

LPN Practice/Scope of Practice

Introduction:

The Saskatchewan Association of Licensed Practical Nurses (SALPN) is responsible to ensure the safety of the public with the regulation of the LPN profession in Saskatchewan. The authority to regulate the profession is derived from legislation, specifically the Licensed Practical Nurses Act 2000. The act delegates the privilege to regulate the profession to the SALPN elected council. The council consists of seven LPN members and three public representatives, therefore creating a self regulating profession. The SALPN Council must ensure the following:

1. It is the duty of the SALPN at all times:
 - a) to serve and protect the public; and
 - b) to exercise its powers and discharge its responsibilities in the public interest and not in the interests of the members
2. The objectives of the SALPN are:
 - a) to regulate the practice of the profession and to govern the members in accordance with the Act and the bylaws; and
 - b) to assure the public of the knowledge, skill, proficiency, and competency of members in the practice of practical nursing.

The SALPN council has been entrusted to regulate the LPN profession according to the act and manage the affairs of the association while abiding with both regulatory and administrative bylaws. The Licensed Practical Nurses Act 2000 and the SALPN Bylaws specifically define and outline:

- a) Requirements of licensure / re-licensure;
- b) Approval practical nursing education;
- c) The setting, monitoring and enforcing of a professional code of ethics and standards of practice;
- d) Intervention with a peer-led disciplinary process in cases when standards are not met and the safety of the public may be compromised.

Self-Regulation:

Self-regulation is a privilege and responsibility granted to the profession by the Government of Saskatchewan. The LPN membership contributes to self-regulation by either becoming elected to the SALPN Council or voting for members in the electoral race for a council position. The elected member represents the LPN membership at the council level. Decisions made regarding the profession are made at the council level. Members can further contribute by attending the annual general meeting. LPN members can propose resolutions and or participate in the voting process.

Core and Supporting Documents:

SALPN Legislative Documents: Over-arching term capturing the legislation, bylaws, and documents incorporated by reference into the bylaws and that form the base of all SALPN policy and supporting documents

The Licensed Practical Nurses Act 2000: statute or proclamation of the government declaring the SALPN as the regulatory body of the profession and provides a definition of practice.

The Licensed Practical Nurses Act 2000 states, “**practice as licensed practical nurse**” means to provide services, within the education and training of licensed practical nurses, for the purposes of providing care, promoting health, and preventing illness.” It is this definition in which all SALPN documents are derived and justified.

SALPN Regulatory Bylaws: Rules adopted by the SALPN and approved by the government in which the SALPN must follow to effectively regulate the profession. Regulatory bylaws cannot be changed or altered without the approval of the membership and the Ministry of Health.

SALPN Administrative Bylaws: Rules adopted by the SALPN and approved by the membership in which the SALPN must follow to effectively operate the organization.

Standards of Practice for Licensed Practical Nurses In Canada: The Standards of Practice for Licensed Practical Nurses in Canada provide a national framework for LPN practice. The Standards of Practice are authoritative statements that define the legal and professional expectations of licensed practical nurse practice. In conjunction with the Code of Ethics for Licensed Practical Nurses, they describe the elements of quality LPN practice and facilitate mobility through inter-jurisdictional mutual understanding and agreement of expectations and requirements for practice.

The four broad standards are applicable to LPNs in all settings in which they practice. They provide the benchmark to which LPNs are measured. Indicators accompany each standard and describe more specifically the expectations for LPN practice. Neither the standards nor the indicators are in any order of priority.

As members of a self-regulating profession, LPNs are personally responsible for meeting the Standards of Practice. The legislative responsibility for setting, monitoring and enforcing the Standards of Practice lies with the provincial and territorial regulatory authorities. The policies and practices of employing organizations do not relieve LPNs of accountability to meet these standards of practice.

Code of Ethics for Licensed Practical Nurses in Canada: articulates the ethical values and responsibilities that Licensed Practical Nurses uphold and promote, and to which they are accountable. The Code serves to:

- guide LPNs’ ethical reflections and decision-making across all areas of licensed practical nurse practice; and,
- inform the public about the ethical values and responsibilities of the LPN profession and convey the profession’s commitment to society.

LPNs’ primary responsibility is to the client within the context of an inter-professional collaborative environment. “Client” refers to an individual (or their designated representative(s), families, and groups).

Respect for the inherent dignity and rights of clients, colleagues and LPNs underpins the five ethical principles encompassed in the Code. These principles although distinct are inter-related and include:

1. Responsibility to the Public
2. Responsibility to Clients
3. Responsibility to the Profession
4. Responsibility to Colleagues
5. Responsibility to Oneself

SALPN Regulatory / Practice Policy: These documents guide the carrying out of regulatory functions as outlined in the “Licensed Practical Nurses Act, 2000” and the SALPN Regulatory Bylaws.

SALPN Supportive Documents: Overarching term capturing the entire suite of differing types of documents that support LPNs in meeting the expectations of behavior set in legislation, legislative documents, and policy. These may include Practice Guidelines, Interpretive Documents, Fact Sheets, Discussion Papers, Position Statements, Research and Resources, and Publications of the SALPN.

Scope of Practice:

The Licensed Practical Nurses Act provides the following definition of LPN Practice;

“Practice as a Licensed Practical Nurse means to provide services within the education and training of licensed practical nurses, for the purposes of providing care, promoting health and preventing illness.”

(The Licensed Practical Nurses Act 2000)

The SALPN Regulatory Bylaws provide the following:

20. All members shall ensure that they work within their educational preparation, level of competence and scope of practice and comply with the standards of practice set out in the *Standards of Practice for Licensed Practical Nurses* approved and adopted by Canadian regulatory agencies as of April 1, 2013.

21. All members shall conduct themselves in an honorable and ethical manner, upholding the values of truth, honesty, and trustworthiness, and shall observe the standards of conduct set out in the *Code of Ethics for Licensed Practical Nurses* in Canada approved and adopted by Canadian Regulatory Agencies as of April 1, 2013.

The above forms the professional scope of practice of the LPN in Saskatchewan. Professional scope of practice refers to the outer range of activities that the LPN is educated and additional competencies recognized by the SALPN to provide. The SALPN has provided the LPN membership with a Code of Ethics, Standards of Practice, Practice Competencies, and Practice Guidelines to assist the LPN with decision making to ensure practice occurs within scope of practice.

The LPN is not educated to formulate a medical diagnosis and prescribe medical treatment. An LPN in Saskatchewan requires an order from an authorized prescriber: Physician, RN (NP), and in some settings a dentist or optometrist in order to implement medical treatments during nursing care.

Additional competencies obtained by the LPN must be supported by foundational practical nursing knowledge and applied for the purposes of providing care, promoting health and preventing illness. Additional competencies reflecting the practice of or general services of medicine and surgery are not and will not be recognized by the SALPN.

The individual scope of practice of each LPN is unique and is influenced by nursing experience, continuing education, professional development, attitudes, and utilization in employment. The individual scope of practice can not exceed the professional scope of practice as determined by legislation.

LPNs can develop expertise in an area of practice; however continuing education and additional competencies enhance competence within the professional designation only.

Scope of employment refers to practice that is supported by both policy and procedure in the LPN's place of employment. The scope of employment cannot exceed the professional scope of practice. In instances when the scope of employment exceeds the individual scope of practice the practitioner, along with the employer, must address deficiencies or knowledge gaps with education and training to gain and maintain competence.

The foundation of today's health care education and the health care system has developed in such a way that most professional disciplines will share few, some, or many competencies with other professionals. Professionals must collaboratively work together and support all other professionals to utilize scope of practice in its entirety. The goal of all health care providers is to provide safe, competent, and ethical care.