

Legislative
Interpretation

Professional Scope of Practice:
Additional
Competencies



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Saskatchewan Association of Licensed Practical Nurses on
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Introduction

The Licensed Practical Nurse (LPN) profession in Saskatchewan is regulated by the Saskatchewan Association of Licensed Practical Nurses (SALPN). The purpose of professional regulation is to protect the public from risk and reduce harm to those a profession serves. LPNs are regulated because the service LPNs provide can pose a risk to the public if performed incompetently, unethically, or by unqualified individuals.

The SALPN has been granted the legal authority to regulate the practical nursing profession by the Government of Saskatchewan through The Licensed Practical Nurses Act, 2000. The Act sets the rules the SALPN must follow in the regulation of the profession.

Licensed Practical Nurses are members of a self-regulated profession whose scope of practice is directed by a legislative structure that includes the LPN Act and bylaws made under the authority of the Act. The bylaws provide for Specialized Areas of Practice, Standards of Practice and the Code of Ethics.

LPN practice is determined and broadly guided by the **professional scope of practice** (The LPN Act and bylaws), **individual competence** and **employment role** (employer policy).

The context of practice determines the appropriate application of LPN practice with the collective consideration of conditions or factors affecting the status and needs of the patient, the abilities and attributes of the individual LPN, and the characteristics and resources of the environment. The context of practice guides individual LPN decision-making within practice and employers in the development of LPN employment roles.

Professional Scope of Practice

Basic Competencies are the observable knowledge, skills, and abilities authorized by the SALPN as appropriate in LPN practice and taught in the Practical Nursing program. All LPNs can be reasonably expected to apply basic competencies in a safe and ethical manner at any point their career.

Examples of Basic Competencies:

- Use appropriate medical terminology in reporting and documentation
- Demonstrate knowledge and ability to insert, manage, and remove a nasogastric tube.
- Demonstrate knowledge and ability to apply critical thinking and critical inquiry throughout the nursing process related to pharmacology and medication administration.

Additional Competencies are the observable knowledge, skill, and abilities authorized by the SALPN as appropriate in LPN practice and are developed through education, training, and practice experience after completion of the Practical Nursing program.

Examples of Additional Competencies:

- Demonstrate knowledge and ability to provide advanced health teaching and coaching as a lactation/breastfeeding consultant
- Demonstrate knowledge and ability to provide assistance in rapid primary initial assessment utilizing the Canadian Triage and Acuity Scale
- Demonstrate knowledge and ability to adhere to agency policy and procedure for safe administration of medication by IV push (direct)

Specialized Areas of LPN Practice are the knowledge, skills, and abilities authorized by the SALPN as appropriate in LPN practice that requires specific post basic education outlined in the **SALPN Regulatory bylaws**. These specialized areas of practice have their own specific competencies and are not included in this description of additional competencies.

Current Specialized Areas of Practice:

- Hemodialysis care
- Peri-operative care
- Advanced Orthopedics

Additional Competencies

Additional Competencies are the observable knowledge, skill, and abilities authorized by the SALPN as appropriate in LPN practice and are developed through education, training, and practice experience after completion of the Practical Nursing program. Additional Competencies cannot exceed the LPN professional scope of practice.

Additional Competencies are often required in the employment role and are permitted by the employer through the development of policy and/or procedure. Additional Competencies are applied in practice to meet specific needs of a patient/patient population and/or a specific practice setting. Additional Competencies address risks that may exist within a specific patient/patient population and/or a specific practice setting.

Additional Competencies, like basic competencies, are applied within the nursing process as a nursing intervention or as part of a medical treatment / intervention under the order of a professional authorized to diagnose and prescribe medical treatments and interventions (physician, nurse practitioner, podiatrist for example).

Examples of Additional Competencies

- Demonstrate knowledge and ability to manage elimination needs including nephrostomy
- Demonstrate knowledge and ability to perform basic wound care utilizing medical/surgical asepsis as needed: Specialized (wound equipment): negative pressure therapy (Wound Vac)
- Demonstrate knowledge and ability to apply critical thinking and critical inquiry within the role of manager/administrator of an organization

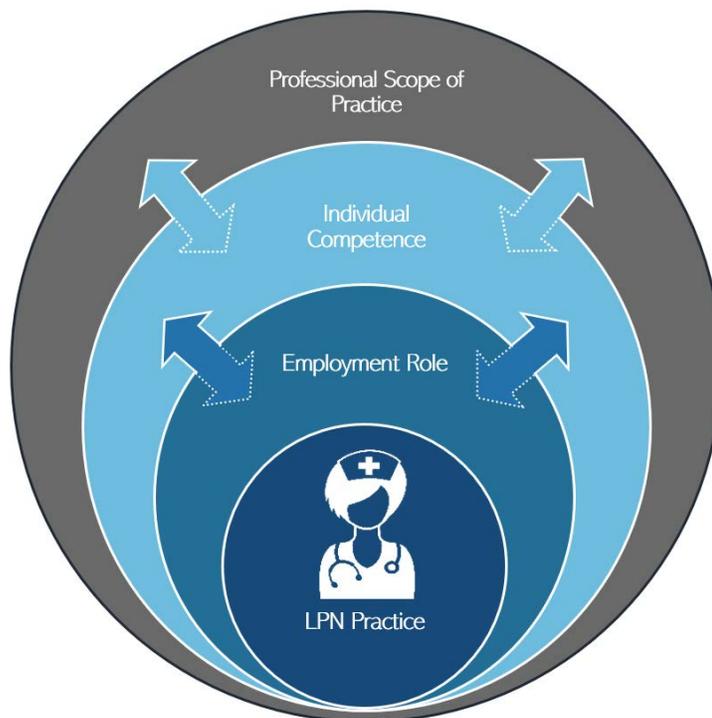
Additional Competencies: Employment Role

Employment role refers to how an employer utilizes the LPN within the authorized professional scope of practice. The employer permits the LPN to apply basic and additional competencies within the LPN professional Scope of Practice and cannot exceed the LPN professional scope of practice.

Employment role, developed by the employer, is typically based on the specific needs and risks of the practice area and patient population the employer serves. The employer addresses risks within the practice area with clearly defined employment role(s). Employers outline and provide limitations to the responsibilities, functions, and activities related to applying additional competencies in the employment role. This will be often referred to as policy and procedure.

Although it is the responsibility of the LPN to address competency deficiencies and develop individual competence, the employer role in supporting LPNs to achieve and maintain individual competence is significant. This is done through the requirement and development of education, training, and practice experience opportunities.

Figure 1- LPNs must practice within the defined limits of multiple factors. The **LPN practice** must remain within the **Employment Role** (which can expand or narrow as defined by employer policy), which must be within the **LPN's Practice** (which may expand as the LPN gains additional competencies), all of which must remain within the **professional scope of practice**.



Additional Competencies: Achieving and Maintaining Individual Competence

Individual competence is the LPN's ability to apply and demonstrate competencies (knowledge, skill, and abilities) within LPN professional scope of practice in a safe and ethical manner. Individual competence is different for each LPN. Individual competence can and will vary throughout the stages of an LPN's career. New LPNs begin practice at the novice level and is influenced by an LPN's practice experience, continuing education and training, employment role, and personal attributes (attitudes, values, beliefs). Individual competence cannot exceed the professional scope of practice. Practice experience, education, and training do not alter, nor expand, the professional scope of practice of licensed practical nurses.

Individual competence to apply additional competencies within LPN practice is developed and achieved with completion of education, training and practice experience. Individual LPNs may need to achieve competence with a single additional competency or several additional competencies to meet the specific needs of a specific patient/ patient population and practice environment or to address the specific risks within a specific patient/patient population, and practice environment.

The education and training required to develop, achieve, and maintain additional competencies can be completed through various delivery methods:

Formalized education is developed and offered by accredited institutions or certified instruction providers. Formal education will often result in a course credit, official certification, or a widely accepted credential.

Informalized education is developed and offered by non-accredited sources such as employers, organizations, interest groups. Informal education will often result in a certificate of attendance or a certification acceptable to a specific practice environment and may or may not “transfer” to another practice setting.

Because the purpose of the education and training is to develop individual competence, the method of education delivery and the depth and breadth of the education required will vary. The education and training must address the needs of and the risks associated with the patient population and/or practice environment. Some situations may require a combination of both formalized and informalized preparation.

It is the responsibility of the LPN to assess their individual competence to apply additional competencies on an ongoing basis. LPNs are responsible to reflect upon and assess their own individual competence against the competencies of the profession and those required in the employment role. Through the course of a career, an LPN may find they lack competence in some competencies due to changes in employment role or setting, technology, and evolving nursing practice. These deficiencies and gaps, although expected, may lead to a risk of harm to the public if not properly addressed.

Additional Competencies: Context of Practice

Context of Practice determines the appropriate application of LPN practice with the collective consideration of conditions or factors affecting the status and needs of the **patient**, the abilities and attributes of the **individual LPN**, and the characteristics and resources of the **environment**. The context of practice guides individual decision-making and the development of the employment role in specific practice settings or situations.

Although the LPN may have the necessary knowledge and ability to apply additional competencies within the Professional Scope of Practice, the overall context of practice may determine it is not appropriate to do so at a specific point in time or ever. Patient needs can exceed not only the competence of the individual LPN and/or the professional scope of practice but can also exceed the resources and service of the environment.

Examples of factors to consider in the application of additional competencies:

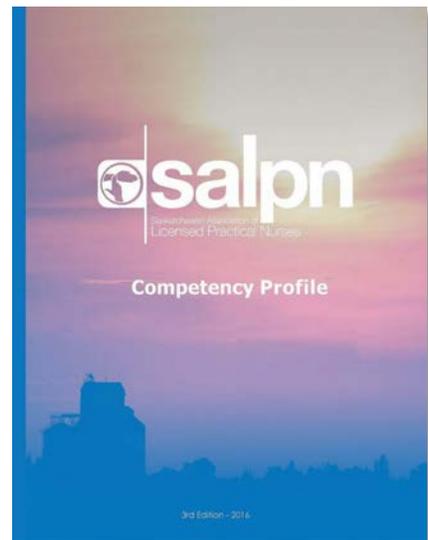
- Does the education and training adequately provide both knowledge and skill to carry out the required interventions and assessments before, during, and following application of a competency?
- Does the education and training adequately provide both supportive knowledge and skill preparation to apply the competency with proficiency?
- Does the education and training address the risks associated with the application of the competency?
- Does the education and training address the response to potential adverse or unexpected events associated with the application of the competency?
- Are the needs of the patient appropriate to the professional scope of practice and level of individual competence?
- Are the needs of the patient appropriate to the practice environment?
- Can potential adverse or unexpected events be addressed in this practice environment?
- How will the needs of the patient be met if they exceed the Professional Scope of Practice of the LPN or level of individual competence?
- How accessible are additional resources if required?
- Is there an order from a physician, nurse practitioner or authorized professional where required?
- Does agency policy support application of the additional competency and are procedures clearly provided to safely utilize the additional competency?
- Does agency policy require recertification of the additional competency?
- Is there a policy and procedure in place in the event of an adverse or unexpected outcome?

Conclusion

- Additional Competencies are the knowledge, skill, and abilities authorized by the SALPN as appropriate in LPN practice and are developed through education, training, and practice experience after completion of the approved Practical Nursing program.
- Additional Competencies are often required in the employment role and are permitted by the employer through the development of policy and/or procedure.
- Individual competence to apply *additional competencies* within LPN practice is developed and achieved with completion of education, training and practice experience.
- Additional Competencies, like basic competencies, are applied within the nursing process as a nursing intervention derived from the nursing diagnosis or as part of a medical treatment / intervention under the order of a professional authorized to diagnose and prescribe medical treatments and interventions (physician, nurse practitioner, podiatrist for example).
- Although the LPN may have the necessary knowledge and ability to apply Additional Competencies within the Professional Scope of Practice, the overall context of practice may determine it is not appropriate to do so at a specific point in time or ever.

Both the Basic Competencies and the Additional Competencies are detailed in the *SALPN Competency Profile, 3rd edition, 2017*. In the SALPN Competency Profile, the Additional Competencies are identified with grey shading.

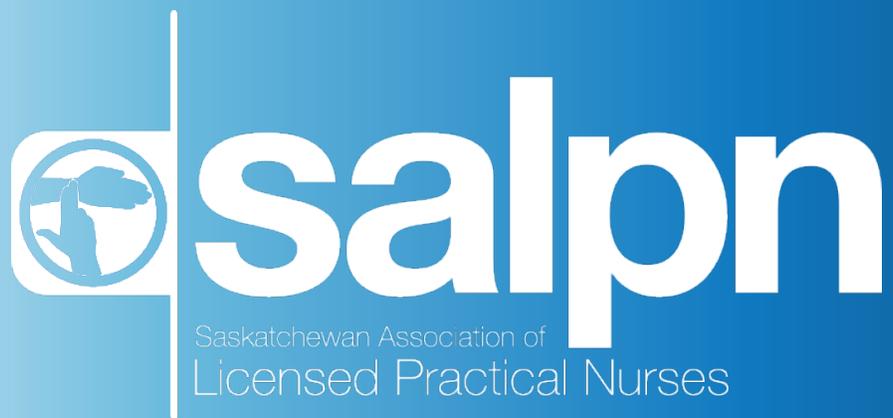
If a specific practical nursing role or competency is not located in the SALPN Competency Profile, please contact the SALPN (practice@salpn.com) to discuss specifically.



The SALPN Competency Profile, 3rd edition, 2017.
<http://www.salpn.com/competencies>

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