

RN & LPN Scope of Practice

As **Primary Care Networks** are established across the province and as team-based care becomes integrated into practices, it is important to be aware of the various scopes of practice of team members, to ensure that teams can function optimally and that patients get comprehensive, quality care.

This document outlines the differences in scope of practice for registered nurses (RN) and licensed practical nurses (LPN), as outlined by the BC College of Nursing Professionals (BCCNP).

Both RNs and LPNs work autonomously within their professional scope of practice and level of competence, and as part of a collaborative team, to support safe, competent and ethical care for patients, families, and communities. Although both RNs and LPNs take similarly titled foundation courses, there is a difference in both the depth and breadth of knowledge covered, in the competencies developed, and expectations for clinical practice.

LPNs care for individuals at all life stages, with a **focus on stable or predictable states of health**. In specific settings, LPNs may be able to care for those with more complex care needs if they have additional education and/or training and/or supervision. As RNs have more comprehensive education, they have a more in-depth and broader knowledge base to draw upon in areas such as clinical practice, advanced clinical decision-making, and utilization of health research. **RNs can provide care for any type of individual including those with complex, unstable or unpredictable conditions.**

Refer to the following: [Table 1: Team Composition Scope Summary for LPN, RN, and RN\(C\)](#) for an overview, and [Table 2: Care Activities and Tasks](#) for more detailed information related to Scope of Practice and specific care activities and tasks.

Table 1: Team Composition Scope Summary for LPN, RN, and RN(C)

| Education | Regulatory Scope of Practice under the <i>Health Professions Act</i> | Role of Regulatory College (BCCNP) (including Standards, Limits and Conditions and requirements for Advanced Certification) | Role (what is expected must be within regulatory Scope of Practice and BCCNP requirements. Employer policies may place additional limits and conditions on practice based on care needs of population) | Function (examples of specific duties or activities performed in role) |
|---|---|--|--|---|
| LICENSED PRACTICAL NURSE (LPN) | | | | |
| <p>Entry-to-practice requirement is a diploma program that varies based on the educational institution.</p> <p>There are two types of Practical Nursing Programs in BC:</p> <ol style="list-style-type: none"> Generic program for students with no prior experience in health care: 18-24 months program Access program for students with past education, training, and work experience (e.g., Health Care | <ol style="list-style-type: none"> Health care for the promotion, maintenance and restoration of health, with a focus on stable or predictable states of health Prevention, treatment and palliation of illness and injury, with a focus on stable or predictable disorders and conditions, primarily by: <ol style="list-style-type: none"> assessing health status, | <p>Standards for LPNs</p> <p>Shared Standards for All Nurses</p> | <ul style="list-style-type: none"> Expected to meet the Entry-to-Practice Competencies for Licensed Practical Nurses Mostly work as direct care staff in a variety of settings, including acute care, residential care and community Within their defined Scope of Practice, LPNs may also provide education to others and/or perform some administrative tasks | <ul style="list-style-type: none"> Assess and identify the status of actual or potential client limitations and strengths Make an LPN nursing diagnosis of a condition before determining an appropriate plan of care Collaborate, contribute, and participate in the care planning process Coordinate care of less acute, less complex, stable clients who have more predictable outcomes Perform planned LPN nursing interventions Teach and deliver elements of established health |

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|--|--|--|--|---|
| Assistant, Resident Care Attendant, combined Home Support/Resident Care Attendant) 13-15 month program. | <ul style="list-style-type: none"> b) planning, implementing and evaluating interventions and c) coordinating health services. | | | education programs as appropriate for LPNs |
| REGISTERED NURSE (RN) | | | | |
| Entry to Practice requirement: <ul style="list-style-type: none"> • 4-year baccalaureate degree (BSN, BScN) or equivalent, or • 2 – 3-year diploma (before 2006) | <ol style="list-style-type: none"> 1. Health care for the promotion, maintenance and restoration of health; 2. Prevention, treatment, and palliation of illness and injury, primarily by: <ul style="list-style-type: none"> a) assessing health status, b) planning, implementing, and evaluating interventions, and | <u>Standards for RNs</u> <u>Shared Standards for All Nurses</u> *Note: BCCNP has limited ‘Medical assistance in dying’ to aiding the Medical Practitioner or Nurse Practitioner. | <ul style="list-style-type: none"> • Expected to meet the <u>Competencies in the Context of Entry-Level RN Practice in BC</u> • May work in one or more areas of practice: clinical, administration, education, and / or research. • Diverse roles within settings such as: hospital units, office, ambulatory care, client homes, clinics, community health centres, | <ul style="list-style-type: none"> • Assess the patient/ client population for specific needs that influence health • Make a nursing diagnosis of a condition and intervene with appropriate nursing interventions • Research, and use, evidence-informed practice • Evaluate the care provided and the patient/ client/ population health responses • Work collaboratively within a client’s health care team |

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| | c) coordinating health services; 3. Medical assistance in dying * | | residential care homes and other settings. | <ul style="list-style-type: none"> • Provide a plain language explanation of complex health concepts for others' understanding • Provide patient/client/family/ group education |
| REGISTERED NURSE (RN) CERTIFIED PRACTICE (C) – Remote Nursing | | | | |
| <p>RN as above, with BCCNP designation indicating successful completion of BCCNP approved Certified Practice course in Remote Nursing.</p> <p>RNs certified in Remote Nursing must also be certified in Sexually Transmitted Infections and Contraceptive Management.</p> | <p>As for RNs, plus expanded Scope of Practice laid out in Section 8 of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>: Section 8 identifies restricted activities for Certified Practice registrants.</p> | <p>Under the authority of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>, the BCCNP has enabled three distinct classes of Certified Practice (see Education column) under its bylaws. Within a specific Certified Practice, a registrant may perform certain restricted activities laid out in Section 8, consistent with their specific certification and BCCNP-approved <u>Decision Support Tools (DSTs)</u>. DSTs establish</p> | <p>Certified Practice registrants using <u>BCCNP DSTs</u> are also expected to adhere to specific employer policies which may further narrow, but may not broaden, practice.</p> <p>No resident Medical Practitioner or NP; Medical Practitioner or NP periodically available to provide consultation; can perform activities outside rural/ remote setting, e.g., in urgent care settings that</p> | <p>Certified Practice RNs apply for their MSP number to allow them to order lab tests as per the <u>DSTs</u></p> <p>Specific services include:</p> <ul style="list-style-type: none"> • Sexually transmitted infections (STI) and contraceptive management (CM) in addition to: • Eye: eye assessment, conjunctivitis and minor corneal abrasion • Ear-nose-throat (ENT): ENT assessment, acute otitis |

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|--|---|---|--|--|
| To remain on the Certified Practice register, RNs with Certified Practice designation must meet specific quality assurance requirements. | | parameters of the role for each category of Certified Practice. | have Medical Practitioners and/ or NPs. | <p>media, pharyngitis, ceruminosis (impacted cerumen) (adult only), dental abscess (adult only)</p> <ul style="list-style-type: none"> • Genitourinary: gastrointestinal-genitourinary assessment, lower urinary tract infection • Respiratory: cardio-respiratory assessment, acute bronchitis (adult only) • Skin: integumentary assessment, localized abscess and furuncle (adult only), cellulitis, impetigo, bites • Pain Management: use of a mixture of oxygen and nitrous oxide (adult only) |

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|--|---|---|---|--|
| REGISTERED NURSE (RN) CERTIFIED PRACTICE (C) – Reproductive Health-Sexually Transmitted Infections | | | | |
| <p>RN as above, with BCCNP designation indicating successful completion of BCCNP approved Certified Practice course in Reproductive Health-Sexually Transmitted Infections.</p> <p>To remain on the certified practice register, RNs with certified practice designation must meet specific quality assurance requirements.</p> | <p>As for RNs, plus expanded Scope of Practice laid out in Section 8 of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>: Section 8 identifies restricted activities for Certified Practice registrants.</p> | <p>Under the authority of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>, the BCCNP has enabled three distinct classes of Certified Practice (see Education column) under its bylaws. Within a specific Certified Practice, a registrant may perform certain restricted activities laid out in Section 8, consistent with their specific certification and BCCNP-approved <u>Decision Support Tools (DSTs)</u>. DSTs establish parameters of the role for each category of Certified Practice.</p> | <p>Certified Practice registrants using <u>BCCNP DSTs</u> are also expected to adhere to specific employer policies which may further narrow, but may not broaden, practice.</p> | <p>Certified Practice RNs apply for their MSP number to allow them to order lab tests as per the <u>DSTs</u></p> <p>Specific services include:</p> <ul style="list-style-type: none"> • STI assessment, Bacterial Vaginosis (BV); chlamydia trachomatis (reportable); genital warts; gonorrhoea (reportable) mucopurulent cervicitis; recurrent urethritis; trichomoniasis; uncomplicated lower urinary tract infection; urethritis; treatment of STI contacts |

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|---|---|---|---|--|
| REGISTERED NURSE (RN) CERTIFIED PRACTICE (C) – Reproductive Health-Contraceptive Management | | | | |
| <p>RN as above, with BCCNP designation indicating successful completion of BCCNP approved Certified Practice course in Reproductive Health-Contraceptive Management.</p> <p>To remain on the Certified Practice register, RNs with Certified Practice designation must meet specific quality assurance requirements.</p> | <p>As for RNs, plus expanded Scope of Practice laid out in Section 8 of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>: Section 8 identifies restricted activities for Certified Practice registrants.</p> | <p>Under the authority of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>, the BCCNP has enabled three distinct classes of certified practice (see Education column) under its bylaws. Within a specific Certified Practice, a registrant may perform certain restricted activities laid out in Section 8, consistent with their specific certification and BCCNP-approved <u>Decision Support Tools (DSTs)</u>. DSTs establish parameters of the role for each category of Certified Practice.</p> | <p>Certified Practice registrants using <u>BCCNP DSTs</u> are also expected to adhere to specific employer policies which may further narrow, but may not broaden, practice.</p> | <p>Certified Practice RNs apply for their MSP number to allow them to order lab tests as per the <u>DSTs</u></p> <p>Specific services include:</p> <ul style="list-style-type: none"> • Contraceptive management assessment, administer and dispense combined hormonal contraception and progestin-only hormonal contraception |

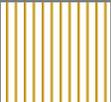
| Education | Regulatory Scope of Practice under the <i>Health Professions Act</i> | Role of Regulatory College (BCCNP) (including Standards, Limits and Conditions and requirements for Advanced Certification) | Role (what is expected must be within regulatory Scope of Practice and BCCNP requirements. Employer policies may place additional limits and conditions on practice based on care needs of population) | Function (examples of specific duties or activities performed in role) |
|--|---|---|--|--|
| REGISTERED NURSE (RN) CERTIFIED PRACTICE (C) – RN First Call | | | | |
| <p>RN as above, with BCCNP designation indicating successful completion of BCCNP approved Certified Practice course in RN First Call.</p> <p>To remain on the Certified Practice register, RNs with Certified Practice designation must meet specific quality assurance requirements.</p> | <p>As for RNs, plus expanded Scope of Practice laid out in Section 8 of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>: Section 8 identifies restricted activities for Certified Practice registrants.</p> | <p>Under the authority of the <u>Nurses (Registered) and Nurse Practitioners Regulation</u>, the BCCNP has enabled three distinct classes of Certified Practice (see Education column) under its bylaws. Within a specific Certified Practice, a registrant may perform certain restricted activities laid out in Section 8, consistent with their specific certification and BCCNP-approved <u>Decision Support Tools (DSTs)</u>. DSTs establish parameters of the role for each category of Certified Practice.</p> | <p>Certified Practice registrants using <u>BCCNP DSTs</u> are also expected to adhere to specific employer policies which may further narrow, but may not broaden, practice.</p> <p>Medical Practitioner or NP periodically available to provide consultation.¹</p> | <p>Certified Practice RNs apply for their MSP number to allow them to order lab tests as per the <u>DSTs</u></p> <p>Specific services include:</p> <ul style="list-style-type: none"> • Eye: eye assessment, conjunctivitis and corneal abrasion (minor) (adult and pediatric) • Ear-nose-throat (ENT): ENT assessment (adult/ pediatric), acute otitis media (adult/ pediatric), pharyngitis (adult/ pediatric), dental abscess (adult only) • Genitourinary: gastrointestinal-genitourinary assessment, |

¹ Small acute care hospitals, diagnostic and treatment centres and other centres where there is a Medical Practitioner or NP.

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|-----------|--|--|---|---|
| | | | | female lower urinary tract infection (adult only) • Respiratory: Cardio-respiratory assessment (adult/ pediatric) |

Table 2: Care Activities and Tasks

KEY:

| | |
|--|--|
| ✓ | May perform care activity/ task as per nurse specific regulatory Scope of Practice (considered entry-to-practice and does not typically require an order to perform) |
|  | Cannot perform care activity/task as it is considered outside the nurse's specific Scope of Practice |
|  | May perform care activity/ task BUT requires a client specific order that is enabled under specific nurse regulations and/or profession specific regulatory college conditions/limits AND/OR completed additional health authority requirements for training/education |

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|--|--------------------------|--|--|
| 1. Greet the client | | | |
| 1.1 Greet client when presenting for services (access point) | ✓ | ✓ | ✓ |
| 1.2 Initiate handover to care team | ✓ | ✓ | ✓ |
| 2. Client Intake | | | |
| 2.1 Determine the urgency of client's need (telephone or in-person triage as per established protocols) | | ✓ | ✓ |
| 2.2 Register the client | ✓ | ✓ | ✓ |
| 2.3 Prepare health records as appropriate | ✓ | ✓ | ✓ |
| 2.4 Determine most appropriate intake clinician | ✓ | ✓ | ✓ |
| 2.5 Conduct intake | ✓ ² | ✓ | ✓ |
| <ul style="list-style-type: none"> Select and conduct suitable screening (e.g., immunization history, malnutrition, GI system, home safety, cognition, perinatal depression, suicide, abuse, neglect) | ✓ | ✓ | ✓ |
| 2.6 Identify resources for client | ✓ | ✓ | ✓ |
| 3. Assessing the client | | | |
| 3.1 Set up the assessment | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Determine what resources are needed | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Perform medical component of formal incapability assessment | | | |
| <ul style="list-style-type: none"> Perform functional component of formal incapability assessment (financial, ADLs, IADLs) | | Requires additional provincial training ³ | Requires additional provincial training ⁴ |
| 3.2 Confirm client's need(s) | ✓ | ✓ | ✓ |

² If client deemed stable/ predictable by RN, RPN, NP or MD.

³ See: <https://learninghub.phsa.ca/Courses/5951/a-guide-to-the-certificate-of-incapability-process-under-the-adult-guardianship-act>.

⁴ See: <https://learninghub.phsa.ca/Courses/5951/a-guide-to-the-certificate-of-incapability-process-under-the-adult-guardianship-act>

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|--|-----------------------------|--|--|
| 3.3 Conduct history (as per specific nursing Scope of Practice, specific certified practice and client's need) | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Gather medication list (including over-the-counter medications, alternative medications and supplements, intolerances and allergies) | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Conduct Best Possible Medication History (BPMH)⁵ | | Possible with PharmaNet access. ⁶ | Possible with PharmaNet access. ⁷ |
| <ul style="list-style-type: none"> Reconcile medications | | | |
| <ul style="list-style-type: none"> Identify social determinants of health barriers & strengths | ✓ | ✓ | ✓ |
| 3.4 Conduct physical assessment (as per specific nursing Scope of Practice, specific certified practice and client's need) | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Collect patient measurements (height, weight) | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Collect vital signs: temp, pulse, respiration rate, blood pressure, pulse oximetry | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Collect samples | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> <ul style="list-style-type: none"> Collect non-sterile and urine specimens | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> <ul style="list-style-type: none"> Collect sterile and urine specimens | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> <ul style="list-style-type: none"> Collect nasopharyngeal swabs | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Administer point of care (POC) testing as applicable for blood glucose, urine chemstrip, urine hCg (OSOM) | Under an order ⁸ | ✓ | ✓ |

⁵ BPMH is a medication history obtained by a health care practitioner that includes a thorough history of all regular medication use (prescribed and non-prescribed). Creating the BPMH includes interviewing the individual and checking at least one other source of information, such as PharmaNet. See: www.interiorhealth.ca/AboutUs/Policies/Documents/Medication%20Reconciliation.pdf and www2.gov.bc.ca/assets/gov/health/health-drug-coverage/pharmacare/8-7to8-10.pdf.

⁶ See: www.bccnp.ca/Standards/RN_NP/StandardResources/DispensingMedications_DecisionTree.pdf#search=best%20possible%20medication.

⁷ See: www.bccnp.ca/Standards/RN_NP/StandardResources/DispensingMedications_DecisionTree.pdf#search=best%20possible%20medication.

⁸ May be able to administer some POC testing under an order as per section 7(1)(a) in the Nurses (Licensed Practical) Regulation

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|---|--|--|---|
| <ul style="list-style-type: none"> Perform venipuncture for the purposes of collecting a blood sample or donation | | ✓ | ✓ |
| <ul style="list-style-type: none"> Perform venipuncture for the purposes of establishing intravenous access, maintaining patency or managing hypovolemia | Under an order ⁹ | ✓ | ✓ |
| <ul style="list-style-type: none"> Administer point of care (POC) testing for HIV | As per BCCNP limits and conditions ¹⁰ | ✓ | ✓ |
| <ul style="list-style-type: none"> Initiate diagnostic tests (laboratory, medical imaging, etc.) | | As per BCCNP limits and conditions ¹¹ | ✓ As appropriate to Certified Practice |
| <ul style="list-style-type: none"> Contraceptive management assessment | | | ✓ Certified practice in Reproductive Health & Remote Nursing |
| <ul style="list-style-type: none"> Pelvic exam and cervical cancer screening | | Must possess PHSA competencies and follow | Must possess PHSA competencies and follow |

www.bclaws.ca/civix/document/id/complete/statreg/224_2015

⁹ May be able to perform venipuncture under an order purposes of establishing intravenous access, maintaining patency or managing hypovolemia as per section 7(1)(a) in the Nurses (Licensed Practical) Regulation www.bclaws.ca/civix/document/id/complete/statreg/224_2015

¹⁰ See page 27 of the LPN Scope of Practice document: www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf

¹¹ See page 75 of the RN Scope of Practice document: www.bccnp.ca/Standards/RN_NP/StandardResources/RN_ScopeofPractice.pdf

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|--|--------------------------|---|---|
| | | PHSA decision support tools ¹² | PHSA decision support tools ¹³ |
| <ul style="list-style-type: none"> • Sexually transmitted infections (STI) assessment | | | ✓ See STI DSTs ¹⁴ |
| <ul style="list-style-type: none"> • Eye, ear-nurse throat, gastro-genitourinary, cardio-respiratory assessment | | | ✓ See Remote Nursing or RN First Call DSTs ¹⁵ |
| <ul style="list-style-type: none"> • Skin, pain management | | | ✓ See Remote Nursing DSTs ¹⁶ |
| <ul style="list-style-type: none"> • Determine disease-specific nutrition requirements as per diagnosis | | ✓ | ✓ |
| <ul style="list-style-type: none"> • Conduct functional/anatomical swallowing assessment | | | |
| <ul style="list-style-type: none"> • Conduct physical assessment of bowels - Auscultate, palpate, insert instrument beyond anal verge | | ✓ | ✓ |
| 3.5 Conduct mental health and substance use screening, as indicated | See BCCNP standards of | See BCCNP standards of | See BCCNP standards of |

¹² See page 31 of RN Scope of Practice document: www.bccnp.ca/Standards/RN_NP/StandardResources/RN_ScopeofPractice.pdf & www.bccancer.bc.ca/screening/Documents/CCSP_GuidelinesManual-ScreeningForCancerOfTheCervix.pdf & www.bccdc.ca/resource-gallery/Documents/Communicable-Disease-Manual/Chapter%205%20-%20STI/PHSA_DST_PelvicExam.pdf & www.bccdc.ca/resource-gallery/Documents/Communicable-Disease-Manual/Chapter%205%20-%20STI/STI_PHSAs_Competencies_pelvic_exam.pdf

¹³ See page 31 of RN Scope of Practice document: https://www.bccnp.ca/Standards/RN_NP/StandardResources/RN_ScopeofPractice.pdf

¹⁴ www.bccnp.ca/Standards/RN_NP/CertifiedPractice/Pages/DSTs_all.aspx

¹⁵ www.bccnp.ca/Standards/RN_NP/CertifiedPractice/Pages/DSTs_all.aspx

¹⁶ www.bccnp.ca/Standards/RN_NP/CertifiedPractice/Pages/DSTs_all.aspx

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|---|--|--|--|
| | practice for more detail ¹⁷ | practice for more detail ¹⁸ | practice for more detail ¹⁹ |
| 3.6 Make a nursing diagnosis ²⁰ specific to Scope of Practice | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> • Make a diagnosis of a disease, disorder or condition as per the below: • Eye: conjunctivitis and minor corneal abrasion (adult/ pediatric) • Ear-nose-throat: acute otitis media (adult/ pediatric), dental abscess (adult only), pharyngitis (adult/ pediatric), ceruminosis (remote for adult only) • Genitourinary: lower urinary tract infection (adult/ pediatric for remote only), female lower urinary tract infection (First Call) • Respiratory: acute bronchitis (remote for adult only) • Skin: abscess and furuncle (remote for adult only), cellulitis, impetigo, bites (remote for adult/ pediatric) | | | ✓ See Remote Nursing or First Call DSTs ²¹ |
| <ul style="list-style-type: none"> • Bacterial Vaginosis (BV); chlamydia trachomatis (reportable); genital warts; gonorrhea (reportable) mucopurulent urethritis; recurrent urethritis; trichomoniasis; uncomplicated lower urinary tract infection; urethritis; treatment of STI contact | | | ✓ See STI DSTs ²² |
| <ul style="list-style-type: none"> • Diagnose behavioral, emotional or mental disorder | | | |

¹⁷ www.bccnp.ca/Standards/LPN/Pages/Default.aspx

¹⁸ www.bccnp.ca/Standards/RN_NP/Pages/Default.aspx

¹⁹ www.bccnp.ca/Standards/RN_NP/Pages/Default.aspx

²⁰ A "nursing diagnosis" means a clinical judgment of an individual's mental or physical condition to determine whether the condition can be ameliorated or resolved by appropriate interventions within the registrant's Scope of Practice to achieve outcomes for which they are accountable.

²¹ www.bccnp.ca/Standards/RN_NP/CertifiedPractice/Pages/DSTs_all.aspx

²² www.bccnp.ca/Standards/RN_NP/CertifiedPractice/Pages/DSTs_all.aspx

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|---|---|---|-------------------------------------|
| <ul style="list-style-type: none"> Determine individual condition using a nursing diagnosis²³ (e.g., condition such as hypoglycemia resulting from known disease diagnosis such diabetes)²⁴ | ✓ | ✓ | ✓ |
| 3.7 Review goals of care with client and link to current health status | ✓ | ✓ | ✓ |
| 3.8 Initiate treatment and intervention as needed | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Screen for underlying health concerns that promote health e.g., tuberculin skin testing | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Prescribe a medication for some diseases/disorders/conditions (as enabled in relevant specific nursing regulations- Nurses (Registered) and Nurse Practitioners Regulation) | | Under development ²⁵ | ✓ |
| <ul style="list-style-type: none"> Adapt a prescription | | | |
| <ul style="list-style-type: none"> Compound/ dispense/ administer specified medications e.g., a Schedule II medication (e.g., glucagon) for specified conditions <p><i>Note:</i></p> <ul style="list-style-type: none"> LPNs can administer routine immunizations to clients four years of age and older who have stable and predictable states of health.²⁶ LPNs refer clients who are off-schedule with their routine immunizations to another health professional. LPNS do not compound, dispense, or administer immunoprophylactic agents for the purpose of preventing disease in travellers. | See LPN Regulation & BCCNP SOP document | See RN Regulation & BCCNP RN SOP document | See RN Regulation |

²³ A "nursing diagnosis" means a clinical judgment of an individual's mental or physical condition to determine whether the condition can be ameliorated or resolved by appropriate interventions within the registrant's Scope of Practice to achieve outcomes for which they are accountable.

²⁴ See BCCNP standards of practice for more detail www.bccnp.ca/Standards/Pages/Default.aspx

²⁵ Regulation allows for prescribing of specific drugs in specific situation; however, BCCNP standards, limits, and conditions are in the process of being developed. As well, PharmaNet prescriber IDs would need to be established for any health professional who was prescribing Schedule I or IA drugs. See www.bclaws.ca/civix/document/id/complete/statreg/284_2008

²⁶ See page 15 of LPN SOP document: https://www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|---|--|--|---|
| <ul style="list-style-type: none"> Compound/ dispense/ administer a limited number of Schedule I medications (e.g., epinephrine) for specified conditions in specific circumstances | See Regulation & BCCNP SOP document for more details ²⁷ | See Regulation & BCCNPRN SOP document for more details ²⁸ | See Regulation for more details ²⁹ |
| 3.9 Communicate findings and next steps | ✓ | ✓ | ✓ |
| 3.10 Schedule another appointment (as needed) | ✓ | ✓ | ✓ |
| 4. Initiating the Client Care Plan | | | |
| 4.1 Identify which providers need to be on the client's care team | | | |
| <ul style="list-style-type: none"> Identify complexity of care needs | | ✓ | ✓ |
| <ul style="list-style-type: none"> Helps ensure coordination of team-based care | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Refer to medical specialist for higher level of (fee-for-service medical care) | | | |
| 4.2 Develop client care plan with team (which includes client) | ✓ | ✓ | ✓ |
| 4.3 Synthesize and coordinate efficient care delivery strategy by the team | | | |
| <ul style="list-style-type: none"> Assign³⁰ to Health Care Assistants and Community Health Workers (as per BCCNP practice standard specific to nurse registrant class) | ✓ | ✓ | ✓ |

²⁷ http://www.bclaws.ca/civix/document/id/complete/statreg/224_2015 & https://www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf

²⁸ http://www.bclaws.ca/civix/document/id/complete/statreg/284_2008 & https://www.bccnp.ca/Standards/RN_NP/StandardResources/RN_ScopeofPractice.pdf

²⁹ http://www.bclaws.ca/civix/document/id/complete/statreg/284_2008

³⁰ Assign - Needs to be within the scope or role of the health care provider.

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|--|---|------------------|-------------------------------------|
| <ul style="list-style-type: none"> Delegate³¹ to Health Care Assistants and Community Health Workers (as per Regulations under the <i>Health Professions Act</i> pertaining to nursing: <u>Nurses (Registered) and Nurse Practitioners Regulation</u>, <u>Nurses (Registered Psychiatric) Regulation</u> and <u>Nurses (Licensed Practical) Regulation</u> and <u>BCCNP practice standard specific to nurse registrant class</u>) | | | |
| <ul style="list-style-type: none"> Assign tasks to Rehab Assistants | | | |
| 4.4 Schedule appointment(s) for client/family with new care provider(s) as identified in patient care plan. | ✓ | ✓ | ✓ |
| 4.5 Provide treatment/intervention | | | |
| <ul style="list-style-type: none"> Syringe ears using water and bulb | | ✓ | ✓ |
| <ul style="list-style-type: none"> Basic skin and wound care (apply/ remove protective padding/ dressings over intact skin, apply bandage to superficial scrape, add extra clean padding to established dressings, perform basic wound care (e.g., dry, moist, transparent, medicated dressing changes), shorten/ and/or remove wound drains) | See BCCNP Limits & Conditions ³² | ✓ | ✓ |
| <ul style="list-style-type: none"> Complex skin and wound care as per BCCNP Standards, Limits and Conditions³³ and using: <u>Guideline: Treating Minor Uncomplicated Lacerations in Adults</u> | | | |
| <ul style="list-style-type: none"> o Care for tunneled wound (including probing, irrigating and packing) | See BCCNP Limits & Conditions ³⁴ | ✓ | ✓ |

³¹ Delegate - Not required to be within the scope or role of the health care provider. The delegator maintains responsibility.

³² See page 11 of LPN SOP: www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf

³³ [BCCNP Wound care Limits and Conditions](#)

³⁴ See page 11 of LPN SOP: www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|---|---|------------------|-------------------------------------|
| ○ Negative pressure wound therapy (e.g., VAC dressing) | See BCCNP Limits and Conditions ³⁵ | | |
| ○ Apply biological debridement therapy | | | |
| ○ Perform conservative sharp wound debridement | | | |
| ○ Suture an uncomplicated skin laceration | | | |
| 4.6 Communicate response and plan with team members | ✓ | ✓ | ✓ |
| • Report observations and actions | ✓ | ✓ | ✓ |
| • Evaluate effectiveness of interventions | ✓ | ✓ | ✓ |
| 5. Optimizing the Patient's Health | | | |
| 5.1 Communicate and collaborate with team members | ✓ | ✓ | ✓ |
| • Update health plan (documentation as per specific nursing Scope of Practice and specific certified practice) | ✓ | ✓ | ✓ |
| • Document and facilitate interprofessional health plan | ✓ | ✓ | ✓ |
| 5.2 Monitor and evaluate client specific health and goals as per specific nursing Scope of Practice and specific certified practice | ✓ | ✓ | ✓ |
| • Provide treatment and interventions as per health plan | ✓ | ✓ | ✓ |
| • Evaluate client's overall health and achievement of team goals | ✓ | ✓ | ✓ |
| 5.3 Provide (additional) treatment/intervention as required (in collaboration with team) | ✓ | ✓ | ✓ |

³⁵ See page 17 of LPN SOP: https://www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf

| Care Activities and Tasks | Licensed Practical Nurse | Registered Nurse | Certified Practice Registered Nurse |
|--|---|---|---|
| <ul style="list-style-type: none"> Select and administer appropriate screening and respond as appropriate | See BCCNP Limits & Conditions ³⁶ | See BCCNP Limits & Conditions ³⁷ | See BCCNP Limits & Conditions ³⁸ |
| 5.4 In collaboration with other health care providers, support patient/client/resident self-management and behaviour changes which enhance or maintain of health using motivational interviewing, brief intervention skills and health promotion education strategies (e.g., smoking cessation, problematic alcohol and substance use, physical activity, and healthy eating). | ✓ | ✓ | ✓ |
| 5.5 Hand over care as team member or client needs change (as per specific nursing Scope of Practice and specific certified practice) | ✓ | ✓ | ✓ |
| 6. Transitioning the Client | | | |
| 6.1 Transition client outside of geographical area (including move, transfer to hospital) | ✓ | ✓ | ✓ |
| <ul style="list-style-type: none"> Initiate interactive handover as appropriate | ✓ | ✓ | ✓ |
| 6.2 Conclude services | ✓ | ✓ | ✓ |

³⁶ www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf

³⁷ www.bccnp.ca/Standards/RN_NP/StandardResources/RN_ScopeofPractice.pdf

³⁸ www.bccnp.ca/Standards/RN_NP/StandardResources/RN_ScopeofPractice.pdf & www.bccnp.ca/Standards/RN_NP/CertifiedPractice/Pages/Default.aspx