

OUR RESERVED ACTIVITIES



Political responsibility

Jérôme Rousseau, Vice-President, Organization of Work and Professional Practice Sector

Coordination

Guillaume Parisé, Coordinator Sectors and Services

Research and drafting

Katia Fecteau and Marie-Eve Viau Union Consultants Organization of Work and Professional Practice Sector

Revision and production

Marie Eve Lepage, Union Consultant Communication Service

Collaboration on update

Justine Lecomte-Rousseau, Union Consultant, Organization of Work and Professional Practice Sector

Translation

Susan Millroy, Union Consultant Communication Service

Secretariat

Francine Parent, Secretary Communication Service

Graphic Design

Brigitte Ayotte (www.ayograph.com)

Printing

Numérix

March 2017 (Updated in January 2022)

ISBN 978-2-920986-54-1 (printed) ISBN 978-2-920986-55-8 (online)

FOREWORD

Different laws stipulate professional scopes of practice as well as reserved activities, namely for nurses, licensed practical nurses and respiratory therapists. Some of these reserved activities are exclusive to one profession, while others are shared. Professional regulation also allows clinical perfusionists to perform the professional activities that are specific to them. These laws reflect the evolution of the skills of each one and must make their professional practice as autonomous as possible.

However, despite the repeated efforts of the Fédération interprofessionnelle de la santé du Québec—FIQ and the FIQ | Secteur privé, institution managers are not yet required to have each professional perform all of their reserved activities. Instead, they have the power to steer the practice based on their vision of the context, needs and resources. In this respect, poor management practices often cause confusion over the roles, tasks, duties and responsibilities that each healthcare professional is able to perform, which can create an unhealthy work environment and penalize both the professionals and patients.

As healthcare professionals, we must take back control of our professional practice. That is how we can promote the rights and interests of patients, how we will be able to carry out our role as advocates. Promoting interprofessional collaboration and using the full potential of healthcare professionals places value on their clinical judgement and strengthens the caregiving practice to deliver safe, quality, and humane care to patients.

To educate team members, administrators, patients and the population about them, it is important that we fully understand the nature of our own field of practice and that of other healthcare professionals. Knowledge is power! That is why the Federation created this tool for its healthcare professional members.

I AM A NURSE

My scope of practice¹

Assess the state of health

- Determine and ensure the carrying out of the nursing care plan and treatments
- **Provide** nursing and medical **care and treatments** in order to **maintain** and **restore** the **health** of a human being in interaction with their environment
- Prevent illness
- Provide palliative care

My reserved activities***

Assess the physical and mental condition of a symptomatic person.

Assess mental disorders, with the exception of mental retardation, if the nurse [...] has the university degree and clinical experience in psychiatric nursing care required under a regulation made in accordance with paragraph g of section 14.

Assess a child not yet admissible to preschool education who shows signs of developmental delay, in order to determine the adjustment and rehabilitation services required.

Provide **clinical monitoring** of the condition of a person whose state of health is problematic, including monitoring and adjusting the therapeutic nursing plan.

Initiate diagnostic and therapeutic measures, according to a prescription.

Initiate diagnostic measures for screening purposes, as part of an activity under the application of the *Public Health Act* (Chapter S-2.2).

Perform invasive examinations and diagnostic tests, according to a prescription.

Perform and adjust **medical treatments**, according to a prescription.

Apply invasive techniques.



Participate in pregnancy care, deliveries and postpartum care.

Provide **nursing follow-up** for persons with complex health problems.

Administer and adjust prescribed medications or other prescribed substances.

Mix substances to complete the preparation of a medication, according to a prescription.

Determine the **treatment plan** for wounds and alterations of the skin and teguments and **provide** the required **care** and **treatments**.

Perform vaccinations, as part of an operation under the application of the Public Health Act.

Make decisions to use restraint measures.

Make a decision on the use of **isolation measures** as part of the application of the *Act respecting health services and social services* and the *Act respecting health services and social services for Cree Native persons.*

I am a specialized nurse practitioner (SNP)

In addition to the nursing activities described on pages 6 and 7, I am also authorized to perform **eight advanced nursing practice activities**, under certain conditions:

- 1. Diagnose illnesses
- 2. Prescribe diagnostic examinations
- 3. Use diagnostic techniques that are invasive or entail risks of injury
- 4. Determine medical treatments
- 5. Prescribe medication or other substances
- 6. Prescribe medical treatments
- 7. Use techniques or apply medical treatments that are invasive or entail risks of injury
- 8. Provide pregnancy care

I AM A LICENSED PRACTICAL NURSE

My scope of practice²

- Participate in assessing a person's state of health and carrying out a care plan
- **Provide** nursing and medical **care and treatments** in order to maintain and restore health and prevent illness
- Prevent illness
- Provide palliative care

My reserved activities*

Observe the state of consciousness of a person and monitor neurological signs.

Introduce an instrument or a finger, according to a prescription, beyond the nasal vestibule, labia majora, urinary meatus or anal margin or into an artificial opening in the human body.

Apply invasive measures for the maintenance of therapeutic equipment.

Take **specimens**, according to a prescription.

Introduce an instrument, according to a prescription, into a **peripheral vein** in order to take a **specimen**, providing a training certificate has been issued to the member by the Order pursuant to the regulation under paragraph o) of Section 94.

Administer, prescribed **medications** or other prescribed substances via routes other than the intravenous route.

Mix substances to complete the preparation of a medication, according to a prescription.

Provide care and treatment for wounds and alterations of the skin and teguments, according to a prescription or a nursing plan.

Participate in vaccination operations as part of an activity under the Public Health Act (Chapter S-2.2).



I AM A RESPIRATORY THERAPIST

My scope of practice³

- Assess the cardiopulmonary condition for diagnostic or therapeutic follow-up purposes
- Participate in the administration of anaesthesia and sedation and analgesia
- Treat problems affecting the cardiopulmonary system to restore and maintain cardiopulmonary health in the human body

My reserved activities***

Provide **clinical monitoring** of the conditions of persons under anesthesia, including sedation analgesia, or under ventilatory assistance.

Introduce an instrument, according to a prescription, into a peripheral vein or an artificial opening or in and beyond the pharynx or beyond the nasal vestibule.

Provide **ventilatory assistance**, according to a prescription.

Test cardiopulmonary function, according to a prescription.

Take **specimens**, according to a prescription.

Administer and adjust prescribed medications or other prescribed substances.

Mix substances to complete the preparation of a medication, according to a prescription.

Assess the cardio-pulmonary condition of a symptomatic person.

I AM A CLINICAL PERFUSIONIST

My goal⁴

• Contributing to the maintenance of bodily functions of a human being in a treatment requiring the temporary support or replacement of cardiac, pulmonary or circulatory functions.



My professional activities***

Provide **clinical supervision** of the condition of persons linked to cardiac, pulmonary or circulatory assistance, autotransfusion or apheresis equipment.

Perform treatments through the circulatory supports, according to a prescription.

Operate and ensure the operation of cardiac, pulmonary or circulatory assistance, autotransfusion or apheresis equipment.

Program a **pacemaker** or **cardiac defibrillator**, according to a prescription.

Take **specimens** from **catheters** already in place or through the **circuit of the circulatory supports**, according to a prescription.

Administer and adjust prescribed medications or other prescribed substances.

Mix substances in order to complete the preparation of a medication, according to a prescription.

OBSTACLES TO OVERCOME

Here are a few questions to ask myself in order to identify eventual obstacles to fully occupying my scope of practice and carrying out my reserved activities:

- Are there enough staff on my care team to meet the patients' needs? Is the healthcare professional-to-patient ratio adequate in my centre of activities?
- Is the combination of healthcare professionals (nurses, licensed practical nurses, respiratory therapists, clinical perfusionists), non-professional staff (beneficiary attendants, clerks, etc.), and other professionals (physiotherapists, nutritionists, etc.) adequate for providing safe care to our patients?
- Am I being asked to perform tasks that belong to another job title?
- Do I frequently have to work mandatory overtime? Are absences often unreplaced?
- Have contingency and care rationing plans been put in place in my institution?

- Does the workload in my centre of activities allow me to give all the care my patients require? Am I able to care for them in a way that respects their dignity, liberty and integrity?
- Does the organization of work in my centre of activities hinder my professional activities or clinical judgement? Does it result in me making compromises in my ethical, professional and personal values?
- Is independent labour often hired, thus requiring, for example, the team on site to provide orientation and do more patient follow-up?
- Does the physical environment in which I practice hinder my work? Is there enough of the equipment and tools I need available in my centre of activities?
- Are the clinical tools (collective prescriptions, care protocols and rules, etc.) that I need every day easily accessible?
- Am I able to attend the inservice training necessary for my everyday practice?



The union representatives of the FIQ and FIQP are there to discuss anything that affects the working conditions of healthcare professionals, but also to intervene in organization of work and in matters of professional practice. The healthcare professionals can therefore share their questions with them. The union team's mission is to remove the obstacles that interfere with professionals' ability to provide safe, quality care. To do this however, they need everyone to be mobilized. Together, let's take action so that healthcare professionals can provide safer, more humane care to Quebec patients.

Name of my local union:______

Phone number: ______

Email address:_____

ACTIONS TO UNDERTAKE

Despite poor management practices that often exist in workplaces, healthcare professionals may and must promote interprofessional collaboration. This collaboration can be facilitated by a better understanding of their respective reserved activities, because each caregiver has an essential role to play. It is also important that they use all areas of influence to demand their full place on the care team, among their colleagues with other job titles.

What mechanisms can be used?

- The collective agreement provides for a parity (joint) committee, in all healthcare institutions, with the mandate to study workloads, but that can also study any issue related to the care. This is the committee on care: a place of discussion, debate and preferred form of intervention in organization of work.
- The councils of nurses (CII), licensed practical nurses committees (CIIA) and the multidisciplinary councils (MC) have the responsibility to assess and give advice and recommendations to institutions on care and its proper distribution. They are places of influence that healthcare professionals must participate in.



- The FIQ provides accredited training courses for members who want to know more about a healthcare professional's role as advocate. Contact your union team to learn more!
- The Safe Staffing form is available at fiqsante.qc.ca and only takes a few minutes to complete. It gives healthcare professionals the option to report situations in which practice conditions prevent them from providing safe, quality, humane care to patients. For example, when their excessive workload makes it impossible to give all the required patient care, or when the employer demands they perform the tasks of another job title. The forms are then sent confidentially to the union team which can then take the necessary action with healthcare professionals.



- The healthcare professionals' codes of ethics legitimize their right to report and demand better organization of work and enriched professional practice, in favour of the rights and interests of the patients. The more the caregivers are forced to act based on their codes of ethics, the more their employer has the responsibility to ensure that they can practice in a safe environment. Conditions that allow them to give proper, safe, personalized and continuous care must be put in place: the care to which patients are entitled. The employer must therefore recognize the clinical judgment of the professionals to adapt the care to the needs of the patients and make an adequate care team, in both composition and number, available.
- The FIQ or FIQP union team can help healthcare professionals see things more clearly and identify the different options that will help them avoid or overcome the obstacles preventing them from exercising their full scope of practice.



DEMANDS TO MAKE

When the healthcare professionals have appropriate conditions of practice which allow them to provide safe, quality care consistent with their skills and abilities and their professional aspirations, everyone wins. It is therefore critical that the caregivers have the opportunity and the capacity to fully carry out their professional role on the care team. To do this, everyone must first know and understand each person's place.

Together, we can thus claim the respect of our common values: humanism, integrity, equity and compassion. The FIQ, FIQP, and their union teams are there to support the demands of the healthcare professionals, in their own interest and that of the patients.

Safe, quality care can only be provided when there is a sufficient number of healthcare professionals to care for patients. The FIQ and FIQP are waging a fierce battle to implement healthcare-professional-to-patient ratios in Quebec. Every gain made for members' professional practice brings us closer to this goal. All healthcare professionals must take part in this battle.

TO LEARN MORE:

www.fiqsante.qc.ca/soins-securitaires-et-pratique-professionnelle/

REFERENCES

- ¹ Nurses Act, section 36.
- ² Professional Code, section 37 p).
- ³ Professional Code, section 37 s).
- ⁴ Regulation respecting the professional activities that may be engaged in by a clinical perfusionist, Medical Act, Chapter M-9, section 3.
- * Each of the reserved activities includes its own practice conditions that must be respected by the healthcare professional who performs it. In this brochure, colour codes have been used to identify the "families" of professional activities, making it easier to compare and understand healthcare professionals' reserved activities.



Activities authorized by regulation can also be carried out by the healthcare professionals who meet specific requirements. These authorized activities are not included in this document, as they cannot be done by all healthcare professionals.

- ** Some nurses and respiratory therapists also have the right to prescribe (Regulation respecting certain professional activities that may be engaged in by a nurse, Regulation respecting certain professional activities that may be engaged in by respiratory therapists). However, since these activities may not be performed by all of these professionals from the outset, they are not included in this guide.
- *** These clinical perfusionist activities have their own practice conditions that must be respected by healthcare professionals who perform them. In this brochure, colour codes have been used to identify the "families" of professional activities, making it easier to compare and understand healthcare professionals' reserved activities.



 FIQ Montréal
 Head Office

 1234, avenue Papineau, Montréal (Québec)
 H2K 0A4

 514 987-1141
 1 800 363-6541

 Fax 514 987-7273
 1 877 987-7273

FIQ Québec 1260, rue du Blizzard, Québec (Québec) G2K 0J1 | 418 626-2226 | 1 800 463-6770 | Fax 418 626-2111 | 1 866 626-2111 |

fig fip

fiqsante.qc.ca | info@fiqsante.qc.ca