Approved by the Alberta Association of Registered Nurses (AARN) in October 2005 for use when regulations for registered nurses were proclaimed under the Health Professions Act (HPA). Proclamation occurred on November 30, 2005 and the AARN became the College and Association of Registered Nurses of Alberta (Carna).

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Introduction

The *Health Professions Act* (HPA) (2000) provides a regulatory structure for all self-governing professions in Alberta. Schedule 24 of HPA has a practice statement that describes the practice of *registered nurses*. The College and Association of Registered Nurses of Alberta (CARNA) documents, such as *Scope of Practice for Registered Nurses* (2005), *Entry-to-Practice Competencies* (2005), *Nursing Practice Standards* (2003) and *Health Professions Act: Standards for Registered Nurses in the Performance of Restricted Activities* (2005) further define nursing practice.

The intent of HPA is to make professional legislation transparent to the public and to recognize that professions have overlapping scopes of practice. Under HPA, there is a common framework for:

- registration
- discipline
- continuing competence
- restricted activities

The *Nursing Practice Standards* apply to the overall care provided to *clients* and to all *regulated members* of CARNA in clinical practice, research, education and administration. This document builds on those *standards*. The purpose of this document is to outline the requirements for employers, nursing education programs and registered nurses as regulated members and how they must approach the *supervision* of care provided by *nursing students*.

The standards for supervision of nursing students, *undergraduate nursing employees, nurse practitioner students* and supervision of students of other regulated health professions must be met in order to provide care that includes restricted activities. The criterion represents the usual outcomes that must be achieved in order to meet a particular supervision standard. A supervision standard cannot be achieved if each criterion has not been met. Nursing students may perform restricted activities as defined

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1 Words or phrases in bold italics are listed in the Glossary. They are displayed in bold italics upon first reference.
in the *Government Organization Act* (GOA) (1999) as part of the care they provide. These standards address supervision of care in:

- clinical practicums in nursing education programs leading to initial entry-to-practice as a registered nurse
- employment situations where nursing students are undergraduate nursing employees
- clinical practicums for nurse practitioner students
- the supervision of students of another health profession

These standards provide direction for making decisions about students’ practice based on an adequate assessment of potential risks to clients, staff, nursing students and resources available in the practice setting. Staffing patterns and the availability of adequate supervision of student practice are key factors in decision-making.

### Restricted Activities

HPA introduces the concept of restricted activities. “Restricted activities are regulated health services which have been identified as involving a significant degree of risk to the public. They are also activities that demand specific competencies on the part of the person performing them.” (Alberta Health & Wellness, 2000, p. 12.) The complete list of restricted activities is outlined in Schedule 7.1 of the GOA. (See Appendix C.)

The *HPA Registered Nurses Profession Regulation* identifies the restricted activities that registered nurses and certified graduate nurses are authorized to perform and any conditions or supervisory requirements that may be applicable to the performance of the restricted activity. (See Appendix A.) The CARNA document *Health Professions Act: Standards for Registered Nurses in the Performance of Restricted Activities* (2005) identifies standards for the performance of restricted activity interventions in clinical practice. In addition, the Nursing Education Program Approval Board (NEPAB) *Standards for Alberta Nursing Education Programs Leading to Initial Entry-to-Practice as a Registered Nurse* (2005) contain the minimum requirements for approving a nursing education program and for supervision of nursing students in a nursing education program.
Nursing students in a nursing education program leading to initial entry-to-practice as a registered nurse are not regulated by CARNA. These nursing students, when providing nursing care in either a clinical practicum or as an undergraduate nursing employee, are considered unregulated workers under HPA. They can only perform restricted activities if a regulated member of a health profession consents to and supervises them in the performance of the restricted activity and the regulated member’s college has regulations authorizing the consent and supervision of the restricted activity. CARNA has identified in regulations that a nursing student in a nursing education program leading to initial entry-to-practice as a registered nurse in either a clinical practicum or an employment situation as an undergraduate nursing employee, will be authorized to perform, under supervision, the restricted activities that a registered nurse and certified graduate nurse are authorized to perform. (See Appendix B for regulations for nursing students performing restricted activities as part of the registered nurse regulations under HPA.)

Under the HPA Registered Nurses Profession Regulation, the individual nursing student may perform restricted activities under the supervision of a regulated member of a health profession in a certain, very specific set of circumstances.

Supervision is defined as consultation and guidance by a regulated member of a regulated health profession in the practice setting. The nursing student, undergraduate nursing employee, nurse practitioner student or student of another regulated health profession being supervised, is responsible for requesting consultation or guidance from the regulated member when they need assistance. Supervision may be direct, indirect or indirect remote:

a. Direct supervision means a regulated member is present in the practice setting at the point of care. This means that the regulated member is providing supervision ‘at the side of’ the nursing student, the undergraduate nursing employee, the nurse practitioner student or the student of another regulated health profession.

b. Indirect supervision means a regulated member is available for guidance and consultation but is not directly at the side of the nursing student, the undergraduate nursing employee, the nurse practitioner student or the student of another regulated health profession. This means that the regulated member is readily available in the unit or in the same location where the care is being provided. In community health settings, being readily available in the same location where the care is being provided would mean that the regulated member is physically present in the clinic setting (for example, at a flu clinic the registered nurse would be
present in the same room where the nursing student or the undergraduate nursing employee would be immunizing clients).

c. Indirect remote supervision means that a regulated member is available for consultation and guidance but is not physically present in the location where the care is being provided but is able to be contacted through the use of technology. This means that the regulated member may be available on an adjacent unit, within the four walls of a facility or agency, or can be reached by telephone, pager or other electronic means when the nursing student or the nurse practitioner student needs verbal assistance or guidance in providing client care.

Standard for Supervision of Care Provided by Nursing Students in a Clinical Practicum

Standard
Under the supervision of a regulated member of a health profession authorized to perform that restricted activity, nursing students may perform as part of their clinical placement the restricted activities that a registered nurse or certified graduate nurse is authorized to perform as set out in HPA Registered Nurses Profession Regulation Section 15(1) and 15(3).

Criteria
1.1 The nursing student must be currently enrolled in an approved nursing education program that leads to eligibility to write the exam approved for registration by CARNA.

1.2 If a nursing student from another Canadian province or territory comes to Alberta for a clinical practicum, the practice setting where the nursing student is to do the practicum must verify with the regulatory body in the student’s province of origin that the education program is an approved nursing education program in that jurisdiction leading to eligibility to write the exam approved for registration by CARNA.

1.3 The practice setting where the clinical practicum is to occur and the nursing education program where the nursing student is enrolled must have an agreement
that addresses lines of communication, supervision of the nursing student in the clinical practicum, expectations and accountabilities.

1.4 If a nursing student from another country comes to Alberta for a clinical practicum, the student must have visiting student status with an approved Alberta nursing education program. Visiting student status is a process administered and authorized by the Alberta educational institution.

1.5 The nursing faculty member in collaboration with the regulated member at the point of care will decide what a reasonable and prudent patient care assignment is for a particular nursing student in that specific practice setting, in light of the nursing student’s current competencies, client needs and the nursing care required.

1.6 The supervision of a nursing student by a regulated member may be direct, indirect, or indirect remote.

1.7 Supervision of a nursing student will most commonly be provided by the nursing faculty member or by a registered nurse in the practice setting.

1.8 The registered nurse or nursing faculty member supervising the nursing student performing the restricted activity intervention will use their critical judgment to decide the level of supervision required based on the restricted activity intervention to be performed, the practice setting and the level of risk involved should the nursing student perform the restricted activity intervention. The registered nurse or nursing faculty member decides based on these factors whether direct, indirect, or indirect remote supervision is required in the particular situation.

1.9 A regulated member must only supervise those restricted activity interventions that the member is competent to provide and those restricted activity interventions that are appropriate to the member’s area of practice.

1.10 Relevant practice setting policies and guidelines and policies set by the nursing education program for clinical practice for nursing students are to be followed. Although the HPA Registered Nurses Profession Regulation states that a nursing student is authorized to perform, under supervision, the restricted activities that a registered nurse and certified graduate nurse are authorized to perform, employer policy and/or the nursing education program guidelines or policies can limit or place parameters around the performance of the restricted activity intervention that a nursing student can perform.
1.11 The nursing education program has the responsibility to address and manage performance difficulties the nursing student may have in the practice setting.

1.12 Nursing students must have appropriate theory and practice as part of the nursing education program prior to performing any clinical skill that is a restricted activity intervention in the course of providing nursing care.

**Standard for Supervision of Care Provided by Undergraduate Nursing Employees in an Employment Situation**

**Standard**
Under the supervision of a regulated member of a health profession authorized to perform that restricted activity, an undergraduate nursing employee may perform the restricted activities that a registered nurse or certified graduate nurse is authorized to perform as set out in *HPA Registered Nurses Profession Regulation* Section 15(1) and 15(3).

**Criteria**

1.1 Employers must verify that the individual applying for employment as an undergraduate nursing employee is currently enrolled in an approved nursing education program in Alberta.

1.2 If a nursing student from another Canadian province or territory comes to Alberta for employment as an undergraduate nursing employee, the practice setting where the nursing student is to be employed must verify with the regulatory body in the student’s province of origin that the education program is an approved nursing education program in that jurisdiction leading to eligibility to write the exam approved for registration by CARNA.

1.3 Employers will need information from nursing education programs to collaboratively decide what is reasonable and prudent for a given practice environment in light of the student’s current competencies. The employer must verify with the nursing education program that the student is currently enrolled.
1.4 In an employment situation, a decision about whether or not an undergraduate nursing employee performs a specific restricted activity will be dependent upon:

a. employer policy

b. job description for the undergraduate nursing employee

c. current competencies of the undergraduate nursing employee

d. client health-care needs

1.5 The employer must provide orientation for the undergraduate nursing employee and has the responsibility to address and manage performance difficulties the undergraduate nursing employee may have in the practice setting.

1.6 The regulated member at the point of care has the responsibility to decide what a reasonable and prudent patient care assignment is for a particular undergraduate nursing employee in that specific practice setting, in light of the undergraduate nursing employee’s current competencies, client needs and the nursing care required.

1.7 The supervision of the undergraduate nursing employee by a regulated member may be direct or indirect. Direct supervision means a regulated member is present in the practice setting at the point of care. This means that the regulated member is providing supervision ‘at the side of’ the undergraduate nursing employee. Indirect supervision means a regulated member is available for guidance and consultation but is not directly at the side of the undergraduate nursing employee. This means that the regulated member is readily available in the unit or in the same location where the care is being provided. In community health settings being readily available in the same location where the care is being provided would mean that the regulated member is physically present in the clinic setting (for example, at a flu clinic the registered nurse would be present in the same room where the undergraduate nursing employee would be immunizing clients).

1.8 The regulated member supervising the undergraduate nursing employee performing the restricted activity intervention will use their critical judgment to decide the degree of supervision required and whether it will be direct or indirect supervision based on the restricted activity intervention to be performed, the practice setting and the level of risk involved should the undergraduate nursing employee perform the restricted activity intervention.
1.9 Regulated members must only supervise those restricted activity interventions that they are competent to perform themselves and those activities that are appropriate to the member’s area of practice.

1.10 Relevant agency policies must be followed. Although the *HPA Registered Nurses Profession Regulation* states that an undergraduate nursing employee is authorized to perform, under supervision, the restricted activities that a registered nurse and certified graduate nurse are authorized to perform; employer policy can limit or place parameters around the restricted activity interventions that an undergraduate nursing employee can perform.

1.11 The undergraduate nursing employee must have had appropriate theory and practice in the nursing education program and be competent to perform the restricted activity intervention prior to doing the restricted activity intervention in the course of providing nursing care.

1.12 Undergraduate nursing employees must never be left in charge or left alone on a unit or in any practice setting without a registered nurse or another regulated member present.

**Nurse Practitioner Students**

A nurse practitioner student is a registered nurse who must meet specific qualifications including formal educational preparation as a nurse practitioner to apply for registration as a registered nurse in the nurse practitioner category. The category of nurse practitioner student differs from that of a nursing student in a nursing education program leading to initial entry-to-practice as a registered nurse, since the nurse practitioner student is already a regulated member of the registered nurse profession.

**Standard for Supervision of Care Provided by Nurse Practitioner Students in a Clinical Practicum**
Standard
Under the supervision of a regulated member who is authorized to perform that restricted activity, a regulated member who is on the registered nurse register and is enrolled in a nurse practitioner education program is permitted to perform as part of a clinical practicum, the restricted activities authorized for a nurse practitioner. [See Appendix A, Section 15(5)]

Criteria

1.1 A nurse practitioner student must have current registration as a registered nurse with CARNA.

1.2 If a nurse practitioner student from another Canadian province or territory comes to Alberta for a clinical practicum, the practice setting where the clinical practicum is to occur must verify with CARNA that the nurse practitioner student has current registration as a registered nurse with CARNA and must also verify with the regulatory body in the nurse practitioner student’s province of origin that the student is enrolled in a nurse practitioner education program.

1.3 If a nurse practitioner student from another country comes to Alberta for a clinical practicum, the nurse practitioner student must have visiting student status with an Alberta nurse practitioner education program. Visiting student status is a process administered and authorized by an Alberta educational institution. The nurse practitioner student must have current registration as a registered nurse with CARNA.

1.4 The practice setting where the clinical practicum is to occur and the nurse practitioner education program where the nurse practitioner student is enrolled must have an agreement that addresses lines of communication, supervision of the student in clinical practicum, expectations and accountabilities.

1.5 The nursing faculty member in collaboration with the regulated member at the point of care will decide what a reasonable and prudent clinical assignment is for a given practice environment in light of the nurse practitioner student’s current competencies, the nursing care required and client needs.

1.6 The supervision of the nurse practitioner student may be direct, indirect or indirect remote.
1.7 The regulated member supervising the nurse practitioner student performing the restricted activity intervention will use their critical judgment to decide the level of supervision required based on the restricted activity intervention to be performed, the practice setting and the level of risk involved should the nurse practitioner student perform the restricted activity intervention. The regulated member may decide based on these factors that direct, indirect or indirect remote supervision is required in the particular situation.

1.8 Regulated members must only supervise those restricted activity interventions that they are competent to provide and those that are appropriate to the regulated member’s area of practice.

1.9 Relevant practice setting policies and guidelines and policies set by the nursing education program for clinical practice for nurse practitioner students are to be followed. Although the HPA Registered Nurses Profession Regulation states that a nurse practitioner student is authorized to perform, under supervision, the restricted activities that a nurse practitioner is authorized to perform, employer policy and/or the nursing education program guidelines or policies can limit or place parameters around the restricted activity interventions that a nurse practitioner student can perform.

1.10 The nurse practitioner education program has the responsibility to address and manage performance difficulties the nurse practitioner student may have in the practice setting.

1.11 A nurse practitioner student must have appropriate theory and practice in the learning environment as part of the nurse practitioner education program prior to performing any clinical skill that is a restricted activity intervention in the course of providing nursing care.

**Can Nurse Practitioner Students be Employed?**

Carna regulations do not authorize regulated members in the registered nurse category, who are enrolled in a nurse practitioner education program, to perform the restricted activities a nurse practitioner may perform in an employment situation prior to being on the Carna roster for nurse practitioners.

The nurse practitioner student, however, may be employed as a registered nurse and perform the restricted activities that registered nurses and certified graduate nurses are
authorized to perform under the *HPA Registered Nurses Profession Regulation*. (See Appendix A)

**Supervision of Students of Other Regulated Health Professions**

**Standard**

A registered nurse may supervise students of other regulated health professions in the provision of care that may include restricted activity interventions if the restricted activity is authorized for both professions. Conversely, a regulated member of another health profession may have regulations that authorize their members to supervise a nursing student in a nursing education program leading to initial entry-to-practice as a registered nurse, to supervise an undergraduate nursing employee or to supervise a nurse practitioner student in the performance of a restricted activity intervention if the restricted activity is authorized by both health professions.

**Criteria**

1.1 Regulated health professionals must only supervise those restricted activity interventions that they are competent to perform and those that are appropriate to the regulated health professional’s area of practice.

1.2 Relevant agency policies must be followed.

**Conclusion**

The introduction of a regulatory framework for restricted activities will have many implications for staff, managers, educators, nursing students, employers and administrators of facilities/settings where nursing students practice. Employer policies and procedures will have to address the performance of restricted activity interventions by a number of health-care providers to support the use of best practices to determine, implement and evaluate nursing care based on their clients’ needs for care.
Glossary

**Client** – Can refer to patients, residents, families, groups, communities and populations.

**Competency** – The ability to demonstrate the requisite knowledge, skills, judgment and attitudes to perform a specific function.

**Criteria** – The usual outcomes that must be achieved in order to meet a particular supervision standard; a supervision standard cannot be achieved if each criterion has not been met.

**Consultation** – Conferring with, seeking information, advice or direction from.

**Registered Nurse** – A regulated member of the College and Association of Registered Nurses of Alberta.

**Nurse Practitioner Student** – A registered nurse who is a student in an education program as part of the requirements for entry on the nurse practitioner roster.

**Nursing Student** – A student in a nursing education program leading to initial entry-to-practice as a registered nurse.

**Regulated Member** – A member of a regulated health profession authorized to perform certain restricted activities.

**Responsibility** – Obligation to provide for the needs of implied or explicit nursing care in accordance with professional and legal standards.

**Standard** – An explicit statement that represents the minimum requirement for supervision of a nursing student, undergraduate nursing employee, nurse practitioner student or student of another regulated health profession providing care.

The standard is the basis by which the actual performance of supervision of a nursing student, undergraduate nursing employee, nurse practitioner student or student of another regulated health profession providing client care is measured.

**Supervision** – Consultation and guidance by a member of a regulated health profession in the practice setting.
The nursing student, undergraduate nursing employee, nurse practitioner student or student of another regulated health profession being supervised, is responsible for requesting consultation or guidance from the regulated member when they need assistance. Supervision may be direct, indirect or indirect remote:

a. Direct supervision means a regulated member is present in the practice setting at the point of care. This means that the regulated member is providing supervision ‘at the side of’ the nursing student, undergraduate nursing employee, nurse practitioner student or student of another regulated health profession.

b. Indirect supervision means a regulated member is available for guidance and consultation but is not directly at the side of the nursing student or undergraduate nursing employee. This means that the regulated member is readily available on the unit or in the same location where the care is being provided. In community health settings, being readily available in the same location where the care is being provided would mean that the regulated member is physically present in the clinic setting (for example, at a flu clinic the registered nurse would be present in the same room where the nursing student or undergraduate nursing employee would be immunizing clients).

c. Indirect remote supervision means that a regulated member is available for consultation and guidance but is not physically present in the location where the care is being provided but is able to be contacted through the use of technology. This means that the regulated member may be available on an adjacent unit, within the four walls of a facility or agency, or can be reached by telephone, pager or other electronic means when the nursing student or the nurse practitioner student needs verbal assistance or guidance in providing client care.

Undergraduate Nursing Employee – A nursing student who has not completed their nursing education program leading to initial entry-to-practice as a registered nurse and has been hired by a regional health authority, agency or facility to provide nursing care.
References


Appendix A: Restricted Activities Authorized for CARNA Regulated Members


Authorized Restricted Activities

15(1) Regulated members on any register may, within the practice of registered nursing and in accordance with the standards of practice governing the performance of restricted activities approved by the Council, perform the following restricted activities:

(a) to cut a body tissue, to administer anything by an invasive procedure on body tissue or to perform surgical or other invasive procedures on body tissue below the dermis or the mucous membrane;

(b) to insert or remove instruments, devices, fingers or hands
   (i) beyond the cartilaginous portion of the ear canal,
   (ii) beyond the point in the nasal passages where they normally narrow,
   (iii) beyond the pharynx,
   (iv) beyond the opening of the urethra,
   (v) beyond the labia majora,
   (vi) beyond the anal verge, or
   (vii) into an artificial opening into the body;

(c) to insert into the ear canal under pressure, liquid, air or gas;

(d) to reduce a dislocation of a joint except for a partial dislocation of the joints of the fingers and toes;

(e) to dispense, compound, provide for selling or sell a Schedule 1 drug or Schedule 2 drug within the meaning of the Pharmaceutical Profession Act;

(f) to administer a vaccine or parenteral nutrition;

(g) to compound or administer blood or blood products;

(h) to administer diagnostic imaging contrast agents;
(i) to administer radiopharmaceuticals, radiolabelled substances, radioactive gases or radioaerosols;

(j) to prescribe or administer nitrous oxide, for the purposes of anaesthesia or sedation;

(k) to perform a psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs

(i) judgment,

(ii) behaviour,

(iii) capacity to recognize reality, or

(iv) ability to meet the ordinary demands of life;

(l) to manage labour or deliver a baby.

(2) Despite subsection (1)(e), a regulated member on any register performing the restricted activity described in that subsection shall not distribute, trade or barter for money or valuable consideration, or keep for sale or offer for sale a Schedule 1 drug or a Schedule 2 drug within the meaning of the Pharmaceutical Profession Act but may distribute or give away a Schedule 1 drug or a Schedule 2 drug without expectation or hope of compensation or reward.

(3) A regulated member registered on the registered nurse register or on the certified graduate nurse register may, within the practice of registered nursing, perform the restricted activity of ordering or applying non-ionizing radiation in the application of ultrasound imaging.

(4) Despite subsection (3), regulated members on the registered nurse register or on the certified graduate nurse register are authorized to apply ultrasound to a fetus only under the supervision of a person who provides health services and is authorized by a regulation under this Act or by another enactment to apply ultrasound to a fetus.

(5) A regulated member on the nurse practitioner register may, within the practice of registered nursing, perform the restricted activities listed in subsection (1) and the following additional restricted activities when practising as a nurse practitioner:
(a) to prescribe a Schedule 1 drug within the meaning of the *Pharmaceutical Profession Act*;
(b) to prescribe parenteral nutrition;
(c) to prescribe blood products;
(d) to order and apply any form of ionizing radiation in medical radiography;
(e) to order any form of ionizing radiation in nuclear medicine;
(f) to order non-ionizing radiation in magnetic resonance imaging;
(g) to order or apply non-ionizing radiation in ultrasound imaging, including any application of ultrasound to a fetus;
(h) to prescribe diagnostic imaging contrast agents;
(i) to prescribe radiopharmaceuticals, radiolabelled substances, radioactive gases and radioaerosols.

**Restriction**

16(1) Despite section 15, regulated members must restrict themselves in performing restricted activities to those activities that they are competent to perform and to those that are appropriate to the member’s area of practice and the procedures being performed.

(2) A regulated member who performs a restricted activity must do so in accordance with the standards of practice adopted by the Council in accordance with the bylaws and section 133 of the Act.
Appendix B: Regulations for Students Performing Restricted Activities


Students

17 (1) A nursing student who is enrolled in an approved nursing program and who is participating in a clinical practicum in Alberta or is employed as an undergraduate nursing employee in Alberta is permitted to perform the restricted activities set out in section 15(1) and (3) under the supervision of a regulated member who is authorized to perform those restricted activities.

(2) A nursing student who is enrolled in a nursing education program outside Alberta that leads to eligibility to write the registration exam and who is participating in a clinical practicum in Alberta or is employed as an undergraduate nursing employee in Alberta is permitted to perform the restricted activities set out in section 15(1) and (3) under the supervision of a regulated member who is authorized to perform those restricted activities.

(3) A nursing student outside Canada who has visiting nursing student status in an approved nursing program in Alberta and who is participating in a clinical practicum of the program in Alberta is permitted to perform the restricted activities set out in section 15(1) and (3) under the supervision of a regulated member who is authorized to perform those restricted activities.

(4) A regulated member who is on the registered nurse register and is enrolled in a nurse practitioner education program approved by the Council is permitted to perform the restricted activities referred to in section 15(5) as part of the clinical practicum of the nurse practitioner education program if the regulated member is under the supervision of a regulated member who is authorized to perform those restricted activities.

(5) A student in a nurse practitioner education program outside Alberta is permitted to perform the restricted activities set out in section 15(5) in a clinical practicum in Alberta if the student
(a) is registered on the registered nurse register,

(b) has visiting student status in a nurse practitioner education program approved by the Council, and

(c) is supervised by a regulated member authorized to perform those restricted activities.

(6) A student in a health services program of studies, other than an approved nursing program, who is authorized by an enactment to perform a restricted activity set out in section 15(1) or (3) is permitted to perform that restricted activity under the supervision of a regulated member who is authorized to perform that restricted activity.

(7) Supervision under this section must be carried out in accordance with the standards for supervision of students adopted by the Council in accordance with the bylaws and section 133 of the Act.
Appendix C: Government Organization Act

Schedule 7.1 Health Services Restricted Activities

Definitions

1 In this Schedule,

(a) “activity of daily living” means an activity that individuals normally perform on their own behalf to maintain their health and well-being, and includes

(i) routine and invasive self-care activities, including but not restricted to the removal of slivers and the cleaning of wounds, and

(ii) specifically taught procedures, which generally result in predictable and stable responses, including but not restricted to catheterization, maintenance of drainage tubes and administration of drugs by injection;

(a.1) “administration of a drug” means the supplying of a dose of a drug to a person for the purpose of immediate ingestion, application, inhalation, insertion, instillation or injection;

(b) “compound” means to mix together 2 or more ingredients of which at least one is a drug for the purposes of dispensing a drug or drugs, but does not include reconstituting a drug or drugs with only water;

(c) “dispense” means

(i) with respect to drugs, to provide a drug pursuant to a prescription for a person, but does not include the administration of a drug to a person;

(ii) with respect to corrective lenses, to verify corrective lenses objectively to the prescription;

(d) “drug” means drug as defined in the Pharmaceutical Profession Act;

(e) “health service” means a service provided to people

(i) to protect, promote or maintain their health,

(ii) to prevent illness,

(iii) to diagnose, treat or rehabilitate them, or

(iv) to take care of the health needs of the ill, disabled, injured or dying;
(f) “Minister” means the Minister responsible for the *Health Professions Act*;

(g) “restricted activity” means an activity named as a restricted activity in section 2;

(h) “sell” includes
   
   (i) distribute, trade or barter for money or other valuable consideration,

   (ii) distributing and giving away without expectation or hope of compensation or reward,

   (iii) keeping for sale, and

   (iv) offering for sale;

(i) “surrogate” means a person authorized by an individual or by the individual’s guardian, if the guardian is authorized to give such authorization, to assist the individual in carrying on an activity of daily living.

**Restricted activities**

2(1) The following, carried out in relation to or as part of providing a health service, are restricted activities:

(a) to cut a body tissue, to administer anything by an invasive procedure on body tissue or to perform surgical or other invasive procedures on body tissue

   (i) below the dermis or the mucous membrane or in or below the surface of the cornea;

   (ii) in or below the surface of teeth, including scaling of teeth;

(b) to insert or remove instruments, devices, fingers or hands

   (i) beyond the cartilaginous portion of the ear canal,

   (ii) beyond the point in the nasal passages where they normally narrow,

   (iii) beyond the pharynx,

   (iv) beyond the opening of the urethra,

   (v) beyond the labia majora,
(vi) beyond the anal verge, or
(vii) into an artificial opening into the body;

(b.1) to insert into the ear canal
   (i) under pressure, liquid, air or gas;
   (ii) a substance that subsequently solidifies;
(c) to set or reset a fracture of a bone;
(d) to reduce a dislocation of a joint except for a partial dislocation of the joints of the fingers and toes;
(e) to use a deliberate, brief, fast thrust to move the joints of the spine beyond the normal range but within the anatomical range of motion, which generally results in an audible click or pop;
(f) to prescribe a Schedule 1 drug within the meaning of the \textit{Pharmaceutical Profession Act};
(g) to dispense, compound, provide for selling or sell a Schedule 1 drug or Schedule 2 drug within the meaning of the \textit{Pharmaceutical Profession Act};
(h) to administer a vaccine or parenteral nutrition;
(i) to prescribe, compound or administer blood or blood products;
(j) to prescribe or administer diagnostic imaging contrast agents;
(k) to prescribe or administer anesthetic gases, including nitrous oxide, for the purposes of anesthesia or sedation;
(l) to prescribe or administer radiopharmaceuticals, radiolabelled substances, radioactive gases or radioaerosols;
(m) to order or apply any form of ionizing radiation in
   (i) medical radiography,
   (ii) nuclear medicine, or
   (iii) radiation therapy;
(n) to order or apply non-ionizing radiation in
   (i) lithotripsy,
   (ii) magnetic resonance imaging, or
(iii) ultrasound imaging, including any application of ultrasound to a fetus;

(o) to prescribe or fit
   (i) an orthodontic or periodontal appliance,
   (ii) a fixed or removable partial or complete denture, or
   (iii) an implant supported prosthesis;

(p) to perform a psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs
   (i) judgment,
   (ii) behaviour,
   (iii) capacity to recognize reality, or
   (iv) ability to meet the ordinary demands of life;

(q) to manage labour or deliver a baby;

(r) to prescribe or dispense corrective lenses.

(2) Despite subsection (1), the following are not restricted activities:

(a) activities of daily living, whether performed by the individual or by a surrogate on the individual’s behalf,

(b) giving information and providing advice with the intent of enhancing personal development, providing emotional support or promoting spiritual growth of individuals, couples, families and groups, and

(c) drawing venous blood.

Regulations
3 On consulting with the Health Professions Advisory Board under the Health Professions Act, the Minister may make regulations authorizing a person or a category of persons other than a regulated member or category of regulated members under the Health Professions Act, to perform one or more restricted activities subject to any conditions included in the regulations.
Offence

4(1) No person shall perform a restricted activity or a portion of it on or for another person unless

(a) the person performing it

(i) is a regulated member as defined in the Health Professions Act, and is authorized to perform it by the regulations under the Health Professions Act,

(ii) is authorized to perform it by a regulation under section 3, or

(iii) is authorized to perform it by another enactment,

or

(b) the person performing it

(i) has the consent of, and is being supervised by, a regulated member described in clause (a)(i), and

(ii) is permitted to perform the restricted activity under a regulation made under section 131(1)(d)(i) of the Health Professions Act by the council of the college of the regulated member referred to in subclause (i),

and there are regulations made under section 131(1)(d)(ii) of the Health Professions Act by the council of the college of that regulated member respecting how regulated members must supervise persons who provide restricted activities under this clause.

(2) Despite subsection (1), if no person who is authorized under subsection (1) is available to perform the restricted activity or a portion of it, a person may without expectation or hope of compensation or reward provide a restricted activity or a portion of it to provide physical comfort to or to stabilize another person who is ill, injured or unconscious as a result of an accident or other emergency.

(3) No person, other than a person authorized to perform a restricted activity under subsection (1)(a), shall or shall purport to consent to, provide supervision of and control of, another person performing the restricted activity or a portion of a restricted activity.
(4) No person shall require another person to perform a restricted activity or a portion of a restricted activity if that other person is not authorized in accordance with subsection (1) to perform it.

Penalty

5 A person who contravenes section 4 is guilty of an offence and liable

(a) for a first offence, to a fine of not more than $5000,
(b) for a 2nd offence, to a fine of not more than $10 000, and
(c) for a 3rd and every subsequent offence, to a fine of not more than $25 000 or to imprisonment for a term of not more than 6 months or to both fine and imprisonment.

Burden of proof

6 In a prosecution under this Schedule, the burden of proving that a person was authorized to perform a restricted activity by section 4(1) is on the accused.

Injunction

7 The Court of Queen’s Bench, on application by a person authorized by the Minister by way of originating notice, may grant an injunction enjoining any person from doing any act that contravenes section 4 despite any penalty that may be provided by section 5 in respect of that contravention.

RSA 2000 cH-7 s137; 2001 c21 s25; 2005 c13 s2