

SCOPE OF PRACTICE POSITION STATEMENT

The scope of practice of a regulated health profession is defined in their practice legislation (Bill 70, 2013). Scope of practice forms the foundation on which competencies and practice standards are developed, informs curriculum content, assists with staffing decisions and health care workforce planning. Generally, the scope of practice defined in legislation is broad enough to allow for some flexibility in interpreting the scope of practice of a profession to allow for changes in practice, evolving trends and new models of care (1).

It is now accepted that no one health profession has a completely unique scope of practice and that many professions share competencies. One task or activity does not define a profession; rather, it is the entire scope of competencies that make a profession unique. With increasing patient acuity, increasingly complex care, the advent of new technologies, and a health system expectation that all health care professionals work to their optimal scope of practice, discussions around interpreting the MIRTP scope of practice are needed(1) .

NSCMIRTP is receiving requests from registrants, employers, and other health profession regulators seeking assistance in determining whether MIRTPs can perform particular tasks and interventions. These decisions are at times challenging because often these tasks and interventions are beyond entry-level practice but could be considered to be within the scope of practice of MIRTPs(1).

When discussing scope of practice, it is important terms are used consistently and definitions are clear. Definitions as provided by the NSCMIRTP Act include;

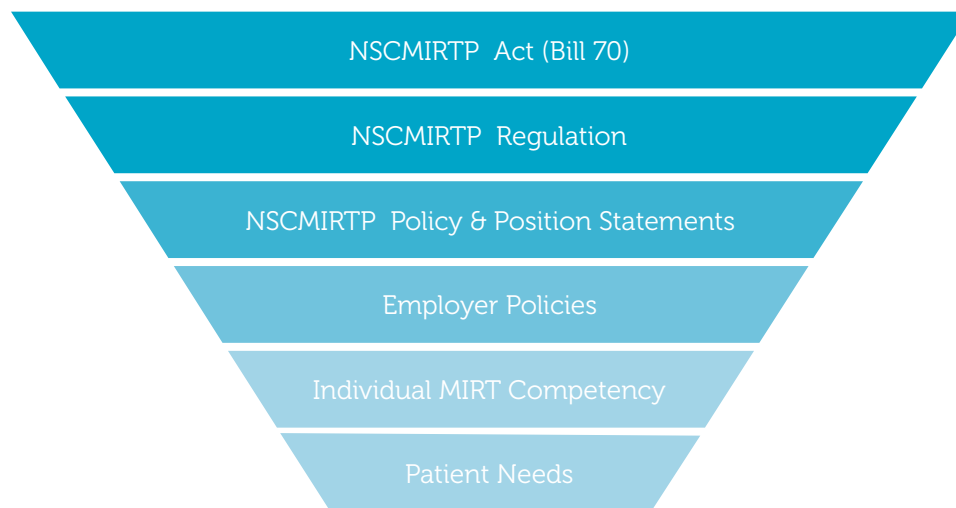
2 (g) “competence” means the ability to integrate and apply the knowledge, skills, attitude and judgement required to practise safely, ethically and professionally in a designated role and practice setting and includes both entry-to-practice and continuing competence;

2 (r) “individual scope of practice” means the roles, functions and accountabilities that an individual is educated, competent and authorized to perform;

2 (zze) “scope of practice” means the roles, functions and accountabilities registrants are educated in and authorized to perform;

DIAGRAM #1

Scope of Practice illustrates the various levels that are possible for scopes of practice in a given profession. The legislation will give the broadest and most general specifications for a MIRTTPs scope of practice and each successful level will be more specific and thus narrowing the scope.



As illustrated in Diagram #1 the scope of practice of an individual may be narrower than the scope of practice of the profession. However, while the scope of an individual MIRTTP may be narrower than that of the profession, an individual may have more specialized and in-depth knowledge and competence in one area of practice. An example of this would be a radiological technologist who is employed in mammography. If they are no longer performing general duty radiology procedures, these procedures may not be part of their current individual scope of practice, but they have specialized and in-depth skills in the area of mammography practice.

When encountering a scope of practice question in practice, several factors need to be considered by the employer and MIRTTP.

- The first and most important priority is protection of the public.
- MIRTTPs, regulators, employers, educators, and government must be responsive to changes to support evolving scopes of practice. This means scope of practice questions often need to be assessed on an individual basis taking context of the individual and situation into consideration.
- MIRTTPs are accountable for making professional judgments about when an activity is beyond their individual competence or professional scope of practice and pursuant to section 24 (1) of the Act -no registrant shall engage in practice that falls outside that registrant's individual scope of practice.

This does not allow an MIRTTP to refuse to perform activities on an ongoing basis if that activity is within their broader professional scope of practice. It is incumbent on MIRTTPs to work with employers



to attain or regain competencies that are within their professional scope of practice, but currently not in their individual scope of practice if requested by their employer. For example, if a nuclear medicine technologist had not performed radiopharmaceutical prep in a number of years it would not be a sound decision to allow them/ask them to independently perform this skill as this would constitute an unnecessary heighten risk to the patients. However, if this is an expected/needed skill set by the employer the employee must make every effort to regain this skill and the employer must give reasonable support, such as working under the supervision of a MIRTTP competent in this skill.

Regulators of health professions, such as NSCMIRTTP, cannot control every aspect of the practice of the profession, but are there to help provide direction through the development of standards, guidelines, and policy documents.

REFERENCES

1. College of Registered Nurses of Nova Scotia (2015) Interpreting and Modifying the Scope of Practice of the Registered Nurse
2. Nova Scotia College of Medical Imaging and Radiation Therapy Professionals. (2013) Bill 70