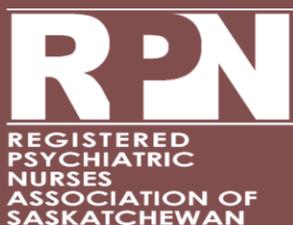


# THE REGISTERED PSYCHIATRIC NURSE SCOPE OF PRACTICE



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# The Registered Psychiatric Nurse (RPN) Scope of Practice

## 1. Introduction

The purpose of this document is to provide clarification to the public (owners) on the role and responsibilities (scope of practice) of the registered psychiatric nurse (RPNs). The registered psychiatric nurse practices under licensure in accordance with the Saskatchewan Registered Psychiatric Nurses Association Act (June 23, 1993), the registered psychiatric nurse's association's (RPNAS) bylaws for the Registered Psychiatric Nurses Act (Revised March 12, 2010), the RPNAS Code of Ethics, RPNAS standard of practice, the psychiatric nurse's pledge, Guidelines for Registered Psychiatric Nurses in Independent Practice (Registered Psychiatric Nurses of Canada, June 2008), and the Registered Psychiatric Nurses: Competency Profile for the Profession in Canada (Registered Psychiatric Nurses of Canada 2001). Psychiatric nursing is recognized as a distinct health care profession throughout Western Canada and many other countries – a profession that is growing and adapting to meet the changing needs of patients and our health care system (RPNC, 2013). Registered psychiatric nurses are skilled health care professionals and trained to provide a high quality of care in a contemporary patient, family and community based paradigm.

## 2. Legislation

The Saskatchewan Registered Psychiatric Nurses Association of Saskatchewan has the legislated authority to self-regulate the profession, determine the scope of practice for its members and to regulate the practice of registered psychiatric nursing in the public's interest. The RPN act provides for the protection of the

titles psychiatric nurse, registered psychiatric nurse, graduate psychiatric nurse, the abbreviation GPN, PN, RPN or any word, title or designation, abbreviated or otherwise to imply that the person is a practicing member (Section 22, subsection 1 and 2). Section 23 of the Registered Nurses Act enables registered psychiatric nurses (RPNs) to also use the title nurse (The RN scope of practice 2004).

Through the RPN act, the RPNAS has the legislated responsibility and right to:

- (a) Prescribing the qualifications, standards and tests of competency and good character for:
  - (i) The registration of persons or any category of persons as members; and
  - (ii) the issuing of licenses;
  
- (b) Prescribing:
  - (i) The procedures governing registration of persons or any category of persons as members;
  - (ii) the procedures governing the issuing of licenses;
  - (iii) the terms and conditions of licenses;
  
- (c) providing for a code of professional ethics;
  
- (d) setting standards or professional conduct, competency and proficiency of members;
  
- (e) setting standards regarding the manner and method of the practice of members;
  
- (f) setting requirements for maintenance of membership;
  
- (g) setting standards for continuing education and the participation of members in continuing education;
  
- (h) prescribing special categories of practice and the requirements for the admission to each of those categories; (Registered Psychiatric Nurses Act, Section 15 (2) a-h, 1993) Section 24 (2) of the RN act grants specific exemptions for non-RNs to practice registered nursing in the following circumstances: provision of specific services to a specific client in a client's residences where that practice is under the direction of a RN, RPN or a licensed physician (The RN Scope of Practice, 2004). The current RPN legislation does not provide this provision.

The scope of practice outlined in this document is taken from the Registered Psychiatric Nurses: Competency Profile for the Profession in Canada (2001). The provisions in the RPN act under section 15 (2) (d and e) provides the regulatory body with the responsibility to define the scope of practice. **Scope of practice**, best defined by the collaborative definition on Wikipedia in 2013, is “a terminology used by national and state/provincial licensing boards for various professions that defines the procedures, actions, and processes that are permitted for the licensed individual. The scope of practice is limited to that which the law allows for specific education and experience, and specific demonstrated competency. Each jurisdiction has laws, licensing bodies, and regulations that describe requirements for education and training, and define scope of practice” (Wikipedia, 2013). The definition above will be used for the purpose of this document. The importance of defining the scope of practice is further explained as,

*“A profession’s scope of practice encompasses the activities its practitioners are educated and authorized to perform. The overall scope of practice for the profession sets the outer limits of practice for all practitioners. The actual scope of practice of individual practitioners is influenced by the settings in which they practice, the requirements of the employer and the needs of their patients or clients. Although it can be difficult to define precisely, scope of practice is important because it is the base from which governing bodies prepare standards of practice, educational institutions prepare curricula, and employers prepare job descriptions. Consumers, too, need at least a general understanding of scope of practice to know who is qualified to provide different kinds of services.” CNA. (1993). *The Scope of Nursing Practice: A Review of Issues and Trends.**

### 3. RPNAS Competencies, Policies, Standards, Codes and Guidelines

The RPNAS Competency Profile is a document that was created for the regulatory bodies of psychiatric nursing in the four Western provinces (British Columbia, Alberta, Saskatchewan and Manitoba). Psychiatric Nursing, as a distinct profession, is regulated in Canada with the provinces of British Columbia, Alberta, Saskatchewan and Manitoba as well as in other Canadian jurisdictions with an agreement. Registered Psychiatric Nurses use a holistic approach to work with individuals, families, groups and communities while understanding the relationships between the physical, emotional, mental [cognitive] spiritual, cultural and social aspects of the individual. The four domains of the practice of Psychiatric Nursing are direct psychiatric nursing practice, psychiatric nursing education, psychiatric nursing administration and psychiatric nursing research. The competency profile is designed to capture the full range of psychiatric nursing and best practices. (Registered Psychiatric Nurses of Canada, 2001). The purpose of policies, standards, codes and guidelines is to further protect the public and ensure professional guidance for licensed members of the RPNAS. All RPN practice in the province of Saskatchewan is guided by the competency document and the RPNAS code of ethics and bylaws.

### 4. Scope of Practice of Registered Psychiatric Nurses

The Province of Saskatchewan began educating Psychiatric Nurses in 1932 and in 1948 legally recognized this profession as distinct with the proclamation of the Registered Psychiatric Nurses' Act (Registered Psychiatric Nurses Association of

Saskatchewan, White Paper 2009). Registered psychiatric nurses are trained and competent to work in many areas of the health care system and community based services. Registered psychiatric nurses do not received basic nursing education in obstetrics or pediatrics and therefore nursing practice in these areas of the health care system are not part of the practice unless the health care challenge is directly related to psychosocial/mental health nursing expertise. Registered psychiatric nurses have nursing competencies to work in all areas of the health care system and make a valuable contribution to the patient care outcomes.

The RPNAS currently regulates seven categories of membership:

- (a) practicing membership;
- (b) graduate psychiatric nurse membership;
- (c) non-practicing membership;
- (d) student membership;
- (e) life membership;
- (i) associate membership;
- (f) honorary membership.

Only practicing members of the RPNAS are entitled to practice as registered psychiatric nurses to the full scope of practice. Additional categories of practice are currently being developed by the RPNAS.

Registered Psychiatric Nurses practice to promote mental health, increase capacity and facilitate self-efficacy with individuals, groups, families, communities, and populations. Through the application of self-awareness and deliberate consciousness, Registered Psychiatric Nurses use the therapeutic milieu to promote positive change in both the physical and mental health of the client. Comprehensive psychiatric nursing care, through the nursing process, assists the individual to meet psychosocial, physiological, and developmental needs, including the following:

- Promoting, maintaining, and restoring the holistic health of diverse populations;
- teaching and practice;
- Developing authentic therapeutic relationships through application of effective interpersonal skills; and

- Coordinating\* mental health and psycho-social services.
- Registered Psychiatric Nurses have general and psychiatric professional nursing knowledge, skills and abilities. They practice in diverse settings with diverse clients, independently and in collaboration with other disciplines. Registered psychiatric nursing practice includes direct care, administration, education, consultation and research.

\***Coordinating** does not imply that the coordinator has authority or control over the service or person being coordinated or that the service or person being coordinated is under the direction of the coordinator. (Nursing in Collaborative Environments, Registered Psychiatric Nurses Association, Saskatchewan Association of Licensed Practical Nurses, Saskatchewan Registered Nurses Association, 2000).

A legally defined scope of practice promotes safe, ethical, quality care that responds to the needs of society. Scope of practice is the range of roles, functions; skills, responsibilities, and activities RPNs are educated and authorized to perform. The scope of practice for registered psychiatric nurses comes from the Registered Psychiatric Nurses: Competency Profile for the Profession in Canada (2001). Registered psychiatric nursing's legitimacy comes from the legislated mandate of the Registered Psychiatric Nurses Act (1993) and all documents produced by the RPNAS that provides regulatory governance of the profession of registered psychiatric nursing in the province of Saskatchewan.

Nursing is a broad term that is used to distinguish several disciplines within the profession of nursing. The province of Saskatchewan has three legislated regulatory bodies providing governance to the profession of nursing (SALPN, SRNA, and RPNAS). All three categories of nurses work together in various health care settings and community based programs to ensure the health care needs of the consumer are met to the highest standard possible. Each of the three professional regulatory bodies has the right to regulate its own membership. The scope of practice for registered psychiatric nurses articulated in a comprehensive manner in the Registered Psychiatric Nurses: Competency Profile for the Profession in Canada (2001). Individual RPNs are responsible to recognize their own personal and professional limitations and practice the within the scope of practice in manner which reflects their individual level of competence.

Within health care settings and community based organizations, where the RPN is competent to practice, the RPN has the responsibility to make decisions about a person's psychiatric nursing care and does so through the use of sound nursing process at the point of care. Through the RPN act (Section 15 (2) d/e) the RPNAS has the responsibility for setting standards of professional conduct, competency and proficiency of members, and setting standards regarding the manner and method of the practice of members. The Registered Psychiatric

Nurses: Competency Profile for the Profession in Canada includes the following areas:

### **Therapeutic Psychiatric Nursing Practice**

#### **A. Communication skills and therapeutic relationships**

- A-1 Knowledge and Application of Interpersonal Communication Skills
- A-2 Knowledge and Application of Self in the Therapeutic Process
- A-3 Knowledge and Application of the Characteristics of the Therapeutic Relationship
- A-4 Knowledge and Application of Teaching Skills

### **Theory-Based Psychiatric Nursing Practice**

#### **B. Knowledge of Biological Systems**

- B-1 Knowledge of Anatomy and Physiology
- B-2 Knowledge of Microbiology
- B-3 Knowledge of Pathophysiology
- B-4 Knowledge of Nutrition

#### **C. Knowledge of Human Growth and Development**

- C-1 Knowledge of Prenatal and Genetic Influences on Development
- C-2 Knowledge of Developmental Theories

#### **D. Knowledge of Fundamental Skills of Psychiatric Nursing Practice**

##### **D-1 Medication Administration**

- D-1-1 Knowledge of Pharmacology
- D-1-2 Knowledge and Ability to Process Physicians' Orders
- D-1-3 Ability to Calculate Dosages
- D-1-4 Knowledge of Storage and Disposal Procedures
- D-1-5 Ability to Conduct Drug Counts on Narcotic and Controlled Substances
- D-1-6 Knowledge and Ability to Administer Medication

##### **D-2 General Procedures**

- D-2-1 Knowledge of Activities of Daily Living
- D-2-2 Knowledge of Monitoring of Vital Signs

- D-2-3 Knowledge and Application of Positioning and Mobility
- D-2-4 Knowledge of Sterile Techniques
- D-2-5 Knowledge and Ability to Perform Treatments and Procedures

#### D-3 General Safety

- D-3-1 Knowledge and Application of Universal Precautions
- D-3-2 Knowledge of Safe Occupational Work Practices
- D-3-3 Knowledge of Infection Control

#### D-4 Documentation and Recording

- D-4-1 Knowledge and Application of Documentation and Reporting Skills

### E. Knowledge of Disorders of Mental Health and Development

- E-1 Knowledge of Disorders in Infancy, Childhood and Adolescence
- E-2 Knowledge of Cognitive Disorders
- E-3 Knowledge of Substance-Related Disorders
- E-4 Knowledge of Schizophrenia and Other Psychotic Disorders
- E-5 Knowledge of Mood Disorders
- E-6 Knowledge of Anxiety Disorders
- E-7 Knowledge of Personality Disorders
- E-8 Knowledge of Other Psychiatric Disorders

### F. Knowledge of Social and Family Systems

- F-1 Knowledge of Sociocultural Influences
- F-2 Knowledge of Family Systems
- F-3 Knowledge of Socioeconomic Factors and Social Systems
- F-4 Knowledge of Loss, Transition and Change

## **Application of the Nursing Process in Psychiatric Nursing Practice**

### G. Psychiatric Nursing Assessment

- G-1 Knowledge and Ability to Apply the Nursing Process in Psychiatric Nursing Practice
- G-2 Knowledge of Assessment Skills
- G-3 Knowledge and Application of Psychiatric Nursing Assessment Skills
- G-4 Knowledge and Ability to Complete a Mental Status Examination

- G-5 Knowledge of Physical Assessment Skills
- G-6 Knowledge of Psychiatric Nursing Diagnosis

## H. Psychiatric Nursing Planning

- H-1 Knowledge and Ability to Complete the Planning Phase of the Nursing Process

## I. Implementation of Psychiatric Nursing

- I-1 Knowledge of the Implementation Phase of the Nursing Process

### I-2 Safety/Emergency Interventions

- I-2-1 Knowledge and Ability to Respond to Emergencies
- I-2-2 Ability to Recognize, Manage and Document Aggressive Behavior
- I-2-3 Ability to Recognize and Report Abuse
- I-2-4 Knowledge of the Therapeutic Use of Restraints
- I-2-5 Knowledge and Ability to Respond to Psychiatric Emergencies

### I-3 Procedural Implementation

- I-3-1 Knowledge of Admission/Entry to the System Procedures
- I-3-2 Knowledge of Discharge/Exit from the System Procedures

### I-4 Fundamental Skill Implementation

- I-4-1 Knowledge and Ability to Assess and Manage Nutrition and Hydration Needs
- I-4-2 Ability to Assess and Manage Elimination Needs
- I-4-3 Ability to Perform Dressing Changes
- I-4-4 Knowledge and Ability to Perform Specimen Collection and Testing
- I-4-5 Ability to Provide Post Mortem Care

### I-5 Treatment Modalities

- I-5-1 Knowledge and Application of Therapeutic Milieu Therapy
- I-5-2 Knowledge and Application of Techniques of Individual Therapy
- I-5-3 Knowledge of Group Processes
- I-5-4 Knowledge and Application of Pharmacological Therapies
- I-5-5 Knowledge of Electroconvulsive Therapy and Ability to Assist in Electroconvulsive Therapy

## J. Psychiatric Nursing Evaluation

J-1 Knowledge and Ability to Complete the Evaluation Phase of the Nursing Process

### **Integration of Critical Thinking and Clinical Judgment in Psychiatric Nursing Practice**

#### K. Problem Solving, Collaboration and Leadership

- K-1 Knowledge and Application of Problem-Solving/Decision-Making
- K-2 Knowledge and Application of Time Management
- K-3 Knowledge and Application of Conflict Management and Resolution
- K-4 Knowledge of and Ability to Advocate
- K-5 Knowledge and Application of Effective Leadership Practices

#### L. Clinical Focus

- L-0 Core Clinical Focus Competencies
- L-1 Psychiatric Nursing in Addiction Services
- L-2 Psychiatric Nursing with Adults Requiring Acute Services
- L-3 Psychiatric Nursing with Adults Requiring Rehabilitative Services
- L-4 Psychiatric Nursing with Children and Adolescents
- L-5 Psychiatric Nursing in the Community
- L-6 Psychiatric Nursing with the Elderly
- L-7 Psychiatric Nursing in Emergency and Crisis Services
- L-8 Psychiatric Nursing in Forensic Services
- L-9 Psychiatric Nursing in Independent Practice
- L-10 Psychiatric Nursing with Individuals Affected by Brain Injuries
- L-11 Psychiatric Nursing with Individuals Affected by Developmental Disabilities

#### M. Mental Health Promotions

- M-1 Knowledge of Primary, Secondary and Tertiary Prevention
- M-2 Knowledge and Application of Mental Health Promotion
- M-3 Community Development

### **Psychiatric Nursing Education**

#### N. Psychiatric Nursing Education

## **Psychiatric Nursing Administration**

O. Psychiatric Nursing Management and Administration

## **Psychiatric Nursing Research**

P. Psychiatric Nursing Research

## **Professionalism in Psychiatric Nursing**

Q. Legal Issues in Psychiatric Nursing Practice

Q-1 Knowledge and Application of Federal and Provincial Legislation in Psychiatric Nursing Practice

Q-2 Knowledge and Application of the Principles of Consent and Confidentiality

R. Professional Practice

R-1 Knowledge and Application of Deliberate Self-Care

R-2 Knowledge of Professional Issues in Psychiatric Nursing Practice

R-3 Knowledge of Application of Standards of Psychiatric Nursing Practice

R-4 Knowledge and Application of Professional Ethics

R-5 Ability to Identify and Incorporate Best Practices

S. Cultural Awareness and Cultural Safety in Psychiatric Nursing

(Registered Psychiatric Nurses; Competency Profile for the Profession in Canada. 2001)

## **5. Accountability**

Accountability is one of four core values outlined by the RPNAS in the code of ethics and is indicated by the following:

- a. Differentiate between professional and personal relationships.
- b. Establish therapeutic relationships.
- c. Recognize potential vulnerability of all persons.
- d. Practice within their level of competence.
- e. Use evidence-based practice.
- f. Use continuing competence throughout their professional career.
- g. Maintain a personal level of health and mental health.
- h. Provide competent, safe and ethical care.
- i. Protect the confidentiality of all information obtained as a result of professional relationships.
- j. Demonstrate professional practice that reflects honesty, integrity, reliability, impartiality and diligence.
- k. Demonstrate professional judgment when accepting and delegating responsibilities.
- l. Report incompetent or unethical behaviors of care providers.
- m. Accept responsibility for own practice and minimize harm arising from adverse events.
- n. Refrain from endorsement of products or services.
- o. Promote the psychiatric nursing profession.
- p. Practice according to provincial and federal legislation and *Standards of Psychiatric Nursing Practice, and Competency Profile for the Profession in Canada*.
- q. Understand, promote and uphold the ethical values of the profession. (RPNAS Code of Ethics).

## 6. Summary

Mental health challenges and illness are complex issues facing people of all cultural and ethnic backgrounds and multiple-complex in nature. The practice of psychiatric nursing has emerged as a distinct practice within the nursing profession and continues to evolve towards a highly refined profession that is focused on meeting the bio psychosocial developmental needs of people. The profession has evolved over the years and is represented by a group of registered psychiatric nurses who are regulated by their own professional regulatory body and proud of the contribution they make to society. The registered psychiatric nurse works as part of a collaborative interdisciplinary team with the ability to provide leadership to a team of health care professions for the purpose of ensure a high quality of care in whatever delivery model being utilized. RPNs are proud to be a member of the collaborative nursing initiatives and value the egalitarian recognition of other nursing distinctions. The scope of practice for RPNs is a living document that is in a constant process of change to reflect the current practice paradigm and to reflect the contextual needs of the vast cultural, ethnic and geographical factors related to high quality patient centered care.

## 7. References & Resources

Registered Psychiatric Nurses Act of Saskatchewan. (1993).

Registered Psychiatric Nurses Association Coded of Ethics.

Registered Psychiatric Nurses Association Standard of Practice.

The Saskatchewan Registered Nurses Association Scope of Practice. (2004).

The Saskatchewan Registered Nurses Association Act. (1988).

Registered Psychiatric Nurses: Competency Profile for the Profession in Canada. (2001).

Registered Psychiatric Nurses' Association of Saskatchewan White Paper. (2009).

Wikipedia Dictionary, 2013. [http://en.wikipedia.org/wiki/Scope\\_of\\_practice](http://en.wikipedia.org/wiki/Scope_of_practice)

Nursing in Collaborative Environments: Registered Psychiatric Nurses Association of Saskatchewan, Saskatchewan Association of Licensed Practical Nurses, Saskatchewan Registered Nurses' Association (2000).

*The Scope of Nursing Practice: A Review of Issues and Trends.* CNA 2003.





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