



# Standards of Practice for Health Care Aides on Restricted Activities and Supervision Requirements

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College of LPNs and HCAs of Alberta

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## INTRODUCTION

The College of Licensed Practical Nurses and Health Care Aides of Alberta (CLHA) has the authority under the *Health Professions Act* (HPA) to carry out its activities and govern Health Care Aides (HCAs) in a manner that protects and serves the public interest. Part of carrying out this mandate is to ensure that HCAs provide care that is safe, competent, and ethical.

Terms defined in the glossary are **bolded** where they appear for the first time in this document.

### Standards of Practice and the HPA

Standards of practice provide the minimum standard of behaviour that HCAs are expected to meet in their professional practice. Standards of practice are **enforced** under the HPA, and a breach of a standard of practice is considered **unprofessional conduct** that could result in disciplinary action.

The purpose of these *Standards of Practice for Health Care Aides on Restricted Activities and Supervision Requirements* is to outline the minimum expectations every HCA must meet, including the minimum supervision requirements, when performing a **restricted activity**. This document applies to HCAs working in all settings. However, this document does not apply when an HCA who is a student of another regulated profession performs a restricted activity in their capacity as a student of that other regulated profession.

### Understanding HCA Restricted Activities

#### Definition of restricted activities

Under the HPA, a “restricted activity” is a high-risk health service or procedure that can only be performed on another person by regulated health professionals authorized and competent to perform them. Restricted activities are listed in section 1.3 of the HPA.

#### Legal authorization to perform restricted activities

A regulated health professional can be authorized to perform a restricted activity by the *Health Professions Restricted Activities Regulation* (HPRAR) and the standards of practice of a regulatory college.

When performing a restricted activity, an HCA must follow the minimum expectations in this document. Generally, HCAs must follow standards of practice even if they conflict with policies. HCAs must follow all legal requirements, CLHA **regulatory documents**, and employer policies and procedures to provide safe, competent, and ethical care. However, if there is a conflict between these Standards of Practice and an employer’s policy, the HCA must follow these Standards of Practice. If there is a conflict between these Standards of Practice and the standards of practice of another regulated health profession, the HCA must follow this document and perform only the restricted activities outlined in these Standards of Practice.

## Restricted activities and activities of daily living

In some cases, an activity that appears to be a restricted activity may also be an **activity of daily living** (ADL) for that **client**. ADLs are activities that individuals normally perform on their own to maintain their health and well-being. For more information, please see the CLHA practice guidance on *Health Care Aides Performing Activities of Daily Living*.

## Understanding Supervision Requirements

### Three levels of supervision

Supervision refers to the support that an HCA receives from a supervising health professional<sup>1</sup> while performing certain tasks, including restricted activities. This can be in the form of assistance, consultation, and guidance. Different tasks may require different types of supervision. The three types of supervision are listed below.

- **Direct Supervision:** the supervising health professional is present and beside the HCA while the activity is performed.
- **Indirect Supervision:** the supervising health professional assigning a task to the HCA is on-site, ready to provide guidance, consultation, and assistance, but is not directly beside the HCA.
- **Remote Supervision:** the supervising health professional assigning a task to the HCA is not on-site but can be easily contacted for consultation and guidance via technology (such as by telephone).

### Factors in determining supervision

The type of supervision required by the HCA will depend on factors such as the:

- care setting,
- **acuity** of the client,
- client's condition and if it is changing,
- **predictability** of the **outcome** of the task, and
- individual **competence** level of the HCA.

### Unstable or unfamiliar clients

In some cases, the client may have many needs, and their condition may be likely to change. Such clients may need ongoing assessment by a nurse before any restricted activity is performed. In such cases, the HCA will require direct supervision.

### Stable and familiar clients

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<sup>1</sup> In this document, a supervising health professional is a regulated health professional (other than an HCA) who assigns a task to the HCA and is responsible for providing supervision to the HCA for that task.

In other cases, HCAs may provide care to the same client(s) on a regular schedule. If the HCA is familiar with the client, their needs and abilities, and all requirements for performing a restricted activity are met, the HCA may receive indirect supervision or remote supervision for that activity.

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## STANDARD 1: PERFORMING RESTRICTED ACTIVITIES UNDER SUPERVISION

An HCA may perform a restricted activity only if the restricted activity is authorized under these Standards of Practice, there is appropriate supervision, and the HCA is competent to perform the restricted activity.

### Performance Expectations

An HCA

1.1. may perform a restricted activity only if:

- a) performing the restricted activity is expressly authorized under Standard 1.2 of these Standards of Practice,
- b) there is a **client-specific order** from an **authorized health professional**, and
- c) the HCA is performing the restricted activity under the supervision of a supervising health professional.

1.2. may perform the following restricted activities:

- a) to insert or remove instruments, devices, fingers, or hands beyond the:
  - (i) labia majora or
  - (ii) anal verge.

**NOTE:** (i) For example, HCAs may perform the restricted activity outlined in standard 1.2(a) for the purpose of fecal evacuation (e.g., suppositories or fleet enemas), management of menstruation, or inserting vaginal medication.

(ii) Assessing clients is not within the scope of HCA practice. Therefore, HCAs may not perform the above listed restricted activity for the purpose of carrying out an assessment of the client; however, the HCA is expected to report any unusual observations if noticed.

1.3. must not assign a restricted activity to another HCA, any student, or any other person.

1.4. must not supervise another HCA, any student, or any other person performing a restricted activity.

**NOTE:** An HCA student performing a restricted activity must receive supervision from the supervising health professional who assigned the task. The supervising health professional cannot be another HCA.

## STANDARD 2: COMMON EDUCATION STANDARDS

An HCA must have and apply the knowledge, training, skills, and judgment required to perform a restricted activity.

### Performance Expectations

An HCA must:

- 2.1 Have the knowledge and competence to perform the restricted activity safely.
- 2.2 Take reasonable steps to identify any gaps in knowledge before performing a restricted activity and acquire the necessary education, training, and assistance.
- 2.3 Have the knowledge and competence to use any equipment and technology required to perform the restricted activity.
- 2.4 Be aware of the reason, relevant observations, and outcomes of any medication or intervention used when performing a restricted activity.
- 2.5 Have **client-specific education** or training to perform the restricted activity.

## STANDARD 3: COMMON PRACTICE STANDARDS

An HCA must follow appropriate legislation, regulations, regulatory documents, and employer requirements when performing restricted activities.

### Performance Expectations

An HCA must:

- 3.1. Be **responsible** and **accountable** for their practice.
- 3.2. Before performing the restricted activity, take reasonable steps to identify any risks associated with it, report those risks, and take any required precautions.
- 3.3. Ensure that the restricted activity is supported by the client's care plan and that the activity is appropriate to the client's needs.
- 3.4. Confirm that the employer has authorized the HCA to perform the restricted activity.
- 3.5. Follow employer requirements and best practices related to performing the restricted activity.
- 3.6. Apply infection prevention and control best practices following legislative requirements, CLHA documents, and employer requirements.
- 3.7. Obtain **consent** from the client (or an authorized **substitute decision maker**) before performing the specific restricted activity.
- 3.8. Observe the client after performing the restricted activity for an appropriate period.
- 3.9. Document the restricted activity according to legislation and employer requirements.
- 3.10. Follow legislation and employer requirements to document and report any **adverse event** or other relevant information.

## **STANDARD 4: SUPERVISION REQUIREMENTS**

To perform any restricted activity authorized under these Standards of Practice, an HCA must have sufficient supervision from a health professional who is authorized to perform the restricted activity without supervision.

### **Performance Expectations**

An HCA must:

- 4.1 Be supervised by a regulated health professional who:
  - a) is authorized to perform the restricted activity without supervision,
  - b) consents to supervise the HCA to perform that restricted activity, and
  - c) accepts responsibility for ongoing evaluation of the restricted activity being performed by the HCA.
- 4.2 Work with the supervising health professional to determine the appropriate supervision the HCA requires to perform that restricted activity:
  - a) at a minimum, an HCA must receive remote supervision to perform the restricted activity outlined in Standard 1.2.
- 4.3 Document the following after performing a restricted activity:
  - a) the regulated health professional supervising the HCA, and
  - b) the type of supervision provided by the regulated health professional.

## DEFINITIONS

This glossary explains some of the terms used in these standards.

**Accountable:** the ability to explain why actions were or were not taken for a job or task for which the HCA is responsible.

**Activity of daily living (ADL):** as defined in the HPA, an activity that an individual normally performs on their own behalf to maintain their health and well-being. In other words, these are tasks that the client would complete for themselves if they were not hindered by a health condition.

**Acuity:** the severity of an illness or medical condition.

**Adverse event:** a harmful and negative outcome that happens to a client as a result of a drug or medical care that they have received.

**Authorized health professional:** a regulated health professional who is allowed by law to perform specified healthcare services.

**Client/patient:** An individual or group of individuals who require personal care and support services from HCAs. In some clinical settings, the client may be referred to as a patient or a resident. Where this term is used, it should be taken to mean anyone receiving care, including family members.

**Client-specific education:** refers to tailored education or information that includes the unique care needs, preferences, and circumstances of a particular client. Having this knowledge enables the HCA to provide competent care for the client.

**Client-specific order:** an instruction or authorization given by an authorized health professional to provide care services for a specific client. A client-specific order must be recorded in the client's permanent record, detailing all necessary information for safe execution, and include a signature of the health professional giving the order.

**Competence:** the ability to demonstrate the required knowledge, skills, judgment, and attitude to perform a specific function.

**Consent:** agreement to what is being done by another person, such as the client approving the proposed actions or care of the HCA and the healthcare team.

**Enforce:** "making sure people obey a law or rule."

**Outcome:** the responses and events that happen following the provision of care to the client.

**Predictability:** the extent to which a client's health outcomes and future care needs can be expected.

**Regulatory documents:** rules and guidance documents made by a regulatory body that sets minimum standards of behaviour, expected behaviours, or best practices for individuals regulated by that body. Some examples of regulatory documents include standards of practice, a code of ethics, and practice guidelines. A regulatory body (such as the CLHA) is an organization responsible for ensuring compliance with laws or rules or managing a particular activity or process.

**Responsible:** duty to provide for the needs of a client following professional and legal standards.

**Restricted activity:** health services that can only be performed by authorized persons because of the risks associated with the performance of these activities and the need to ensure that professionals possess the necessary competencies.

**Substitute decision-maker:** someone who is appointed to make certain decisions about the care of a client who cannot make those decisions themselves.

**Unprofessional conduct:** actions and behaviours that reflect poorly on the HCA profession and may result in disciplinary action under the HPA.

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