

# Supervision: Standards for Registered Nurses and Nurse Practitioners

*(Not in effect until approved)*

## Purpose

This standard applies to registered nurses (RNs), certified graduate nurses (CGNs), nurse practitioners (NPs), herein referred to as **REGISTRANTS**<sup>1</sup>. The purpose of this document is to outline the **SUPERVISION** authorizations and expectations for registrants.

Registrants may consent to supervising a person performing a restricted activity if the person is

- Another regulated health professional,
- A student of an approved RN or NP education program or a student of another regulated health profession program of study, or an undergraduate nursing employee (UNE), or
- An unregulated health-care provider.

Additionally, registrants on the provisional register (i.e., **GRADUATE NURSE, GRADUATE NURSE PRACTITIONER**) require supervision and registrants may consent to supervise a person on the provisional register and must meet the criteria as outlined in section 3.

Registrants must be aware of any employer or organizational policies (if applicable) that may further direct supervision in the practice setting. For registrants in self-employed practice, it is important to ensure evidence-informed policies and procedures are in place to support supervision practices.

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## Criteria

To meet this standard, the registrant must

1. Be authorized to perform the **RESTRICTED ACTIVITY** without supervision.

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<sup>1</sup> Words and phrases displayed in BOLD CAPITALS upon first mention are defined in the Glossary.

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2. Be competent to perform the restricted activity.
  3. Be satisfied with the knowledge, skill and judgment of the supervised person performing the restricted activity.
  4. Be responsible for the restricted activity performed by the supervised person.
  5. Meet the expectations outlined in the restricted activity standards.
  6. Ensure it is safe and appropriate for the supervised person to perform the restricted activity on the **PATIENT**.
  7. Obtain the patient's **INFORMED CONSENT** for the restricted activity to be performed under supervision, unless consent is not possible because of emergency.
  8. Ensure the patient is provided with the name and role (student, UNE, GN, GNP, etc.) of the person performing the restricted activity.
  9. Ensure the person performing the restricted activity is clearly identified in the patient care record.
  10. Ensure the equipment and resources used to perform the restricted activity are safe and appropriate.
  11. Follow the **PRINCIPLES OF SUPERVISION**.
  12. Remain readily available for consultation during the performance of the restricted activity and for an appropriate follow up period.
  13. Use their critical judgement to decide the **TYPE OF SUPERVISION** required for supervising any individual based on
    - 13.1. Collaboration with other regulated health-care providers,
    - 13.2. Assessment of patient health-care needs,
    - 13.3. Current competencies and supervision requirements of the individual being supervised,
    - 13.4. **HEALTH SERVICE** required,
    - 13.5. Restricted activity to be performed,
    - 13.6. Appropriateness to the practice setting and available practice setting supports, and
    - 13.7. Level of risk to the patient from the individual performing the restricted activity.
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The criteria in the following sections must be met in addition to what is listed above for each of the following categories.

## Supervision of Students

- 14. When supervising a student performing a restricted activity, the registrant must
  - 14.1. Ensure the student is enrolled in an approved nursing education program,
  - 14.2. Collaborate with the faculty member for the student performing the restricted activity, and
  - 14.3. Address and manage any competence issues of the student in the performance of the restricted activities.
- 15. NP students must be registered on the RN register or the courtesy register.

## Supervision of UNEs

- 16. When supervising a UNE performing a restricted activity, the registrant must ensure
  - 16.1. The restricted activity is outlined in the UNE job description, and
  - 16.2. The UNE has attained the competencies to perform the restricted activity in their **APPROVED NURSING EDUCATION PROGRAM.**

## Supervision of Registrants on the Provisional Register

- 17. Registrants and provisional registrants are expected to adhere to these supervision standards and criteria. Provisional registrants must
  - 17.1. Collaborate with the registrant supervising them to confirm type of supervision required as outlined in criteria 13 and in accordance with the practice condition on their permit
- 18. When supervising a registrant on the provisional register, the registrant must ensure that the provisional registrant
  - 18.1 Has, at minimum, indirect remote supervision in all practice settings,
  - 18.2 Be supervised by a registrant or a person who is authorized by a regulator under the *Health Professions Act (HPA, 2000)* to perform that restricted activity, and

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**18.3** Does NOT supervise students, UNEs or other regulated or unregulated health-care providers.

## Supervision of Unregulated Health-Care Providers

**19.** A registrant who meets the above criteria may supervise a person who is not prohibited under section 1.6 of the HPA to perform a restricted activity and must

**19.1.** Consent to supervising the person performing the restricted activity which must be for the provision of a health service, and

**19.2.** Only consent to supervise restricted activities that would be considered an **ACTIVITY OF DAILY LIVING** for the patient.

### Glossary

**ACTIVITY OF DAILY LIVING** – "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" (*Health Professions Act, 2000*)

**APPROVED (NURSING EDUCATION PROGRAM)** – A nursing education program in Alberta approved by the Nursing Education Program Approval Committee (NEPAC) in accordance with nursing education standards and criteria approved by the Council.

**GRADUATE NURSE(S)** – A graduate of an approved or recognized entry-level nursing education program or an internationally educated nurse applicant who is on the provisional register and is in the process of meeting the CRNA's RN registration requirements.

**GRADUATE NURSE PRACTITIONER** – A graduate of an approved NP program who is on the provisional register and is in the process of meeting the CRNA's NP registration requirements. These individuals may be graduates from an approved NP program leading to initial NP registration or internationally educated NPs.

**HEALTH SERVICE(S)** – "A service provided to people

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

(ii) to prevent illness,

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(iii) to diagnose, treat, rehabilitate, or

(iv) to take care of health needs of the ill, disabled, injured or dying" (HPA, 2000).

**INFORMED CONSENT** – For consent to be informed, the registrant must explain the intervention, including alternative options, as well as risks and potential complications. The patient, or a parent or guardian, must understand the potential risks and benefits of the treatment (or refusing treatment) before making a decision. Consent must be voluntary and cannot be coerced from the patient through undue influence or intentional misrepresentation.

**NURSE PRACTITIONER STUDENT** – An RN who is currently enrolled in an approved nursing program leading to initial entry-to-practice as an NP.

**Registered NURSING STUDENT** – A person enrolled in an approved nursing education program leading to initial entry-to-practice as an RN, or re-entry-to-practice as an RN.

**PATIENT(S)** – The term patients can refer to clients, residents, families, groups, communities and populations.

**PRINCIPLES OF SUPERVISION** –

1. The focus of supervision is the provision of safe, competent, and ethical care to clients.
2. Assessment of client needs and safety risks are the priority considerations for supervision decisions and requirements.
3. Effective communication between members of the healthcare team is required for appropriate supervision and safe client care.
4. Appropriate supervision assists in the consolidation of knowledge and skill in practice.
5. A quality practice environment supports and facilitates supervision and safe client care.
6. Supervision is supported by
  - a. clear role and job descriptions;
  - b. identification of the learning or performance expectations and objectives for the individual or health-care provider;
  - c. comprehensive orientation and mentoring by staff; and
  - d. ready access to resources, and employer requirements.
7. Supervision facilitates continuity of care.
8. Direction and guidance are provided as required to the individual being supervised by answering questions, consultation, oversight and constructive feedback.

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**PROFESSIONAL SERVICE** – “A service that comes within the practice of a regulated profession” (Health Professions Act, 2000).

**REGISTRANT(S)** – Includes registered nurses (RNs), graduate nurses, certified graduate nurses, nurse practitioners (NPs), graduate nurse practitioners and RN or NP courtesy registrants on the CRNA registry.

**RESTRICTED ACTIVITY** – High risk activity that requires specific competencies and skills to be carried out safely and are listed in the HPA (2000) and the Health Professions Restricted Activity Regulation (Alta Reg 22/2023, s 60) that are part of providing a health service.

Restricted activities are not linked to any particular health profession, and a number of regulated health practitioners may perform a particular restricted activity.

**STUDENT(S)** – A student from other health services program of studies.

**SUPERVISION** – The consultation, guidance and oversight by a registrant in the practice setting. Supervision may be direct, indirect or indirect remote.

**TYPE OF SUPERVISION** – Direct, indirect and indirect remote:

**DIRECT SUPERVISION:** The registrant providing supervision must be present in the practice setting where care is being provided; they are at the side of the person being supervised.

**INDIRECT SUPERVISION:** The registrant providing supervision must be available for guidance, consultation, and oversight but is not required directly at the side of the person being supervised. This means they are readily available on the unit or in the same location where the care is being provided and must have the opportunity to observe the nursing practice as required. In community health settings, being readily available in the same location where the care is being provided means that the registrant providing supervision is physically present in the practice setting (for example, at an influenza immunization clinic the RN or NP would be present in the same room where the nursing student or UNE would be immunizing patients).

**INDIRECT REMOTE SUPERVISION:** The registrant providing supervision must be available for consultation, guidance, and oversight, is not physically present where the care is being provided and is able to be contacted through the use of technology. The registrant providing supervision may be available in a nearby unit, within the building, or by phone, pager or other information communication technology methods when the person being supervised needs support or guidance.

**UNDERGRADUATE NURSING EMPLOYEE** – A nursing student who has the competencies attained in their approved **REGISTERED NURSING PROGRAM**, required for the role of UNE as outlined in the employer job description and has been employed to provide nursing care.

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## References

*Health Professions Act*, RSA 2000, c H-7. <https://kings-printer.alberta.ca/documents/Acts/H07.pdf>

*Health Professions Restricted Activity Regulation*, Alta Reg 22/2023, s 60. [https://kings-printer.alberta.ca/documents/Regs/2023\\_022.pdf](https://kings-printer.alberta.ca/documents/Regs/2023_022.pdf)

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