



# Scope of Practice: Guideline for Registered Psychiatric Nurses

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**CRPNS**  
COLLEGE OF  
REGISTERED PSYCHIATRIC NURSES  
OF SASKATCHEWAN

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## ACKNOWLEDGEMENT

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### PURPOSE

Scope of practice defines the roles, functions, and range of activities that professionals are educated and authorized to perform, rather than the capabilities of any single individual (BCCNM, 2021; CIHI, 2021). This includes knowledge, skills, and critical thinking. For registered psychiatric nurses (RPNs), scope is based on an education program that integrates theory, lab work, and clinical practicum to prepare them to provide safe, knowledgeable, and ethical care, and the continuous development of their competencies by building on this foundational knowledge.

The purpose of this practice guideline is to clarify the RPN scope of practice and provide guidance for RPNs, employers, and the public on determining whether a specific activity falls within the scope of practice of an RPN. This guideline is applicable to RPNs across all domains of psychiatric nursing practice: direct care, education, research, and administration.

### INTRODUCTION

The practice of psychiatric nursing is regulated under The Psychiatric Nurses Act. The Act provides the CRPNS with the authority to define the scope of practice of the RPN. An RPN is permitted to participate in the practice of psychiatric nursing in Saskatchewan only when they meet the legal requirements, possess the necessary competencies, and are deemed fit for such responsibilities. This includes having the appropriate licensure, undergoing relevant education, demonstrating proficiency in psychiatric nursing principles, standards, and techniques. RPNs build on their foundational knowledge to acquire competencies that are beyond entry-level within their scope of practice.

The scope of practice as defined within this document can be seen as an overarching framework. It defines the RPN scope broadly to encompass the varied and complex nature of psychiatric nursing practice. The RPN scope of practice reflects the diverse and evolving spectrum of client populations, roles, and environments where an RPN may practice. Psychiatric nursing practice is continuously evolving to address the dynamic needs of patient populations and the healthcare system, and to stay current with changes in legislation, regulation, and evidence (Lankshear & Martin, 2019).

### DEFINITION OF PSYCHIATRIC NURSING PRACTICE

This broad definition of psychiatric nursing practice, along with the education psychiatric nurses receive, inform the RPN scope of practice. CRPNS members are permitted to practice psychiatric nursing, as defined within the CRPNS Bylaws:

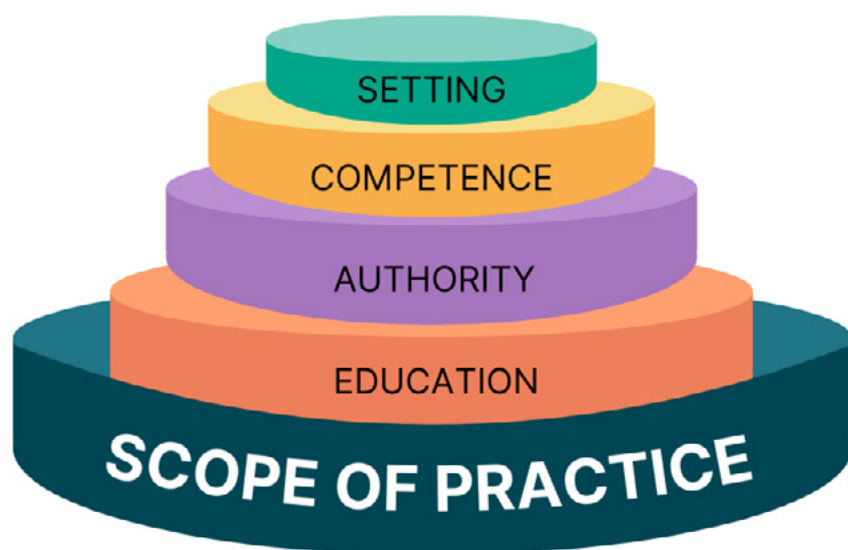
**“Psychiatric Nursing Practice” means, the application of psychiatric nursing knowledge, skill and judgement:**

- a. to coordinate and provide physical and mental health care through utilization of the nursing process;
- b. to promote, prevent, restore and maintain health, with a focus on minimizing the effects of mental illness and developmental challenges, psychosocial, mental, or emotional disorders, or conditions, and associated or comorbid physiological conditions; and
- c. in the domains of direct care, education, administration, policy development, and research.

## NAVIGATING RPN SCOPE OF PRACTICE

The RPN scope of practice is grounded in the profession's academic knowledge and educational credentials, as well as in the role that the RPN serves in providing healthcare to the public. Scope of practice also encompasses the critical thinking that RPNs use to make decisions about client care. Therefore, scope of practice cannot be reduced to a list of tasks. The scope of practice for the profession sets out what is authorized. Individual RPNs practice within this scope, but never beyond. RPNs are required to maintain and obtain skills depending upon their role and what is authorized within their work setting.

To determine whether they are able to perform a particular type of care within their specific setting, RPNs must evaluate four key elements: Education, Authorization, Competence, and the Practice Setting. They begin by reviewing their educational background to understand whether they possess the required foundational knowledge and determine the need for additional education. Next, assess whether there is the appropriate authorization to provide the care, which encompasses compliance with legal and regulatory requirements such as those set by the CRPNS, employer policies, and any relevant client expectations. Finally, RPNs further assess their competence by examining their practical skills, knowledge, and their ability to safely perform tasks and manage outcomes effectively (Moghabghab et al., 2018). It is the responsibility of every RPN to acquire and maintain the knowledge and skills required to address any gaps and stay current within their scope of practice, ensuring they can effectively fulfill their role.





## EDUCATION

The scope of practice for RPNs is shaped by the foundational knowledge and skills acquired through an entry-to-practice nursing education program, and through ongoing continuing education. This encompasses both formal and informal learning, integrating theoretical knowledge with practical experience. It also includes methods for validating competence, ensuring that RPNs maintain the necessary skills and expertise throughout their careers.

- **Entry-Level Education:** The psychiatric nursing education program provides RPNs with the theoretical and practical knowledge and competence to apply critical thinking and clinical and professional judgement in the provision of healthcare across continuums of health and illness. RPN education includes health promotion, prevention and protection, health maintenance, rehabilitation, restoration and recovery, as well as palliation. RPNs have foundational education in basic medical-surgical nursing assessment and intervention, anatomy and physiology, microbiology, physical assessment, and pathophysiology to support them in caring for adults and children. In addition to general medical-surgical nursing skills, RPN foundational education includes in depth psychiatric, mental health, addiction-related and safety risk assessments, advanced communication skills and psychosocial interventions. RPNs are prepared for medication management with education in both general and psychopharmacology. RPN education includes a holistic view of health, including physical, mental, emotional, social, relational, and spiritual components with an understanding of development across the lifespan. The psychiatric nursing educational program educates RPNs to meet the [Entry-Level Competencies \(ELC\)](#) for the profession and provides the foundation for RPNs to develop further competencies, once they are in practice.

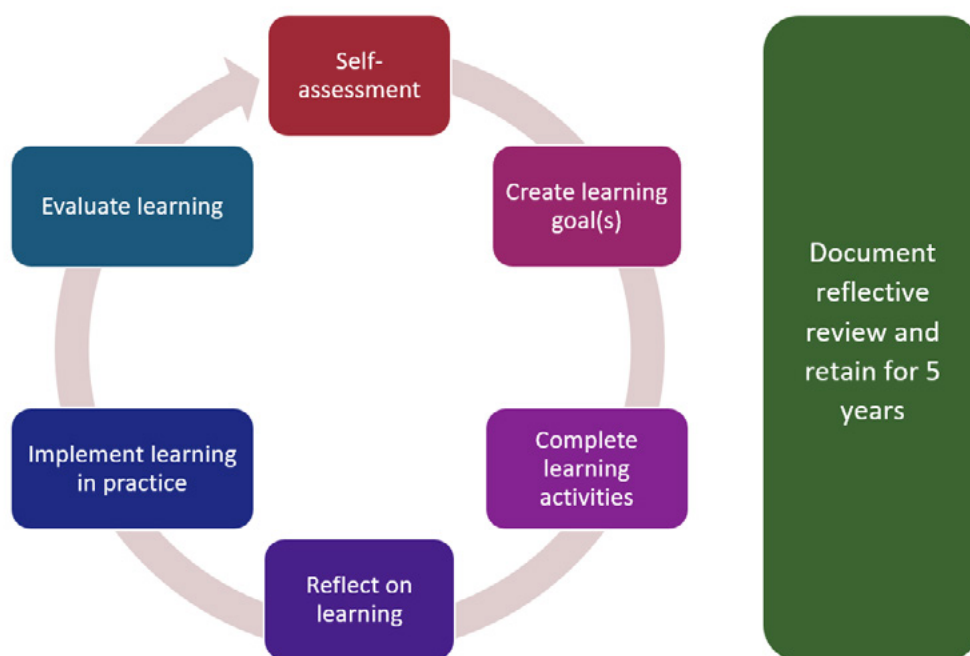
### COMPETENCY EXAMPLE: TRACHEOSTOMY CARE

RPNs have foundational education in basic medical-surgical nursing assessment and intervention, anatomy and physiology, microbiology, physical assessment, and pathophysiology to support them in caring for patients with well-established tracheostomies as an ELC. In addition to theory, psychiatric nursing students also have the opportunity to practice these skills within the lab and clinical setting.

RPNs commonly work with clients who have tracheostomies in a variety of practice settings, including homecare, acute care, palliative care, long term care, and rehabilitation.

- **Post-Entry Knowledge and Skill Development:** After completing entry-level education and beginning their careers, RPNs engage in ongoing learning to further enhance their skills and knowledge to the specific demands of their healthcare settings. This professional development is essential for building the experience needed to navigate the unique challenges of healthcare (Mlambo et al., 2021). RPNs must continually deepen their knowledge and skillset to provide safe, effective, compassionate care with competence and confidence.

- **Career Long Learning:** Each year, RPNs must participate in the CRPNS Career-Long Learning Program (CLP). This involves continuously reflecting on their practice, setting learning goals, engaging in activities to achieve those goals, and then applying and reflecting on what they've learned. This process is cyclical and iterative, adapting throughout the year as new opportunities and challenges emerge.



## AUTHORIZATION

To perform any RPN competency, it is imperative to meet all four mandatory areas of authorization:

- **Legislation:** Activities must align with federal and provincial laws that regulate nursing practice. If a specific activity is restricted by legislation, it cannot be performed even if employers or other healthcare professionals provide authorization.
- **CRPNS:** Activities must be recognized and approved by CRPNS. This includes meeting entry-level competencies, standards of practice, and specific education and practice requirements for new or high-risk competencies. These requirements are not fixed and may change over time.
- **Employer:** Activities must be authorized by the employer as part of approved nursing practice within the specific work setting. This authorization is typically detailed in role descriptions, employer policies, and care directives. While employers may restrict the scope of RPN practice in a particular employment setting, they cannot extend it beyond what is legally permitted. RPNs play a crucial role in developing, advocating for, and evaluating these policies and procedures within the intra-professional setting.

- **Client:** Activities must receive authorization from the client through informed consent, ensuring that the client agrees to the proposed nursing interventions. RPNs are authorized to work under client-specific orders and medical directives, in addition to exercising their autonomous scope of practice. This may include the use of clinical decision-making tools or protocols and other evidence-based supportive practices. By integrating these elements, RPNs can provide comprehensive and individualized care for clients while adhering to both standardized and personalized treatment protocols.

### COMPETENCY EXAMPLE: VENIPUNCTURE FOR DRAWING BLOOD

Venipuncture is not currently covered in basic RPN education. However, RPNs can build on their foundational knowledge of intravenous management to perform venipuncture.

Each employer or organization must have specific policies that determine whether venipuncture can be performed in a particular setting, who is authorized to perform it, and whether a client-specific order is required. For example, an organization might require that blood be drawn by a lab technician rather than an RPN.

## COMPETENCE

Brown and Elias (2016) describe competence as an evolving process that progresses throughout a professional's career. It is a dynamic concept that shifts as RPNs advance to higher levels of development, responsibility, and accountability within their practice setting and role. An RPN's competence to provide care is determined by their individual education, knowledge, skills, experience, including their current proficiency.

- **Self-Assessment:** Prior to providing any type of care the RPN must always assess their individual competence to ensure they have the knowledge, skills, and judgement to provide the type of care in question, including understanding what to do if an adverse event occurs. This also includes reflecting on if the RPN has the necessary experience and expertise to make evidence-informed decisions and manage the specific type of care effectively.
- **Safe Application:** Competence is also the ability to integrate and apply the knowledge, skills, judgment, and personal attributes required to practise safely and ethically in a designated role and practice setting (Moghabghab et al., 2018). Personal attributes include, but are not limited to, attitudes, abilities, behaviors, values, and beliefs.
- **Shared Responsibility:** Maintenance and development of competence is a shared responsibility between the RPN and their employer. If an RPN recognizes a lack of competence in a required skill within scope due to insufficient experience or expertise, it is their responsibility to acquire that skill to meet the needs of clients within their care setting. There should be employer policies in place to support the RPN's continuing education and practice, including education in theory, skills practice, and return demonstration.



### COMPETENCY EXAMPLE: PSYCHOTHERAPY

Psychotherapy is a fundamental aspect of psychiatric nursing practice, as outlined in the CRPNS Entry Level Competencies. Entry level RPN education provides foundational knowledge in areas such as psychology, psychopathology, mental health, development, interpersonal relationships, communication, and individual and group psychotherapy. Within the entry-level program, common therapies are taught and practiced. Therefore, the application of therapeutic modalities is an entry-level competency for RPNs.

As RPNs gain experience and consolidate their foundational knowledge, it is expected that they will develop further competence in particular areas of practice. This may include, but is not limited to, psychotherapy, depending on each RPN's individual experiences. As such, RPNs may develop advanced competencies in psychotherapy, which go beyond those obtained at entry-level and require further training and experience. These competencies build upon the foundational knowledge from the RPN education program. Eye Movement Desensitization and Reprocessing (EMDR) and Psychodynamic Psychotherapy are examples of therapies that are Beyond Entry-Level Competencies (BELC). Similarly, an RPN is able to further their competence with therapies they are already familiar with by developing advanced skills and interventions of therapeutic modalities learned within the foundational education program.

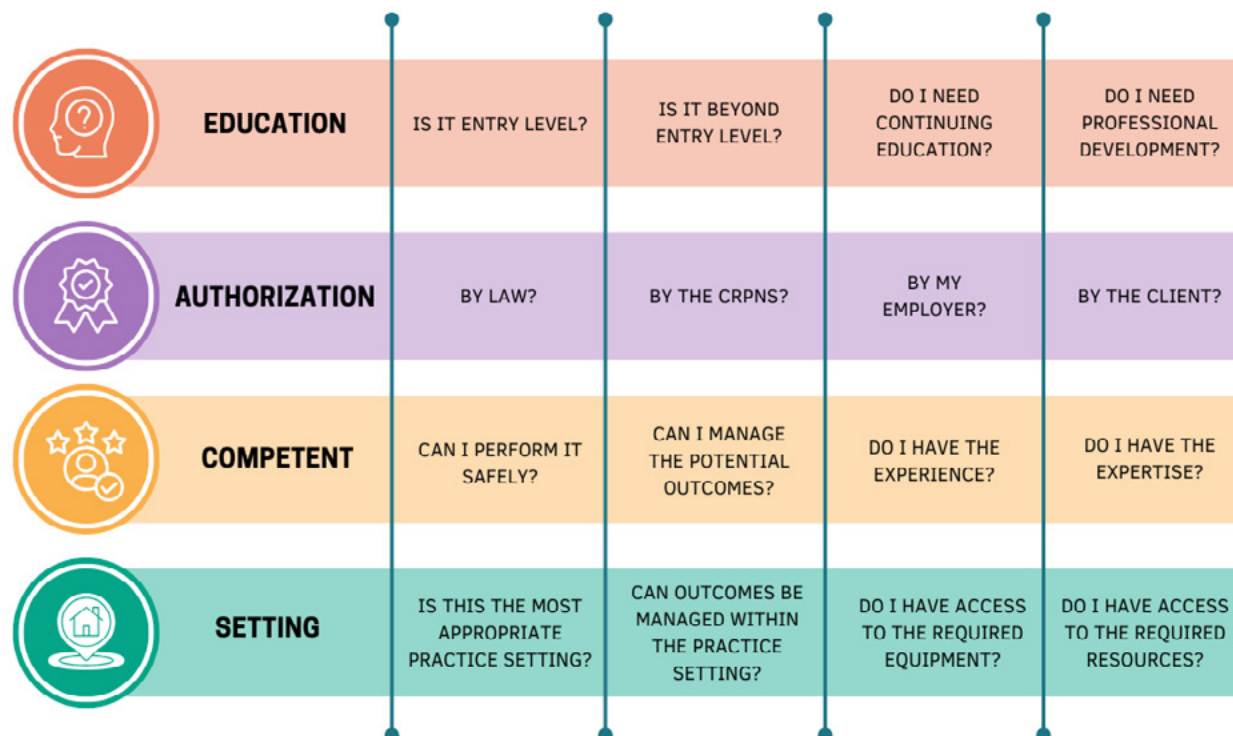
## PRACTICE ENVIRONMENTS

RPNs practice in many environments that require the utilization of not only their mental health specialization, but also medical/surgical competencies. This includes, but is not limited to, acute psychiatry, emergency rooms, home care, palliative care, occupational health, oncology, community health clinics, long term care, correctional facilities, general medical units, crisis outreach, and more. This may involve care of clients from all different age groups.

In addition to demonstrating competence, the RPN must also assess whether they can effectively manage the outcomes of care within their practice setting. The RPN needs to determine if performing a specific competency is appropriate for their current environment and if they can safely manage any adverse outcomes that might occur. For example, some settings, such as a client's home rather than a hospital or clinic, are not suitable for certain competencies. The RPN must be capable of effectively and safely managing any potential unintended consequences within the practice environment, rather than relying exclusively on emergency support that is external to the setting. This requires the RPN to be well-prepared and equipped to handle such situations when needed.

## CRPNS SCOPE OF PRACTICE

### DECISION MAKING FRAMEWORK:



## CONCLUSION

The CRPNS defines psychiatric nursing practice broadly to encompass the diverse and varied nature of the RPN's role. Controls on psychiatric nursing practice and scope include several critical factors. Regulation and legislation, specifically the RPN Act, bylaws, standards of practice, and guidelines or directions establish the foundational framework for practice. Employer organizational policies further impose specific restrictions or guidelines that vary by workplace, affecting the activities an RPN can perform. Finally, individual competence plays a crucial role; each RPN's ability to carry out specific tasks is evaluated based on their unique education, knowledge, skills, experience, and current proficiency. These controls collectively promote safe and effective psychiatric nursing practice.

## ADDITIONAL RESOURCES

### CRPNS PRACTICE PROGRAM

The CRPNS offers free, confidential consultation via email or the phone to help psychiatric nurses, employers, healthcare providers, the public and others understand psychiatric nursing practice and scope in Saskatchewan. In addition to one-on-one consultation, CRPNS also offers education to teams that may benefit from learning more about a specific area of psychiatric nursing practice.

If you have questions or concerns about the RPN scope of practice contact CRPNS at [info@CRPNS.ca](mailto:info@CRPNS.ca)

### ADDITIONAL SUPPORTING DOCUMENTS

- **Standards of Psychiatric Nursing Practice:** sets out the minimum acceptable level of performance required of an RPN. These standards articulate the legal and professional obligations of all RPNs. They apply to all practice settings, domains and roles, regardless of an individual RPN's educational preparation or professional experience.
- **CRPNS Code of Ethics:** articulates ethical principles, values and standards to guide all members of the psychiatric nursing profession. The Code defines accepted behaviors and establishes a framework for professional responsibility and accountability.
- **Entry Level Competencies:** identifies the entry-level competencies that the average, beginning RPN require for safe, competent, and ethical practice.
- **Beyond Entry Level Competencies:** are activities within the RPN's scope of practice that require knowledge beyond entry-level, incorporate theory and professional skills that build on the RPN's foundational knowledge, and may pose a high risk to the client.

## GLOSSARY

**Competency:** A component of knowledge, skill, and/or judgment, demonstrated by an individual, for safe, ethical, and effective nursing practice (Moghabghab et al., 2018).

**Competence:** An individual's capability for consistently integrating the required knowledge, skill, and judgment for safe, ethical, and effective nursing practice (Moghabghab et al., 2018).

**Scope of Practice:** The roles, functions, and activities that members of a profession are legislated, educated, competent, and authorized to perform, and for which they are held accountable (CIHI, 2021).

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## APPENDIX A

### Factors that shape psychiatric nursing practice in Saskatchewan

## S.C.O.P.E. OF PRACTICE: Factors that shape psychiatric nursing practice in Saskatchewan

