Introduction and Purpose:
Patient safety is of primary concern. Scope of practice defines the range of responsibility and the boundaries of practice that a health care provider that can perform. Health Care Organizations (HCO) define where and when staff are permitted to perform an activity. Policies are based on professional practice standards, accreditation standards, provincial/federal law, and organizational resources.

Usually, students have practiced most activities in a simulation lab setting or under direct Post Secondary Institution (PSI) educator supervision prior to staff supervision or performing independently. Anyone who performs an activity outside of their scope of practice places the patient, the HCO, PSI and themselves at risk.

The purpose of this guideline is to outline scope of practice for students, including criteria for supervision, as they learn professional competencies within the practice education setting.

Definitions:
Also refer to: Standardized Guideline definitions in Practice Education Guideline (PEG) Introductory Module.

Direct Supervision: Where a supervising staff/physician/faculty is present to observe and correct, as needed, the performance of the student. Direct supervision requires that the supervisor be in the room. The goal of direct supervision is to provide reasonable assurance that concerns related to the performance of activities are identified and corrected before patients are harmed.1

Indirect Supervision: the supervisor is readily available to provide support as needed; however, the supervisor may not be physically present.

Qualified: A person who has “the competence to carry out the activity safely and ethically and to manage the intended and unintended outcomes of the activity”.2 This may require the successful completion of an education program or certification.

Scope of Practice: the range of responsibility (e.g. types of patients or caseload) and practice guidelines that determine the boundaries within which a physician, or other professional, practices.3

Practice Guideline Standards:
The HCO Educator (term includes all HCO practice education supervisory roles) is ultimately responsible for the care of the patient and/or service in the practice setting.

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1 Adapted from College of Physiotherapists of Ontario. (February 2006). B. Standards for Professional Practice: Clinical Education. Toronto, ON.
Students may perform only those activities for which they have received instruction within the education program and only if permitted by Post Secondary Institution (PSI) and Health Care Organization (HCO) policy.

Students may perform activities if:

- the performing of the activity in that practice setting is permitted by HCO policy and practice standards;
- the activity is within the scope of practice of the profession;
- the HCO Educator or PSI Educator who is supervising the student perform the activity, is competent, qualified and authorized to perform the activity;
- the student’s performance of the activity is under the direct supervision of qualified HCO educator or PSI educator until judged to be able to safely and effectively perform the activity with a consistent level of competence;
- the supervision of the student’s performance of the activity continues at a level appropriate to the risk of harm thereafter.

The student may not perform the activity if:

- the performing of the activity in that practice setting is not permitted by HCO policy and practice standards or
- the student has not had the theory or practice in a lab setting and the HCO Educator or PSI Educator is not available to teach or directly supervise the activity or
- the HCO educator or PSI educator is not qualified or authorized to perform the activity or
- the student’s HCO Educator or PSI Educator does not feel comfortable with the student performing the activity or
- the HCO Educator or PSI Educator judges the student is not ready to perform the activity.

Some activities must be performed under direct supervision each and every time as determined by either the PSI or HCO policies.

In cases where there is a discrepancy between PSI policy and HCO policy, the more restrictive of the two policies applies.

In the absence of on-site PSI Educator, the final responsibility for the decision as to whether or not the student performs an activity lies with the HCO Educator within policy guidelines.

In keeping with Health Care Organization’s (HCO) responsibility for care, education and research, HCOs have the right to intervene in any instance where a student may be functioning in a manner considered to be potentially dangerous or harmful to the well-being of the patient or organization, or contrary to the HCO mission, vision, values, policies, procedures, rules, or regulations. This could result in the termination of the clinical placement, termination of the educational agreement, and/or legal action.

**Roles, Responsibilities and Expectations:**

*Post Secondary Institution*

Develop and communicate policy outlining what students can and cannot do according to the level of student.
Practice Education Guidelines for BC
Student Scope of Practice

Educate the students of the practice policies related to performing activities in the practice education setting.

Outline and communicate student supervision needs for the HCO Educator at the outset of the practice education experience.

Provide the practice education setting a description of competencies including a list of skills that the student(s) has been taught to date and can perform.

Health Care Organization:
Identify in their organizational policies which activities students are not permitted to perform.

Student:
Ensure actions are limited to defined scope of practice as defined by the PSI, the professional body (if applicable), and by HCO policies and practice guidelines.

Be aware of own practice limitations and communicate supervision needs to HCO Educator or PSI Educator.

HCO Educator (term includes all HCO practice education supervisory roles):
Be familiar with own scope of practice as well as that of students under their supervision.

Establish a learning relationship with the student where there is;
- Mutual understanding of scope of practice and supervisory needs;
- Safety to identify and express practice limitations and learning needs.

Inform their colleagues in the practice setting of the scope of practice of any students under their supervision.

Resources and References:


College of Physiotherapists of Ontario. (February 2006). B. Standards for Professional Practice:
Guideline Review History:

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<tr>
<th>Revision #</th>
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