 Department of Health Government of Nunavut		NURSING POLICY, PROCEDURE AND PROTOCOLS	
		Community Health Nursing	
TITLE:		SECTION:	POLICY NUMBER:
Transferred Functions		Administration	05-009-00
EFFECTIVE DATE:	REVIEW DUE:	REPLACES NUMBER:	NUMBER OF PAGES:
December 13, 2021	December 2024	05-009-00, 05-009-01, 05-009-02	3
APPLIES TO:			
Healthcare Providers employed in Health Centres			

1. BACKGROUND:

- 1.1. In Nunavut, health care provision in health centres is provided primarily by Registered Nurses (RNs) who are employed as Community Health Nurses (CHNs) practising under an expanded role as sanctioned by the Department of Health (Health).
- 1.2. While the Canadian Nurses Association and the Registered Nurses Association of Northwest Territories and Nunavut (RNANTNU) set the standards and scope of practice for Registered Nurses, the Legislative Assembly provides the legislative acts that regulate the profession within Nunavut.
- 1.3. The CHNs are supported by Licensed Practical Nurses (LPNs), Public Health Nurses (PHNs), Mental Health Nurses (MHNs) Supervisors of Home and Community Care (SHCCs), Acute Care Paramedics (ACPs) and Primary Care Paramedics (PCPs) who may also practise in an expanded role as authorised by Health.
- 1.4. Health develops policy statements and medical directives in collaboration with Physicians Services as well as other professions from which the functions involved in the expanded role are being transferred.

2. POLICY:

- 2.1. Any function that is outside of the basic scope of practice for Registered Nurses, LPNs, ACPs and PCPs will be authorised by Health in a written policy statement developed in partnership with the profession from which the function is being transferred.
- 2.2. Any policy developed must be reviewed at minimum every three years to ensure alignment with changing legislation and best practices.
- 2.3. Health will explicitly outline the parameters for which sanctioned functions may be transferred to healthcare providers in health centres.

3. PRINCIPLES:

- 3.1. The development of policies for transferred functions is the shared responsibility of nursing administration and the profession from which the function is being transferred. The authorisation and maintenance of transferred functions to CHNs, LPNs, PHNs, SHCCs, MHNs, ACPs and PCPs are the responsibility of the Department of Health.
- 3.2. The primary concern in the transfer of functions is that client safety is maintained.
- 3.3. Transferring of functions does not change the legal responsibility of the employer, the profession transferring the function or the healthcare provider.

4. DEFINITIONS:

- 4.1. **Transferred function:** any function transferred from one profession to another through policy or directive, e.g., CHNs are able to diagnose and initiate laboratory investigations without an order from a physician or nurse practitioner. This function was transferred to CHNs from physicians through policy and medical directive.
- 4.2. **Healthcare Provider:** In the context of this policy, refers to Registered Nurses employed as Community Health Nurses, Supervisors of Home and Community Care, Mental Health Nurses or Public Health Nurses; Licensed Practical Nurses, Acute Care Paramedics and Primary Care Paramedics.
- 4.3. **Certification:** an educational program resulting in a certificate – e.g., Basic Radiography Training and Immunisation Certification are both programs that result in a certificate.
- 4.4. **Verification of competence:** confirmation that a healthcare provider who has successfully completed a course of education designed to teach a specific skill can demonstrate that skill effectively. Verification of competence may done by a clinical nurse educator, mentor, or supervisor.

5. GUIDELINE FOR TRANSFERRED FUNCTIONS

5.1 When drafting a policy to transfer functions to a registered nurse, licensed practical nurse or acute and primary care paramedic, the following points are considered:

- Ensure a profession has sanctioned functions to be transferred and develop the policy in collaboration with the profession transferring the function.
- The need to transfer a function is documented and substantiated.
- Possible complications and/or consequences of the delegation are reviewed and a protocol for safe transfer of function is established.
- Evidence that the transferred function will be practised often enough to maintain competence must be provided.
- There must be a provision for review and, where indicated, recertification to ensure competency is maintained.
- Verification of competence should be recorded so that both the healthcare

provider and Health possess and up-to-date record of authorisation to perform the function.

5.2 Registered Nurses Association of Northwest Territories and Nunavut (2004) developed *Guidelines for Nursing Practice* which outlines a decision-making model for performing additional nursing functions and transferred functions (Reference Sheet 05-008-03). This model should be used as a reference in the development of all policies related to additional functions and transferred functions for any health centre healthcare provider.

6. GUIDELINE FOR PERFORMING TRANSFERRED FUNCTIONS

6.1 Healthcare Providers (HCP) may perform transferred functions providing that:


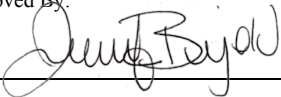
- HCP successfully completes a program of instruction leading to competence in the function.
- HCP is appropriately certified if required and maintains such certification.
- HCP meets the necessary competence level to perform the function and demonstrates confidence in performing the function.
- HCP is authorised by Health to perform the function and maintains an up-to-date record of such authorisation.

6.2 The instruction program for transferred functions must:

- Be reviewed at the same time the supporting policy is reviewed.
- Have identified competency standards.
- Include knowledge of underlying principles, and conditions under which it may be performed (a written teaching outline should be available).
- Have a method for demonstrating competence.

7. RELATED POLICIES, PROTOCOLS AND LEGISLATION:

- Guideline 05-009-01 Policy Guidelines for Transferred Functions
- Guideline 05-008-03 Decision-Making Model for Additional Functions and Transferred Functions

Approved By: 	Date: December 12, 2021
Jennifer Berry, Assistant Deputy Minister for Operations – Department of Health	
Approved By: 	Date: December 13, 2021
Jennifer Bujold, Chief Nursing Officer	