



NURSING ASSISTANTS IN THE FMG

The nursing assistant in the FMG contributes to the evaluation of health, to care and to nursing plans; she/he provides nursing and medical care and treatment to maintain health and prevent disease.

In the nursing assistant's field of practice, nine activities are performed in the FMG (Appendix 1).

The nursing assistant works in collaboration with other professionals in the FMG to gather information and to carrying out the care and the therapeutic nursing plans (TNP). She/he communicates her/his observations orally and in writing to other members of the FMG and participates in multidisciplinary team meetings (MSSS 2016).

CLIENTELE

The nurse serves the various types of clients who have registered with the FMG.

ROLES OF THE NURSING ASSISTANT

1. Contributing to the evaluation of the state of health

Depending of her/his field of work, she/he performs this activity in collaboration with the nurse, doctor or specialized nurse practitioner (SNP-FLS)

- gathers information
- takes vital signs, weight, height, level of pain, head circumference of a baby when lying down
- observes the state of consciousness and monitors neurological signs
- installs ambulatory monitoring of blood pressure (MAPA) and ambulatory electrocardiograms (Holter), performs an ECG at rest and then transmits the information to the doctor for evaluation
- gathers data and completes forms
- communicates her/his observations orally and in writing to other members of the team, and quickly reports any difficult situations.
- assists the patient in preparing for the medical exams and prepares the necessary equipment.

Prevention

Contributes to the **vaccination** of clients of all ages, in the course of an activity that stems from applying the *Law on Public Health*:

- administers the vaccine according to the decision of the nurse or the requirements of the individual prescription, while respecting the dosage, the method of administering the drug, the injection techniques and the calendar of immunization. Notes the immunizations in the client's file, in the vaccination record and in any other documents, as needed.

- contributes to the required monitoring after the vaccination. Immediately reports any adverse reactions that have been observed and applies emergency measures, as determined by the nurse or the doctor. In a situation of extreme emergency, where life is at risk, she/he applies the recommended emergency measures (chapter 8, *Emergencies linked to vaccination* (QIP).¹(appendix2)
- circulates information pertaining to the promotion and prevention of disease, accidents and social problems. Sends this information to individuals, families and communities that are related to her/his professional activities.

2. Clinical intervention: Care and treatment according to individual prescription or nursing guidelines (Appendix 3)

- draws blood **samples** according to an individual prescription, in a peripheral vein, by capillary puncture
- takes urine and stool samples, anal secretions, expectorations, secretions of conjunctiva, throat, ear and nose and secretions of a wound, vaginal secretions, and cervical cytology with the doctor performing the examination of the cervix
- performs analyses such as pregnancy tests, urine tests with test strips, and capillary blood glucose levels
- administers **medication or other substances** by routes other than intravenous. The medication is prescribed or requested according to guidelines set by a nurse.
- mixes substances to complete the preparation of a medication, according to a prescription
- administers aerosol therapy by a metered dose inhaler
- **depending on how the work is organized, contributes to intravenous therapy for clients 14 years old and older:** installs a short peripheral intravenous catheter (less than 7.5 cm.), and administers an IV solution without additives
- installs and irrigates, with an isotonic solution, a short IV catheter (less than 7.5 cm.) with pulse injection (certificate from the OIIAQ)
- provides care and treatment for **wounds and skin damage** and integuments, such as removing staples or stitches, applying surgical tape, and changing dressings with or without wicks, including dressings with drains
- **performs invasive care and treatment** such as urinary and intestinal elimination care, and stoma or nasogastric tube care, and ensures the correct functioning of machines, catheters, drains and tubes
- proceeds to a urinary catheterization
- performs ear irrigation according to a nurse's prescription or guideline, with a pre- and post-irrigation evaluation from a nurse, specialized nurse practitioner (SNP-FLS) or doctor

3. Monitoring and follow-up

- performs activities according to the nurse's clinical guidelines or an individual prescription

¹Quebec Immunization Protocol (PIQ) nov. 2015, chapter 3. Professional and legal responsibilities, section 3-7- Nursing assistants' contribution.

4. Teaching clients

- contributes to planned teaching and to providing information to patients, depending on her/his scope of practice
- transmits information to the patient and to caregivers about the activities that she/he performs

5. Interprofessional collaboration

- collaborates as a member of the multidisciplinary team
- shares her/his knowledge and her/his expertise
- participates in the orientation of new employees and trainees

TYPES OF INTERVENTION

- the nursing assistant intervenes according to an individual prescription from the doctor, specialized nurse practitioner (SNP-FLS) or nurse clinician, in accordance with the nurse's prescription or the clinical guidelines of the nurse regarding the therapeutic nursing plan (TNP). She/he cannot decide to apply a collective prescription.
- Performs short individual consultations

SPACE AND MATERIALS

- access to electronic medical file (reading and writing)
- access to a computer and telephone
- access to treatment rooms and to the necessary medical equipment

REQUIREMENTS

- diploma of vocational studies (DVS)
- licence from the Ordre des infirmières et infirmiers auxiliaires du Québec (O.I.I.A.Q.)
- confirmation of the right to contribute to intravenous therapy, to take blood samples, and to introduce tubes beyond the entrance of the nose cavity, and confirmation of training in vaccination according to proof recognized by the OIIAQ and indicated on the licence, requested according to the planned organization of work

TRAINING IN THE FMG

According to the regulation on mandatory continuous education activities for nursing assistants, the nursing assistant is obliged to update his/her knowledge by engaging in ten hours of continuous education for each two-year period.

Previous and current on-the-job training will be planned in partnership with the CIUSSS and the FMG to ensure professional development and the updating of clinical competencies.

CLINICAL EVALUATION AND MENTORING

The nursing assistant practices according to recognized quality and security criteria. She/he conforms to standards, rules, clinical protocols, collective prescriptions and care regulations in effect in the CIUSSS and the FMG.

The CIUSSS is responsible for the quality of the activities that are carried out by nursing assistants in the course of performing their duties in the FMG. The CIUSSS ensures professional supervision by defining the standards of practice and by providing the appropriate clinical support to nursing assistants.

In conjunction with the FMG, the CIUSSS takes the necessary means to evaluate the quality of the nursing assistant's professional activities (including auditing files and clinical supervision) and to ensure follow-up. In addition, the nursing assistant is subject to inspections by his/her professional order (OIIAQ) to ensure that the public is protected, as required by the professional code.

REFERENCES

CIUSSS du Centre-Ouest-de-l'Île-de-Montréal, (2014). *Description des fonctions*, infirmier ou infirmière auxiliaire—UMF/GMF CDN/CDAR.

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APPENDIX I: FIELDS OF PRACTICE AND RESERVED ACTIVITIES OF THE NURSING ASSISTANT²

Under Article 37p) of the *Professional Code*, the field of practice of the nursing assistant is to "contribute to the evaluation of a person and to the implementation of the care plan, provide nursing care and treatment in order to maintain and restore health, prevent disease and provide palliative care."

The nine reserved activities of a nursing assistant under Article 37.1 5° of the *Professional Code*:

- a) apply invasive maintenance measures for the therapeutic equipment
- b) take samples, according to a prescription
- c) provide care and treatment for wounds and skin damage and integuments, according to a prescription or the nursing care plan
- d) observe the state of consciousness of a person and monitor neurological signs
- e) mix substances to complete the preparation of a medication, according to a prescription
- f) administer medications or other substances by routes than intravenous, when prescribed
- g) contribute to vaccination in the course of an activity that stems from applying the *Law on Public Health* (chapter S-2.2)
- h) introduce an instrument or a finger, according to the prescription, beyond the entrance of the nose cavity, the labia majora, the urinary meatus, the anal verge, or in an artificial opening of the human body
- i) introduce an instrument, according to a prescription, in a peripheral vein to take a sample, when she/he receives a confirmation of training from the Order in the context of a regulation regarding the application of Article 94

Authorized activities according to the regulation regarding certain professional activities that can be performed by a nursing assistant:

Intravenous therapy can be performed under certain conditions (art. 4):

1. Install a short peripheral intravenous catheter of less than 7.5 cm.
2. Administer an intravenous solution, without an additive, from a short peripheral intravenous catheter of less than 7.5 cm.
3. Install and irrigate, with an isotonic solution³, a short peripheral intravenous catheter of less than 7.5 cm. with pulse injection

To this end, the individual must be trained (art.5) and hold a certification from the OIIAQ according to which:

- a. she/he has successfully completed theoretical and practical training of at least 21 hours, arranged by the Order.
- b. she/he has, on at least three occasions, successfully performed the professional activities indicated in article 4, under the immediate supervision of a nurse.

For any professional:

¹ OIIAQ (2011), Les activités professionnelles de l'infirmière auxiliaire, Champ d'exercice, activités réservées et autorisées. p. 5.

³ Seule l'irrigation avec du NaCl 0,9 % est autorisée.

The nurse shares with other professionals activities that involve spreading information to individuals, families and groups about health, and preventing suicide, disease, accidents and social problems.
(*Professional Code*, art. 39.4)

VACCINATION ROLES AND RESPONSIBILITIES OF NURSES AND NURSING ASSISTANTS

	NURSE TECHNICIEN/CLINICIAN	NURSING ASSISTANT
Reserved activity	" Vaccinate in the course of an activity that stems from applying the <i>Law on Public Health</i> ." ⁴	" Contribute to the vaccination in the course of an activity that stems from applying the <i>Law on Public Health</i> ." ⁵ Presence of an MD, SNP-FLS or nurse on the premises Individual prescription or nursing guideline
Before vaccination	Evaluation, consent, decision-making: <ul style="list-style-type: none"> ▪ verify the vaccine status (record, file, registry) ▪ determine the relevance of vaccinating, depending on indications and contra-indications ▪ inform the person or his/her legal representative of the advantages, risks and reactions, and measures that must be taken ▪ obtain free and informed consent 	<ul style="list-style-type: none"> • During mass vaccination (e.g., influenza-pneumococcus), can complete the prepared pre-vaccination questionnaire by questioning the patient, and then gives it to the nurse • Can consult the vaccination registry for verification before vaccinating
During vaccination	<p>After her/his written evaluation, she/he can ask the nursing assistant to prepare and inject the vaccines she/he decided to give.</p> <p>The delay between the evaluation and the administering of the vaccine cannot exceed two (2) hours.</p> <p>If she/he administers the vaccine:</p> <ul style="list-style-type: none"> ▪ Respect the dosage, method of administering, injection, the pain and anxiety reduction techniques, and the immunization calendar, according to the Quebec Immunization protocol (QIP). • Note the immunization in the file, the vaccination record or any other document according to modalities in place (registry). 	<p>Administer the vaccine according to the decision of the nurse, the medical prescription or the FLS:</p> <ul style="list-style-type: none"> ▪ Respect the dosage, method of administering, injection, the pain and anxiety reduction techniques, and the immunization calendar, according to the Quebec Immunization protocol (QIP). ▪ Note the immunization in the file, the vaccination record or any other document according to modalities in place (registry).
Post-vaccination	<ul style="list-style-type: none"> ▪ Ensure the required monitoring immediately after the vaccination. 	<ul style="list-style-type: none"> ▪ Ensure the required monitoring immediately after the vaccination and immediately report to the nurse, doctor

⁴ Ordre des infirmières et des infirmiers du Québec (2016). *Le champ d'exercice et les activités réservées des infirmières*. 3^e édition. p. 63

⁵ Ordre des infirmières et des infirmiers auxiliaires du Québec (2011). *Les activités professionnelles de l'infirmière auxiliaire, Champ d'exercice, activités réservées et autorisées*. p. 12

	<ul style="list-style-type: none"> ▪ Evaluate the situation and decide on appropriate emergency measures. ▪ Apply emergency measures and/or ask the nursing assistant to apply the specified emergency measures. ▪ Note her/his observations concerning the reaction and the intervention she/he has decided upon, as well as the result in the file or the documentation. ▪ Declare any unusual clinical incident to the area's Director of Public Health (clinical incident report) and according to the internal procedures in place. 	<p>or FLS any reaction observed in the patient.</p> <ul style="list-style-type: none"> ▪ Immediately apply emergency measures decided by the nurse, FLS or doctor, in case of an adverse reaction. ▪ In a situation of extreme emergency where life is at risk, she/he applies the recommended emergency measures (chapter 8 <i>Emergencies linked to vaccination</i> (QIP).⁶ ▪ Note her/his observations concerning the reactions and interventions she/he has performed, as well as the results, in the file or any other documentation.
Vaccine and emergency materials management	<ul style="list-style-type: none"> ▪ Follow vaccine handling and storage recommendations. 	<ul style="list-style-type: none"> • Follow vaccine handling and storage recommendations.

Source : CSSS De la Montagne (2009), *Intégration des infirmières auxiliaires au programme perte d'autonomie liée au vieillissement et à la déficience physique (PPALV-DP)*, Direction des soins infirmiers. p. 26-27.

⁶Protocole d'immunisation du Québec (PIQ) nov. 2015, chapitre 3. *Responsabilités professionnelles et légales*, section 3-7- *Contribution des infirmières auxiliaires*.

APPENDIX 3: LIST OF CLINICAL ACTIVITIES FOR THE NURSING ASSISTANT IN AN FMG AUTHORIZED BY THE CIUSSS, ACCORDING TO AN INDIVIDUAL PRESCRIPTION OR CLINICAL GUIDELINE FROM THE NURSE

PARAMETERS

- state of consciousness
- neurological signs
- vital signs
- oximetry
- pain according to a scale/grid

MEDICATION

Administer medication by route, including vaccination (for certification of the permit and conditions, see appendix 2)

- oral
- subcutaneous
- intradermal
- intramuscular
- topical
- transcutaneous (patch)
- ophthalmic
- auricular
- nasal
- respiratory (inhaler, nebuliser)
- vaginal
- vesical
- rectal
- enteral by feeding tube (nasogastric, gastrostomy, jéjunostomy)
- Administer **narcotic** through the following routes:
 - oral
 - subcutaneous
 - transcutaneous
 - intramuscular

SAMPLES/TESTS

- urine
- feces
- expectoration
- secretions of the eye, nose, ear, throat, anus, conjunctives, ear, wound or vagina
- cervical cells by cervical cytology, in collaboration with the doctor who performs the examination of the cervix
- culture of a wound, ~~blood samples by venipuncture in a peripheral vein~~
- capillary **glycemia**
- **pregnancy test**
- glycosuria-acetonuria
- blood sample by venipuncture (permit with certification)

WOUND MANAGEMENT (according to the nurse's treatment or the prescription)

- care for chronic wounds (pressure lesions, diabetic ulcers, venous ulcers, arterial ulcers)
- care for acute wounds (burns, scratches)
- care for dressings, with wick or around a drain
- care for an eye bandage
- changing the V.A.C. container (negative pressure wound therapy), if necessary

- install a negative pressure wound therapy bandage (VAC, PICO) with mandatory reevaluation of the wound by the nurse once a week. The nursing assistant must know how to use the technology, be able to recognize signs of complication and inform immediately, if necessary.
- install elastic bandage
- place medical compression stockings
- install sequential compression of the lower limb (e.g., *Profore*, *SurePress*)
- remove stitches and staples
- remove **adhesive skin closures**

FEEDING

- install a feeding tube
- irrigate the tubes: nasogastric, jejunostomy, gastrostomy
- care and maintain the drainage system

RESPIRATORY

- install a device to administer oxygen by mask or nasal cannula, as prescribed

EAR

- irrigation the ear with an individual prescription and an evaluation by a MD, SLP or nurse before and after

TRACHEOTOMY

- perform stoma care
- maintain the internal cannula and change the dressing
- change the cord
- perform aspiration of secretions for an unventilated client

BLADDER ELIMINATION

- perform bladder irrigation
- perform bladder instillation
- perform bladder wash-out, with or without medication
- perform bladder catheterization
- install, change or remove a permanent bladder catheter
- maintain and ensure the proper functioning of a bladder catheter and the collecting devices
- change a cystotomy probe

DRAINAGE

- irrigate a percutaneous drain (nephrostomy catheter)
- install or remove the securing device for the percutaneous drain (*StatLock*, etc.)
- flush a wound drainage system (*Hémovac*, *Jackson-Pratt*)
- care and monitoring of drains (système pleural/ *Pleurx*, ascite, etc.)

BOWEL ELIMINATION

- stimulate the anal wink reflex
- perform a rectal cleaning
- perform an evacuating enema
- insert a rectal tube

CARE OF INTESTINAL STOMAS

- care of the skin (treat redness, prevent irritation)
- change and maintain the collecting device
- irrigate an intestinal stoma

GYNECOLOGY

- perform a vaginal irrigation
 - insert a pessary
-