College of Respiratory Therapists of Ontario



Revised Prescribed Procedures Regulation

May 2014

Changes to Prescribed Procedures Regulation

Dear Member,

On March 28, 2014 the Ministry of Health and Long-Term Care (MOHLTC) approved the CRTO's revised Prescribed Procedures Regulation (O. Reg 596/94). The performance of prescribed procedures below the dermis is one of the controlled acts authorized to Respiratory Therapy through the *Respiratory Therapy Act* is. The *Prescribed Procedures Regulation* lists the procedures authorized to RTS by the nature of their training and role as health care providers ("prescribed" in this context meaning "listed in regulation"). The original Regulation categorized those procedures as *basic, added* or *advanced* based on the amount of training required to perform them safely and the risks associated with the procedures.

However, over the 20 years since the Regulation was drafted, the practice of Respiratory Therapy and clinical practice in general has evolved. Some of the procedures originally listed are now rarely seen in clinical practice, while others that were considered advanced at the time - such as the insertion of arterial lines - have become commonplace and part of the entry-to-practice training of RTs. As a result, the Regulation has been updated and amended to better align the current practice of Respiratory Therapy with the needs of patients.

There have been substantial changes to the Regulation. For a detailed list, click here.

Previous regulation (since 1994)	New regulation (approved March 28, 2014)	What Changed?
Basic procedures		
 i. Arterial puncture. ii. Capillary puncture. iii. Tracheostomy tube change for an established stoma. iv. Transtracheal catheter change for an established stoma. 	 i. Arterial, venous and capillary puncture. ii. Insertion, suturing, aspiration, repositioning, manipulation and removal of an arterial cannula. iii. Insertion, suturing, aspiration, repositioning, manipulation and removal of a venous cannula. 	 Arterial and capillary puncture remains the same and venous puncture (venipuncture) was moved from Added Procedures. Tracheostomy tube change for an established stoma -removed from Prescribed Procedures regulation and placed in Controlled Acts Regulation . This move allows for the continued performance of trach tube changes – see Summary. Transtracheal catheter change for an established stoma - removed from Prescribed Procedures regulation. "Insertion" moved from Advanced Procedures category, and "removal", "manipulation", "aspiration" and "suturing" moved from Added Procedures category.
Added Procedures:		
 i. Removal of a cannula. ii. Manipulation or repositioning of a cannula. iii. Aspiration from a cannula. iv. Venipuncture. v. Suturing to secure indwelling cannulae. vi. Transtracheal catheter change for a fresh stoma that is less than seven weeks. vii. Tracheostomy tube change for a fresh stoma that is less than seven days but not less than 24 hours. viii. Manipulation or reposition of a cannula balloon. 	Ν/Α	 Added Procedures category removed from Prescribed Procedures regulation and procedures i. to v. are moved to Basic Procedures. Transtracheal catheter change for a fresh stoma that is less than seven weeks - removed from Prescribed Procedures regulation. Tracheostomy tube change for a fresh stoma that is less than seven days but not less than 24 hours removed from Prescribed Procedures regulation and placed in Controlled Acts Regulation. This move allows for the continued performance of trach tube changes – see Summary. Manipulation or reposition of a cannula balloon - moved to Advanced Procedures category.

Advanced Procedures		
 ii. Insertion of cannula. iii. Chest needle insertion, aspiration, reposition and removal. iv. Chest tube insertion, aspiration, reposition and removal 	 Manipulation or reposition of a cannula balloon. Chest needle insertion, aspiration, reposition and removal. Chest tube insertion, aspiration, reposition and removal Bronchoscopic tissue sample for the purpose of bronchoalveolar lavage and endobronchial brushing. Intraosseous needle. insertion. Subcutaneous electrode placement for interoperative and perinatal fetal monitoring. 	 Manipulation or reposition of a cannula balloon - moved from Added category. Insertion of cannula - Divided up into arterial and venous cannulas and moved to Basic Procedures. New procedures: Bronchoscopic tissue sample for the purpose of bronchoalveolar lavage and endobronchial brushing; Intraosseous needle. Insertion; and Subcutaneous electrode placement for interoperative and perinatal fetal monitoring.

Summary of Changes

Basic Procedures

- "Insertion of a cannula" was moved to the *basic* category, along with removal, manipulation, aspiration and suturing as this procedure is now entry-to-practice and common RT practice. This enables Registered Respiratory Therapists (RRTs) to perform procedures like an arterial line or IV insertion without the requirement of a CRTO approved certification program. Also, Graduate Respiratory Therapists (GRTs) may now perform these procedures to obtain skills essential to their practice.
- *"Tracheostomy tube change for an established stoma"* was removed from the regulation and placed in the **Controlled Acts Regulation** (please see section below).
- *"Transtracheal catheter change for an established stoma"* was removed from the Regulation, as it is no longer part of common medical practice.

Added Procedures

- Removing the *added* classification eliminates confusion about which procedures require advanced certification, and are prohibited from be performed by GRTs and Practical Respiratory Therapists (PRTs). *Added* procedures are now listed as either:
 - **Basic** can be performed by all GRTs, and can be performed by PRTs only if prior permission is granted by the CRTO and;
 - **Advanced** cannot be performed by either GRTs or PRTs.
- *"Tracheostomy tube change for a fresh stoma that is less than seven days but not less than 24 hours"* was removed from the Regulation and placed in the **Controlled Acts Regulation** (please see section below).

Advanced Procedures

• Other procedures below the dermis that are now common clinical practice (e.g., intraosseous needle insertion and bronchoscopic tissue sample) have been included in list of *advanced* procedures. Newer procedures (e.g.,

subcutaneous electrode placement) that reflect the evolution of RT clinical practice since 1994 have also been added to the *advanced* list.

Controlled Acts Regulation

It was identified that the Regulation dealing with procedures below the dermis was not the optimal place to authorize tracheal procedures. Therefore, the MOHLTC removed tracheal procedures from the *Prescribed Procedures* regulation and placed it in the *Controlled Acts Regulation* (s. 14, O. Reg. 87/14). As a result, these procedures are not fully authorized to RTs at this time However, this change provides an exemption that allows RRTs to do the following:

- 1) Perform a tracheostomy tube change for a stoma that is more than 24 hours old; and
- 2) Perform a tracheostomy tube change for a stoma that is less than 24 hours old.

The table below illustrates who is permitted to perform tracheal procedures under the exemption in the *Controlled Acts* regulation:

Tracheal Procedure		GRT	PRT
Perform a tracheostomy tube change for a soma that is more than 24 hours old.	✓	✓	*
Perform a tracheostomy tube change for a soma that is less than 24 hours old.			

*can be performed if permitted by the terms, conditions and limitations on the Member's certificate of registration.

****Important to note** – Before performing any tracheal procedure it's still necessary to obtain a valid order from either:

- 1. A member of the College of Physicians and Surgeons of Ontario, the College of Midwives of Ontario, the Royal College of Dental Surgeons of Ontario; or
- 2. A member of the College of Nurses of Ontario who holds an extended certificate of registration (i.e., Nurse Practitioner).

New Procedures

There are three (3) new procedures authorized to RRTs in the revised regulation:

- 1) Bronchoscopic tissue sample for the purpose of bronchoalveolar lavage and endobronchial brushing;
- 2) Intraosseous needle insertion; and
- 3) Subcutaneous electrode placement for the interoperative and perinatal fetal monitoring

What Hasn't Changed

• You still need to complete a Certification Program for Advanced Procedures

Successful completion of an approved certification program is still required prior to any RT performing an Advanced Procedure. The existing Clinical Best Practice Guidelines will still be available from the CRTO website as a reference. They will not be updated and at a future date will be removed from the CRTO website.

• You still need an Order

Any prescribed procedure must be appropriately authorized prior to performance (I.e., you still need an order to perform them).

• You must be competent to perform a procedure

As with any activity, (regardless of whether a procedure is authorized to the profession) you must ensure that prior to performing the activity, you have the knowledge, skills and judgment to perform the procedure safely and competently.

Terms, Conditions and Limitations

RTs with terms, conditions or limitations on their certificates of registration related to prescribed procedures below the dermis will have their certificates reissued with updates to reflect these Regulation changes . *Terms, conditions or limitations will be maintained at the same level as they are currently.* The Public Register and your online printable certificate will also reflect these updates.

Notifying Your Employer

The CRTO will be sending notices to employers outlining how these changes affect Respiratory Therapists. In addition, each RT is responsible to informing their employer(s) of any change to the terms, conditions or limitations on their certificate of practice.

For More Information

The <u>CRTO website</u> contains descriptions of the changes in the regulation, an FAQ section, and links to the amended Regulation. Please contact Carole Hamp, Manager of Quality Practice if you have additional questions or concerns. She can be reached at <u>hamp@crto.on.ca</u> or 416.591.7800 ext. 33.