

PRACTICING OUTSIDE THE SCOPE OF SOCIAL WORK

ISSUE

The Alberta College of Social Workers (ACSW) governs registered social workers in the public interest. The social work scope of practice is outlined in the *Health Professions Act* (Schedule 27, s.3). Social workers may practice outside the scope of social work practice, provided the activity performed is not a restricted activity and the social worker can safely and competently perform the activity. More considerations are detailed below.

BACKGROUND

It is important for social workers to understand which activities are within the scope of social work practice, as well as which restricted activities the profession of social work is authorized to perform.

Social Work Scope of Practice:

Health Professions Act, Schedule 27, s. 3 states that in their practice, social workers do one or more of the following:

- (a) enhance or restore the social functioning of individuals, families, groups, organizations and communities by improving developmental, problem-solving and coping capacities of people and systems,
- (b) promote effective and humane systems that provide resources, opportunities and services to people and link people to those systems,
- (c) contribute to the development and improvement of social policy, and
- (c.1) teach, manage, and conduct research in the science, techniques and practice of social work, and
- (d) provide restricted activities authorized by the regulations.

In Alberta, the legislation does not protect or restrict the scope of practice for social workers, but instead recognizes that the regulated health professions have over-lapping scopes of practice. Furthermore, the activities outlined within the scope of social work may be performed by people from other disciplines, including those who are not regulated health professionals. When people outside the profession of social work provide these services, they may not be considered social work.

RESTRICTED ACTIVITIES

Restricted activities are high-risk activities performed as part of providing a health service that require specific competencies to be carried out safely. Restricted activities may only be performed by the health professions specifically authorized to perform them. The social work profession is authorized to perform restricted psychosocial interventions, which is defined in the *Health Professions Act*, Part 0.1, s. 1.3(1)(q) as follows:

To perform a psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs:

- i. judgment,
- ii. behaviour,
- iii. capacity to recognize reality, or
- iv. ability to meet the ordinary demands of life.



PRACTICING OUTSIDE THE SOCIAL WORK SCOPE OF PRACTICE

There are some things to consider when practicing outside the scope of social work practice. In accordance with the ACSW Standards of Practice (2023), when practicing outside the social work scope of practice, social workers are expected to identify themselves as a registered social worker and to clearly represent their qualifications and the nature of the services and actions being provided in an honest and accurate manner (ss. B.1(d) and G.4).

Social workers in employed/contracted roles are also subject to the policy and direction of employers. An employer may impose limits or require practice outside of traditional scope. It is also important to consider if the service is better provided by another profession.

While social workers may practice outside of the scope of social work practice, provided the activities being performed are not restricted, they are always accountable to the ACSW Standards of Practice. Services must be limited to areas in which the social worker has gained competence through education, training, or supervised experience (Standards of Practice, 2023, s. E.4(b)). Provided the activity is not restricted by the *Health Professions Act* or other relevant legislation, a social worker may apply this standard. Below are examples of how this standard relates to examples such as the performance of medical testing and emergency treatment.

THE ROLE OF SOCIAL WORKERS IN PUBLIC HEALTH EMERGENCIES

In a public health emergency, testing, contact tracing, and sharing health information, may be delegated to regulated health professionals, including social workers. Social workers have been sought to support contact tracing and share supportive health information. Further, while medical testing procedures are not activities within the scope of social work practice, social workers may be called to assist during a public health emergency. If the task is not a restricted activity, the employer allows/requires it, and a social worker is sufficiently trained to safely and competently perform these tasks, social workers may take roles that include medical testing procedures (e.g. some medical swab testing).

WHICH MEDICAL SWAB TESTING IS RESTRICTED?

Social Workers are not authorized to insert or remove instruments, devices, fingers or hands (1) beyond the point in the nasal passages where they normally narrow or (2) beyond the pharynx (*Health Professions Act, RSA 2000, Ch. H-7, Part 0.1, ss. 1.3(1)(b)(ii & iii)*). This is a restricted activity.

Not all throat or nasal swabbing are restricted activities and can be done safely and competently by trained social workers. However, nasopharyngeal (NP) swabbing is more specialized than swabbing of the throat and nostrils and has been identified as a restricted activity. Social workers **are not authorized** to perform nasopharyngeal (NP) swabbing.

It is the responsibility of social workers to engage in the relevant training directed by their employers and follow the policies relating to medical testing procedures to perform these activities safely and competently.

THE ROLE OF SOCIAL WORKERS IN OVERDOSE RESPONSE

Social workers play important roles responding to the opioid crisis and have the potential to be on the front line when an overdose emergency occurs. In Alberta, the administration of an injection is a restricted activity (*Health Professions Act, Part 0.1, s. 1.3(1)(a)*). Generally, social workers are not authorized to perform this restricted activity and may not perform injections as part of their



professional role. However, there are exceptions in case of emergency and if a social worker is authorized by their employer.

Generally, registered social workers who have completed the required training for a Naloxone kit may do the following:

- Provide overdose prevention, recognition and response education and training to members of the public.
- Distribute overdose response kits to members of the public who are at risk of overdose or who may witness an overdose.

WHICH OVERDOSE RESPONSE ACTIVITIES ARE RESTRICTED?

Registered social workers (RSW) may not be involved in the sale of Naloxone or receive compensation in relation to providing Naloxone. RSWs may not inject Naloxone unless it falls within one of the following exceptions.

Emergency Exception: Injections of Naloxone are prohibited, UNLESS doing so clearly falls within the emergency exception:

- i. there is no authorized individual available to do the injection;
- ii. the Naloxone is provided in order to provide physical comfort or stabilize the individual who is ill, injured or unconscious as a result of an accident or other emergency; and
- iii. no compensation is expected or received by the member.

The emergency injection of Naloxone by an RSW who is trained in opioid overdose response would not constitute unprofessional conduct. It is the responsibility of the RSW to follow training, best practice and their employer's policies regarding the distribution and use of overdose response kits in the work setting (*Health Professions Act*, Part 0.1, s. 1.6(2)).

Employer Authorization Exception: Social workers can administer injectable Naloxone as part of their job duties, provided they are authorized by their employer that meets the requirements and are appropriately trained. The Minister of Mental Health and Addiction detailed the following requirements:

- A worker must be authorized by their employer in writing.
- A worker must complete training that builds competence in rescue breathing, contacting emergency medical services and naloxone administration by injection.
- A worker must complete any other training required by their employer, including any requirements under the *Occupational Health and Safety Act*, Occupational Health and Safety Regulation and Occupational Health and Safety Code.
- Employers must have appropriate controls in place to protect workers.
- Employers must ensure naloxone kits and personal protective equipment are in proper working condition and stored and used correctly, including proper sharps disposal.
- Employers must purchase naloxone for use in the workplace.

The Alberta Ministry of Mental Health and Addiction, Ministerial Order (702/2023) is empowered by the *Health Professions Act* (Part 0.1, ss. 1.4 or 1.5) subject to conditions included in the regulations or for the purpose of preventing, combating or alleviating a public health emergency.



RELEVANT STANDARDS OF PRACTICE (2023)

- E.4 Limits on Practice and Adding New Services and Techniques
- E.5 Restricted Activity: Psychosocial Intervention
- E.6 Prohibited Activities

MINISTRY OF MENTAL HEALTH AND ADDICTIONS EMPLOYER RESOURCES (2023)

- [Workers administering injectable naloxone](#)
- [Naloxone in the workplace: OHS information for employers and workers in non-health-care settings](#)
- [Ministerial Order 702/2023](#)

