

Controlled Acts Tip Sheet

What is a controlled act?

A controlled act is a health care procedure that can cause harm to a person if done incorrectly. The government has identified controlled acts, with specific rules around who can perform the act.

Examples include procedures such as administering an insulin injection or a puffer. If done by an unqualified person it can cause harm to the person.

There are 13 controlled acts established by the Ontario Ministry of Health and Long Term Care legislation called the *Regulated Health Professions Act* (RHPA, 1991). See <http://www.health.gov.on.ca/en/pro/programs/hhrsd/about/rhpa.aspx> for more information.

Here is a list of the 13 controlled acts:

- 1) Communicating a diagnosis of symptoms
- 2) Performing a procedure either:
 - Below the skin
 - Below the mucous membrane (i.e., tissue that secretes mucus and lines many body cavities and organs)
 - In or below the cornea (i.e., front part of the eye)
 - Involving the teeth (e.g., deep cleaning/scaling)
- 3) Setting or casting a bone fracture or a joint dislocation
- 4) Moving the joints of the spine beyond normal range of motion with fast thrusts
- 5) Applying for or ordering an application form of energy
- 6) Prescribing, dispensing, selling or preparing personalized medications for patients
- 7) Prescribing or dispensing eye glasses or contact lenses
- 8) Dispensing or fitting a dental appliance
- 9) Prescribing a hearing aid
- 10) Delivering a baby
- 11) Performing allergy testing
- 12) Administering a substance by injection or inhalation
- 13) Putting an instrument, hand or finger either:
 - Beyond the external ear canal
 - Beyond the point in the nasal passages where they normally narrow
 - Beyond the larynx
 - Beyond the opening of the urethra
 - Beyond the labia majora
 - Beyond the anal verge, or
 - Into an artificial opening into the body



When is it okay for direct support professionals (DSPs) to administer a controlled act?

- The DSP must receive client-specific instruction (i.e., instruction related to the care of a particular client)

Examples: teaching related to a procedure for a certain client, direct orders within a health care provider's care plan for a specific client

- The controlled act procedure must be routine and prescribed by a health professional
- The outcomes of the procedure must be routine, 'stable' and predictable
- The DSP must be competent, current and comfortable with the act, and have the necessary knowledge
- A mechanism to determine ongoing competence and monitoring must be in place (i.e., a way to ensure that DSPs are still competent in administering the act and that their competence is monitored)

The controlled acts that apply to you as a paid DSP are those involving the use of a *suppository/enema/injection/inhaled substance/and/or catheterization*.

Important tip: DSPs supporting adults with intellectual and developmental disabilities (IDD) can be taught to perform controlled acts ONLY:

1) If you are assisting the person with routine activities of living (procedures that involve established and predictable need, response and outcome)

or

2) When providing first aid or temporary assistance in an emergency

How do I know if a medication that someone I am supporting is taking falls under a controlled act?

It's very important that when a person you are supporting is prescribed a new medication that you think may be a controlled act, you let the health care provider know and ask them whether they would consider this medication a routine activity of living. Here is a sample script you can use:

Would you consider this treatment to be a routine activity of daily living? I'm asking this because our staff who are supporting [Client's Name] can be taught to perform the controlled act only if it is an activity of daily living. If it is not an activity of daily living, we may need more support, e.g. through Home Care.



If the health care provider agrees that this falls under a controlled act and is relevant to the person's routine activities of daily living, you will need to get them to sign a form so that staff can receive training on this controlled act. Here is a sample script to use in this scenario:

We have a *[suppository/enema/injection/inhaled substance/and/or catheterization]* protocol and individualized care plan to assist us in carrying out your prescribed controlled act, which we need your authorization on. *[Here is/I can send you]* a letter with more information about the RHPA (*Regulated Health Professions Act*)-related needs and how our agency is able to support our staff to perform prescribed controlled acts.

The pharmacist dispensing medication for the person you are supporting would also be a resource for checking if the medication or procedure on the Medication Administration Record falls within a controlled act.

How is my role as a paid DSP different than that of a family member or caregiver when it comes to controlled acts?

While paid DSPs and family members are both considered unregulated care providers when it comes to administering controlled acts, there are differences in the type of authority each group has to perform certain control acts as well as different requirements surrounding when training is required. Paid DSPs must follow the guidelines described here, whereas family members do not have these same requirements.

What is my role in ensuring that I receive the training I need when it comes to controlled acts?

As a DSP, you may have received training around the administration of the following controlled acts:

- Administration of enema and/or rectal suppository
- Administration of inhaler
- Administration of insulin and/or glucose monitoring

If you are supporting someone who requires you to administer a controlled act that is not included in the list above, make sure to alert your Program Supervisor that additional training is needed. This will ensure that a health care provider that can provide the appropriate training is contacted. Some examples include:

Catheterization

Other: _____

A health care provider who trains you on administering a controlled act must determine if/when you are competent enough to administer the procedure or activity safely for the person you are supporting in the given circumstances.

Remember: If you have not been trained on a controlled act you should not be administering it!

Insert agency
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Controlled Acts: Template Letter to Health Care Provider

This is a sample letter that your agency can send to a health care provider to help them understand your role and inform them about the limitations that your agency may have in regards to administering treatments that are controlled acts. Some health care providers may not realize that as a DSP you are not a regulated health professional. As such, the health care provider may need to make alternative arrangements for the patient, in order for them to receive the required care at home.

Health Care Provider's Name
Address
Phone/Fax

Date: _____

Re. Patient _____
Patient's Address: _____

DOB: _____
Phone Number: _____

Dear Dr. _____

Agency name provides residential support to _____. Our mission is to enhance the quality of life for those living with intellectual disabilities and/or mental health issues by promoting community, practicing respect and providing a safe and respectful environment. The generosity of our community and the compassion of our volunteers have made that mission a reality.

Agency name is committed to ensuring that support staff provide the highest quality care to the individuals they support. Under Ontario's Regulated Health Professions Act (RHPA), certain support needs, (such as administering suppositories, enemas, injections, inhaled substances, catheterization) referred to as "controlled acts," are performed by authorized health care professionals.

Please note: if/when you are prescribing a treatment that is considered a controlled act, our support staff are not medically trained (unregulated care providers),. We require that the treatment be a routine activity of living, with a clear protocol for staff to follow.

The RHPA outlines exceptions, including assisting a person with his or her routine activities of living. For a controlled act to be a routine activity of living, it is performed as part of a well-established routine with predictable outcomes. Unregulated care providers such as support staff must still be taught by a professional that is authorized to perform the controlled act. In some cases, Community Care Access Centres (CCAC) do not offer staff training and we may need to hire a professional to train our staff. If a prescribed treatment involves a controlled act that does not fall under the exceptions, then arrangements need to be made for the appropriate professional to perform the treatment.

If you have further questions about RHPA and working with unregulated care providers, you may contact **Staff Name, Role** at **phone number**.

Thank you,

Signature
Name
Title
Contact info