



The Nova Scotia College of Nursing (NSCN) is the regulatory body for licensed practical nurses (LPNs), registered nurses (RNs) and nurse practitioners (NPs) in Nova Scotia. Our mandate is to protect the public by promoting the provision of safe, competent, ethical and compassionate nursing services by our registrants. The term nurse in this document refers to LPNs, RNs and NPs unless otherwise stated.

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Revised May 2020, first published 2005 Complementary & Alternative Health Care A Guideline for Registered Nurses and Nurse Practitioners

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Our practice support tools are developed using current reference material. The source of this material is available upon request.



This tool is a resource for nurses who use complementary and alternative health care (CAHC) in their practice or work with clients who have questions about CAHC to help them understand:

- Treatments and practices that are considered CAHC
- Accountabilities when working with clients using or inquiring about CAHC
- When CAHC is considered nursing practice

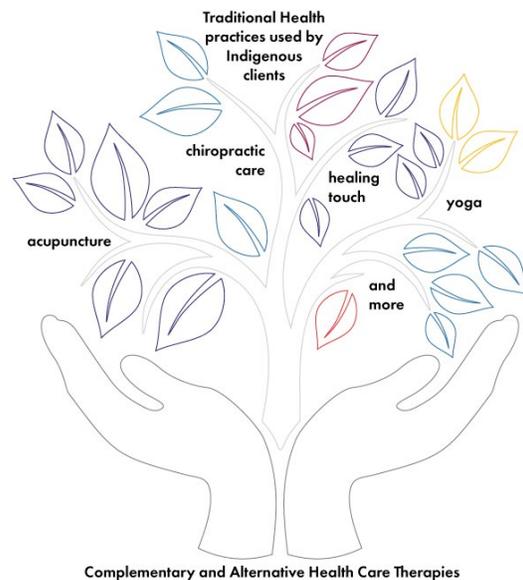
Like all regulatory tools, use this document in conjunction with employer policy, applicable legislation and the [standards of practice](#) and code of ethics for LPNs, RNs and NPs.

Complementary and Alternative Health Care

[Complementary and Alternative Health Care \(CAHC\)](#) is an umbrella term used to describe numerous therapies including but not limited to, acupuncture, chiropractic, healing touch, herbal medicine, massage, naturopathy and yoga.

Complementary practices are used alongside mainstream health care and alternative practices are used in place of mainstream health care practices.

Traditional Health practices used by Indigenous clients are also considered CAHC. It is important to honour and respect these practices when providing care to clients. The importance of Traditional Health practices is recognized in The Truth and Reconciliation Commission of Canada Calls to Action which states: “We call upon those who can effect change within the Canadian health-care system to recognize the value of Aboriginal health practices and use them in the treatment of Aboriginal patients in collaboration with Aboriginal Healers and Elders where requested by Aboriginal patients”.



Considerations When Answering Questions or Providing Care to Clients Receiving CAHC

As with all nursing [interventions](#), when providing CAHC you are accountable to:

- Work within your scope of practice
- Meet your standards of practice
- Provide evidence-informed, safe, competent, ethical and compassionate care to clients

When caring for clients who are using or seeking information about CAHC, you must provide information based on best evidence to help the client make an informed decision. It is important to seek reliable sources of evidence to share with clients to support their decision.

When providing care or information to clients about CAHC you must:

- Obtain a comprehensive client history, including any CAHC practices the client is presently using.
- Consider indications, potential interactions, client preferences, quality of life and contextual factors, for example family issues, cultural beliefs and determinants of health, and potential interactions when discussing CAHC.
- Assist the client to obtain information to support informed decisions about their desired CAHC therapy.

- Respect the client’s right to choose their treatment, ensuring that the client understands implications of CAHC on any existing diagnoses, including interactions with existing treatments.
- Ensure that clients provide [informed consent](#) to treatment.
- Collaborate and consult with other appropriate health care providers through collaboration and consultation about proposed CAHC.
- Refer to other health care providers when the specific CAHC is outside of the nurse’s scope of practice.
- Document all discussions with the client, including information provided, recommendations, therapies chosen, interventions provided and a follow up plan.
- Follow employer policies related to the use and/or provision of CAHC in your practice setting.

When is CAHC Considered Nursing Practice?

It is important to remember that CAHC therapies are not always considered nursing practice. It is considered nursing practice when CAHC is provided within a [therapeutic nurse-client relationship](#) based on a nursing plan of care which includes:

- Identification of priority problems
- Development of nursing interventions to address priority problems
- [Evaluation](#) of the client’s progress

If a nurse is providing CAHC in a non-nursing role it is not considered nursing practice. If you have questions regarding your role as a nurse in CAHC and for help determining whether the therapy you are providing is considered nursing practice, contact Registration Services at registration@nscn.ca.

If a CAHC therapy is not considered nursing practice you can still provide this CAHC, however you cannot:

- Indicate that you are providing [nursing services](#)
- Represent yourself as a nurse while providing the therapy
- Count these hours towards your licensing and registration requirement

If you are considering initiating CAHC as part of a self-employed practice, please refer to [Self Employment Practice Guideline](#)

Key Points

- Accountability when providing CAHC is not different than when providing traditional nursing services.
- Nurses must consider several factors when providing care or information to a client receiving or considering CAHC.

Suggested Readings

- [Self- Employment Practice Guideline](#)
- [Nurses Recommending and Administering Over the Counter Medications or Devices Practice Guideline](#)
- [Medication Guidelines](#)

For further information on anything contained within this tool, please contact an NSCN Practice Consultant at practice@nscn.ca.