

# Registered Nurse (RN)

## Acute Care Medical Surgical Environment

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**Purpose of this Document:**

A key deliverable of the Model of Care Initiative in Nova Scotia is the establishment of province-wide standardized roles to enable more consistent work practices at full scope of practice. The purpose of this document is to describe the intent of a standardized/ consistent role for a **Registered Nurse (RN)** in an acute care medical surgical environment.

The following table identifies those role functions of the *Registered Nurse* that are expected to have a renewed emphasis and be optimized in the new Collaborative Care Model, as well as tasks that can be safely transferred out of the role, either to another role within the profession or to other members of the care team. It is expected that all *Registered Nurses* in Nova Scotia practice according to the standards defined by the *College of Registered Nurses of Nova Scotia* and no attempt was made to replicate these expectations in this document.

Renewed Emphasis	Optimized	Transferred
<p><b><u>Assessment</u></b></p> <p><b>Review</b> of information from a variety of sources to make critical judgments.  <b>Systematically</b> collect data from a primary source &amp; also secondary sources such as family or other health care providers – verify &amp; analyze.  <b>Utilize</b> strong theoretical &amp; clinical assessment skills such as observation, questioning, vigilance, monitoring, surveillance, anticipation of events, preventing problems, watching over people &amp; circumstances, knowing the person, knowing the networks, knowing the contexts &amp; pulling it all together.  <b>Surveillance</b> is to frequently assess patients and attend to the cues that lead to the recognition of complications by monitoring often and thoroughly and by digesting recorded information.  <b>Function</b> at a level of autonomy where ongoing assessment and evaluation of the patient’s condition is performed including high-level technical troubleshooting skills, immediate problem solving skills for highly complex equipment and the notification of a resource person according to established criteria.</p>	<p><b><u>Assessment</u></b></p> <p><b>Consider</b> the individual’s strengths &amp; needs &amp; provide a basis for maximizing the individual’s personal resources in the process of care.  <b>Available</b> for consultation and observation of the patients of novice nurses and team for early signs of distress.  <b>Contribute</b> a high level of information about individual patients &amp; their health status to team discussions and decisions.</p>	<ul style="list-style-type: none"> <li>➤ Selected routine patient support activities such as: AM care / bed bath; feeding/meal time supervision; patient errands.</li> <li>➤ Selected patient management activities such as: room transfers; preparatory room cleaning and bed moves; portering / running errands – patient, lab specimens and medications.</li> <li>➤ Unit support activities: such as medication transcribing and MAR.</li> <li>➤ Clerical work</li> </ul>

Renewed Emphasis	Optimized	Transferred
<p><b><u>Planning</u></b>  <b>Form</b> clinical judgments about the patient's responses to actual or potential health problems or life processes.  <b>Establish</b> patient-centred goals and expected outcomes  <b>Set</b> priorities in order of importance and select nursing interventions.  <b>Establish</b> priorities to assist in anticipating &amp; sequencing nursing interactions when a patient has multiple problems or alternatives.  <b>Develop</b> partnerships with patients by including in the planning process.</p>	<p><b><u>Planning</u></b>  <b>Plan care</b> (independent or interdependent) - includes sharing of information, discussing care options in relation to family situations, patient care activities and patient discharge.  <b>Consult</b> on rounds with the care team and develop a plan to meet the patient's discharge needs including anticipation of potential high-risk situations for both patient and staff.  <b>Contribute</b> to team decisions regarding therapeutic interventions is a key factor in the inter-professional process and central to key decisions about patient care issues.</p>	
<p><b><u>Implementation</u></b>  <b>Evaluate</b> the complexity and predictability of the patient's care needs  <b>Manage</b> negative outcomes  <b>Exhibit</b> a high level of clinical decision-making  <b>Recognize</b> subtle signs and symptoms  <b>Anticipate</b> unique interventions,  <b>Select and initiate</b> interventions that are most likely to support or improve the patient's health status.  <b>Perform, assist, or direct</b> the performance of activities of daily living, counseling and teaching the patient.  <b>Provide</b> direct care  <b>Deliver</b> complex care  <b>Record and exchange</b> information relevant to the patient's continued health care.   In a crisis:   <b>Quickly institute</b> appropriate measures by initiating first line emergency measures, activating a team response by alerting appropriate team members, conveying the urgency needed at the bedside, and clearly communicating with other personnel while exerting control over the situation to ensure appropriate actions are taken.</p>	<p><b><u>Implementation</u></b>  <b>Supervise, delegate, &amp; evaluate</b> the work of other staff members   <b>Contribute</b> to the management of length of stay including acting as a navigator for complex patients.   <b>Initiating</b> discharge planning on day of patient admission including patient and care team education for a timely and supported discharge   <b>Coordinates and oversees</b> the overall care, sets priorities and provides clinical expertise and leadership for the plan of care</p>	
<p><b><u>Evaluation</u></b>  <b>Measure</b> the patient's response to nursing actions and the progress made towards achieving health goals.  <b>Maintain</b> continuity of care  <b>Measure</b> the quality of nursing care provided in a health care setting when patient care is complex</p>	<p><b><u>Evaluation</u></b>  <b>Manage</b> patient follow-up  <b>Develop &amp; lead</b> health promotion/disease prevention activities</p>	

Renewed Emphasis	Optimized	Transferred
<p><b>Evaluate</b> total patient progress and evaluation of patient outcomes by initiating and maintaining the integrated patient care plan from admission to discharge</p>	<p><b>Determine</b> effectiveness of patient -driven and patient-centred nursing practice</p>	
<p><b>Professional Nursing Relationships</b> Includes: <b>Nurse-patient helping relationships</b> <b>Nurse-family relationships</b> <b>Creation</b> of the helping or therapeutic relationship is built on the patient’s trust in the nurse <b>Developing</b> a therapeutic relationship occurs within a specific timeframe and is goal-directed with a high expectation of confidentiality. “<b>Being</b> with” patients rather than “doing to” patients <b>Nurse-community relationships</b></p>	<p><b>Professional Nursing Relationships</b> <b>Relationship activities</b> include caring, personalizing care, being customer centred, being ethical and being respectful.  <b>Nurse-health team relationships</b> Collegial relationships that focus on accomplishing the work and goals in the clinical setting. Communication is crucial in this relationship &amp; includes: team building, facilitating group process, collaboration, consultation, delegation, supervision and leadership.</p>	
<p><b>Leadership</b> <b>Coordination</b> includes delegation, supervision of unregulated care providers, patient advocacy, working with other disciplines, resource identification and the referral of tasks. <b>Roles:</b> <b>Nurse / patient advocate role</b> <b>Leader in navigating</b> the patient through the health care system. <b>Nursing interventions</b> are independent responses to the patient’s health care needs - these autonomous actions are based on scientific rationale and require no supervision or direction from others. <b>Support</b> the autonomy of the patient by respecting and upholding the person’s right to his or her own values and decisions.</p>	<p><b>Leadership</b> <b>Perform</b> a central coordinating role that includes coordinating the services of nurses and other professionals for the patient, and also matching patient needs with available services. <b>Ensuring</b> that care is adequately provided; in particular where there is increased intensity, unpredictable changes in clients and / or unstable patients <b>Autonomy</b> in decision-making and practice that is the ability to be self-directive in accomplishing goals and advocating for others.</p>	
<p><b>Teaching &amp; Learning</b> <b>Ethical</b> responsibility to teach patients <b>Anticipate</b> patient’s needs for information and then be responsible for teaching that information. <b>Pivotal role</b> in educating themselves, students, other RNs, staff, patients and the public</p>	<p><b>Teaching &amp; Learning</b> <b>Determine</b> with the patient what they need to know <b>Create</b> a learning environment <b>Evaluate</b> the outcomes after learning has occurred. <b>Meet</b> the individual learning needs of the patient  <b>Increased focus</b> on health education and health promotion</p>	

## **Role Summary:**

The Registered Nurse (RN) is a one of the collaborators in the Collaborative Care Model, providing holistic, comprehensive care to meet the needs of individuals, families and/or communities. The Registered Nurse provides leadership in nursing assessment, planning, implementation and evaluation for the purpose of promoting, maintaining or restoring health, preventing illness, injury and disability or supporting a peaceful death. The RN develops professional relationships for the purpose of providing care in collaboration with the patient and family, other nurses and health team members throughout all stages of health and complexities of illness. The RN independently provides safe, competent, compassionate, ethical nursing care to stable, predictable *and* unpredictable populations, and ensures the goals and needs of the patients and families are prioritized and individualized. Using nursing knowledge, critical thinking and clinical judgement, the RN engages in independent, interdependent and dependent functions to provide healthcare focusing on comprehensive assessment, patient/family education, and coordination of care. These functions may be self-determined, or assigned by physician, nurse practitioner or other RNs.

## **Key Responsibilities:**

### **I. COMPETENT PRACTICE**

#### **Assessment:**

1. Performs initial and ongoing biopsychosocial assessment specific to the setting and target population, which may include, but is not limited to:
  - physical status,
  - psychological status,
  - social/family interactions,
  - spiritual status,
  - financial resources that impact on health status,
  - roles and responsibilities of the individuals/families/communities/client and caregivers,
  - learning capabilities and education needs,
  - self-care capabilities,
  - health risks,
  - cultural influences,
  - environment and
  - expectations/potential for living in the community.
2. Identifies and incorporates data relevant to the determinants of health for the patient and situation (e.g., income, education, employment status, work conditions).
3. Utilizing a therapeutic relationship, assesses the unique health care needs/strengths of individuals/families/communities, including:
  - Coping with acute or chronic illness,
  - Support after discharge,
  - Relationships and developmental stages.
4. Collaborates with members of the healthcare team and individuals/families/communities to collect, validate and expand assessment data.
5. Recognizes potentially critical situations and takes appropriate action.

6. Monitors through assessment data, the ongoing health status of the individual/family/community.
7. Recognizes deviations in health care needs and adjusts the care plan accordingly.
8. Documents and communicates pertinent information in a timely manner.

### **Planning:**

1. Analyzes assessment data to identify the individuals/families/communities' needs and strengths
2. Mutually establishes priorities for optimal independence, in partnership with individuals/ families/ community and members of healthcare team, initiates planning, short and long term goals and expected outcomes, including transitioning into an alternate setting.
3. Develops the plan of care based on the assessment including consideration of strengths, risk factors, options, consequences of actions, health promotion, learning, comfort, safety, privacy, dignity and integrity.
4. Applies knowledge of pertinent nursing and related healthcare research and evidence to care planning; uses current knowledge to justify plan of care.
5. Integrates inter-professional and multiagency factors into the care plan.
6. Negotiates with the individual, family, community, health care team, and service providers when there is a difference between the care plan and the wants, needs and strengths of the individuals / families / communities.

### **Implementation:**

1. Collaborates and communicates effectively with individuals, families, communities, team member(s) and internal/external resources to implement and coordinate plan of care/services.
2. Through the critical analysis of theory as it applies to the practice setting, patient population and individual patient's health status, provides care appropriate to the patient's situation and in accordance with DHA/facility policies and procedures, best practice and established standards of care.
3. Offers culturally safe and competence nursing care
4. Administers treatments and medications and performs procedures as defined by DHA/facility policies and procedures.
5. Performs Post Entry Level Competencies, Medical Directives and Delegated Medical Functions as approved for practice setting, as outlined in the DHA/facility policy and procedures.
6. Teaches and coaches patients and families in a flexible and creative manner using accurate and consistent information.
7. Implements and evaluates teaching of individuals/ families/communities, and assists in developing education materials.
8. Articulates rationale for decisions that are based on current theory and research

### **Evaluation:**

1. Evaluates, reports, and documents expected and unexpected responses to care, in partnership with individuals/families/communities.
2. Reviews and revises the plan of care based on reassessment of changing status and progress.

3. Evaluate total patient progress and evaluation of patient outcomes by initiating and maintaining the integrated patient care plan from admission to discharge
4. Recognizes patterns of health care needs within the population served, including health promotion and prevention, (such as infection rates, early discharge outcomes) and assesses the effectiveness of interventions over time.
5. Discusses observations with and makes recommendations to interprofessional team and leaders to influence program development/evaluation.
6. Interacts with patients and families in a respectful, manner facilitating their growth and adaptation to their health care experience.
7. Maintains an accurate account of care given through clear, concise, written and verbal communication and evaluates, communicates and documents patient/client response to care.
8. Continuously evaluates plan of care and makes revisions to plan as necessary in consultation and collaboration with other members of the health care team and client/family in the development and revision of the plan of care
9. Protects individual and family confidentiality, privacy and creates an overall environment that is safe and secure

### **Care Coordination for a Group of Patients:**

The RN serves as the coordinator of care within the bedside care delivery team. The members of this team vary depending on the needs of the patient population. In this role he/she will:

1. Provide leadership at the bedside team level for ensuring that an integrated inter-disciplinary plan of care is created as early as possible in the patient experience for scheduled and unscheduled patients;
2. Focus on ensuring that the patient care experience is coordinated and integrated within an interdisciplinary model of care, both within acute care and across the continuum of care.
3. Assume responsibility for assessing, planning, implementing, directing, supervising, evaluating direct and indirect care, and evaluation of patient outcomes.
4. Assign care to licensed practical nurses according to their scope of practice and the DHA/facility Policies and Procedures
5. Provide guidance or direction to a licensed practical nurse when working collaboratively to care for a patient considered to be unstable with unpredictable outcomes.
6. Assign care to unregulated health care team members according to their scope of employment and the DHA/facility Policies and Procedures
7. Supervise assigned care of unregulated health care providers.
8. Serve as a key resource to the family and patient
9. Organize patient and family conferences as required to ensure active involvement in the development of the plan of care as well as the ongoing management and monitoring of progress
10. Facilitate decision making through renewed processes of communication including scheduled rounds as well as ad hoc meetings to ensure timely flow and progression of the ongoing stay and discharge
11. Identify barriers to smooth flow and timely progression of the ongoing stay and review with the team to rectify issues at the earliest possible moment.
12. Facilitate and coordinate referrals based on needs
13. Ensures patient/family education by an appropriate person

14. Function on a 24/7 basis (unless circumstances dictate that direct hands-on coordination is not required on all shifts)
15. Participate in direct patient care delivery as per their defined scope of practice

## **II. EXCELLENCE AND LEADERSHIP**

1. Advocates for the rights of the patient and family and for provision of their unique care requirements.
2. Identifies system (environmental/unit) issues and offers recommendations of change.
3. Provides input into the development of DHA/Facility policies/procedures and practices.
4. Participates in and supports the development and implementation of the plans, goals and objectives of the workplace.
5. Demonstrates a commitment to the values of the DHA/Facility and the profession of nursing and acts in congruence with vision, value, and mission.
6. Leads initiative to constructively challenging the status quo, questioning assumptions, taking action and resolving conflicts.
7. Uses human and material resources effectively and efficiently
8. Fosters the development and maintenance of shared leadership through personal contribution and by supporting the contribution of colleagues in decision-making processes.
9. Maintains an acute awareness of the changes within the health care system that may affect the practice of registered nurses in Nova Scotia through education.
10. Functions as a change agent by thinking reflectively, questioning assumptions, assessing alternatives, and supporting change
11. Advocates for the nursing profession by contributing to an environment that supports and acknowledges other's contributions and successes
12. Provides guidance and support in a preceptor role to students, colleagues, and other personnel as appropriate, to assist in their orientation to work routines, roles and expectations.
13. Mentors colleagues in areas of expertise and seeks mentorship to achieve full potential in professional development.
14. Demonstrates a spirit of inquiry by examining current practice and uses research findings to improve outcomes of nursing care and shares in the dissemination of research finding.

## **III. SAFETY**

1. Demonstrates accountability for practice using strategies such as providing rationale for decisions and actions, acknowledging errors, taking corrective action, recognizing own limitations and consulting with others as necessary.
2. Invites, expects and accepts constructive feedback from patients and families regarding the care and services the DHA/Facility provides.
3. Participates in the analyses of quality improvement data in collaboration with consumers and colleagues
4. Identifies potential problem areas and participates in the collection of data for problem verification, and adverse event reporting.
5. Identify, promotes and implements a safe working environment by identifying and resolving potential risk issues

6. Implements safety measures to protect self and others from injury
7. Demonstrates ability to use equipment and supplies according to established standards and procedures.
8. Identifies trends in safety issues, reports appropriately, and participates in correction and prevention action plans
9. Participates in quality improvement activities, e.g. falls prevention and error management programs.

#### **IV. PROFESSIONAL PRACTICE**

1. Assumes responsibility for clinical competence in designated area of practice consistent with current knowledge
2. Demonstrates accountability for own nursing practice by complying with Canadian Nurses Association (CNA) Code of Ethics, College of Registered Nurses of Nova Scotia (CRNNS) standards for nursing practice, the DHA/Facility standards and policies and procedures.
3. Maintains certification in mandatory programs (i.e CPR, Delegated Medical Functions, Medical Directives and Post Entry Level Competencies) as required by the practice area
4. Complies with:
  - Legal requirements of licensure
  - Registered Nurses Act – including continuing competence
  - DHA/Facility Policies and Procedures
  - Freedom of Information and Protection of Privacy Act (FOIPP)
  - Other relevant legislation.
5. Maintains awareness of own values and ethical priorities and how they may impact on their own practice.
6. Develops therapeutic relationships with individuals/families/communities, displaying appropriate use of communication skills, respect, empathy and an understanding of the unique values of each individual/family.
7. Displays a collaborative attitude of mutual respect and valuing of others in interactions with individuals/families/communities and members of the inter-professional healthcare team.
8. Appropriately advocates on behalf of the individuals/families/communities including:
  - Providing access to information in consultation and collaboration with other team members
  - Consultation regarding ongoing consent for care
  - Promoting comfort and safety
  - Facilitating participation in decisions affecting care
  - Intervening effectively in situations where safety or well-being may be compromised; while respecting individual rights and diversity.
9. Recognizes and examines processes to correct unsafe practice issues or inappropriate professional conduct.
10. Identifies, achieves, and maintains own professional development needs and competencies, seeks appropriate learning opportunities and evaluates own learning.
11. Promotes and maintains effective interpersonal and inter-professional relationships by listening actively and communicating directly and assertively and seeks to resolve conflict in a respectful manner.



12. Ensures ongoing development and maintenance of own knowledge, skills and abilities through self evaluation, feedback from colleagues, and identification of learning needs
13. Demonstrates commitment to continuous learning through participation in activities such as in-service programs, conferences, and appropriate continuing nursing and health professional education
14. Participates actively in the development of peers using methods such as sharing knowledge and resources, providing feedback, precepting, role modeling, mentoring and coaching.
15. Provides consistent, current factual information based on the needs of the population identified and fitting with the learning needs and style of the family to promotes health and prevention.
16. Shares knowledge gained through attendance at conferences, in-services, etc. with peers.

## **V. WORKLIFE AND RELATIONSHIPS**

1. Promotes a positive work environment by:
  - Respecting other's opinions, judgements and abilities
  - Using proper channels of communication
  - Managing conflict effectively
  - Demonstrating flexibility and reliability
2. Assigns care to licensed practical nurses according to their scope of practice, patient status, scope of practice and employment and the DHA/Facility Policies and Procedures.
3. Assigns care to unregulated health care team members according to their scope of employment and the DHA/Facility Policies and Procedures
4. Supervises unregulated health care providers.
5. Participates actively in meetings and attends assigned committees, as able, and carries out assigned responsibilities.
6. Identifies system (e.g. environmental/unit) issues and offers recommendations for change.
7. Appears professionally attired with proper identification at all times
8. Guides and supports students and other personnel as appropriate.

## **Definitions**

- Team - there is a fundamental base that a team moves beyond just a "group" of people. At its fundamental level a team is an integrated, directed group of individuals who share a common goal and vision. Team development is not static and linear, but is evolutionary
- Inter-professional – A fully integrated practice by a team of professionals from a diverse background of disciplines. Each member of the team has an integrated knowledge of the other team members' roles, and all work from an equally valued team mandate. When two or more professions purposely interact in order to learn with, from and about each other ... to improve effectiveness and the quality of care

- Collaboration – An effort to consult and co-operate as a group or team in developing a shared direction or vision. Each member still maintains a separate functional identity. A collaborative practice is an active, often ongoing practice partnership between professionals, teams or organizations.

*Drinka, T.J.K & Clark, P.G (2000) and Gilbert, J. (2006) as cited in Interprofessional Network of BC. (2006). Patients first: Optimizing interprofessional team work. Report on current practices. Retrieved March 9, 2009, from [www.inbc.ca/docs/Job\\_1130\\_Patients\\_First\\_Optimizing\\_Inter\\_Professional\\_Team\\_Work.pdf](http://www.inbc.ca/docs/Job_1130_Patients_First_Optimizing_Inter_Professional_Team_Work.pdf)*

### **References:**

- CRNNS: A Discussion Paper on Scope of Practice for Registered Nurses in Nova Scotia (2005)
- CRRNS Standards for Nursing Practice (2004)
- CRNNS Entry Level Competencies for Registered Nurses in Nova Scotia (2004)
- RN job descriptions (IWK, Calgary Health Region)

### **Additional Resources:**

- CRNNS/CLPNNS Brochure: Today's Nurses ...at a glance (2007)

## Appendix I

**Practice of Nursing:** Is defined in the RN Act as meaning the application of specialized and evidence based knowledge of nursing theory, health and human sciences, inclusive of principles of primary health care, in the provision of professional services to a broad array of clients ranging from stable or predictable to unstable or unpredictable, and includes:

- (1) assessing the client to establish their state of health and wellness;
- (2) identifying the nursing diagnosis based on the client assessment and analysis of all relevant data/information;
- (3) developing and implementing of the client's plan of care;
- (4) coordinating client care in collaboration with other health care disciplines;
- (5) monitoring and adjusting the plan of care based on client responses;
- (6) evaluating the client's outcomes;
- (7) such other roles, functions, and accountabilities within the scope of practice of the profession which support client safety and quality care;

in order to

- (a) promote, maintain or restore health;
- (b) prevent illness and disease;
- (c) manage acute illness;
- (d) manage chronic disease;
- (e) provide palliative care;
- (f) provide rehabilitative care
- (g) provide guidance and counseling; and
- (h) make referrals to other health care providers and community resources;

and also includes research, education, consultation, management, administration, regulation, policy or system development relevant to the above.