Collaboration Within The Interdisciplinary Health Care Team

RPN as A Resource Nurse

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A Little About Norfolk General Hospital
Issues

- There are still fundamental differences between organizations in what RPNs are allowed to do and not to do, keeping within their scope of practice.
- There is still a divide in many institutions between RNs and RPNs.
Issues Continued

- Patients still believe that RPNs are not “real” nurses
- Million dollar question “What do RPNs do?”
Initial Impressions Of NGH

RPNs were REALLY SMART
RPNs are using all of their skills
RPNs are doing what I learned in school
RPNs worked as part of the TEAM
No real distinctions between RPNs and RNs

WHAT WAS SO DIFFERENT HERE?
RPNs As Resource Nurses

- Dec 2001 CNO advised that RPNs would require a two year diploma effective Jan 2005
- Created in 2007 included RNs and RPNs
- RPNs on this team would “boldly go where no RPN at this hospital had gone before”
- These RPNs underwent two weeks of education in order to assist in bringing their skill level up to their full scope.
RPNs As Resource Nurses

- These RPNs are encouraged to work to their full scope of practice in virtually every unit of the organization.
- Work collaboratively with other staff members in Emergency, Step Down, Postpartum, Medical, Surgical, Day Surgery, Rehab and Complex Continuing Care Units.
- These RPNs act autonomously when floating throughout the organization.
Working As A Resource Nurse
But How?

- How could an RPN work with patients on telemetry? What exactly would an RPN be doing in the emergency department?

- Three factor framework from the CNO: Patient; Nurse; Environment
Working As A Resource Nurse

Collaboration is the process of working together to build consensus on common goals, approaches and outcomes. It requires an understanding of own and others’ roles, mutual respect among participants, commitment to common goals, shared decision making, effective communication relationships and accountability for both the goals and the team members.”
RPNs As Resource Nurses

- Assist or teach staff members with unfamiliar skills
Working As A Resource Nurse

- “We all work together”
- Knowledge, skill and judgement
- Value
- Respect
- Trust
Working As A Resource Nurse

- Nursing Practice Committee
- Palliative Care Committee
- Changes to Admission Database
- Changes to Transfer of Accountability Forms
- Preceptor
Working As A Resource Nurse

- Continuing Education
- Learning New Skills
- Pushing boundaries and innovations
The Next Steps

Using the RPNs on the Resource team as a model, the hospital decided in 2010 that all RPNs should be working to their full scope of practice in keeping with the best interests of patient care and patient safety.
What Did NGH Do?

- Implemented the change using the Transformational Change Model
- Examined CNO’s three factor framework
- Examined the RPN Scope of Practice
- Offered Education to RPNs
- Offered opportunities to put knowledge into practice within a supportive learning environment
Transformational Change

- Vision
- Adequate Planning Processes
- Resources
- Organizational and administrative Supports
- Appropriate Facilitation

RNAO, Collaborative Practice Among Nursing Teams (p13)
Transformational Change
Continued

Vision

- Client Centred Care
- Best for Client
- Safest for Client
Transformational Change Continued

- Adequate planning processes
- Resources
- Organizational and administrative Supports
CNO Three Factor Framework

Client

Nurse

Environment
RPN Scope Of Practice

- We are responsible for assessing our level of competence when caring for clients
- We need to recognize the limitations of our experience and knowledge and know when to seek guidance from others
- We need to understand the roles and responsibilities as documented in our employment settings

CNO Entry to Practice Competencies for Ontario Registered Practical Nurses (p 4)
Appropriate Facilitation

- Education
Appropriate Facilitation Continued

- Roll out of vision – opportunities to put knowledge into practice
- More experienced Nurses acting as Mentors
Some Results
88.3% of staff stated that they have opportunities to use their skills compared to 82.5% at other hospitals
79.9% of staff stated that they have opportunities to take initiative compared to 76.9% at other hospitals.
Results Continued

- 65.2% of staff believed that they have opportunities to receive further education and training compared to 59.2% of staff at other hospitals.
Nursing leadership is “about the competent and engaged practice of nurses, who provide exemplary care, think critically and independently, inform their practice with evidence, delegate and take charge appropriately, advocate for patients and communities, insist on practising to their full and legal scope and push the boundaries of practice to innovative new levels”

Canadian Nurses Association
Allan, H (2010). Mentoring overseas nurses: Barriers to effective and non-discriminatory mentoring practices. *Nursing Ethics*, 17(5), 603–613


References


References
