



RN & RPN PRACTICE: THE CLIENT, THE NURSE AND THE ENVIRONMENT
College of Nurses of Ontario (2014)

MODULE 03 | ACCOUNTABILITY

*Prepared by: Donna Rothwell, RN, BScN, MN Wharton Fellow
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The goal of Module Three is to help you increase your nursing knowledge of accountability in nursing practice.

Outcomes

By completing this learning module you will learn the following:

- The definition of competence;
- The definition of competencies;
- How nurses demonstrate accountability in nursing practice;
- What nurses are accountable for in their nursing practice.

Process

- Build on your own nursing knowledge, experience and expertise;
- From case studies, matching and true and false questions to help you analyze and self-reflect about RN and RPN Practice: The Client, the Nurse and the Environment;
- From the College of Nurses of Ontario's Professional Standards (2002) and Guidelines;
- By applying what you have learned to your professional nursing practice.

Keep a notebook or journal to document your ideas and answers to the questions in this learning module.

Building On Your Experience

Nurses demonstrate their accountability by taking responsibility for their decisions and actions, taking appropriate action when needed, and ensuring that practice is consistent with entry-to-practice competencies, standards of practice, guidelines and legislation.

In reference to SEIU Healthcare's presentation entitled, "A Guideline to Workload Issues - Professional Practice Problem Solving" by J. Walker, the following are important points to understand about accountability:

- Nurses are accountable for their decisions and actions and the consequence of those actions.
- Registered Nurses (RNs) and Registered Practical Nurses (RPNs) are not accountable for the decisions or actions of other healthcare providers or other nurses. However, they are responsible for taking action in situations where the client's safety and wellbeing are compromised.
- In addition, nurses must adhere to the laws specific to the profession (such as the Healthcare Consent Act and the Nursing Act, 1991).
- Nurses must seek help and share knowledge; and refrain from performing activities for which she/he is not competent.
- Ask yourself "Do I have the Skills, Knowledge, Ability and Judgment to perform this nursing intervention?"
- Nurses are expected to:
 - Provide direction
 - Collaborate and share knowledge and expertise with nurses working in a new environment or who are experiencing new situations.
 - Provide solutions to correcting practice issues
- How can I figure out where the root of the problem lies?

True or False

1. Competencies are statements describing the expected performance or behavior that reflects the professional attributes required in a given nursing role, situation or practice setting

- True False

Nurses are expected to consult with others when any situation is beyond their competence. A nurse is NOT accountable for the actions and decisions of other care providers when the nurse has no way of knowing of those actions.

2. Competence - has been defined by the College of Nurses of Ontario as: "a nurses' ability to integrate the professional attributes required to perform in a given role, situation or practice setting. Professional attributes include but are not limited to: knowledge; skill; judgment; attitudes; values; and beliefs.

- True False

Answers:

1. True (p. 14 RN and RPN Practice: The Client, the Nurse, the Environment, 2014)
2. True (p. 14 RN and RPN Practice: The Client, the Nurse, the Environment, 2014)

For What Are Nurses Accountable?

In the list below, place a check mark in the square beside each statement you believe is nurse is accountable.

Statement Is the Nurse accountable?

- 1. For another nurse's practice
- 2. His or her own actions
- 3. Collaborating with clients
- 4. Collaborating with colleagues
- 5. Taking action to ensure client safety – including informing your employer of concerns related to the conduct and/or actions of other care providers
- 6. Documenting care provided by another colleague
- 7. Knowing and understanding the roles and responsibilities of other team members
- 8. Collaborating, consulting and taking action on client information when needed

Answers: 2, 3, 4, 5, 7 & 8 are correct

Myth Buster

The nurse that has the highest authority for nursing in a practice setting for example, Chief Nurse Executive, Chief Nursing Officer, Director of Care etc. is accountable for ensuring there are mechanisms in place such as policies, procedures, guidelines and other resources to support each of the following:

1. Utilization decisions that take into account client, nurse and environment factors and that are evidenced-based;
2. Nurse collaboration and consultation;
3. Clear and well-understood role descriptions;
4. Professional nursing practice; and
5. Continuity of care.

Imagine

Accountability is such an important factor in our nursing practice. We use this terminology in our day to day nursing language.

How do you define accountability?

In your current role, what are you accountable for in terms of your nursing practice?

Do you feel competent in your role?

What competencies do you need to have in your current role as a nurse?

Case Scenario

Lishma is a Team Leader for the dementia unit at the long-term care facility where Frederick works. As Frederick is receiving his transfer of accountability (TOA) (report) from his colleague Samantha, he becomes acutely aware that all of his colleagues are novice nurses.

The care that is required for this client population can be demanding and will need effective communication and assessment skills of all staff. Frederick is quite concerned as to how he will effectively manage and lead in this situation in the best interest of quality and safe client care.

What are Frederick's nursing responsibilities?

A worksheet allows you to capture your ideas!

Critical-Thinking

1. What guiding principles are you most concerned about in Frederick's situation?
2. How does this issue conflict with CNO's Three Factor Framework - Standard of Practice - RN and RPN Practice - the Client, the Nurse and the Environment? Which Standards?
3. What practice setting or unit policies/procedures does Frederick have the potential in not meeting in this situation?
4. Who else is potentially affected by this request?

5. How could Frederick resolve this issue or problem? If Frederick is not able to, who could/should he approach?

6. What resources might give direction to resolve the issue/problem?