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

MODULE 05 | THE THREE FACTOR FRAMEWORK
NURSE FACTORS

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The purpose of Module Five is ensure that as a nurse making effective decisions about which category of the nurse (RN or RPN) to match or meet client needs involves considering three (3) factors of equal importance:

- the client,
- the nurse
- and the environment,

and determining on how they apply to the patient situation.

The factors that affect a nurse's ability to provide safe and ethical client care includes the following:

- Leadership
- Decision-making
- Critical-thinking
- Transfer of accountability (TOA)

Other important factors include the application of knowledge, knowing when and how to apply that knowledge and having resources available to consult as required.

Outcomes

By completing this learning module you will learn the following:

- The importance of individual competence;
- The need to know when consultation is required;
- The nurse factors required for safe and ethical client care.

Process

- Build on your own nursing knowledge, experience and expertise;
- Based on the matching exercise you will be able to complete a self-reflection and an analysis of the client factors and influence the utilization of an RN and RPN practice;
- 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

Ongoing Nursing Competence

It is fundamentally important for nurses to recognize the limits of their individual competence and their practice. As nurses reflect on their individual practice and their current nursing environments, they must engage in continuous lifelong education to ensure they enhance their nursing knowledge and expertise.

Nurses can become experts in an area of specific practice like maternal newborn, medicine, complex continuing care or even surgical nursing, however enhanced competence through continuing education and experience does not mean that an RPN will acquire the same foundational competencies as an RN. This will only occur through formal education and credentialing processes.

Nursing Consultation

Nurses consult with one another when a situation demands nursing expertise that is beyond their competence. Consultation involves seeking advice from a more experienced or knowledgeable nurse or healthcare professional.

An important aspect of efficient consultation is providing nurses with the time and resources needed to consult as often as required in order to meet client care needs.

Nurses also need to clarify their reasons for consulting and determine an appropriate course of action. **Unless care is transferred, the nurse who sought consultation is still accountable for the client's care.**

Consultation results in one of the following:

a. The nurse receiving advice and continuing to care for the client
b. The nurse transferring an aspect of care to the consultant
c. The nurse transferring all care to the consultant

When any care is transferred from one nurse to another, the accountability for that care is also transferred.

Whenever the need for consultation exceeds the efficient delivery of care, it is most likely that the client requires an RN to provide all care.

AUTONOMUS RN + RPN PRACTICE		RN PRACTICE
RPN Education *2 year College Diploma program*	Nurses continuously add to their foundational knowledge through experience, ongoing learning and reflective practice. It is important that a Nurse consider their individual characteristics when accepting a patient assignment.	**RN Education** *4 year BScN program*

Nurse Factors

In the table below place a check mark in the column beside each statement you believe is RN or RPN practice

Nurse Factors Client	RPN Practice	RN Practice
1. Individuals, families, groups, communities and populations		
2. Individuals, families, groups and communities		
Direct Practice Assessment		
3. Recognizes changes, probes further and manages or consults appropriately with RN or other health team member		
4. Anticipates and recognizes subtle changes, probes to assess further, identifies relevant factors, understands significance and manages appropriately		
Direct Practice Decision Making		
5. Analyzes and synthesizes a wide range of information using a variety of frameworks and/or theories		
6. Transfers knowledge from similar situations through pattern recognition		
7. Makes decisions based on the analysis of available information		
8. Makes decisions after actively seeking information		
9. Makes decisions by drawing on a comprehensive range of options to interpret, analyze and solve problems		
10. Makes decisions by accessing a known range of options to solve problems		
11. Anticipates many possibilities and makes proactive decisions		

Direct Practice Planning		
12. Plans broadly and over a longer time period, incorporating a variety of options and resources		
13. Develops plans of care to achieve identified client goals when overall care needs are less complex, outcomes are predictable and risk of negative outcomes is low		
Direct practice consultation		
14. Coordinates care for complex clients		
15. Coordinates care for less complex clients		
Direct practice implementation		
16. Meets identified nursing care needs of less-complex clients with predictable outcomes including health teaching		
17. Meets current identified client care needs using a systematic framework for providing care		
18. Works in consultation with RNs and others to meet care needs of more complex clients		
19. Meets a wide range of nursing care needs of clients regardless of complexity		
20. Directs plans of care for highly complex clients		
21. Selects from a known range of options		
22. Provides elements of care for highly complex patients when in close consultation with the RN directing client's care		
23. Manages multiple nursing interventions simultaneously in rapidly changing situations		
24. Selects from a wide range of options		

Answers:

RPN Practice: 2, 3, 6, 7, 10, 13, 15, 16, 17, 18, 21, 22 | RN Practice: 1, 4, 5, 8, 9, 11, 12, 14, 19, 20, 23, 24

In the table below place a check mark in the column beside each statement you believe is RN or RPN practice

Nurse Factors Direct Practice Evaluation	RPN Practice	RN Practice
1. Collaborates with client to evaluate overall goal achievement and modifies plan of care for less-complex clients		
2. Recognizes deviations from predicted client response(s) and consults appropriately		
3. Collaborates with client to evaluate overall goal achievement and modifies plan of care		
4. Identifies and anticipates a multiplicity of outcomes and modifies plan of care in collaboration with client		
5. Identifies expected outcomes of specific interventions and modifies plan of care		
6. Recognizes, analyzes and interprets deviations from predicted client responses and modifies the plan of care autonomously		
Direct practice consultation		
7. Acts as a resource to RPNs to meet client needs		
8. Consults with RNs and other members of the healthcare team about client needs		
9. Consults with other healthcare team members about a broad range of client needs		
Direct practice (other)		
10. Delivers elements of established health programs		
11. Designs, coordinates and implements health programs		

Answers:
RPN Practice: 1, 2, 5, 8, 10 | RN Practice: 3, 4, 6, 7, 9, 11

In the table below place a check mark in the column beside each statement you believe is RN or RPN practice

Nurse Factors Leadership	RPN Practice	RN Practice
1. Acts as a preceptor to students and novice nurses		
2. Directs unregulated care providers as appropriate		
3. Provides leadership through formal and informal roles		
4. Assumes role of leader within interprofessional team		
5. Represents nursing and nursing care issues – participates in committees, workgroups, union and regulatory activities		
6. Leads team effort to develop plans of care		
Resource Management		
7. Contributes to appropriate resource utilization		
8. Makes decisions about and allocates resources at program/unit or organizational level		
Research		
9. Critically evaluates theoretical and research based approaches for application to practice		
10. Integrates theoretical and research based approaches to design care and implement change		
11. Uses research to inform practice (practice guidelines)		
12. Appraises the value of evidence, incorporates research into practice, develops research questions and participates on research teams		
13. Participates in data collection for research		

Answers:
RPN Practice: 1, 2, 3, 5, 7, 11, 13 | RN Practice: 1, 2, 4, 6, 8, 9, 10, 12

Reflection on Nursing Leadership

In this module we discussed an important element related to the role of the nurse and that is leadership.

Fairness and respect for the worth of others are values that are identified as traits of leaders and have been strongly linked to trust. Trust, along with fairness and respect are the key values that lead to healthy organizations (RNAO, 2013). Trust supports good interprofessional relationships. Building trust is not a simple or rapid process; it takes time and personal commitment and comes from being client-centred, quality driven, and respectful of colleagues. Building relationships and trust is a critical leadership practice.

Nurses practice as a member of an interprofessional team and there are skills that are needed to be able to work with others effectively. Leaders know and understand that team work takes skill and they understand the need to strive toward developing that skill and taking necessary time to support and mentor members of the team.

An effective team player and leader:

- Demonstrates reliability
- Communicates effectively and constructively
- Listens actively
- Works as an active participant
- Shares openly and willingly
- Cooperates and pitches in to help
- Exhibits flexibility
- Shows commitment to the team
- Works as a problem solver
- Treats others in a respectful and supportive manner

Case Scenario

At approximately 0315 hours Alexa was rounding on her patients at an acute medical/ surgical unit. One patient in particular was of concern to Alexa as the patient was difficult to arouse and her vital signs had changed significantly from the previous assessment.

Based on this assessment, Alexa approached the Charge Nurse and explained her assessment. Alexa stated that the Physician should be notified immediately to the Charge Nurse.

The Charge Nurse assessed the patient and did not feel it was appropriate to notify the Physician and told Alexa to reassess vital signs Q 30 minutes. Alexa did not feel that this was the best approach in terms of quality and safe patient care and asked to discuss this with the Charge Nurse further in the hallway.

Alexa explained to the Charge Nurse that the patient's condition has changed given the extensive surgery and the assessments she had conducted during her shift. Alexa advocated on the patient's behalf that the Physician needed to be notified immediately. The Charge Nurse listened to Alexa's concerns but still disagreed.

What should happen now?
What are Alexa's immediate nursing responsibilities?
A worksheet allows you to capture your ideas!

Critical-Thinking

1. What guiding principles are you most concerned about in Alexa'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 Alexa have the potential in not meeting in this situation?

4. Who else is potentially affected by this request?

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

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