

When RNs are Expected to Work with Limited Resources



Nurses Association **Association des infirmières et infirmiers**
OF NEW BRUNSWICK DU NOUVEAU-BRUNSWICK



An RN may find it challenging to meet her professional obligations in providing safe, competent and ethical care, when working with limited resources, for example: working short staffed, working overtime, floating to an unfamiliar unit or working with an inadequate staff mix to provide nursing care.

However, in all situations the RN is expected to practise within their own level of competence, adhere to agency policies, and the NANB *Standards of Practice*.

Underlying Principles

- The client is the central focus of RN practice.
- The RN provides the best possible care in a safe, competent, and ethical manner regardless of the work situation.
- The RN's practice supports the safety, dignity, and wellbeing of every client.
- The RN does not abandon* her client.
- The RN practises in accordance with relevant legislation, standards, and employer policies.
- Quality practice environments support the RN in meeting practice expectations.

***Abandon/Abandonment: Occurs when the registered nurse has engaged with a client or has accepted an assignment and then discontinues care without:**

- negotiating a mutually acceptable withdrawal of service with the client; or
- arranging for suitable or replacement services; or
- allowing the employer a reasonable opportunity for alternative or replacement services to be provided (CRNBC, 2008).

Dealing with Limited Resources

10 Strategies for the RN

1. Identify and discuss client care needs requiring immediate or urgent attention with your colleagues.
2. Quickly review clients, assessing specific concerns and immediate needs. Differentiate activities that are absolutely necessary from those that can be delayed.
3. Review the assignment or caseload to determine how to provide care based on client needs. Determine which tasks can be safely delegated or assigned to support staff and provide guidance to support staff about new assignments.
4. Assignments need to be developed based on the acuity of the patient load versus the patient's geographical location. Workload should be equally distributed among staff.
5. Meet with your team members or colleagues to review the situation and discuss how and when you will communicate during your shift or work day. Schedule a brief report or meeting part way through the day or shift to update each other and reassign care accordingly.
6. Inform clients, as appropriate, about changes in their respective plans of care and provide clear factual information about the care or services they can expect. For clients in the community, ensure that they are aware of what action to take or who to contact if their situation changes.
7. Communicate any changes in client conditions, as needed, to other members of the health care team.
8. Decide if your supervisor/manager needs to be informed immediately about the situation. If so, clarify roles and responsibilities for resolving the situation.
9. Document any concerns about the situation and provide a copy to your manager. Additionally, RNs should complete a NBNU work situation report when faced with an unsafe situation
10. Be prepared to work collaboratively with your manager to resolve these types of situations by proposing solutions which promote safe, ethical and competent care.

Dealing with Limited Resources

10 Strategies for the Employer

1. Determine the competencies of the nursing providers working in the unit affected by the situation. If more than one unit is involved, the nursing supervisors or charge nurses from each unit should be consulted.
2. Determine the appropriateness of calling back non-RN staff to assist with services such as transporting clients, clerical functions and/or housekeeping duties. Explore ways to decrease non-nursing tasks being carried out by RNs.
3. Before making over time mandatory, consider the appropriateness of cancelling other forms of leave among staff.
4. When requiring an RN to float consider a buddy approach– assign the RN with an experienced registered nurse to provide support in meeting the care needs of a group of clients.
5. When staff have been floated from another unit, it would be best to identify options with the floated RN and nurse manager of the receiving unit for patient care assignment ensuring RNs are practising within their own level of competency.
6. Once the situation has stabilized the nursing supervisor, the nurse manager or designate of the affected unit(s) will evaluate where the RN is required for the remainder of the shift if alternative solutions have not been put in place.
7. Keep communication open. Keep staff informed about the development of situations/solutions to address the problem.
8. Work with staff to address any concerns around client safety.
9. When an RN does not feel competent or adequately prepared to carry out a specific function, examine how she can utilize her skills as an adjunct to existing staffing without assigning unfamiliar functions.
10. Monitor staffing situation(s) on an on-going basis and report to senior management in a timely manner.

The following three scenarios are examples of working with limited resources.

Scenario 1: Excessive hours or overtime

At the completion of the RN's shift, the supervisor/nurse manager or designate tells the RN that she has to stay to work because no replacement was found for a colleague who called in absent.

Ask yourself

Can the RN refuse to work overtime? Is it considered abandonment if the RN does not stay?

Answer

An RN has the ethical and legal responsibility to continue to provide care. If the RN identifies she is too fatigued to provide safe, competent ethical care she must tell her employer she is unable to stay. However, if a qualified replacement is not available she is responsible to stay until a solution is found and client is safely assured. Consequently, should a solution not be found and she decides to leave this could be considered abandonment of the client.

Scenario 2: Floating to an unfamiliar unit

An RN has been asked to float to another unit without orientation.

Ask yourself

Can an RN refuse to be reassigned/ floated to a unit that is short staffed?

Answer

Requiring an RN to work in an area that she is not familiar with may happen in emergency situations. The RN has the professional responsibility to take on only those nursing assignments for which she is competent. The RN should clarify the assignment and assess her capabilities in relation to the assignment. If the RN identifies she is not able to take a client assignment and provide safe, competent and ethical care on a reassigned unit, she is still responsible to float and provide nursing care for which she has competence.

Scenario 3: Safety and staff skill mix

Due to staff mix changes, RNs on a particular unit may be without sufficient professional staff. They are concerned about client safety and worried about liability if a client is harmed.

Ask yourself

What are the RNs responsibilities when faced with inadequate staff mix?

Answer

The RN is responsible to identify and prioritize the necessary nursing services required to meet the essential needs of the clients and decide which aspects of care can be safely assigned or delegated to others. The RN should communicate changes in care with clients in a way that instills trust within the client that they are safe. Additionally, the RN is responsible for responding to and reporting unsafe situations. The RN's employer should be notified in writing of the RNs concerns with a request for follow up.

For further assistance refer to:

**NANB's FRAMEWORK FOR MANAGING PROFESSIONAL
PRACTICE PROBLEMS**

Contacting NANB and /or NBNU

NANB and NBNU are available to provide consultative services that support RN practice.

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