

Pandemic Response: Temporary Nursing Redeployment and Team Nursing

Site Applicability:
All PHC Sites
Scope:
RN, RPN, LPN - Basic Skill
Need to Know:
<p>To support an anticipated increase in patient care needs during a pandemic, nurses may be temporarily redeployed across the organization (as required). Redeployed nurses work within their own level of competence; by</p> <ul style="list-style-type: none"> • Providing care in a team nursing model under the leadership of a nurse familiar with the unit. Team nursing model means that two or more nurses collaborate to care for the same patient assignment. OR • Taking an appropriate independent patient assignment(s). <p>Nurses who are redeployed to critical care or other specialty areas are not expected to achieve comprehensive critical care/specialty nursing knowledge and skills.</p> <p>This resource takes into consideration the redeployed nurses' regular place of employment, associated skillset, and self-assessed competencies, to provide guidance on the roles and responsibilities of nurses within a team nursing model.</p>
Procedures
<p>Nurses are expected to use established critical thinking and professional judgment skills when redeployed. Although the area or nursing model may be unfamiliar, the nursing process, professional standards and practice standards remain the same.</p> <p>Steps</p> <p>Prior to or at the beginning of the shift:</p> <ul style="list-style-type: none"> • Redeployed nurse to complete the PHC Nursing Practice Competency Assessment to review and assess your own competencies. • CNL/Charge Nurse: <ul style="list-style-type: none"> ○ Identify most appropriate patient assignment taking into account the redeployed nurse's skills and competencies and the current patient care needs.

- Identify and assign host nurse (nurse familiar with unit) to provide support/guidance to the redeployed nurse during the shift.
- CNL/Charge Nurse, Nurse Educator or Unit Nurse to provide the redeployed nurse a mini orientation to the unit.

During the shift:

For independent patient assignment:

- Redeployed nurse to identify any questions or learning needs.
- CNL/Charge Nurse to check in with redeployed nurse throughout shift to ensure assignment remains appropriate and address any issues as they arise.

A team nursing model will be used in many of the areas where nurses will be re-deployed. **This means two (or more) nurses (+/- Care Aides) collaborating to care for a single patient assignment.** This provides the greatest flexibility and opportunity to make the best use of re-deployed nurses' skills and abilities, while leveraging the expertise of all nurses.

For team nursing model:

- All members of the Team Nursing Pod are responsible and accountable for their own nursing actions and work collaboratively to provide safe patient care.
- Identify a Team Nursing Pod lead (nurse with most experience in practice area "host nurse") that is primarily responsible for the overall care of the patient(s).
- At the beginning of the shift, members of the nursing team listen to handover together. Discuss important considerations for each of the patients within the assignment, including what to anticipate or watch out for and care priorities for the shift.
- The team lead will, assign nursing tasks and care responsibilities (e.g. assessments, overall monitoring, vitals, medication administration, wound care, hygiene, positioning, communication with rest of care team) based on each nurses' scope of practice and individual competencies, patient acuity and unit flow.
- In collaboration with CNL, establish plan for break relief and patient transport off unit for diagnostic tests or interventions to ensure all patients in the assignment are safely cared for at all times.
- As team members are completing tasks, continue to share assessment findings and results with each other regularly.
- Check-in with each other at least every 4 hours and more often as needed to review care priorities, assigned nursing tasks and care responsibilities.
- If additional assistance is required, reach out to the unit leadership, such as the CNL, NE, and/or manager as needed.

At the end of the shift:

- At the end of the shift, the Team Nursing Pod debriefs how the day went and identifies lessons learned, recognizing that each nurse contributes their own knowledge, skills and experience to patient care.

Documentation:

Nurses may only follow these minimal documentation standards when local/unit leadership enacts surge plans during a pandemic.

- At minimum:
 - Document a head-to-toe assessment once per shift.
 - Use iView to document a focused assessment or re-assessment every 4 hours or at a frequency determined by the patient's condition.
 - Nursing interventions, treatment and care provided should be charted as close as possible to the time performed
 - Use a nursing narrative note or shift summary to expand upon pertinent events, including patient/family concerns. .
 - Document on medication administration using the Medication Administration Wizard and Medication Administration Record (MAR)
 - Follow existing [employer policy](#) and [college documentation](#) standards.

Related Resources:

1. [BC College of Nurses and Midwives Documentation Standard](#)
2. [PHC Nursing Practice Competency Assessment](#)
3. [PHC Resources for Redeployment Preparation](#)
4. [Documentation, Acute Care](#)
5. [B-00-13-10186](#) - Physical Assessment of Patients (Acute Medicine)
6. [BCD-11-11-41002](#) - Documentation Policy

Appendices:

[Appendix A](#): Nursing Competency Assessment

[Appendix B](#): Education Resources for Redeployment

Appendix A: Nursing Competency Assessment

PHC Nursing Practice Competency Assessment



PHC Re-Deployment Plan

NURSING PRACTICE COMPETENCY ASSESSMENT

Name: _____ Date: _____			
My main place of employment is:			
Site: _____	Nursing Designation:		
Department/Program: _____	<input type="checkbox"/> RN <input type="checkbox"/> RPN <input type="checkbox"/> LPN		
Unit/Clinic: _____			
The most acute nursing competency I have achieved is: (i.e. most acute training at any point in my nursing career)			
<input type="checkbox"/> SPECIALTY TRAINING Select all that apply: <input type="checkbox"/> BCIT Critical Care <input type="checkbox"/> BCIT High Acuity <input type="checkbox"/> BCIT Emergency <input type="checkbox"/> BCIT Neonatal <input type="checkbox"/> BCIT Perinatal <input type="checkbox"/> BCIT Perioperative <input type="checkbox"/> BCIT Nephrology <input type="checkbox"/> Other: _____ Years of experience: <input type="checkbox"/> 0 to 6 months <input type="checkbox"/> 6 months to 2 years <input type="checkbox"/> 2 to 5 years <input type="checkbox"/> More than 5 years	<input type="checkbox"/> ACUTE CARE Select all that apply: <input type="checkbox"/> Medicine <input type="checkbox"/> Surgery <input type="checkbox"/> Mental Health <input type="checkbox"/> Urban Health <input type="checkbox"/> Palliative <input type="checkbox"/> Renal Years of experience: <input type="checkbox"/> 0 to 6 months <input type="checkbox"/> 6 months to 2 years <input type="checkbox"/> 2 to 5 years <input type="checkbox"/> More than 5 years		
NURSING PRACTICE COMPETENCY ASSESSMENT			
This self-assessment checklist is meant to assist you with exploring your current knowledge and skills and identify areas that require further knowledge and practice. To assess yourself, reflect on each criterion and check your assessment of where you are at: Ask yourself "Can I do this? Do I do this? How well can I do this?" It is expected that all nurses are competent to perform the following BASIC skills: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> Risk Screening (violence, falls, etc.) CPR Personal Protective Equipment (PPE) </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> Vital Signs and Physical Assessment Pain Assessment Continence Management </td> </tr> </table>		<ul style="list-style-type: none"> Risk Screening (violence, falls, etc.) CPR Personal Protective Equipment (PPE) 	<ul style="list-style-type: none"> Vital Signs and Physical Assessment Pain Assessment Continence Management
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Appendix B Education Resources for Redeployment

- [PHC Resources for Redeployment Preparation](#)
- [Education Toolkit for Redeployed Nursing Staff \(Learning Hub\)](#)
- [BCIT FEPA](#) (Focused Education Preparation Advancing Front line RNs) online modules are available for your completion on [LearningHub](#).

	Date Certificate Obtained
Module 1: Foundational Acute Practice <ul style="list-style-type: none"> ○ Oxygen Supply and Demand ○ Comprehensive Assessment ○ Arterial Blood Gas Analysis ○ Hemodynamic Monitoring 	
Module 2: ECG interpretation, The Basics	
Module 3A: Oxygenation and Ventilation <ul style="list-style-type: none"> ○ CPAP and BIPAP 	
Module 3B: Oxygenation and Ventilation <ul style="list-style-type: none"> ○ Mechanical Ventilation, The Basics 	
Module 4: Shock states: signs and symptoms <ul style="list-style-type: none"> ○ Hypovolemic ○ Cardiogenic ○ Septic 	

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