

College of Licensed Practical Nurses of Nova Scotia
College of Registered Nurses of Nova Scotia

Effective Utilization of RNs and LPNs

Guideline for Nurses



The College of Licensed Practical Nurses of Nova Scotia (CLPNNS) and the College of Registered Nurses of Nova Scotia (CRNNS) are legislated to serve and protect the public interest through the regulation of licensed practical nurses (LPNs), nurse practitioners (NPs) and registered nurses (RNs). Only LPNs, NPs, RNs or students of a nursing program can use the term nurse¹.

All nurses are expected to optimize their roles and practice based on their legislated scope of practice, education, individual competence, experience and employer policies. This requires nurses and their employers to understand the scope of practice of each designation of nurse so their roles can be effectively optimized. In addition, there is a need to understand how nurses provide care and the interventions used to influence client health outcomes when making decisions about the most appropriate nurse to meet client's needs.

This guideline will provide information to assist nurses in better understanding their own and each other's scope of practice. Additionally, it will help nurse and non-nurse managers of nurses determine the most appropriate nurse to support clients to achieve their intended outcomes.

Consider the following assumptions when determining the most effective nurses to use for client care:

1. All nurses practice in a manner that is consistent with legislation, their standards of practice, codes of ethics and scopes of practice.
2. All nurses are accountable for their decisions, actions, inaction and all related consequences.
3. LPNs and RNs are autonomous practitioners; however, LPNs practice their autonomy within a collaborative relationship with other care providers, most frequently with the RN.
4. LPNs and RNs study from the same body of nursing knowledge. RNs study longer and as result have a more in-depth, comprehensive nursing knowledge base and a broader scope of practice with more professional autonomy than the LPN.
5. RNs establish the initial nursing plan of care and make independent nursing care decisions based regardless of the acuity or complexity of the client's health needs.
6. LPNs make independent nursing decisions using an established plan of care for clients with less complex care needs. When the client's needs become more complex, LPNs must collaborate with an RN or other appropriate healthcare provider to make decisions.

Client Continuum

stable health conditions, predictable health outcomes, less complexity, low risk for negative outcomes

unstable health conditions, unpredictable health outcomes, high complexity, high risk for negative outcomes

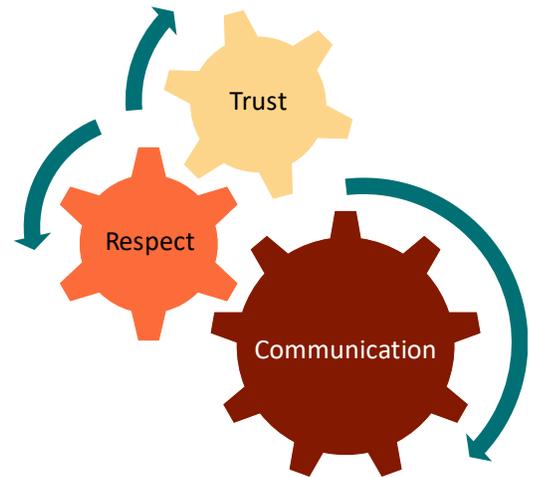


¹ In this document, the term nurse(s) will refer to LPNs and RNs.

Collaboration and Consultation

Trust, respect and communication are the cornerstones for effective collaboration. Members of a collaborative practice team need to understand and respect each other's roles and trust that all team members will consult and collaborate appropriately when a client's needs are beyond their scope of practice.

Collaboration happens when two or more individuals discuss the needs of a client, offer their unique perspective based on their professional capacity and collectively come to consensus regarding a decision to address the issue. Collaboration is an ongoing process that requires effective communication among nurses and members of the health care team and a clear understanding of the roles of the individuals involved. Nurses should include clients in the collaborative decision-making process. Effective communication between nurses, team members and clients leads to better client outcomes and improved client satisfaction.



Consultation involves a request for advice about client care from another health professional. It can occur face-to-face, by telephone or other electronic means. The consultant may or may not see the client directly and the accountability for clinical outcomes remains with the consultee. During a consultation, nurses clarify their reasons for consulting, ensure the sufficient exchange of relevant information, and determine an appropriate course of action. When care is transferred from one nurse to another, the accountability for that care is also transferred.

Collaboration and consultation are shared accountabilities between nurses and employers. When an assignment involves consultation, nurses should determine if the required resources are available. Employers have an accountability to ensure sufficient resources such as policies, procedures and role descriptions, are in place to meet client needs. These resources should be evidence-informed and support professional nursing practice.

What is the difference between consultation and collaboration?

Consultation is providing advice based on one's knowledge, experience and scope of practice.

Collaboration is about two or more people using their knowledge base to make a decision.

Three-Factor Framework: Factors to Consider for the Most Effective Utilization of Nurses

Nurses and employers are responsible to ensure that clients receive care from nurses whose scope of practice best meets their health care needs. Determining which designation of nurse most appropriately matches the client's needs requires an analysis of three equally important factors: the client, the nurse and the environment.

The following assumptions inform the process of determining which designation of nurse most appropriately matches the client needs.

1. LPN practice is most independent when:
 - i. the client's needs are known, responses to interventions are consistent over time, reasonably predictable, and less complex;
 - ii. there are sufficient and accessible resources in the practice environment to support the client or LPN if needed; and,
 - iii. the LPN has the necessary knowledge, skill and judgment to predicate and manage the outcomes their actions and their practice is supported by organizational policy.

2. The independence of LPN practice is more contextually based than RN practice because of the differences in their legislative scope of practice.
3. As clients' needs changes, so may the designation of nurse most appropriate to meet their needs.
4. LPN practice is more sensitive to minor changes in the any of the individual elements in the three factor framework, so as overall complexity increases, so does the LPN's obligation to consult with the RN to make nursing decisions to address the client's care needs.
5. In situations where the overall complexity of care requires coordination and management by the RN, the LPN may provide elements of care or perform interventions (as long as the LPN is competent to do so) with direction of the RN.
6. Continuity of care means care is continuously provided by the designation of nurse most appropriate to meet the client's needs.

Each factor of the Three-Factor Framework is considered in relation to the other factors. The elements listed below are not an exhaustive list.

Client Factors

Client factors refer to the overall complexity of the client's needs including the predictability and consistency of responses to interventions or achieving expected outcomes and the risk of negative outcomes. The client's bio-psycho-social, cultural and emotional needs can influence client complexity and it can vary on a continuum from less complex to highly complex.

Nurse Factors

Regardless of education, experience and competencies, LPNs and RNs are different designations of nurses with different scopes of practice, professional authorizations around practice and differing capacities to make autonomous nursing decisions. Other nurse factors include their individual capacity to provide safe and competent care in a given situation and their ability to predict and manage the outcomes of their actions or the client's response to interventions.

Environmental Factors

Environmental factors include available policies, resources and mentors, and mechanisms for effective communication and consultation. Geographical proximity to resources and services are also environmental factors that can affect client care.

When the collaboration is getting in the way of the client care, this is an indication that care may need to be transferred from the LPN to the RN

Conclusion

Nurses and employers need to consider the client's needs and the key differences in professional knowledge base, experience and scope of practice of the different nursing designations to ensure the appropriate delivery of client care in the collaborative practice environment. In addition, using the Three-Factor Framework supports decision-making when assigning the appropriate designation of nurse to best meet the client's needs.

We encourage you to reach out to CLPNNS or CRNNS with any additional questions you may have. Please email a CLPNNS Practice Consultant at practiceconsultant@clpnns.ca or a CRNNS Practice Consultant at practice@crnns.ca for additional information.