

Job Class Profile: Registered Nurse IB**Pay Level: NS-30 Point Band: 842-892**

Factor	Knowledge	Interpersonal Skills	Physical Effort	Concentration	Complexity	Accountability & Decision Making	Impact	Development and Leadership	Environmental Working Conditions	Total Points
Rating	5	5	5	6	5	5	5	3	6	
Points	233	83	32	29	150	108	103	64	64	866

JOB SUMMARY

The Registered Nurse IB is responsible for providing professional standards of nursing care for residents. Often performs as sole nurse in charge for a site of a multi-site organization, overseeing the care of residents with varying levels of requirements, physical and/or mental diagnoses, and performing bargaining level supervision to non-professional nursing and support staff and possibly other nurses. Performs multiple roles such as leader, practicing nurse, educator and resident advocate.

Key and Periodic Activities

- As a leader, is often the sole charge nurse with nursing responsibilities for an entire site.
- Performs bargaining level supervision when in charge of healthcare workers, support staff, and occasionally other nurses in a healthcare facility. This involves delegating, assigning and organizing resident assignments, co-ordinating meal breaks and resources, scheduling staff coverage, managing any issues related to scheduling, and participating in performance appraisals.
- In emergencies, acts as a team leader to co-ordinate any “medical codes”.
- As a practicing nurse, and when a resident is admitted to the facility, is responsible for completing the admission assessment on the resident which includes obtaining the resident’s history, checking vital signs, and monitoring and treating acute and chronic medical conditions.
- Assesses, monitors, treats and evaluates residents which may include assessing signs and symptoms, needs, concerns and changes in conditions, documenting pertinent information, and maintaining accurate and detailed reports/records.
- Administers medication, injections such as vitamin B12 shots) and monitors therapeutic/side effects and allergic reactions.
- May perform/arrange, evaluate, and interpret diagnostic tests and procedures (i.e. x-rays, EKG, blood work, etc.).
- Checks and prepares equipment and machines such as glucometer and cardiac monitors, and IV pumps, ensures equipment is working properly, and may calibrate machines.
- Attends resident rounds, assists physicians and other healthcare providers with medical procedures and tests (i.e. sutures, insert IV, etc.), carries out physician orders, and transfers residents to other healthcare facilities for investigation and/or treatments, if required.
- Consults and co-ordinates with multidisciplinary healthcare team, which may include assessing, planning, implementing and evaluating care plans, moving residents and delivering

Key and Periodic Activities

- reports to new team.
- As the resident advocate, promotes advanced health care directives and ensures resident and their families are aware of care options, in order to make informed decisions.
- Updates families of resident's care such as appointments, any changes in conditions or general well-being.
- Reports any activity or observation of mistreatment and/or abuse.
- Along with other team members, provides daily basic care such as feeding, bathing, toileting, dressing change care, ventilator, and wound care management, etc.
- As the educator, communicates and provides education and counseling to acute care residents in such areas as diabetic diets, cardiac teaching, and end-of-life palliation.
- Directs, supervises, and teaches new tasks and health promotion techniques to team and support staff.
- Assists with identifying educational needs on site.
- Acts as a preceptor/mentor to nursing students, novice staff nurses, and other care providers.
- May provide escort duty to residents who have to be transferred to other facilities for tests and treatment or during emergency treatment.
- Participates and leads committees and interest groups related to facility.
- Reorders and replaces medications through pharmacy department
- Reviews medication administration profiles and documents.
- Checks monthly medication and cycles refill and changes to blister packs and documents as appropriate.
- Completes monthly infection control sheets and checks medication administration records.
- Performs advanced foot care, IV therapy, and blood transfusions.

SKILL

Knowledge

General and Specific Knowledge:

Knowledge of:

- Nursing and related organizational and professional policies and procedures.
- Ethical issues.
- Advanced equipment and technology, disease processes, therapies and drug treatments.
- Current knowledge of nursing trends, research, and developments in a broad range of disciplines.

Formal Education and/or Certification(s):

- 3 year Diploma or Undergraduate Degree in Nursing.
- Professional Designation of R.N. (Registration with the Association of Registered Nurses of Newfoundland and Labrador (ARNNL).
- Attends and receives continuous training and education which may require recertification.

Years of Experience:

- Minimum: 2 – 3 years of related nursing experience.

Competencies:

- Professional responsibility and accountability.
- Ethical decision making.
- Critical thinking and assessment skills.
- Ability to communicate effectively.

Interpersonal Skills

- Skills are used to listen to information and provide direction, advice to students and other staff; care, comfort and nurturing to residents and their families (some who may be upset, confused, or angry), and to collect confidential information (i.e. resident history). Skills are also used to work as part of a team to deliver professional nursing care, and to communicate effective care plans, instruct/train/teach/coach and mentor team members, provide expert advice, counselling, resolve disputes, deal with upset/angry people, and gain the co-operation of others.
- Communications occur with residents, supervisors/managers, families, general public, employees, and occasionally with students, physicians, volunteers, clergy, sales representatives, and other members of the interdisciplinary team. Interactions may also occur with professional associations, advisors (Professional Practice), and the fire department.

EFFORT

Physical Effort

- Regularly, the demands of the job result in considerable fatigue, requiring periods of rest and strength and endurance.
- Constantly lifts meal trays up to 10 lbs., regularly moves or lifts supplies, equipment/machinery/supplies, i.e. beds, stretchers, furniture (chairs, stools, carts, pumps, portable monitors, oxygen tanks, IV bags, etc.), between 25 to 50 lbs. Also, lifts (may use mechanical lifts or sliding board for assistance), transfers, moves (repositions), turns, pushes and pulls residents in beds, or wheelchairs over 50 lbs.
- Regularly works in awkward or cramped positions requiring balance when performing activities such as assisting residents in daily living activities, (i.e. baths, toileting, meals, and dressing changes), walks with residents, and stands in one spot when performing or assisting physicians with procedures (i.e. foot care, dressing changes, and diagnostic work). Occasionally, sits to complete computer work or document charts.
- Physical effort may also include regularly performing fine finger/precision work requiring accurate control and steadiness such as when performing IV and catheter insertions, dressing changes, injections, and nursing care on wounds. Also constantly uses gross motor skills, and regularly uses hand tools that require accurate control and steadiness when performing treatments.

Concentration

- **Visual** concentration is required when observing and performing assessments, conducting treatments and tests (glucometer testing), reading physicians orders, completing charts/reports, reading equipment/monitors, calculating, preparing and administering medications, giving injections, inserting IVs, performing wound care management, suturing wounds, and reviewing

diagnostic test results.

- **Auditory** concentration is required when listening to report at the change of shift, residents when providing information (i.e. medical history, describing symptoms, calling for assistance or using call bell, etc.), and when conducting assessments (i.e. using stethoscopes, dopplers to listen to heart/lungs, abdominal/bowel sounds, wheezes, crackles chest sounds, irregular heart rhythm, etc). Auditory concentration is also required to listen for alarms on machines, beds, equipment, i.e. IV pumps, oxygen concentrators, and wander guard alarms.
- Other sensory demands such as **touch** is used to feel a vein for venipuncture, check temperature changes, to palpate pulses, to feel the body for physical abnormalities, to perform assessments (bony fractures, swelling), and to provide comfort and care. **Smell** is also used to denote illness, stress, hazards (odours from wounds, breath, infection, smoke in building, etc).
- **A high level of alertness and concentration** is required when working as sole nurse (often evenings and weekends) in a facility **for both the health and safety of the residents** and safety of the building. Alertness is also required when conducting assessments, documenting charts, administering or counting medications, when doing procedures, setting up and using equipment (i.e. IV, blood pressure, catheter, etc.), and providing care.
- **Time pressures and deadlines** are experienced when administering medication, checking labs, taking blood sugars, completing plan of care, documenting, and in emergencies or crisis situations.

Complexity

- Performs a series of tasks and activities that are different/unrelated and require a broad range of skills and a diversity of knowledge.
- Tasks are regularly repetitive/well-defined and can have simple solutions. Others, however, may require analysis and some interpretation to select from a number of possible and prescribed solutions or can be solved in a team setting.
- A typical complexity is being able to identify changes after assessment of a resident and knowing when to contact a physician. There are also issues related to developing specific care plans for residents, being able to change that plan according to established parameters, and having to respond to family concerns related to the resident's care/treatment. There are also challenges with directing staff and issues around facilities emergencies.
- Complexities tend to be solved by obtaining advice or through discussion with other nurses (i.e. resident care co-ordinator during day shift, or on call manager after hours), physicians, collaboration with the healthcare team, ARNNL and Canadian Nursing standards, policies, procedures, and nurse manager.

RESPONSIBILITY

Accountability and Decision-Making

- Tasks are generally prescribed and controlled based on professional standards, policies, and procedures and are generally structured, documented, and reviewed.
- Makes independent decisions around the health and safety of residents including assessing vital signs, initiating a plan of care, calling a physician(s), and transferring residents to hospital. Can also independently call family members, consult with other healthcare professionals (i.e. Social Worker, Occupational Therapist, and Physiotherapist, etc.), regarding the care of the

resident, call a taxi to perform services for the facility such as transporting lab specimens, etc., and order supplies. Delegates or changes work tasks of colleagues and support staff, and requests or calls-in additional staff to work.

- Requires supervisory approval for capital supplies such as equipment purchases. Managers approve resident admissions, changes to policies and/or procedures, monthly time schedules, and leave approvals (i.e. education, vacation, etc.).
- Has some discretion around treatment choices when assessing wounds, administration of PRN medications when a resident receives them, and whether a resident should be transferred to hospital. Also exercises a high degree of discretion and judgement with the resident's care during emergencies, treatments, or when there are errors affecting their care. This also may include evacuating part, or all of the facility or handling emergencies related to the facility, if these place the resident(s) in possible danger.
- Provides information, advice, and recommendations regarding a resident's treatment, procedures, and medical conditions and discusses their situations with other healthcare staff within the parameters of the organization's confidentiality policies.

Impact

- The tasks and activities have a direct impact on the resident, the immediate work area, and within and outside the department.
- Work can negatively or positively impact on the quality of care provided to the resident. The most significant impact is on residents, their treatment and information provided to them, and their health and safety.
- The resources that are impacted include: equipment (i.e. if it is not set up or used properly or is malfunctioning and not reported appropriately), processes and systems, information (if there is incorrect documentation or is not shared such as appointments, consults, etc), finances (wastage of supplies), human resources (staffing schedules are not completed), and health and safety
- The types of error that could occur is a medication error, incorrect or missed physician orders, improper transcription of orders, or a procedure performed on the wrong resident, either of which could be fatal; however, this is mitigated through the double checking of medications being administered and physicians orders, and the highly documented care plan. Requires licensure to practice and professional activities are monitored through a professional association. Problems are typically resolved within hours of problem identification.

Development and Leadership of Others

- Not responsible for the supervision to staff; however, has clinical supervisory responsibilities of staff when in charge on a per shift basis.
- Provides direction, leads, and co-ordinates other nursing staff, students, and support staff; delegates/allocates tasks, organizes and co-ordinates resident/nurse assignments, some staffing functions, and checks the work of colleagues/students. Also, provides on-the-job advice, guidance, orientation and training to students and/or co-workers, input into performance assessments, and may mentor students or new nurses (preceptor).
- May provide a team leader or a technical mentor/educator role for educating other staff on various treatments, medications, and training for their site/facility (i.e. CPR instructor, Wound Care Resource Educator, and may perform project leader roles such as a facilitator for

Resident-Assessment Instrument - Minimum Data Set (RAI-MDS), Meditech, and Therapeutic Crisis Intervention training/projects).

WORKING CONDITIONS

Environmental Working Conditions

- Required to use protective equipment such as gloves, goggles, masks, gowns, appropriate footwear, and take preventative measures and universal precautions against the spread of diseases/infections by proper hand washing. There is also a requirement to practice safety techniques such as Back Injury Prevention Program (BIPP), and/or to use mechanical lifts and sliding board to move or lift residents.
- There is a limited likelihood of receiving minor cuts, bruises, fractures, and illnesses, and a total disability; however, there is a moderate likelihood of receiving illnesses or injury resulting in a partial disability when performing these tasks given all health and safety regulations are followed.
- There is constant exposure to physical hazards, health and safety risks, and undesirable characteristics in the environment such as unusual/distracting noise, bodily fluids/waste, sharp objects (i.e. needles), infectious diseases (i.e. Norwalk virus, HINI, Hepatitis, and Shingles), and odours. In addition, there is regular exposure to conditions such as wet or slippery surfaces, lack of privacy when working with residents, and hazardous chemicals when administering toxic drugs (i.e. chemo agents). Occasionally, is exposed to glare of computer screen, and has to work in awkward/confined spaces, exposure to electric shocks when using a defibrillator, radiation, and physical danger (i.e. from upset, aggressive, and/or confused resident and family members). Occasionally, there is some travel involved in providing care during ambulance escorts.