You asked a Practice Advisor:

"As a registered nurse, what are my responsibilities when working with Unregulated Care Providers (UCPs)?"



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When working with UCPs in a team model of care delivery, the RN assigns the nursing work and establishes the degree of oversight required.

Background

SYSTEMIC CHANGE TO the health care system is being driven by and affected by, the number, deployment and utilization of nursing resources. The ongoing changes to skill mix and service delivery models create new working relationships between registered nurses (RNs) and other nursing care providers. RNs need a clear understanding of how these changes affect their professional practice as they are increasingly required to work with others to achieve patient outcomes. In many care delivery models, the RN is not the only health care provider delivering care to patients. Many models are based on collaborative work where some tasks can be provided by Unregulated Care Providers (UCPs).

Unregulated Care Providers

Working with UCPs is an increasing part of the registered nurse's practice in many settings in New Brunswick. Unregulated Care Providers are paid health care workers who are neither registered nor licensed by a regulatory body and have no legal defined scope of practice. UCPs provide personal care and/or support for activities of daily living to patients. UCPs include, but are not limited to, resident care aides, home support workers and special education assistants. Their work settings include, but are not limited to, client homes, group homes, residential care facilities, long term care facilities, hospitals and schools.

RNs Direct Nursing Care at the Point of Care

When RNs and UCPs work together, the nursing care delivery model must support collaboration and cooperation among the nursing team, respecting the contribution of each individual, to help ensure safe and appropriate client care. Regardless of the model, the registered nurse remains responsible for the overall direction of nursing care (NANB & ANBLPN, 2009).

UCPs are accountable to their employer for the overall performance of their role description.

When working with UCPs in a team model of care delivery, the RN assigns the nursing work and establishes the degree of oversight required. Assignment occurs when the required task falls within the UCPs role description and training, as defined by the employer. Oversight is a combination of consultation, guidance, teaching, evaluation, clarification of the care plan and follow-up by the RN at the point of care for the purpose of overseeing the care which is assigned or delegated.

The RN provides directions and clear expectations of what activities need to be performed, monitors performance, obtains and provides feedback, intervenes if necessary and ensures proper documentation. It is very important that the RN remains aware of the UCP's job description in order to assign the proper activities. In some specific situations and according to agency policy, an UCP can also be educated by RNs to perform, under specific conditions, certain other tasks.

The degree of oversight required must be established by the RN who is assigning the nursing work. The amount of direction provided depends upon the complexity of the task or procedure, and the ability of the care provider to perform. The level of communication necessary between the RN and the UCPs during a shift is determined by the RN, taking into account the client predictability and complexity of the assigned task(s).

When accepting their assignments, the UCPs are responsible and accountable to ensure they have the necessary knowledge and skills to provide the nursing work assigned to them and for communicating with the RN team leader as necessary. Although RNs are not responsible or accountable for the UCP's practice, the RN needs to know about the client's health status and the clients' needs in order to coordinate the care appropriately. Employer policies and care delivery models must support the role of registered nurses in directing care.

For more information about working with UCPs, see NANB's new document *Practice Guideline: Working with Unregulated Care Providers (2009)* at www. nanb.nb.ca

Additional Resources

- Nurses Association of New Brunswick (2005). Standards of Practice for Registered Nurses. Fredericton: Author. (under revision) www.nanb.nb.ca/PDF/practice/ StandardsofRegisteredNursesE.pdf
- □ Nurses Association of New Brunswick and Association New Brunswick Licensed Practical Nurses (2009). Working Together: A Framework for the Registered Nurse and Licensed Practical Nurse. Fredericton: Authors.www.nanb. nb.ca/PDF/Working_Together_Final.pdf
- Nurses Association of New Brunswick (2002). Delegating Nursing Tasks and Procedures Position Statement.
 Fredericton: Author. (under revision) www.nanb.nb.ca/ PDF/position-statements/DELEGATING_NURSING_TASKS_ AND_PROCEDURES_E.pdf
- Nurses Association of New Brunswick, Adapting to the New Workplace Reality: Part 3: Organizing patient care,

- Info Nursing, March 2008, vol.39, Issue 1, p.18. www.nanb.nb.ca/PDF/Info-Nursing/Info-March2008-E-Final.pdf
- Nurses Association of New Brunswick, Adapting to the New Workplace Reality: Part 4: Working Together, *Info Nursing*, September 2008, vol.39, Issue 2, p.12. www.nanb.nb.ca/ PDF/Info-Nursing/Info-Sept2008-E.pdf
- Nurses Association of New Brunswick, Adapting to the New Workplace Reality: Part 5: Directing Care, *Info Nursing*, Winter 2008, vol.39, Issue 3, p.18. www.nanb.nb.ca/PDF/ Info-Nursing/INFO-Winter2008-ENG.pdf

The Practice Department of the Nurses Association of New Brunswick (NANB) provides consultation services and support to nurses in their practice. For more information regarding working with unregulated care providers or other practice issues, contact the Practice Advisor at 1 800 442-4417, (506) 458-8731 or email nanb@nanb.nb.ca.

