Nursing in a Team Environment

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The College of Licensed Practical Nurses of Manitoba (CLPNM), College of Registered Nurses of Manitoba (CRNM) and College of Registered Psychiatric Nurses of Manitoba (CRPNM) developed this document.
**Purpose**

Nursing regulatory colleges frequently receive questions about how to best understand the roles of licensed practical nurses (LPN), registered nurses (RN) and registered psychiatric nurses (RPN) in a specific practice setting. In today’s complex health care environment the answer to this question is multifaceted and requires the consideration of several factors. The purpose of this document is to provide a framework for this discussion using some of the collaboration competencies from the National Interprofessional Competency Framework (2010). Collaboration between health care professionals including the client is expected and necessary in all practice settings.

**Role of Entry-Level Competencies**

Each of the three nursing professions in Manitoba have produced documents describing the entry-level competencies for the professions. Entry-level competencies are important as they describe the minimum requirements or expectations of the new graduate required for safe, competent and ethical practice. The entry-level competencies reflect theoretical and clinical preparation and the knowledge, skills and judgment required to practice as a nurse in Manitoba. While there is much overlap between the three nursing professions, there are also differences in the nursing education which needs to be taken into account when determining the most appropriate nurse for the job.

As nurses move throughout their careers, they build on their entry-level competencies through various methods of learning. No one nurse will practice the scope of the entire profession, and nurses build on competencies throughout their career. This is especially true of nurses that practice in more specialized areas of nursing. Scope of practice is what a nurse or health care provider is authorized to do and competencies are the ability to competently perform the activities. Some may have a broader scope of practice competencies while the competencies of other members of the same profession may be narrower. However, with that in mind, no matter how experienced the nurse is in a specific area, gaining new competencies of another profession does not make the nurse a part of that profession.

**Model for Assessment of Team Composition**

Professional scope of practice, or full range of activities that the profession has the legal authority to do, is provided by legislation and further defined by the entry-level competencies of each profession. Decisions regarding the appropriate nursing staff for a unit, program, or service are complex. Consideration must be given to the needs of the client population, the practice environment including availability of other health care providers including LPNs, RNs, and RPNs on the health care team and the individual nurse’s level of competence. These factors are depicted in Figure 1 on the next page. The assessment begins at the bottom of Figure 1 with a broad determination of the community/population needs and continues to narrow until the focus is on the individual nurse and client need at the point of care. The discussion can involve regulators, educators, employers and health care providers including nurses.
Following the determination of the needs of the community or population served, the members of the health care team should be identified. What are their scopes of practice? Where is the overlap in scopes? Do these collective scopes meet the needs of the community or population?

Collaboration Competencies

1. **All members of the health care team understand each other’s role.**

**Role Clarification** - Nurses need to understand their own and other health care providers’ professional roles and level of competence. This includes the recognition of their limitations in skills, knowledge and abilities. This understanding must be used to establish a plan to meet the client’s health care goals. The context of care is an important factor for consideration along with the individual’s level of competence.

Each nursing profession provides care to clients which are defined as individuals, families, groups, communities and populations. This definition of client is consistent across the nursing professions. As client care needs become less defined, more unstable, unpredictable, with higher complexity and higher risk of negative outcomes the greater the need for enhanced collaboration as nurses practice to the limits of their individual scope of practice.
Employer Considerations

1. What are the health care needs of the clients?
2. What knowledge, skill and judgement are necessary within the health care team to meet those client needs?
3. Are the members of the health care team utilized to their full capacity/scope of practice?
4. What is the level of competence in the team? For example, what is the proportion of novice to more experienced nurses? What members of the health care team are available?
5. What are the environmental factors? For example, are other health care providers available for collaboration? Are current clinical decision tools available? Are there other environmental risks to consider?

Care Continuum

Figure 2 below depicts the care continuum within the context of care. The gray oval represents the context of care and includes available resources, collaborative practice setting, access to other health care providers in the team and the environment. Context is particularly important as nurses reach the limits of their competence and scope of practice. The arrows in the care continuum represent growing client health care needs, while the blue circles identify the corresponding need for nurses to enhance collaboration. Collaboration is expected in all care and is enhanced as care becomes less defined.
2. **Collective competence is essential for safe client care.**

**Team functioning/collaboration** – Collective competence is a complementary concept to individual competence that is relevant in healthcare as client care is dependent on teams and networks of individuals working together within a complex system. It is necessary to establish and maintain effective and healthy working relationships with clients and practitioners, whether or not a formalized team exists to ensure collective competence. Health care providers are responsible to communicate with others in a collaborative, responsive and responsible manner. Teams that change frequently need more formalized systems to ensure adequate communication between the team members to ensure client needs are addressed.

The health care providers present on the team may vary depending on the practice setting. As client care needs become less defined other members of the team may need to become more involved in the care. Nurses share the accountability for health outcomes with clients, other professions and communities, while maintaining accountability for their own practice.

**Context**

The level of client care needs and the individual nurse’s level of competence should be considered within the context of care. Nurses practicing in settings with less access to other members of the health care team should have a higher level of competence and may need access to other resources; other health care professionals, equipment, technology and policies. Context is as important as the understanding of the client need.

The circumstances may require collaborative leadership where practitioners recognize that different team members may assume leadership roles as appropriate to the task, situation and environment. The team must engage and effectively facilitate respectful interactions amongst each other and recognize that both formal and informal leadership co-exist. An understanding of who is most appropriate to take on a lead role, a complementary role and when to refer/consult within the team is essential. The team must actively engage to deal effectively with interprofessional conflict. Each member of the team needs to recognize the potential for conflict, recognize how their behavior and conduct contributes to the situation and work effectively to address and resolve disagreements among the team.

**Employer Considerations**

1. What resources are necessary for nurses to safely provide care?
2. Are members of the team accessible? How readily?
3. Are members of the team known to each other? If not, what systems are in place to facilitate communication?
4. Is there an understanding within all members of team on the team structure?
5. How are conflicts within the team managed and resolved?
Conclusion

Determining the appropriate healthcare providers to involve in care is complex and dependent on the client needs. The scope of professions provides a broad starting point but does not provide a definitive formula as there is overlap in the scope of practice of nursing professions and other health care professions. All of these factors must be taken into consideration. Scope of practice will continue to evolve to reflect changes in legislation, regulation and education to meet the ever changing needs of populations and the health care system (Lankshear & Martin, 2019).

References and Resources

CLPNM Entry level competencies
CRNM Entry level competencies
CRPNM Entry level competencies
CRNM RN Scope of practice
CLPNM Scope of practice
CRPNM Scope of practice

Interprofessional Collaborative Care – Joint document


