

## THE ROLE OF THE REGISTERED NURSE IN TEAM-BASED PRIMARY CARE

### WHAT IS THE ROLE OF A REGISTERED NURSE IN TEAM-BASED PRIMARY CARE?

- Nurses in primary care are self-regulating, autonomous professionals who practice in accordance with the standards of professional practice and scope of practice as outlined by the BC College of Nursing Professionals (BCCNP). RN practice is also guided by a nationally adopted Code of Ethics.
- Registered Nurses (RNs) in team-based primary care work collaboratively in an integrated, coordinated manner with a complement of interdisciplinary providers and the persons/populations they serve, to support the health and well-being of individuals, families, groups, communities, populations, and systems. Key foundational underpinnings to the delivery of nursing care include: cultural safety; trauma and violence informed; patient and family-centered; shared decision making; health equity; and gender-based analysis lenses.
- RNs practicing in primary care settings support a high functioning health care system by reducing the number of emergency room visits and hospitalizations as well as helping clients, residents, and patients remain well in community.
- RNs functions focus on screening and assessment of the person/population; making a nursing diagnosis of a condition; researching/planning, implementing and evaluating nursing interventions that support/align with evidence-informed best practices for clinical direct service that span: health promotion and disease/injury prevention (e.g., immunization/communicable disease prevention, individual/group health promotion education to support chronic disease primary and secondary prevention, injury prevention, conducting/supporting screening for health issues as per the Lifetime Prevention Schedule); chronic disease management/self-management (e.g., medication management, wound care, diabetes management); child, adolescent and women's/reproductive health; basic mental health; geriatrics; end-of-life care; and other areas. RNs refer to a range of health and social services as applicable, including community services to support provision of holistic care that is responsive to the person's health needs/goals. RNs in primary care also play a key coordination role, and support cross-sector transitions and system navigation for people across the lifespan.
- RNs are currently the most common nursing provider in primary care and are known as primary care nurses or family practice nurses (as aligned with the Canadian Family Practice Nurses Association).
- Primary Care RN practices in accordance with the standards of professional practice and code of ethics as outlined by the BC College of Nursing Professionals (BCCNP).

### HOW ARE RNs EDUCATED & REGULATED?

- To practice as an RN in BC, the minimum educational requirement is a Bachelor of Science in Nursing degree (or equivalent). Many post-secondary institutions offer accredited baccalaureate nursing programs (refer to: [www.bccnp.ca/becoming\\_a\\_nurse/Pages/study\\_to\\_be\\_a\\_nurse.aspx](http://www.bccnp.ca/becoming_a_nurse/Pages/study_to_be_a_nurse.aspx) for BCCNP recognized baccalaureate nursing programs).
- The Canadian Nurses Association (CNA) plans to incorporate primary care nursing into the CNA Community Health Nursing (CHN) certification exam (update in progress).

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- RNs are self-regulating professionals that are registered and licensed through the British Columbia College of Nursing Professionals (BCCNP); a requirement to practice nursing in B.C.
- Nursing practice is governed in the Province of British Columbia through legislation and regulation. While nursing practice intersects with a wide range of legislation, the Health Professions Act (1996) sets out the regulatory framework for nursing in BC;
- BCCNP sets [standards of practice](#) to assist nurses to provide safe, competent and ethical care; and addresses complaints about BCCNP registrants.
- BCCNP also outlines the legally prescribed [scope of practice](#) that describes the activities registered nurses are educated and authorized to perform.
- The National Council Licensure Examination for Registered Nurses (NCLEX-RN) is the mandatory regulatory entry-to-practice examination to become RN in B.C. and in other Canadian jurisdictions.
- To retain practising registration, RNs must meet minimum practice hours (1,125 hours within the preceding five years) and participate in the BCCNP Quality Assurance (QA) Program.
- The QA program includes completing a self-assessment using BCCNP standards of practice; seek and receive peer feedback; develop and implement a learning plan; and evaluate the impact of their learning on an annual basis.
- As autonomous professionals, with broad scope and significant professional responsibility within the interdisciplinary care team, nurses have an obligation to ensure their individual competence, i.e., that they possess the knowledge, skills and judgment required for safe and appropriate performance in primary care practice. This includes ongoing professional development to ensure currency of their knowledge base and practice that is consistent with evidence-informed clinical best practices for primary care nursing and team-based care. Additionally, the primary care RN participates in activities that support onboarding/professional development of staff within the interdisciplinary team, and provides supervision and mentorship of primary care nurses and students.
- The primary care RN also supports research and continuous quality improvement in the delivery of nursing and team-based primary care to facilitate CQI and optimal health outcomes for individuals, families, communities and the primary and community healthcare sector.

### WHAT ARE THE KEY FUNCTIONS OF A PRIMARY CARE RN?

#### Screening and Assessment

- RNs in primary care apply best practice guidance to conduct screening and holistic health assessments (emotional, physical, spiritual and social determinants) that are focused or comprehensive according to identified needs, and to support monitoring and follow up.
  - RNs utilize critical/analytical thinking to incorporate screening/assessment findings along with laboratory and diagnostic test results in the development of a nursing diagnosis and comprehensive care plan.
  - RNs triage clients based on screening/assessment findings to support timely referral to health and social service providers and appropriate community resources.
- Screening/assessment can be conducted in person, over the phone or via virtual methods.

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RNs also conduct community health assessments to determine community needs, strengths, risks and barriers to care; and to establish priorities for collaborative interventions to support the health and well-being of priority populations and the broader community over time.

### Care Planning and Intervention

- RNs contribute their unique knowledge, skills and expertise to the health journeys of their patients, clients, residents, and communities. This also includes health education and literacy, and sexual health;
- RNs work in partnership/consultation with physicians, nurse practitioners, and other providers in interdisciplinary teams to develop and implement comprehensive care plans; and engage people (and families where applicable) in the care planning process using a shared decision making model to ensure that it addresses patient health care needs and goals, and supports self-management wherever possible.
- RNs counsel patients in areas of health knowledge gaps and skills, e.g., symptom management; chronic disease management e.g., glucose monitoring for diabetics; medication management, wound care; rehabilitation.
- RNs support the ongoing follow up, evaluation and modification of the care plan to respond to shifting care needs.
- RNs refer to other health and social services providers and support continuity of care/ care transitions across sectors.
- RNs serve as a community resource and key contributor to community health.

### Health Promotion and Disease/Injury Prevention

- RNs collaborate with patients and the interdisciplinary care team to develop and implement health promotion, disease and injury prevention strategies/care plans at the individual level along with group/community programming e.g., smoking cessation, healthy eating, well child clinics, immunization, etc.
- RNs apply the principles of change theory/adult learning, social justice, cultural safety and humility, and nursing science to their work; and utilize motivational interviewing and brief intervention skills and health counselling to enhance knowledge and problem-solving and support positive health promoting behaviours and achievement of health goals; and primary/secondary prevention of chronic disease that can result from smoking, problematic substance use, inactivity, unhealthy eating, etc.
- RNs integrate best practice from nursing and health-related disciplines and the humanities, arts and sciences disciplines into professional practice. This includes supporting the implementation of best practices for screening and clinical prevention services as per the Lifetime Prevention Schedule, e.g., cervical, hypertension, cardiovascular disease, depression screening, etc.

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### **Quality Assurance, Evaluation and Research**

- RNs engage in advancing health care knowledge and practice expertise through the use of innovative approaches and innovation activities to improve the health care services they provide and the health and wellness of those they serve;
- RNs engage in clinical governance through the development of evidence-informed practice guidelines, clinical protocols, and health policy, both at the local level and through collaborative efforts across the province and country.
- RNs participate in gathering, interpreting, and/ or synthesizing patient data to inform continuous quality improvement in patient care in the primary and community health care sector and patient/population health outcomes. Additionally, RNs examine data trends related to population and community to inform programming and continuous quality improvement.