

RPNs and the case for full utilization

Nursing is one profession with two categories of care providers (RN and RPN). Professional standards apply equally to all registered nurses (RNs and RPNs), regardless of category of CNO registration or role responsibility.

All registered nurses (RNs or RPNs) are equally accountable as individuals for their practice, decisions and actions. Similarly, all RNs/RPNs are governed by the same scope of practice under the Nursing Act and Regulated Health Professions Act.

All RNs/RPNs are authorized to perform 3 of the 13 specific controlled acts that fall within the profession's scope of practice and all RNs/RPNs may perform procedures within the controlled acts authorized to nursing ordered by a physician, dentist, chiroprapist, RN(EC) or midwife.

All nurses:

- study from the same body of nursing knowledge
- possess knowledge relevant to their professional practice acquired through basic education and continuing learning.
- continuously enhance knowledge throughout career by pursuing continuous learning, CE and experience, and engaging in reflective practice.

RPNs study for a more focused practical foundation of knowledge of clinical practice and decision-making though.

RNs study for a greater breadth and depth of theoretical knowledge in clinical practice, decision-making, critical thinking and leadership.

All nurses are required to:

- pass the Canadian RN Exam or Practical Nurse Registration Exam or an acceptable equivalent.
- register/maintain annual registration with the CNO
- complete RPN program with 450 hours of theory / 800 hours of practice or RN program of 750 hours of theory / 1200 hours of practice .

- meet education requirements for entry to practice for either category (2 year college diploma for RPN or 4 year BScN for RN by 2005).

RPN (Previous Standard)

- 3 semesters in a CAAT (certificate) program.

Since 2005

- 4 semesters in a CAAT (diploma).

RN (Previous Standard)

- 6 semesters in a CAAT (diploma) or 4 year University degree program.

Since 2005

- 4 year university degree program.

RPNs are

- individually accountable for their professional practice and actions.
- able to work independently and collaboratively with other health care team members.
- responsible for individual competence and continuing skill knowledge and judgment.
- They also have the same legislative scope of practice for nursing as a RN and practice autonomously under the auspices of the Regulated Health Professions Act.

RPNs are challenged today by:

- increasing complexity of care and new practice opportunities.
- changing skill mix and entry-to-practice competencies.
- declining FT positions and increased workload due to systemic under-funding.
- balancing continuous learning and professional development opportunities and obligations.
- a lack of awareness or appreciation of scope of practice in work units and institutions.

Moving Towards Full Utilization

Criteria for Utilization

- complexity of client condition including 'intensity.'
- acuity, complexity and predictability of outcome for the client.
- knowledge, skill and judgment required to assess for and deal with risks involved.
- resources (human and other) available for collaboration and/or assistance and appreciation of limits of scope of practice.
- level of expertise (continuing education; length of experience).

Obstacles to Full Utilization

- lack of awareness of evolving scope of practice and competencies.
- lack of supportive organizational culture to re-assess scope of practice and utilization.
- resistance to collaborative and interdisciplinary care delivery models.
- lack of distinct professional identity - overshadowed by RN.

Steps to Full Utilization

GOAL: to ensure a sustainable, collaborative and healthy work environment by increasing satisfaction with work and practice environment based on evidence and best practices.

- implement full utilization of RPN within scope of practice.
- increase professional development opportunities including Nursing Education Initiative (NEI) funding.
- promote life-long learning and improved access to educational opportunities.

- ensure representation of RPNs within health organizational structures.
- offer tuition programs, mentorship and other opportunities for professional development.

RPNs share 209 competencies with other registered nurses of the 304 competencies required for entry-level practitioners in 2001. (Source: 1997 National Nursing Competency Report)

RPNs share 140 of competencies related to level of autonomy with RNs; with 37 competencies practiced independently and 73 practiced in consultation with RNs. (Source: 1997 National Nursing Competency Report)

RPNs provide care in complex clinical situations in a variety of practical areas. (CNO: Entry to Practice Competencies for Ontario Registered Practical Nurses, September 1999)

Practice Expectations:

RPN

- autonomy in nursing care influenced by complexity of client's condition.
- works independently and in collaboration with other health team members to meet complex client needs.
- same authority as RN in legislation to perform controlled acts when ordered.

RN

- autonomously meets nursing needs of clients regardless of complexity of condition.
- co-ordinates care, shares expertise and demonstrating leadership in collaboration with other care providers.
- additional authority to initiate under specific circumstances and may delegate controlled acts to others.