

# Collaborative Emergency Centres in Saskatchewan

## The Role of the Registered Nurse

### What is the role of the RN in Collaborative Emergency Centres (CECs) in Saskatchewan?

The SRNA supports the vision of CECs for the people of Saskatchewan to obtain accessible, consistent and safe emergency care when community physician emergency services are not available.

More information about CECs can be found on the Government of Saskatchewan website <http://www.health.gov.sk.ca/nova-scotia-cecs>.

The SRNA is committed to providing competent, caring, knowledge-based registered nursing for the people of Saskatchewan. SRNA recognizes the contribution RNs provide as collaborative health care team members in the provision of Primary Health Care (PHC) and emergency care services in areas of the province where there is a need for the CEC model.

The College of Registered Nurses of Nova Scotia (CRNNS) has been working with RNs as they transition into a CEC model. For the development of this document, the SRNA consulted CRNNS to ensure all information and requirements are

based on best practices. To ensure RNs deliver safe care and that there is consistency in service delivery of the CECs, the SRNA supports the following requirements be established prior to a CEC site implementation:

- All resources for providing safe care within the 24-hour period are in place prior to opening a CEC. This includes: sufficient numbers of appropriately educated RNs, paramedics and medical oversight physicians for the CEC; and sufficient community and ER physicians and/or RN(NP)s to work in the ER and PHC clinic during hours of operation.
- Clear roles and responsibilities are defined for those who are providing care and are outlined and understood by the RNs, paramedics and medical oversight physicians.
- RN managers, who are familiar with the CEC, are available at all times to support the RN.
- RNs receive adequate education to understand the competencies

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- of the paramedics they will be working with (CRNNS, 2012).
- Work environment resources, including human, material and environmental, are such that the RN can meet practice standards and competencies. This includes appropriate staff coverage for the RN should they be assigned other duties while working in a CEC. This includes if/when necessary, the ability for the RN to call in additional staff for coverage of either the CEC or the inpatient unit.
- RNs receive appropriate education including: ACLS, PALS, TNCC, CTAS [based on Nova Scotia

Emergency Care Standards (Ross, 2010)] and other education the individual RN identifies is required to maintain their competencies to provide safe and competent care when working in a CEC model.

- RNs receive training to ensure they have optimal communication skills for working with team members (i.e., Situation Background Assessment Recommendations, SBAR).
- Contingency plans are established to ensure adequate staffing levels to provide the expected level of care of a CEC. For example, policy is in place to address emergency room closure if any of the CEC team is unavailable (medical oversight physician, RN or paramedic).
- Employer policies and procedures are in place to support the RN in their role in the CEC.
- RNs have a clear understanding of their roles and responsibilities when working with evidence-based medical protocols or directives.
- RNs have a clear understanding of which treatment activities require further involvement from a physician and ensure they have

the training and competence to perform these activities.

- Clear roles and responsibilities are established for the RN when assigning care to other health care team members as part of coordination of care.
- Extra RN resources may be required during the early phase of implementation to support the team members in adjusting to their new roles.

As CECs are developed in Saskatchewan, the above information will be updated.

The SRNA provides support to the RNs to ensure they can provide safe, competent care in their role in this new practice setting. Nursing practice advisors are available face-to-face, by telephone, or email for RN or employer consultation.

For current information please contact:

Terri Belcourt, RN, Nursing Advisor, Practice [tbelcourt@srna.org](mailto:tbelcourt@srna.org)

Barb Fitz-Gerald, RN, Nursing Advisor, Practice [bfitz-gerald@srna.org](mailto:bfitz-gerald@srna.org)

## References

- College of Registered Nurses of Nova Scotia. (2012). Registered nurses working in collaborative emergency centres. Retrieved from <http://www.crnns.ca/documents/CRNNSCollaborativeEmergencyCentresQandA.pdf>
- Ross, J. (2010). Nova Scotia emergency care standards. Retrieved from <http://www.gov.ns.ca/DHW/publications/Emergency-Care-Standards.pdf>

## Saskatchewan RNs Volunteer for the NCLEX Item Development Program!

Canadian RNs can now volunteer for the NCLEX Item Development Program. The National Council of State Boards of Nursing (NCSBN) develops the NCLEX-RN used to measure the competencies needed to perform safely and effectively as an entry-level RN. An important step in this process is the NCLEX Item Development program, a key component in creating and maintaining high quality examination items. The development of the NCLEX examination depends on qualified RN volunteers from all jurisdictions that use the NCLEX for entry to practice. Canadian RNs now have the opportunity to become part of this process, and contribute to the NCLEX-RN exam bank prior to the exam being offered in Canada in January 2015.

By volunteering, you may be selected to participate as an item writer (RN with Master's degree) or item reviewer (practising RNs).

### Some of the benefits of volunteering are:

- Opportunity to contribute to the continued excellence in the nursing profession
- International networking
- Gaining experience and skill in test development

To volunteer, please visit the Exam Volunteer Opportunities page at <https://www.ncsbn.org/1227.htm>