

PART 5

role profiles

Three distinct LPN and care aide roles are described in this section. One profile describes the job of an LPN in a fast track emergency unit at a regional acute care facility. Another presents the role of an LPN providing foot care to residents at three continuing care facilities in a northern community. The third applies to a care aide position in a psychogeriatric assessment unit. In addition to the description of duties and responsibilities for each position, the reports include a description of the unit, the patient population, staffing levels and the education and related qualifications for the position.

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role profiles

This section profiles three examples of some of the unique and emerging roles for LPNs and care aides in B.C. These role profiles provide detailed information on how the skills of some LPNs and care aides are being used in three distinct settings.

Employers, workers, educators and the College of Licenced Practical Nurses of B.C. were canvassed for ideas regarding such roles.

In considering which roles to highlight, the joint committee that oversaw this project determined that it would be most beneficial to the industry to profile roles that have the broadest potential application. The committee did not select roles that, although unique or interesting, were unlikely to be adapted to other sites due to fact that the role was related to a health care service not widely provided (e.g. burn units).

Consequently, the joint committee identified two LPN roles and one care aide role for profiling:

- an LPN in the fast track emergency unit at Matsqui-Sumas-Abbotsford General Hospital, a regional acute care facility
- an LPN providing foot care to residents at Rotary Manor, Peace River Haven and Pouce Coupe Care Home in the northern community of Dawson Creek, and
- a care aide working as a Total Care Worker in a nursing team at Vancouver General Hospital's psychogeriatric assessment unit.

In addition to the description of duties and responsibilities for each position, the reports include a job classification for the position, a description of the unit, patient population and staffing levels, and the education and related qualifications for the position.

fast track LPN

CLASSIFICATION PC 8

Facility

Matsqui-Sumas-Abbotsford General Hospital (MSA) is an acute and extended care facility in Abbotsford. Following an increase in the volume and acuity of patients seen in emergency, the emergency department manager reorganized the department in 1999, including adding a fast track unit. Up to 50 patients are now treated in the unit's seven beds between 9 a.m. and midnight daily.

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Patient Profile

Patients arriving at emergency are assessed by the registered nurse at triage and referred to either the emergency department or the fast track unit. This triage assessment is based on whether a patient's condition will be affected by a wait of up to six hours to see a physician. Once in the fast track unit, patients are generally seen on a first come, first served basis.

Patients of all ages are treated for a variety of non-urgent and semi-urgent conditions, such as earaches, lacerations for suturing, sprains and antibiotic intravenous therapy.

Role

The role of the fast track LPN includes:

- greeting patients and providing comfort
- assisting the RN with assessment, including taking vital signs and patient history
- providing patient care, such as simple dressings and catheterizations
- assisting physicians in such activities as applying casts and suturing
- ordering special supplies for the fast track unit, as well as maintaining supplies in the emergency department
- delivering specimens to labs
- completing requisition forms and taking data from the computer, and
- transporting patients to other treatment areas.

The fast track LPNs enjoy working collaboratively with other professionals – both RNs and MDs. The LPNs have a high degree of job satisfaction as they develop and assert themselves in this new role.

Staffing

Each shift is staffed with one LPN and one RN. LPNs works 7.2 hours, from 9 a.m. to 4:47 p.m. or 4:48 p.m. to 12:30 a.m. There are two full time and two part time LPNs. RNs rotate throughout the emergency department, while the LPNs are assigned to the fast track unit.

Continuing Education

The hospital provides in-service education on topics such as Code White – the hospital's emergency response protocol – and the Waste Hazardous Information Management System. LPNs have attended educational courses, such as CPR, outside of the hospital.

Information Contact

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community foot care LPN

CLASSIFICATION PC 8

Facility

The LPN works in three continuing care facilities in Dawson Creek: Rotary Manor, an intermediate care facility with 45 residents; Peace River Haven, an intermediate care facility with 60 residents; and Pouce Coupe Care Home, an extended care facility with 55 residents.

Services Provided

Foot care is provided to the residents of Rotary Manor, Peace River Haven, and Pouce Coupe Care Home.

Patient Profile

Residents are mainly elderly people requiring assistance with the activities of daily living. Some younger adults with disabilities also live in the three facilities. For most, these care homes are their permanent residence, though some are on short stays as part of a respite program.

Education

The LPN holds a license from the College of LPNs. This position was created in December 1999. The job description was not available at the time of the interview.

In the past, this practical nurse worked as a care aide at one facility where she provided foot care as part her job as a bath aide. In addition to her LPN education she completed a Victorian Order of Nurses program on foot care in Edmonton, Alberta. She had previously attended two workshops on foot care, which were funded by her employer. She also upgraded her skills in pharmacology in 1995 on her own initiative.

Role

The LPN conducts an initial foot assessment on residents in the three facilities. In the future, she will do the foot assessment on admission. Staff members may also refer clients to her.

After the assessment of a resident's feet, the LPN develops a care plan that might include foot soaks, foot massage, care of calluses and corns and skin care after treatments. She contacts the RN/director of care with any problems she finds. The director of care of Rotary Manor oversees the foot care program.

The employer purchased the tools the LPN needs for her practice, and also pays for her mileage to travel to the sites.

It is anticipated that the LPN will expand her practice to include changing dressings and performing catheterizations. The potential exists to offer this foot care service to other health care facilities in the area.

General Comments

This is the first LPN position in these facilities. The position was created with funds from the Ministry of Health as part of the 1999/2000 "\$5 million" initiative for increased LPN and care aide staffing. When the provincial government announced funding to upgrade practical nurses working as care aides, the employer convened committees in the facilities, including RNs and representatives of the B.C. Nurses' Union, the employer, and the Hospital Employees' Union. The committee met many times to discuss how to use the funds, and all three facilities were invited to submit ideas. The proposal by Rotary Manor for an LPN to provide foot care was selected for funding. The provincial government initiative covered the costs associated with the conversion of the care aide position to an LPN position.

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total care worker

CLASSIFICATION ACTIVITY WORKER 11 PC9 (8-2)

Facility

The STAT Centre (Short Term Assessment and Treatment) at Vancouver General Hospital is a psychogeriatric assessment unit in an acute care facility. This unit has both an in-patient and a day hospital program. As VGH is a teaching hospital, students from many disciplines use this unit as a clinic placement. The STAT Centre is a regional referral centre with an educational and research mandate, in addition to the care provided to patients admitted to the unit.

In the 1980s, the federal Department of Veterans Affairs provided a grant for a day hospital to accommodate war veterans who had both a medical and a behavioural problem. In 1985, in-patient beds were added to the STAT Centre because other units were reluctant to admit such patients. The centre is now open to the general public.

Services at the STAT Centre include:

- 17 beds for in-patients
- a day hospital program with 15 spaces per day
- medical assessments
- multi-disciplinary assessments, and
- short term treatments.

Patient Profile

Patients are at least 65 years old, with an average age of 83. Patients have five to six chronic medical problems, plus cognitive impairment that might include dementia or pseudo-dementia (depression or delirium). People are admitted so that changes in their cognitive status can be assessed. Work over the four to eight week admission is focused on rehabilitation. In recent years, more clients have demonstrated aggressive behaviour.

Referral Process

The primary referral source has been and remains the family practitioner. When the STAT unit opened in 1980, staff in continuing care began to refer their clients here, and STAT continues to receive referrals from workers in this sector. Community geriatric mental health services treat individuals who can live in their homes and respond to care. If community geriatric mental health services cannot support people in their homes, they are referred to the STAT Centre.

Qualifications

The unit's policy of hiring staff with a wide range of education and experience allows it to offer a range of services. Requirements in the job description include grade 12, a

recognized care aide certificate, and training or experience in a therapeutic recreation program or equivalent education and experience. The preference is to hire care aides with rehabilitation skills and adult learning principles. For example, one total care worker has care aide experience and a resident care attendant certificate, a class four driving license, experience as a hairdresser and as an activity worker at an extended care unit. Several total care workers were trained in other countries, but their professional qualifications are not recognized in Canada.

Role

A team of two provides the direct patient care – a registered nurse and a total care worker. The TCW provides much of the personal care and helps with activities of daily living, and is thus able to recognize changes in a patient's mood, affect or functional ability. When a patient is admitted, the TCW marks the personal clothing they will wear on the unit, and orients the patient to the unit, including accompanying them to the dining room to introduce them to other patients. Total care workers help with patient meals as needed and provide morning care, including baths and hair washing as needed. They make beds, do laundry and clean equipment. On weekends, a TCW might run a group activity such as an exercise or craft program.

Two teams attend medical rounds with each physician. Rounds include members of all disciplines: social workers, physiotherapists, occupational therapists, dieticians, nurses and psychiatrists. Both members of the nursing team contribute to a report to the next shift.

Total care workers are part of the interdisciplinary team that assesses and discusses future options for clients. This aspect of a team's work is done mainly through a family conference that takes place when the assessment is complete, about three to four weeks after admission. The purpose of the conference is to discuss assessment, diagnosis and options for the patient when discharged. The family and the patient are usually at this conference, along with members of the assessment team: a physician, social worker, physiotherapist, occupational therapist and dietician, registered nurses and the total care worker.

This total care worker role is an integrated job under the collective agreement and is paid at the higher rate of PC 9 – \$18.97 an hour.

Staffing

Weekdays A unit clerk works from 8 a.m. to 4 p.m.
Three RNs work with two TCWs from 7 a.m. to 7 p.m.
A third TCW works from 6 p.m. to 10 p.m.
Two RNs work from 7 p.m. to 7 a.m.

Weekends There is no unit clerk.

Three RNs work with one TCW from 7 a.m. to 7 p.m.

A second TCW works from 10 a.m. to 10 p.m.

Two RNs work from 7 p.m. to 7 a.m.

Continuing Education

There are several opportunities for staff continuing education. There is a weekly, one-hour in-service education for the entire hospital. When the topic is of interest and useful to their jobs, staff can ask to take their lunch and attend. The STAT Centre has a policy that supports staff to attend an educational day. There is some financial support for programs outside the hospital to cover registration fees and, occasionally, wages. Funding for this continuing education comes from two sources: the hospital budget and donations to the unit.

Recommendations to Facilities Considering This Role

1. Examine the type of service your clients need and hire staff to provide those services.
2. Try to hire people with recreational education.
3. Be flexible on the mix of experience and education.
4. Try to keep a generational mix of staff, as geriatric clients respond best to people two generations younger.
5. Given that people with dementia and memory problems may already misinterpret reality, and that staff cannot look after people if they cannot communicate with them, the hospital has instituted an English language requirement. Approximately half of applicants for total care worker positions do not pass the English test.

General Comment

There is a low staff turnover on this unit.

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