

Practice Guideline

Working in Different Roles

Introduction

Nurses¹ are accountable for their own conduct and practice. Accountability comes with registration with the College of Nurses of Ontario (CNO), and remains an obligation whether an individual holds single or dual registration or is working as an unregulated care provider (UCP).

Dual registration refers to nurses who hold registration in more than one category. For example, a nurse may be registered as a Registered Practical Nurse (RPN) and as a Registered Nurse (RN). It is important for a nurse holding dual registration to understand her/his accountability when working in different roles. Dual registration permits a nurse to use both titles but does not change accountability. Dual registrants are accountable for the body of knowledge of both categories and for knowledge of the distinct role of each category.

Nurses do not always need to possess dual registration to work in other positions. For example, an RN does not need to be registered with CNO as an RPN to work in an RPN role, but without registration cannot use the title RPN. However, a nurse is still **accountable** as an RN while employed in an RPN role.

Examples of accountability for nurses working in different roles are as follows:

- An RN working in an RPN or UCP role is still accountable as an RN.
- An RPN working in a UCP role is still accountable as an RPN.

Accountability when working in another category or as a UCP

When an RN accepts a position as an RPN, or when an RN or RPN accepts a position as a UCP,

the nurse is expected to fulfil only the requirements of the position's job description. For example, if the job description does not include administration of medications, CNO does not expect the nurse to administer medications even though she/he may be competent to do so.

At the same time, a nurse's primary accountability is to the client, not to the employer. For example, an RN remains accountable as an RN even when employed as an RPN. This means that an RN who is employed as an RPN must balance knowledge of the role with an assessment of when her/his RN skills must be employed in the interest of client safety. When an RN works in an RPN job category, she/he is responsible for using RPN knowledge, skills and judgment. If the client's condition becomes complex, and there are no other RNs available, an RN working as an RPN is expected to function as an RN until another RN becomes available.

The following describes the accountability of an RN or RPN working in a UCP role.

Stable conditions: When the client's health status appears predictable, a nurse working as a UCP is accountable for:

- knowing and performing within the limits of the UCP role; and
- recognizing when the client's condition deviates from the norm.

Initial signs of a problem: In the event that symptoms present that are beyond the expectations of a UCP role, a nurse working as a UCP is accountable for:

- stepping out of the UCP role to identify and assess the problem as a nurse;
- ensuring the client receives appropriate care — whether by communicating the information to a

¹ In this document, *nurse* refers to Registered Nurse (RN), Registered Practical Nurse (RPN) and Nurse Practitioner (NP).

nurse or by practising as an RN or RPN if another nurse is unavailable within an appropriate period of time;

- practising as an RN or RPN until a member practising at the RN or RPN level is available; and
- assessing why she/he has stepped out of the UCP role.

Emergency situations: In the event of an emergency situation, the nurse working as a UCP will immediately function at the RN, NP or RPN level.

The member is accountable for:

- stepping out of the UCP role to identify, assess and respond to the emergency at the level of her/his RN, NP or RPN preparation;
- practising at the RN, NP or RPN level until a member practising at the RN, NP or RPN level is available; and
- assessing why she/he has stepped out of the UCP role.

For more information

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