When registered nurses (RNs) have been assigned to float to another clinical area, CRNNS consults with these nurses to help guide them in their practice. This practice guideline applies to registered nurses when they have to work in an unfamiliar area or when redeployed in an emergency situation or disaster.

When assigned to float to another area, it is important to consider the following points:

- Typically, RNs are hired by an organization and not a specific unit. As a result, RNs have a contractual obligation to provide care to clients within the organization; this is not limited to the unit where they may have worked.

- The Standards of Practice for Registered Nurses (2012) apply to nurses in all practice settings.

- Registered nurses are accountable to meet their standards of practice by provide safe, competent, compassionate care at all times regardless of practice setting (RN Act, 2006).

- Registered nurses must not work outside of their scope of practice or independently engage in client care if they do not have the competencies to do so (Standards of Practice for Registered Nurses, 2012; RN Act, 2006).

See the appendix for the standards that apply to the registered nurse who has been asked to provide care on another clinical area.

### Meeting the Standards in an Unfamiliar Environment

As an RN, your employer is accountable for safe staffing levels and they sometimes have no alternative but to ask RNs to work on another nursing unit. Many RNs feel uncomfortable in this situation because they are afraid that they are not competent because it is an unfamiliar patient population and because they have had no orientation to the routines of the unit.

While it is true that RNs are not obligated to provide care independently beyond their level of competence, every registered nurse has basic entry-level competencies that are to be applied in any practice setting. Rather than refusing an assignment related to perceived lack of competence, an RN should negotiate the work assignment with her/his manager as well as the staff on the unit they are floating to. This should be based on the registered nurse’s individual scope of practice and competencies.

Registered nurses have an obligation to inform employers when they are asked to deliver care beyond their level of competence or individual scope of nursing practice. Registered nurses must recognize when they have passed the limits of their knowledge, skills and/or judgment and to know when and where to request assistance or additional education or training.

The refusal of an assignment in an unfamiliar practice setting is only justified when the risk of harm to a client is greater by accepting the assignment than by refusing it (CRNBC, 2013). If an RN refuses an assignment for any reason, s/he must inform her/his employer of the reason for refusal, document why the assignment was refused, and provide the employer with enough time to find a suitable replacement.
WHEN WORKING IN AN UNFAMILIAR CLINICAL AREA
CRNNS recommends following these steps:

- Ask the charge nurse or an experienced nurse for an orientation to the unit
- Meet with the charge nurse to discuss your assignment. Inform the charge nurse of the care that you are competent to perform and care that you do not have the knowledge or skill to perform. You should then collaboratively develop a plan for client care for that shift.
- Request an experienced nurse to be available to you for the shift as a resource when you have questions or require assistance.
- Establish a plan for regular communication with the charge nurse/buddy to tell them of any changes in clients care needs during the shift.

WHEN AN RN WHO IS UNFAMILIAR WITH YOUR CLINICAL AREA COMES TO WORK ON THE UNIT
CRNNS recommends the following:

- Greet the nurse and provide her/him with a tour and general orientation to the unit, act as/or assign another RN as a resource for the nurse
- Check with the nurse regularly through the shift to see if there are any questions and to check on the status of the clients to whom she/he is assigned
- Work with your manager to develop an orientation resource for nurses who are not familiar with your area

**Employer Accountabilities**

Employers are ultimately responsible for adequate staffing, to ensure available resources and competencies of personnel are used efficiently and to support nurses to work within their level of competence (CRNBC, 2013). Registered nurse managers and administrators are accountable to meet specific standards of practice to ensure appropriate staffing is in place to enable registered nurses to meet their standards of practice to provide safe client care. The following indicators, from the Standards of Practice of Registered Nurses (2012), apply to nurse managers/administrators in this situation:

- 1.12 promotes quality practice environments that support best practices and the ability of registered nurses to practice safely, effectively, and ethically.
- 2.13 promotes practice environments that contribute to the ongoing demonstration and evaluation of competencies
- 4.15 seeks to ensure that available resources and competencies of members of the healthcare team are used efficiently and effectively
- 5.8 facilitates staff to work within and comply with their professional, ethical and legal obligations.

Employers are accountable to provide:

- Organizational support during a staffing crisis
- Consider the competencies and qualifications of nurses when making client assignments
- Policies, procedures, and/or guidelines to assist employees when they are asked to provide care on an unfamiliar unit
- Appropriate orientation, education/training for nurses who are asked to work in unfamiliar areas
Additional Resources

- Resolving Professional Practice Issues: A Toolkit for Registered Nurses
- Duty to Provide Care: Patient Abandonment
- Duty to Provide Care: Emergency Situations

Appendix

STANDARD 1: RESPONSIBILITY AND ACCOUNTABILITY
Registered nurses are responsible and accountable to practise safely, compassionately, competently and ethically in accordance with their legislated and individual scopes of practice.

STANDARD 2: KNOWLEDGE-BASED PRACTICE AND COMPETENCE
Registered nurses continuously attain, maintain and demonstrate competence (knowledge, skill and judgment) relevant to their individual scope of practice.

STANDARD 5: INDIVIDUAL SELF-REGULATION
In addition to the role of the regulator to self-regulate the registered nursing profession, individual registered nurses are accountable to regulate themselves.

- 5.5: attempts to resolve professional practice issues.
- 5.7: complies with employer and/or agency/facility policies that are not in conflict with the RN Act, Regulations, Code of Ethics and Standards of Practice for Registered Nurses.