

Standards of Clinical Nursing Practice and Role Delineation Statements

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Society of Gastroenterology Nurses and Associates, Inc.

STANDARDS AND GUIDLINES

Standards of Clinical Nursing Practice and Role Delineations

Disclaimer

The Society of Gastroenterology Nurses and Associates, Inc. presents this guideline for use in developing institutional policies, procedures, and/or protocols. Information contained in this guideline is based on published data and current practice.

The Society of Gastroenterology Nurses and Associates, Inc. assumes no responsibility for the practices or recommendations of any member or other practitioner, or for the policies and practices of any practice setting. The nurse and associate function within the limits of state licensure, state nurse practice act, and institutional policy.

Preface

Standards are authoritative statements used by the nursing profession to describe the responsibilities for which practitioners are accountable. Standards of Clinical Nursing Practice are divided into Standards of Practice and Standards of Professional Performance. These standards, based on the American Nurses Association (ANA) format, have been structured to be inclusive of all levels of nursing care providers in a variety of settings and describe the collaborative nature of gastroenterology, hepatology, and endoscopy practice. A variety of personnel collaborate to ensure optimal patient outcomes for diagnostic and therapeutic procedures, and for purposes of health maintenance, restoration, or palliation.

Gastroenterology nurses and associates perform some tasks independently. Some tasks depend upon collaboration with others, and some tasks depend on the performance or judgment of another member of the health care team. These components will differ significantly depending upon the nurse practice act in each state, professional or vocational licensure, educational background, and place of employment.

This document provides examples for implementation of the Standards of Practice as they relate to the roles of the four levels of practitioners in the field: advanced practice nurses, registered nurses, licensed practical/vocational nurses, and assistive personnel. Role delineations have been defined by the Society of Gastroenterology Nurses and Associates, Inc. (SGNA) and are included in this document. Gastroenterology nurses and associates should strive to meet each of the Standards of Practice either independently, collaboratively, or dependently. The Standards of Practice are valid in all health care settings.

The Standards of Professional Performance are directed toward the professional nurse (Registered Nurse). Licensed Practical/Vocational Nurses are held accountable to the Nursing Practice Standards for the Licensed Practical/Vocational Nurse. RNs, LPNs/LVNs and Unlicensed Assistive Personnel are encouraged to participate according to their institution's guidelines for personal development.

Standards of Clinical Nursing Practice & Role Delineation Statements

Definition of Terms

Gastroenterology Nurse refers to practitioners (APRN,RN,LPN/LVN) in gastroenterology, hepatology, or endoscopy.

GI Registered Nurse refers to Advanced Practice Registered Nurse (APRN) and Registered Nurse (RN).

Measurement criteria are key indicators of competent practice for each standard. For a standard to be met, all the listed measurement criteria must be met.

Standards of Practice describe a competent level of clinical nursing practice.

Standards of Professional Performance describe a competent level of behavior in the professional role.

Standards of Professional Performance for the Gastroenterology and/or Endoscopy Setting

Standard I: QUALITY OF PRACTICE

Standard: The Gastroenterology Nurse systematically enhances the quality and effectiveness of nursing practice.

Rationale: The systematic approach uses specific steps to promote and continuously improve patient care quality.

Measurement Criteria:

1. Participates in quality-of-care activities as appropriate to the individual's position, education and practice environment. These activities may include:
 - a. identifying aspects of care important for quality monitoring (e.g., timely discharge);
 - b. identifying indicators used to monitor quality and effectiveness of nursing care (e.g., use of reversal agents, return to baseline status);
 - c. collecting data to monitor quality and effectiveness of nursing care;
 - d. analyzing quality data to identify opportunities to improve care;
 - e. formulating recommendations to improve nursing practice or patient outcomes;
 - f. implementing activities to enhance the quality of nursing care;
 - g. participating interdisciplinary teams that evaluate clinical practice or health care; and/or
 - h. developing policies and procedures to improve quality of care.
2. Utilizes the results of quality-of-care activities to initiate changes in nursing practice.
3. Identifies and implements precepts of palliative care when indicated.

Standard II: PROFESSIONAL PRACTICE EVALUATION

Standard: The Gastroenterology Nurse evaluates his/her own nursing practice in relation to professional practice standards, guidelines, and relevant statutes and regulations.

Rationale: The Gastroenterology and/or Endoscopy Nurse is responsible for self-evaluation as well as soliciting constructive feedback from health care team members.

Measurement Criteria:

1. Engages in performance appraisal on a regular basis, identifying areas of strength as well as areas for professional practice development.
2. Seeks constructive feedback regarding his/her own practice.
3. Takes action to achieve goals identified during performance appraisal.

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4. Participates in peer review as appropriate.
5. Applies professional standards of care and guidelines for practice as a benchmark for his/her personal performance.
6. Demonstrates age-appropriate competency in a culturally and ethnically sensitive manner.

Standard III: EDUCATION

Standard: The Gastroenterology Nurse acquires and maintains current knowledge and competency which reflect current nursing practice.

Rationale: The Gastroenterology Nurse is primarily responsible for his/her own ongoing educational and professional development.

Measurement Criteria:

1. Completes an orientation based on individual learning needs that have been identified for the performance description and practice setting in which the individual will perform.
2. Identifies learning needs based on performance behaviors that include critical thinking and interpersonal and technical skills.
3. Demonstrates accountability for maintaining competency, and participates in educational activities relevant to professional issues and trends in gastroenterology nursing practice.

Standard IV: COLLEGIALITY

Standard: The Gastroenterology Nurse contributes to the professional development of peers, colleagues and others.

Rationale: The Gastroenterology Nurse has an obligation to support and advance the specialty and the profession by sharing knowledge and expertise. The nurse has the opportunity to positively influence peers, colleagues, and others regarding health care issues, education, and practice.

Measurement Criteria:

1. Shares knowledge and skills with colleagues and others. This may be accomplished by a variety of methods, which may include:
 - a. serving as a resource;
 - b. mentoring;
 - c. serving as a preceptor or instructor;
 - d. providing inservices, seminars, programs, or workshops;
 - e. acting as a role model in the clinical setting;
 - f. contributing to professional publications; and/or
 - g. participating in professional organizations.

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2. Provides peers with constructive feedback regarding their practice.
3. Contributes to an environment that is conducive to clinical education of nursing students as appropriate.
4. Utilizes appropriate interpersonal communication techniques to avoid defensive responses and resistance to changing practice.
5. Assists colleagues in building or maintaining the competencies necessary to provide safe, effective care to patients.

Standard V: ETHICS

Standard: The Gastroenterology Nurse's integrates ethical provisions in all areas of practice.

Rationale: Care and service must be delivered without infringing upon basic human rights. The Gastroenterology Nurse is accountable to patients to safeguard these rights while providing appropriate nursing care.

Measurement Criteria:

1. Utilizes the *Code for Nurses with Interpretive Statements* (ANA, 2001) to guide practice.
2. Maintains patient confidentiality.
3. Serves as a patient advocate, assisting patients with self-advocacy skills.
4. Delivers care in a non-judgmental and non-discriminatory manner that is sensitive to diversity, including a patient's culture, race, religion, age, gender, sexual preference, ethnicity and personal preference.
5. Delivers care in a manner which preserves and protects patient autonomy, dignity, and rights.
6. Seeks available resources to help formulate ethical decisions.
7. Reports illegal, incompetent, and impaired practices.

Standard VI: COLLABORATION

Standard: The Gastroenterology Nurse collaborates with the patient, significant others, and health care providers in providing patient care.

Rationale: Comprehensive continuity of service requires coordination and collaboration of health care delivery among all providers.

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Measurement Criteria:

1. Communicates with the patient, significant others, and health care providers regarding patient care and the nurse's role in the provision of care.
2. Collaborates with other members of the health care team for patient care as needed.
3. Makes referrals, including provisions for continuity of care, as needed.

Standard VII: RESEARCH

Standard: The Gastroenterology Nurse integrates the findings of peer-reviewed, published scientific research in practice, and seeks opportunities to participate in research activities.

Rationale: Application of research findings expands the nurse's knowledge base and leads to improvements in practice and patient outcomes.

Measurement Criteria:

1. Utilizes interventions substantiated by valid, scientific research as appropriate to the individual's position, education, and practice environment.
2. Participates in research activities as appropriate to the individual's position, education, and practice environment, which may include:
 - a. identifying clinical problems suitable for nursing research;
 - b. participating in data collection;
 - c. participating in a unit, organization, or community research committee or program;
 - d. sharing research activities with others;
 - e. conducting research;
 - f. reading and critiquing research for application to practice; and/or
 - g. using knowledge gained from research findings in the development and revision of policies and procedures.

Standard VIII: RESOURCE UTILIZATION
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Standard: The Gastroenterology Nurse considers factors related to safety, efficacy, and cost in planning and delivering patient care.

Rationale: Human and material resources in the gastroenterology/endoscopy setting are costly and sometimes scarce.

Measurement Criteria:

1. Evaluates factors related to safety, effectiveness, and cost when two or more practice options would result in the same expected patient outcome.
2. Assigns tasks or delegates care based on the needs of the patient and the knowledge and

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competence of the provider selected.

3. Assists the patient and significant others in identifying and securing appropriate services available to address health-related needs.

Standards of Practice for the Gastroenterology and/or Endoscopy Setting

Standard I: ASSESSMENT

Standard: The GI Registered Nurse is accountable for collecting comprehensive data pertinent to the patient's health or situation.

Rationale: Assessment by the registered nurse is essential to formulate a nursing diagnosis, create a plan of care, and make sound clinical judgments. Appropriate elements of data collection may be delegated to other members of the health care team.

Measurement Criteria:

1. Prioritizes data collection by the patient's immediate condition or needs and the relationship to the proposed intervention.
2. Collects pertinent data using appropriate assessment techniques.
 - a. The nurse obtains data by interview, examination, observation, and review of health records.
 - b. The nurse obtains data related to age-appropriate assessment and needs.
 - c. Data include, but are not limited to:
 - 1) Perceptions and expectations related to health care.
 - 2) Function and status of significance to the gastroenterology/endoscopy patient, such as: airway patency, body image/need for privacy, current level of comfort or pain, physical limitations, communication barriers, elimination patterns, nutrition and hydration status, safety measures which may be needed, self-care deficits, skin integrity, color/turgor, venous access, and or the ability to swallow.
 - 3) Knowledge of health maintenance and practice of health promotion and disease prevention activities.
 - 4) Educational needs/developmental level.
 - 5) Previous access to and utilization of the health care systems.
 - 6) Current diagnosis(es), medications and treatment(s).
 - 7) Environmental, occupational, recreational, psychosocial, cultural and spiritual information.
 - 8) Past medical history.
 - 9) Review of body systems.
3. Collects data in a systematic and ongoing process.
4. Involves the patient, family, significant others, health care providers, and environment, if appropriate, when collecting data.
5. Ensures that relevant data are documented and retrievable.

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Standard II: DIAGNOSIS

Standard: The GI Registered Nurse analyzes the assessment data to determine the nursing diagnoses.

Rationale: The GI Registered Nurse, using independent judgment and available data, formulates the nursing diagnoses upon which interventions are based.

Measurement Criteria:

1. Derives the patient diagnosis from the patient assessment data.
Gastroenterology/endoscopy examples may include such statements as:
 - a. Potential adverse reactions related to sedation and analgesia.
 - b. Potential safety risks related to alterations in level of consciousness.
 - c. Potential for bleeding related to alterations in blood clotting mechanism.
 - d. Knowledge deficit related to newly-diagnosed gastrointestinal disorder.
2. Confirms nursing diagnoses and risk factors with the patient, family, significant other, and health care providers, when possible and appropriate.
3. Documents diagnoses and risk factors, thereby facilitating and determining expected outcomes and contributing to a plan of care.

Standard III: OUTCOME IDENTIFICATION

Standard: The Gastroenterology Nurse identifies expected outcomes unique to the patient.

Rationale: The outcomes identified for a particular patient will drive the interventions selected to achieve those outcomes.

Measurement Criteria:

1. Derives culturally appropriate, expected outcomes from the diagnoses.
2. Documents expected outcomes as measurable goals a time frame for attainment.
Examples of gastroenterology/endoscopy outcomes may include:
 - a. "The patient will meet discharge criteria within [a specified time frame]."
 - b. "The patient will successfully perform a return-demonstration of ostomy care prior to discharge."
 - c. "The patient's primary caregiver will correctly demonstrate administration of feeding via PEG/gastrostomy tube prior to discharge."
 - d. "The patient will identify the name, dose and frequency, purpose and potential side-effects of the medications prescribed."
 - e. "The patient and family will make informed choices about palliative care."
3. Formulates and prioritizes outcomes collaboratively with the patient, family, significant other, and health care providers.
4. Develops realistic and attainable outcomes that provide direction for continuity of care for the patient.

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5. Modifies expected outcomes based on the status of the patient or evaluation of the situation.

Standard IV: PLANNING

Standard: The Gastroenterology Nurse develops a plan of care that prescribes interventions to attain expected outcomes.

Rationale: Effective planning is essential for appropriate interventions.

Measurement Criteria:

1. Promotes patient progression toward the previously-identified outcomes.
2. Individualizes the plan based on gastroenterology patient's conditions or needs, considering elements such as:
 - a. the ability of the patient to tolerate preparation for diagnostic or therapeutic interventions;
 - b. the patient/significant other's readiness to learn;
 - c. the use of appropriate teaching methods;
 - d. the skills necessary to comply with preparation and post-procedure instructions;
 - e. any co-existing health conditions (e.g., TB, HIV, hepatitis); and
 - f. the patient's age and developmental level.
3. Develops the plan with the patient, family, significant others, and health care providers, when appropriate.
4. Ensures that the plan reflects current gastroenterology nursing practice and includes:
 - a. priorities for nursing action;
 - b. a logical sequence of actions to attain the outcome;
 - c. a current scientific knowledge base;
 - d. appropriate and available resource utilization;
 - e. consideration of the patient's rights and responsibilities;
 - f. a multidisciplinary approach to care; and
 - g. current trends in research.
5. Documents the plan of care using standard terminology and language.

Standard V: IMPLEMENTATION

Standard: The Gastroenterology Nurse is responsible for the implementation, either personally or by delegation, of the interventions identified in the plan of care.

Rationale: The nurse implements interventions to ensure continuity of effective care; to prevent, correct or reduce identified risks; and to return the patient to the highest level of wellness attainable.

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Measurement Criteria:

1. Utilizes evidence-based interventions which are consistent with the established plan of care, and include, for example:
 - a. Intervening as necessary to ensure patient safety.
 - b. Acting as a patient advocate.
 - c. Ensuring modesty, privacy and confidentiality.
 - d. Respecting religious and cultural differences.
2. Implements interventions which comply with existing professional practice standards and institutional policies and procedures, including, for example:
 - a. infection control;
 - b. sedation and analgesia;
 - c. radiation safety;
 - d. handling of hazardous materials; and
 - e. health teaching and promotion.
3. Implements interventions in a timely and safe manner.
4. Documents interventions in the identified plan.
5. Collaborates with nursing colleagues and others to implement the plan.

Standard VI: EVALUATION

Standard: The Gastroenterology Nurse evaluates the patient's progress toward attainment of outcomes.

Rationale: Evaluation is essential to permit the nurse to modify the plan of care and develop new interventions and patient education activities.

Measurement Criteria:

1. Conducts a systematic, ongoing, criterion-based evaluation of the outcomes, including elements such as:
 - a. response to diagnostic or therapeutic interventions;
 - b. level of knowledge about disease process; and
 - c. demonstration of appropriate self-care techniques.
2. Utilizes ongoing assessment data to revise diagnoses and plan of care as needed to achieve desirable patient outcomes.
3. Involves the patient, family, significant others, and health care providers in the evaluation process when appropriate.
4. Documents patient's results to the intervention.

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Society of Gastroenterology Nurses and Associates, Inc.

POSITION STATEMENT

Role Delineation of the Registered Nurse in a Staff Position in Gastroenterology

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Definitions

Role delineation is a description of the responsibilities and functions of a health care worker in a specific role, including the current activities common to this role.

Background

The role of the Registered Nurse has expanded with the changes in advancing technology and newly-defined patient needs. Recognizing that the role of the staff nurse in gastroenterology, hepatology and/or endoscopy is still evolving, the following is a statement intended to broadly describe the responsibilities and functions of the Registered Nurse (RN) in a staff role specializing in gastroenterology nursing. The roles that the nurse assumes depend on his/her basic nursing preparation, specialized formal or informal education, and clinical experiences. Certification as a gastroenterology registered nurse (CGRN) validates the acquisition of such skills and knowledge. RNs practice in a variety of settings, such as hospitals, private offices, ambulatory care centers, and clinics (SGNA, 2003). The RN functions within the scope of practice as defined by state nurse practice acts, job description of the employing facility, *SGNA Standards of Clinical Nursing Practice* (2005), and the American Nurses Association *Code for Nurses with Interpretive Statements* (2001).

Position

The RN is accountable for the quality of nursing care rendered to patients. The RN assumes responsibility for assessing, planning, implementing, directing, supervising, evaluating direct and indirect nursing care, and identifying outcomes for patients in the gastroenterology setting. The RN is responsible for determining the education and competency level of assistive personnel to whom he or she is delegating (ANA, 2004). The specific patient populations to whom direct care is provided include adults, adolescents, or children with gastrointestinal disorders/diseases.

The role of the RN includes, but is not limited to:

1. Establishing nursing diagnoses.
2. Providing health education and procedural teaching to patients and significant others.
3. Administering and evaluating pharmacological and other therapeutic treatment regimens.
4. Establishing priorities and making ethically-sound decisions to ensure safe patient care.

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5. Assisting the physician during diagnostic and therapeutic procedures to promote optimal patient outcomes by team collaboration.
6. Responding to emergency situations to promote optimal patient outcomes by recognizing changes in the patient's health status.
7. Performing diagnostic studies as ordered by a physician.
8. Documenting patient data to ensure continuity in the provision and coordination of patient care.
9. Managing follow-up care.
10. Collaborating with other health care professionals.
11. Acting as a resource for others.
12. Serving as a mentor for other nurses.
13. Participating in continuing education and achieving/maintaining certification.
14. Participating in data collection for research and using scientific findings to improve patient outcomes.
15. Monitoring performance by developing and participating in performance improvement activities.
16. Participating as an active member in professional and consumer organizations, contributing to professional publications, and presenting at professional meetings.

References

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Society of Gastroenterology Nurses and Associates, Inc.

POSITION STATEMENT

Role Delineation of the Licensed Practical/Vocational Nurse in Gastroenterology

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Definitions

Role delineation is a description of the responsibilities and functions of a health care worker in a specific role, including the current activities common to this role.

Background

The role of the Licensed Practical/Vocational Nurse (LPN/LVN) has expanded with the changes in advancing technology and newly-defined patient needs. Recognizing that the role of the LPN/LVN in gastroenterology, hepatology and/or endoscopy is still evolving, the following is a statement intended to broadly describe the responsibilities and functions of the LPN/LVN in this specialty. The roles which the LPN/LVN assumes depend on his/her basic nursing preparation, specialized formal or informal education, and clinical experiences. Certification as a gastroenterology nurse (CGN) validates the acquisition of such skills and knowledge (Reeves, 1997). LPNs/LVNs practice in a variety of settings, such as hospitals, private offices, ambulatory surgery centers, and clinics. The LPN/LVN functions within the scope of practice as defined by state nurse practice acts, job description of the employing facility, *SGNA Standards of Practice* (2005), and the National Federation of Licensed Practical Nurses' *Code for Licensed Practical/Vocational Nurses* (1979).

Position

Under the supervision of a licensed RN or physician, the LPN/LVN is accountable for the quality of nursing care he or she provides to patients, and utilizing the nursing process, assumes responsibility for planning, implementing, directing, and evaluating nursing care for assigned patients in the gastroenterology/endoscopy setting. The specific patient populations to whom direct care is provided include adults, adolescents, or children with gastrointestinal disorders/diseases.

The role of the LPN/LVN includes, but is not limited to:

1. Observing, recording and reporting significant changes which require intervention or

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- changes in the patient's plan of care.
2. Implementing interventions within the limitations of licensure and institutional policy.
 3. Providing health education and procedural teaching to patients and significant others (Reeves, 1997).
 4. Administering and evaluating pharmacological and other therapeutic treatment regimens within the limitations of licensure and institutional policy.
 5. Contributing to the planning, implementation, and evaluation of patient care.
 6. Establishing priorities and making ethically-sound decisions to ensure safe patient care.
 7. Assisting the physician and/or registered nurse during diagnostic and therapeutic procedures to promote optimal patient outcomes by team collaboration.
 8. Responding to emergency situations to promote optimal patient outcomes by recognizing changes in the patient's health status.
 9. Performing diagnostic studies as ordered by a physician.
 10. Documenting patient data to ensure continuity in the provision and coordination of patient care.
 11. Assisting with follow-up care.
 12. Collaborating with other health care professionals.
 13. Acting as a resource for others.
 14. Serving as a mentor for others.
 15. Participating in continuing education and achieving/maintaining certification.
 16. Participating in data collection for research, and using scientific findings to improve patient outcomes.
 17. Monitoring performance by developing and participating in quality management activities.
 18. Participating as an active member in professional and consumer organizations, contributing to professional publications, and presenting at professional meetings (Reeves,1997).

References

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Recommended reading

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Society of Gastroenterology Nurses and Associates, Inc.

POSITION STATEMENT

Role Delineation of Unlicensed Assistive Personnel in Gastroenterology

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Definitions

Role delineation is a description of the responsibilities and functions of a healthcare worker in a specific role, including the current activities common to this role.

Unlicensed assistive personnel (UAP) is an unlicensed individual who is trained to function in an assistive role to the licensed nurse in the provision of patient/client activities as delegated by the nurse (ANA, 1997). UAP's who have specialized training or education in a specific area (Gastrointestinal), may be further classified as Technicians, for example, GI assistants, GI techs, or GTS (GI Technical Specialist) who have direct patient care responsibility and are supervised by a Registered Nurse (RN) (ANA, 1997, McClung, 2000).

Delegation is "entrusting the performance of a selected nursing task to an individual who is qualified, competent, and able to perform such tasks. The nurse retains accountability for the total nursing care of the individual" (ANA, 1992) (Habgood, 2000).

Accountability is "being responsible and answerable for actions or inactions of self or others in the context of delegation" (NCSBN, 1995).

Supervision is "directing, guiding, or influencing the outcome of another individual's performance through verbal and written communication" (ANA, 1992; Kopishke, 2002).

Background

The changing health care environment has compelled the reassessment of the roles and tasks involved in providing patient care (ANA, 1992) in gastroenterology, hepatology, and endoscopy practice settings. The following is a statement on the role of unlicensed assistive personnel.

UAPs are accountable to and perform duties under the direct, on-site supervision of the RN when providing delegated patient care (ANA, 1997). As the person accountable for the outcomes of the patient care provided during the diagnostic or therapeutic experience, the RN is responsible for assessing patient care needs and determining the education and competency level of assistive

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personnel to whom the task is delegated as noted below:

- **Education**, specialized Gastro-intestinal training and appropriate utilization of UAP roles (Kido, 2001) (ANA, 1992)
- **Clinical Competency** of UAP's which should be evaluated initially on employment and on an ongoing basis (ONS, 2001)
- **Assessment** of patient care needs, development of the nursing plan of care using the nursing process (assessment, diagnosis, planning, intervention and evaluation), and evaluation of patient outcomes (Kido, 2001).
- **Delegation** of appropriate tasks while retaining the responsibility and accountability of the care given (Habgood, 2000). "Any nursing intervention that requires independent, specialized, nursing knowledge, skill or judgement cannot be delegated" (ANA, 1992; ANA, 1997). When delegating to UAP's, the State Nurse Practice Act in each state must be followed as well as the institutions policies and procedures with the Nurse Practice Act being the final authority in the event of a discrepancy (Kido, 2001).
- **Supervision** requiring direct oversight and timely feedback of care given by UAP's to ensure quality patient outcomes (Anthony, Standing & Hertz, 2000) (Haas & Gold, 1997).

Position

After demonstrating required competencies, UAPs contribute to optimal patient outcomes by providing delegated patient care activities within specified limits which includes, but is not limited to (NCSBN,1995):

UAPs can:

1. Assist in collecting data for an objective assessment to identify the patient's needs, problems, concerns or human responses, e.g., vital signs
2. Assist, under the direction of the RN, in the implementation of the established plan of care.
3. Assist the physician and RN during diagnostic and therapeutic procedures.
4. Respond to emergency situations as directed by the RN.

UAPs will:

1. Provide and maintain a safe environment for the patient and staff (ANA, 1997) by complying with regulatory agency requirements and standards set forth by professional organizations and employers.
2. Be responsible for personal continuing education.
3. Be knowledgeable about professional and practice issues related to the field of gastroenterology.
4. Comply with ethical, professional and legal standards inherent in patient care and professional conduct, e.g., patient's bill of rights.
5. Participate in organizational performance improvement (PI) activities as directed.

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UAP's are strongly encouraged to:

1. Complete the GI Associate's skill validation test and achieve the title GI Technical Specialist (GTS)(Heard, 2004).

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Society of Gastroenterology Nurses and Associates, Inc.

POSITION STATEMENT

Role Delineation of the Advanced Practice Registered Nurse In Gastroenterology

Disclaimer

The Society of Gastroenterology Nurses and Associates, Inc. assumes no responsibility for the practices or recommendations of any member or other practitioner, or for the policies and procedures of any practice setting. Nurses and associates function within the limitations of licensure, state nurse practice act, and/or institutional policy.

Definitions

Role delineation is a description of the responsibilities and functions of a health care worker in a specific role, including the current activities common to this role.

Background

The changing health care environment has led to the development of expanded roles for nurses with graduate degrees in clinical specialties. Recognizing that the advanced practice nursing role in gastroenterology, hepatology and endoscopy is still evolving, the following is a statement to broadly describe the responsibilities and functions of the Advanced Practice Registered Nurse (APRN) specializing in gastroenterology nursing. The APRN may be either a clinical nurse specialist or nurse practitioner who has completed an advanced degree in nursing (master's or doctorate) and who, through study and supervised clinical practice, has become an expert in a clinical area of nursing; in this instance, gastroenterology, hepatology and/or endoscopy (Hamric et al., 2000; ANA, 2001). Additional specific training, credentials and/or advanced practice certification may be required by the state in which the nurse practices. The scope of practice of the APRN is distinguished by the level of complexity, responsibility and autonomy of practice. APRNs practice in a variety of settings, such as hospitals, private offices, ambulatory care centers, and clinics. The APRN functions within the scope of practice as defined by the state nurse practice act, job description of the employing facility, SGNA *Standards of Clinical Nursing Practice* (in press) the American Nurses Association *Code for Nurses* (2001), the American Academy of Nurse Practitioners *Standards of Practice and Core Competencies* (2002), and the National Association of Clinical Nurse Specialists *Statement on Practice and Education* (1998).

Position

The APRN provides service through direct care, consultation, research, education, and collaboration with other health care professionals. The specific patient populations to whom direct care is provided include adults, adolescents, or children with gastrointestinal or hepatic disorders/diseases. The care provided may include, but is not limited to, advanced assessment,

Standards of Clinical Nursing Practice & Role Delineation Statements

diagnosis, treatment/care planning, implementation, evaluation, and patient education. The following are general statements describing the major principles of the role (ANA, 2001; AANP, 2002).

The role of the APRN includes, but is not limited to:

1. Performing a comprehensive history and physical assessments.
2. Ordering and/or performing diagnostic studies.
3. Establishing medical and nursing diagnoses.
4. Prescribing, administering, and evaluating pharmacological and other therapeutic treatment regimens.
5. Managing follow-up care.
6. Collaborating with other health care professionals.
7. Acting as a consultant for other providers regarding the medical and nursing care of clients.
8. Serving as a mentor for other nurses.
9. Identifying and providing learning opportunities for other providers.
10. Documenting patient data to ensure continuity in the provision and coordination of patient care.
11. Establishing priorities and making ethically-sound decisions to ensure safe patient care.
12. Identifying groups, families, and individuals at risk and developing a plan to address those risks including, but not limited to, education programs, screening programs and patient education materials.
13. Participating in continuing education and achieving/maintaining certification and other professional credentials.
14. Participating in research and use of scientific findings to improve client outcomes.
15. Monitoring performance by developing and participating in quality management activities.
16. Being a leader in professional and practice issues through active membership in professional and consumer organizations, publication of scholarly works, and presentations at professional meetings.

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