

Coordination of Client Care Guidelines

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Purpose

This document provides guidelines and a decision-making framework (see figure 1) for the **COORDINATION**¹ of **CLIENT** care at point-of-care to ensure **REGISTRANTS**

1. make effective decisions when coordinating clinical responsibilities of health-care professionals for the provision of safe, ethical, and competent client care;
2. understand their **ACCOUNTABILITY** and **RESPONSIBILITY** for coordination of client care, which includes effective team communication, **SUPERVISION** requirements, and ongoing **EVALUATION** processes; and
3. recognize the interconnectedness of the client's needs, the health-care professional's **COMPETENCIES**, and the **CONTEXT** of the practice environment during the decision-making processes.

The guidelines and decision-making framework within this document outline the requirements for registrants to coordinate point-of-care **HEALTH SERVICE** delivery safely and competently with clients, the health-care team, and other sectors of the health-care system to ensure continuous, safe care in their practice setting.

These guidelines are grounded in the *Practice Standards for Registrants* (College of Registered Nurses of Alberta [CRNA], 2023), the *Entry-level Competencies for the Practice of Registered Nurses* (CRNA, 2019), the **SUPERVISION STANDARDS** (CRNA, 2022), and the *Code of Ethics for Registered Nurses* (Canadian Nurses Association, 2017).

All the CRNA documents can be found on the CRNA website at www.nurses.ab.ca.

Legislation

The *Health Professions Act* (HPA, 2000) provides a legislative framework for health professions using a model that allows for non-exclusive, overlapping scopes of practice. No single profession has exclusive ownership of a specific **RESTRICTED ACTIVITY** or health service, and different professions may provide the same interventions. Under the HPA, each regulated health profession has a legislated practice statement. Schedule 24, Section 3 of the HPA defines the profession of registered nurses (RNs) and encompasses all the overarching categories of interventions which RNs provide.

¹ Words or phrases in **BOLD CAPITALS** upon first mention are defined in the glossary.

Coordination of Client Care Principles

The main goal of coordination of client care is to meet client needs and consider client preferences in the delivery of high-quality health care. This means that client's health-care needs and preferences are known and communicated to the appropriate health-care professional. The coordination of client care is multifaceted and requires registrants to use the skills of critical thinking, collaborative practice, and communication. Registrants interpret complex information from a variety of sources to make decisions reasonably and prudently for the coordination of care. Registrants are responsible and accountable for the coordination of care decisions they make. The health-care professional who accepts the care **ASSIGNMENT** is then responsible and accountable for knowing their own scope of practice, for carrying out clinical care activities in a safe, competent, and ethical manner, and for seeking consultation and guidance if they require assistance. Employer requirements confirm and clarify the roles and responsibilities of each health-care professional in the health-care team.

The following principles should be used when determining how to coordinate client care safely, competently, and ethically:

1. Client safety is central to any decision regarding care coordination.
2. A holistic assessment of the complexity and **ACUITY** of the client's care needs should be completed.
3. Registrants use their critical thinking skills throughout the process of coordination of client care.
4. Registrants should have knowledge of all health-care professionals involved in the health-care team and their scopes of practice.
5. Effective communication skills are used to share information with the client and the health-care team.
6. A client- and family-centred approach using a framework of **CULTURAL SAFETY** and **TRAUMA AND VIOLENCE INFORMED APPROACHES** are used.

Guidelines

The following guidelines should be considered in the process for coordination of client care in all practice settings.

Guideline 1: Assess Client Care Needs

Registrants are responsible and accountable to assess the client and their health-care needs.

The assessment of the client and their health-care needs is vital to ensure appropriate coordination of client care. Several factors and their interrelationship determine whether a client's health-care needs can be met by a particular health-care professional, including but not limited to the following factors:

1. The care requirements which include the client's conditions and the nature, complexity, acuity and priority of client care needs, and any requirements for care.
2. **PREDICTABILITY** of client outcomes in response to care and future care requirements that can be anticipated.
3. The health services needed.
4. Client and family perspectives of health-care needs.

Registrants should consider the following when assessing client care needs:

- Assess the nature, complexity, acuity, and priority of client health-care needs.
- Identify the intended health outcomes and requirements for any ongoing assessments and evaluations.
- Develop the plan of care for achieving the intended health outcomes collaboratively with other members of the health-care team.
- Assess the risk of negative outcomes for the client throughout their care.
- Collaborate with the client when planning care to consider the client's values, customs, spiritual beliefs, as well as the client's social and economic circumstances without judgement or bias.
- Verify that the need, response, and possible outcomes have been identified and documented for the client.

Guideline 2: Confirm the Knowledge, Skill, and Competence of the Health-Care Professional

Registrants are responsible and accountable to determine the appropriate health-care professional to provide client care in the context of the health-care situation.

The psychomotor and technical aspects of care are interconnected with the cognitive aspects of care and cannot be separated. When determining coordination of client care, registrants should consider current assessment data, required interventions and available resources, and current members of the health-care team. This process requires registrants to use their critical thinking skills to set priorities, solve problems, and respond to rapidly changing physical or psychological client states. The client's overall care needs must be considered, along with the knowledge, skills, and competency of the health-care professional.

The priority consideration in the coordination of client care is the desired client outcome. Using evidence-informed practice and following employer requirements, registrants' decisions must be clinically sound and focus on the safety and wellbeing of the client. In situations where care needs can be met by more than one health-care professional, the outcome of care should be the same regardless of who provides the care. When a health-care professional consents to provide health services to a client, they are accountable and responsible for the care they provide.

The registrant should consider the following when assessing the appropriateness of a health-care professional providing client care:

- Assess the client's health-care needs to determine the most appropriate health-care professional to safely provide the client care. Confirm with members of the health-care team who will be providing client care, that their individual **COMPETENCE**, including knowledge, skills and experience, will enable them to provide the care safely in the practice setting.
- Assess their own knowledge, skills, competence, and authorization to perform the intervention that is being assigned.
- Ensure the legislation, regulations, and standards of practice authorize the performance of the restricted activity by the health-care professional.
- Confirm that employer requirements, including those that outline roles and responsibilities, support the coordination of client care decisions.

Guideline 3: Assess Practice Environment Resources and Supports

Registrants are responsible and accountable to assess the practice environment to determine that the available resources and supports meet client needs.

The overall practice environment should be assessed for supports that facilitate the safe coordination of client care. Conditions vary between practice settings where care is coordinated and assigned, and within settings from one point in time to another. Registrants must consider what is the appropriate course of action for client safety rather than focusing on what interventions are allowed. The framework of the HPA (2000) determines who can perform health services and restricted activities. However, the context of care will determine what interventions are appropriate and who should perform those interventions to ensure client safety.

Registrants should consider the following when assessing the practice environment to determine if available resources and supports are in place to meet client needs:

- Identify the human and material resources in the practice setting that are applicable to providing safe client care.
- Determine if the overall resources in the practice setting support the most appropriate health-care professional to be assigned to and perform the client care.
- Assess the composition of the health-care team at the time of care coordination to ensure care can be assigned to the most appropriate health-care professional.
- Determine if the specific restricted activities fall under the definition of **ACTIVITIES OF DAILY LIVING** for that client and the implications for coordination of client care.
- Assess the overall safety of the practice environment for clients and all health-care professionals.

Guideline 4: Assess Communication and Supervision Needs Within the Health-Care Team

Registrants communicate in a collaborative, responsive, respectful, and responsible manner and all requirements for supervision are met.

Appropriate, ongoing communication and supervision are integral to the safe coordination of care. Registrants must use effective communication skills to share information, using language that the client understands and by engaging in processes such as planning, shared decision-making, implementing interventions, and evaluating client care (College of Licensed Practical Nurses of Alberta, CRNA, & College of Registered Psychiatric Nurses of Alberta, 2019). Effective communication between members of the health-care team is required for appropriate supervision and safe client care.

The *Supervision Standards* (CRNA, 2022) should be referred to for supervision requirements and expectations for safe client care including direct, indirect, and indirect remote supervision.

Registrants should consider the following when assessing communication and supervision needs within the health-care team:

- Review and discuss communication expectations with the health-care team to ensure collaborative communication can be maintained with the health-care professional implementing the care.
- Ensure that support and consultation for the health-care professional is available during client care.
- Engage the health-care team in the planning, decision-making, interventions, and evaluation of client care.
- Identify any supervision requirements of the health-care professional and ensure those requirements are met.
- Registrants responsible for providing supervision for the performance of a restricted activity must be authorized and competent to perform the restricted activity and not require supervision themselves or have any conditions or restrictions on their practice permit.

Guideline 4: Evaluate and Adjust to Maintain Optimal Client Outcomes

Registrants continually evaluate and adjust care coordination to ensure optimal client care outcomes.

The coordination of client care is a dynamic process. Ongoing assessment and evaluation of client outcomes occurs as health-care professionals work together to adjust the coordination of client care to meet the changing health-care needs of the client.

Evaluation and monitoring of client care provided should be done in all practice settings. This process involves astute observation, sound judgement, decisive action and resourceful problem solving to determine if the outcomes of the care required are optimal or if adjustments are needed to maintain safe, competent, and ethical care.

When there is a concern about the delivery of care, registrants take the necessary steps to protect client safety. Registrants in all settings need to be proactive in identifying concerns related to care through ongoing assessment and evaluation. Registrants should intervene when unsafe or unethical practice is identified. Unsafe practice situations are circumstances in which the obligations of registrants to provide safe, competent, ethical care cannot be fulfilled, including but not limited to outdated policies and procedures, workplace conflict, unsafe staffing, or disruptive behaviour. Interventions may include guidance, education and direction, clarification of the plan of care and, if necessary, reporting to the appropriate authority.

The registrant should consider the following when assessing and evaluating the coordination of client care:

- Use the nursing process to determine appropriate monitoring and evaluation of the plan of care based on client assessment data, interventions required, environment and competence of the health-care professional.
- Collaborate with the health-care team to determine an appropriate plan for re-assessment, monitoring, and evaluation of the plan of care based on an assessment of risks associated with the client, interventions, practice environment and health-care professionals.
- Evaluate the client outcomes including the impact of the practice environment, the competence of the health-care professional and the client's needs.
- Evaluate to ensure proper documentation of client care is provided and adjust the plan of care as necessary.

- If a concern arises, assess the situation to identify the problem:
 - Consider what happened, or what did not happen, that jeopardized or created a risk to acceptable outcomes of care. Use legislation and regulatory authorizations, employer requirements, the CRNA standards, guidelines, and regulatory guidance to assess the concern.
 - Involve others as required to address or resolve concerns using reporting systems. Collaborate with other members of the health-care team to assess any gaps as soon as possible and determine the need for additional reporting according to employer requirements.
 - Document and report any concerns that occurred. The recurring inability to provide safe staffing, assignment and supervision of client care must be reported and documented to ensure client safety.

Decision-making Framework

When making coordination of client care decisions, three key factors must be assessed to ensure client safety.

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| Client | What is the nature, complexity, acuity, and priority of the client's care needs? What is the client's and/or family's wishes/goals for care? |
| | What are the intended outcomes? What is the predictability of the outcomes? |
| | What is the plan of care for achieving the intended outcomes? What are the risks of negative outcomes in response to care? |
| Health-care Professional | Does the legislation, regulations and standards of practice authorize the performance of any restricted activities by the health-care professional? |
| | What is the knowledge, skills, competencies, and experience of the health-care professional that enables them to carry out the care safely, competently, and ethically in the practice setting? |
| | Does the health-care professional have any supervision requirements and/or conditions on their practice permit? Do employer requirements support the health-care professional to provide care? |
| | How can communication be maintained with the health-care team? Has all documentation been completed? |
| Practice Environment | What are the human and material resources in the practice setting? Do the overall resources support the coordination of care with a client safety focus, including any interventions and activities required? |
| | Does the staff mix and team composition allow for appropriate coordination of client care that best meets the needs of the client? |
| | Do the employer requirements support the care coordination decisions? For example, roles and responsibilities, policies and procedures, protocols, clinical support tools and resources. |
| | Does the environment allow for the ongoing assessment and evaluation of the coordination of care? |

Glossary

ACCOUNTABILITY – The obligation to answer for the professional, ethical, and legal responsibilities of one’s activities and duties (Ellis & Hartley, 2009).

ACTIVITIES OF DAILY LIVING – “An activity that individuals normally perform on their own behalf to maintain their health and well-being, and includes:

- i. routine and invasive self-care activities, including but not restricted to the removal of slivers and the cleaning of wounds, and
- ii. specifically taught procedures, which generally result in predictable and stable responses, including but not restricted to catheterization, maintenance of drainage tubes and administration of drugs by injection.”

(HPA, 2000)

ACUITY – The degree of severity of a client’s condition and/or situation.

ASSIGNMENT – The selective designation of specific responsibilities for client care within employer policies, legislative scopes of practice, competencies of the health-care professional and environmental supports.

CLIENT – refers to patients, residents, families, groups, communities, and populations.

COMPETENCE – The integrated knowledge, skills, judgment, and attributes required of a nurse to practise safely and ethically in a designated role and setting.

COMPETENCIES – The observable ability of a registered nurse that integrates the knowledge, skills, abilities, and judgment required to practice nursing safely and ethically.

CONTEXT – The term context includes client needs for care; intended health outcomes and means for evaluating their achievement; the availability of complementary and supervisory health-care practitioners; and the systems and resources of the overall care environment.

COORDINATION – Involves deliberately organizing client care activities and sharing information among all the health-care professionals involved with a client's care to achieve safer and more effective care (Agency for Healthcare Research and Quality, 2018).

CULTURAL SAFETY – “An outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the health-care system. It results in an environment free of racism and discrimination, where people feel safe when receiving health care” (First Nations Health Authority, First Nations Health Council, & First Nations Health Director’s Association, 2021).

EVALUATION – The assessment of actual versus expected outcomes of care for the purpose of adjusting one’s actions as required towards achieving the best potential health outcomes for clients.

HEALTH SERVICE – “A service provided to people

- i. to protect, promote or maintain their health,
- ii. to prevent illness,
- iii. to diagnose, treat or rehabilitate, or
- iv. to take care of health needs of the ill, disabled, injured, or dying.”

(HPA, 2000)

PREDICTABILITY – The extent to which one can identify in advance a client’s response on the basis of observation, experience, or scientific reason. It involves assessment of how effectively the health condition is managed, the changes likely to occur, and whether the type or timing of changes can be anticipated.

REGISTRANT – Includes registered nurses, graduate nurses, certified graduate nurses, nurse practitioners (NPs), graduate nurse practitioners, and RN or NP courtesy registrants on the CRNA registry.

RESPONSIBILITY – Obligation to provide for the needs of implied or explicit nursing care in accordance with professional and legal standards.

RESTRICTED ACTIVITIES – High risk activities that require specific competencies and skills to be carried out safely and are listed in the HPA (2000) and the *Health Professions Restricted Activity Regulation* (Alta Reg 22/2023, s 60) that are part of providing a health service. Restricted activities are not linked to any particular health profession, and a number of regulated health practitioners may perform a particular restricted activity.

SUPERVISION – the consultation, guidance, and oversight by a registrant in the practice setting. Supervision may be direct, indirect, or indirect remote.

TRAUMA AND VIOLENCE INFORMED APPROACHES – policies and practices regarding the provision of services and programming that include a violence informed approach, work to minimize harm to victims of violence, and aid healing and justice (Ponic et al., 2016).

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