Crisis Model of Care Medical Ward



COVID - 19

Be Safe -- Be Smart -- Be Kind

Introduction

COVID-19 is posing unprecedented challenges to the health system, health practitioners and the wider community. Registered nurses play a vital role in treating and containing the novel coronavirus that causes COVID-19.

The Nursing and Midwifery Board of Australia (NMBA) and Australian Health Practitioner Regulation Agency (AHPRA) must balance public safety with the need to enable governments, hospitals and nurses and midwives to do what is needed to respond to COVID-19, while maintaining standards to keep the public safe. The changes reflect the NMBA's existing policy and standards framework and recognise the unprecedented new environment in which nurses and midwives are now practising as a result of the COVID-19 pandemic https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/COVID19-guidance.aspx

Registered nurse (RN) practice is person-centred and evidence-based with preventative, curative, formative, supportive, restorative and palliative elements. RNs work in therapeutic and professional relationships with individuals, as well as with families, groups and communities. These people may be healthy and with a range of abilities, or have health issues related to physical or mental illness and/or health challenges. These challenges may be posed by physical, psychiatric, developmental and/or intellectual disabilities (NMBA, 2016, p. 2). file:///E:/Nursing-and-Midwifery-Board---Standard---Registered-nurse-standards-for-practice---1-June-2016.PDF

During this unprecedented time, the demand for nurses is expected to be high. To safely care for patients a core activity list has been developed to support the key responsibilities and activities of different clinical care staff within a team based model of care. This is a different approach to care to meet people's needs at this time. Prior to delegation of activities or performance of activities, an evaluation of education and competency of skill to perform the activity must be completed to ensure all delivery of care is performed by team members practicing within their scope of practice.

Purpose

The following Core Activity List has been developed to provide clarity to the Registered Nurse around key responsibilities and activities. The registered nurse will also exercise clinical judgment, and will take into account the patient's acuity and risk of clinical deterioration.

The list of activities is a guide and should only be undertaken by the healthcare professional if it falls within their scope of practice; and they have completed the education and training to competently complete the activity.



Nursing Roles and Responsibilities	Competencies
Recognition of suspected or confirmed COVID-19	Demonstrate ability to identify individuals who are suspected of or confirmed as having COVID-19.
Isolation of the suspected or confirmed COVID-19 patient	Demonstrate ability to isolate individuals who are suspected of or confirmed as having COVID-19, including placing patients in private rooms with door closed and private bathroom (as possible).
Selection and use of personal protective equipment (PPE)	Demonstrate selection and proper use (donning and doffing) of PPE, including gloves, gown, N95 filtering face piece respirator or facemask and eye protection (for example, goggles or disposable face shield that covers the front and sides of the face).
Collection respiratory specimens	Demonstrate proper selection and use of PPE N-95 or higher-level respirator (or facemask if a respirator is not available), eye protection, gloves, and a gown; limit number of people in the room; close door; clean and disinfect room surfaces as soon as possible; ensure proper handling and transport of specimens.
Infection prevention and control measures	Demonstrate competence in proper hand washing and respiratory hygiene practices; manage patients infected with COVID-19; employ environmental and administrative controls; and use safe injection practices.
Workplace Safety	Describe strategies to ensure workplace safety, such as hand hygiene, limits to the numbers of staff providing their care.
Direct patient care	Nursing procedures that are likely to induce coughing (for example, sputum induction, open suctioning of airways) should be performed cautiously and avoided if possible. If performed, demonstrate use of proper selection and use of PPE: wear an N95 or higher-level respirator, eye protection, gloves, and a gown. Limit number of healthcare workers to only those essential for patient care and



procedure support. Clean and disinfect procedure room surfaces promptly

Medical Ward - Expert Nurse

Area of Care	Activity
	 Coordinate access and flow Attend code blue and met calls in own unit Care of the patient on NIV (BIPAP and CPAP) – IRCU (intermediate Respiratory Care Unit) Care of the patient on Hi-flow oxygen on IRCU Care of the tracheostomy patient on hi-flow or NIV Complex dressings including (VAC, special dressing and extensive dressing) Intercostal Catheter (ICC) management

Medical Ward - Registered Nurse (RN)

Area of Care	Core Activity List
General Observations	 Intravenous Catheter Insertion (IVC) IV therapy Provide assistance with CVC insertion CVC management Comprehensive Risk Screening Assessment Vital signs Recording 12 Lead ECG Medication administration (all routes, including drops and topical creams) Double checking S8, S11, insulin and Enoxaparin Incident reporting Supervise, support and delegate duties to COVID19 Support Roles (RUSON or PCA)
Drains	Drain tube management



	DressingsNGT management
Hygiene	 Personal hygiene Tracheostomy management Assist with eye care – eye toilet Assist with mouth care Hand-hygiene
Toileting	 IDC insertion Empty and record urinary catheter bag drainage FBC charting Change incontinence pads or aids Empty, record and provide urinary bottle
Manual handling & Mobility	 Assessment - Pressure injury risk and management Assessment - Falls risk and management Assist with provision of pressure area care (including assist with log roll)
Nutrition	 NGT insertion and enteral feeding NGT management Assist with feeding patients (patients with feeding difficulties, parenteral or enteral nutrition)
Environment	 Maintain safe environment around bed Ensure falls prevention strategies are in place – call bell, bedside table in reach Checking of emergency equipment including resuscitation trolley Checking of bedside resuscitation equipment
Communication	 Admission and discharge of the patient RN's are responsible and accountable for supervision and the delegation of nursing activity to COVID19 Support Roles including enrolled nurses (EN), RUSON and PSA (NBMA, 2016). RUSONs are not to be given sole allocation of patients. Registered nurses can only delegate aspects of care to a RUSON, which are consistent with the



	educational preparation, skill level and assessed competencies of the RUSON The RN participates in and/or leads collaborative practice Provide clinical information and advice to patients or families Reporting and/or escalating all care and concerns to nurse in charge Respond to, and report emergencies as per hospital policy
Documentation	 Patient transfers ISBAR handover EMR as reported by extended role staff All EMR documentation including risk assessments / progress notes Documenting on paper general observation charts Complete food chart – dietary and fluid intake Complete incident reporting Documenting on general observation charts handover sheets
Maintenance	 Restocking emergency supplies in resuscitation trolley Restocking medicine supplies
Other duties	 Checking IV trolley and calibrating blood sugar apparatus Checking medication fridge temperatures Bereavement follow-up Blood glucose levels, urinalysis, collection and labelling of specimens Oxygen therapy

RUSON's role in Medical Ward as per Position Description