

THE ROLE AND SCOPE OF PRACTICE OF THE CRITICAL CARE NURSE

Critical care nursing is a speciality within the field of nursing. This speciality is performed on the basis of advanced knowledge, skills and general competencies within the areas of patient treatment, education, professional development, interdisciplinary collaboration and organization.

THE PURPOSE OF THIS DESCRIPTION IS TO

- guide critical care nursing clinical practice
- clarify the critical care nurse's function and responsibilities in the chain of treatment, for employers and affiliated professions
- connect educational programs and clinical practice
- constitute a professional platform for leadership, setting of priorities, development of the speciality and careers within critical care nursing.



THE NORWEGIAN
ASSOCIATION OF
CRITICAL CARE NURSES





1.0 Formal competency

In Norway, a critical care nurse has completed a bachelor's degree in nursing and is a registered nurse, with specialist education complying with the national directive for critical care (1, 2). The specialist education provides the knowledge and skills to practise in critical care units at levels 1, 2 and 3, high dependency units, post-operative units and prehospital services (3). Critical care nurses' competencies are also used in other units within primary and specialist health services. The critical care nurse is accountable for standards of safety and professional nursing, ensuring the patient's autonomy, integrity and rights (4, 5, 6, 7, 8), and attending to the needs of significant others.

2.0 Clinical practice of critical care nursing

Critical care nursing is evidence-based and embraces health promotion and disease prevention, illness management and rehabilitation as well as comfort and palliative measures.

2.1 Health-promoting and preventative functions require that the critical care nurse

- uses systematic observation and assessment to identify an elevated risk or actual health decline at an early stage
- implements measures to prevent further development of deteriorating health and illness
- protects the patient against complications and injury in connection with assessment and treatment
- facilitates a health-promoting environment for the critical care patient and encourages well-being, hope and quality of life.

2.2 Treatment and rehabilitation functions require that the critical care nurse

- continuously evaluates the patient's resources and systematically performs measures to maintain, strengthen or restore functional capacity
- provides supportive and compensatory assistance in case of failure of the patient's vital functions
- implements medical treatment in collaboration with the patient's medical team, assuming joint responsibility for safe and appropriate treatment
- uses advanced medical technology safely and appropriately
- ensures continuity and quality of the patient's plan of care through interdisciplinary teamwork and appropriate documentation
- plans for rehabilitation early in the acute stage of the patient's illness, with the long-term goal of improving the patient's level of functioning/health status and their quality of life
- collaborates with other health care professionals during the trajectory of care (other parts of the health care system) in order to coordinate rehabilitation and improve treatment based on knowledge of long-term patient outcomes.

2.3 Comfort and palliative measures require that the critical care nurse

- performs procedures to relieve symptoms and limit the patient's burden in association with illness, injury and treatment
- helps the patient to use his or her own resilience to activate health-promoting processes and assists in dealing with and relieving stress, pain and discomfort
- takes the patient's overall situation into account when palliative care is provided
- participates in decision-making processes concerning the limitation of life-prolonging treatment, and shares responsibility to facilitate a peaceful death.

2.4 Critical care nursing for the patient's significant others involves

- establishing a patient- and family-centred treatment environment in order to limit stress which the significant others may experience in connection with critical care treatment
- recognition of significant others as a resource for the patient, providing information, guidance and support for them to facilitate participation in the care of the patient
- recognising and providing for the significant others' needs for care in a critical illness situation.

3.0 Teaching, professional development and research

To build competency, improve quality and develop new evidence are systematic and well-established processes in professional nursing practice.

The critical care nurse:

- uses relevant and current educational and evidence-based approaches in teaching, guidance and counselling
- collaborates with teaching institutions with regards to the provision of clinical practice internships
- recognises multiple forms of evidence and includes the experience of patients and significant others
- contributes to ethical awareness and critical reflection in the context of, conditions for, and practice of critical care nursing
- initiates, collaborates and takes responsibility for quality improvement, professional development and research.

4.0 Collaboration, leadership and organisation

Critical care nursing is practised, developed and led in a short- as well as long-term perspective on health benefits and risk management. Thus, the multidisciplinary health care team collaborates both within and across units in the provision of patient care. Critical care nursing is practised under the professional leadership of qualified nurse specialists.

In clinical practice and in leadership positions, the critical care nurse takes responsibility:

- to collaborate concerning quality and patient safety throughout the trajectory of patient care
- to contribute their expertise in advisory roles
- to develop and improve systems to ensure nursing competency and skill-mix for high quality care at all stages of the patient journey
- To provide training and skills education for assistant personnel in accordance with their individual level of competence
- to participate in the discussion of priorities, resource allocation and to assume co-responsibility for effective and appropriate use of resources.

5.0 Other

The function and responsibility description for critical care nurses is developed in a dynamic interaction between historical traditions, needs of the society and the health care services development. It is revised on assignment and mandate from the NSFLIS General Assembly.



6.0 References

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8. Law on donation and transplantation of organs, cells and tissues. 2015. Ministry of Health and Care Services