CANIBD
Canadian IBD Nurses
ANNUAL CONFERENCE
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CANIBD: Standards of IBD Nursing Practice

Joan Heatherington RN, BScN, MN, NP
University of Calgary IBD Unit
Calgary Alberta
Objectives

• Define
  – Nursing Practice
  – Specialized Practice
  – Advanced Nursing Practice
  – Scope of practice
  – Standards of practice

• Discuss evolution of CANIBD’s: IBD Nursing Standards of Practice
Nursing Practice

• **Nursing practice**: providing care to a patient
• Care is based on the
  – condition of the patient
  – nursing theory (education)
  – practice
  – research
• influenced by education, experience and expertise
• *Scope of practice includes interventions that RNs are authorized, educated and competent to perform.*

  – Scope of practice may vary between provinces depending on governing rules and regulations
Nursing Practice Specialty

- **Specialist** – An individual whose practice is focused in a particular clinical area.
- The focus of practice may be related to:
  - age (e.g., gerontology)
  - medical diagnostic grouping (e.g., gastroenterology)
  - practice setting (e.g., emergency department)
  - type of care (e.g., enteral stomal care).
- CNA recognizes 20 practice specialties, each have a national exam and national association.
- Ours is the gastroenterology exam supported by CSGNA.
Characteristics Of Advanced Nursing Practice

• Builds on their expertise in a specially area, integrating and consistently displaying:
  – Effective and efficient care, delivered with a high degree of autonomy
  – Leadership and initiating changes to improve client, organizational, and system outcomes
  – Integrates the use of nursing knowledge, research and clinical expertise into practice
  – Draws on a wide range of strategies to meet the needs of clients and improve access to high quality of care
  – Ability to apply and explain the theoretical empirical, ethical and experiential foundation of nursing practice
  – Critical analysis of and influence on healthy policy
Standards of Nursing Practice

• Standards are:
  – Broad statements of quality
  – Authoritative statements by which the nursing profession describes the responsibilities RNs are held accountable
  – Reflect the values and priorities of the profession
  – Provide direction and a framework for the evaluation of practice
  – Define the nursing profession’s accountability to the public and outcomes to which RNs are held accountable
Basic Principles of Standards

• Formulated according to requirement and applicability and use by the profession
• Designed to achieve a stated purpose
• Based upon clear definitions of professional scope and accountability
• Promotes the fullest development of the profession
• Sufficiently broad and flexible to achieve their objective while allowing for growth and change
• Promote universal levels of performance
Development of Standards

- Nursing profession must establish, maintain and improve wherever possible the standards of care.
- Standards must serve as the minimum level of acceptable performance.
- Professional bodies must guarantee high quality of care is provided to the public and standards ensure this happens.
- Developed standards are use to evaluate all nursing care.
Standards of Practice

- General guidelines that provide a foundation as to how a nurse should act
- Outlines what a nurse should or should not do in his or her professional capacity
CANIBD Practice Standards

• May be used to assess competence of an IBD Nurse by a peer, senior colleague or manager, or to facilitate self-assessment
• IBD nurses should work towards being competent in each practice standard
• Expectations of a nurse’s practice must be interpreted through the context and culture of the workplace
Disclaimer

- The **Canadian Society of Gastroenterology Nurses and Associates (CSGNA)** presents these guidelines to be used as a reference in the development of institutional policies, procedures and protocols.
- The CSGNA assumes no responsibility for the practices or recommendations of any member or other health care professional, or for the policies and procedures of any practice setting.
- The nurse functions within the scope of practice of the provincial licensing body and the institutional policy of where they are employed.
CANIBD Goals

• Build expertise, knowledge and quality practice in IBD nursing care through educational program development, sharing of best practice and mentorship

• Contribute to policy and planning in order to advocate for improvement of care and treatment for people with, or affected by, IBD

• Promote and gain recognition for the specialist skills and knowledge that nurses and allied health professionals bring to this specific area of practice across Canada
CANIBD Standard Development

• The CANIBD nursing standards were developed by the steering committee

• An agreed assumption was:
  – CANIBD nurses would be expected to follow relevant standard of nursing documents developed provincially by professional associations and nationally by CSGNA.

• Standards were developed to reflect the characteristics of the IBD nurse specialist and advance practice IBD nurse

• Informed through review of literature and similar practice documents
Principles of IBD Nursing Standards

- **Knowledge**: Clinical Care
- Supportive **Patient Centered** Care
- **Quality** Care Assurance
- **Evidence** Based Practice
- **Leadership**
Knowledge

• Considers theory and practice perspectives in clinical decisions
• Based on what is evidence rather than opinion or belief
• Improves practice by questioning findings from all sources
• Raises awareness of personal and professional accountability and the dilemmas of practice
• Improves care if the nurse is aware of the best knowledge or evidence to use in practice
Patient Centered Care

- Respect for patients' preferences
- Coordination and integration of care
- Information and education
- Physical comfort
- Emotional support
- Involvement of family and friends
- Continuity and transition
- Access to care
Quality Care

Strives to achieve quality care indicators outlined by Crohn’s Colitis Canada (in development)

• Effective, adherent to an evidence base and results in improved health outcomes for individuals and communities
• Efficient, maximizes resource use and avoids waste;
• Accessible, timely, geographically reasonable, and provided in a setting where skills and resources are appropriate to medical need
• Acceptable/patient-centered, takes into account the preferences and aspirations of individual service users and the cultures of their communities;
• Equitable, delivering health care which does not vary in quality because of personal characteristics such as gender, race, ethnicity, geographical location, or socioeconomic status;
• Safe, delivering health care which minimizes risks and harm to service users.
Evidence Based

- Cultivate a spirit of inquiry
- Ask Clinical Questions
- Search for and collect relevant evidence
- Critically appraise evidence
- Integrate, evaluate and disseminate evidence
Leadership

- ‘Leadership involves the use of interpersonal skills to influence others to accomplish a specific goal.’ (Sullivan and Garland, 2010)
- Promotes IBD standards locally and nationally
- Supports quality, safety and cost effectiveness
- Identifies local service needs and influences development of programs
- APN
  - Works autonomously
  - Provides mentorship
Canadian IBD Nursing Standards

- Are yours
- Can be used to guide development and assessment of clinical practice
- Reflect CAN IBD goals
- Are dynamic and subject to change
- Can be used to facilitate and lobby for resources and program development