

PRACTICE STANDARD FOR BCCNM REGISTERED PSYCHIATRIC NURSES

# Registered Psychiatric Nurse: Acting by Giving Client-specific Orders

## Introduction

The *Registered Psychiatric Nurse: Acting by Giving Client-specific Orders* standards apply to registered psychiatric nurses and certified practice registered psychiatric nurses when they are giving client-specific orders.

Registered psychiatric nurses may provide care to clients by giving client-specific orders for an activity that they are competent and allowed to perform within their autonomous scope of practice.

Registered psychiatric nurses may provide care to clients by acting with a client-specific order for an activity that is:

1. Within the registered psychiatric nurse's autonomous scope of practice as outlined in the [Nurses \(Registered Psychiatric\) Regulation](#).
2. In alignment with BCCNM standards, limits, and conditions,
3. Allowed by organizational/employer policies, processes, and restrictions, and
4. Within the registered psychiatric nurse's individual competence.

Registered psychiatric nurses and certified practice registered psychiatric nurses need to know when they are allowed to act within their autonomous scope of practice to give a client-specific order before giving the client-specific order.

A **client-specific order** is an instruction or authorization given by a regulated health professional for a nurse to provide care for a specific client, whether or not the care or service includes a restricted activity or a non-restricted activity.

- A consultation, referral or professional recommendation is **not** an order.

Registered psychiatric nurses and certified practice registered psychiatric nurses giving client-specific orders also follow the *Registered Psychiatric Nurse: Acting within Autonomous Scope of Practice* standards in addition to the standards outlined below.

## Standards

1. Registered psychiatric nurses accept sole accountability and responsibility for the client-specific orders they give.
2. Registered psychiatric nurses give client-specific orders for activities that are:
  - a. Within autonomous scope of practice,
  - b. Within the registered psychiatric nurse's individual competence,
  - c. Consistent with any relevant standards, limits and conditions established by BCCNM,
  - d. Consistent with organizational policy, procedures and restrictions.
3. Registered psychiatric nurses only give client-specific orders when organizational supports, processes and resources, including policies and procedures, exist that:
  - a. Outline the accountability and responsibility of the nurse, and
  - b. Ensure continuity of care for the client including the requirements and procedures for responding to questions about client-specific orders, amending client-specific orders and evaluating client outcomes.
4. Registered psychiatric nurses carry out assessments and make an appropriate nursing diagnosis<sup>1</sup> to ensure that the client's condition can be improved or resolved by the ordered activity before giving a client-specific order.
5. Registered psychiatric nurses give client-specific orders that consider the unique characteristics, needs and wishes of the client, contain enough information for the order to be carried out safely and are:
  - a. Based on evidence,
  - b. Clear and complete, and
  - c. Documented, legible, dated and signed with a unique identifier such as a written signature or an electronically generated identifier.
6. Registered psychiatric nurses give verbal or telephone client-specific orders only when there are no reasonable<sup>2</sup> alternatives and it is in the best interest of the client. In these situations, registered psychiatric nurses:
  - a. Ensure that they have the necessary information to conduct the assessment required to give the client-specific order, which may include gathering information from another health care provider when the nurse is not able to directly observe the client,
  - b. Ask for the client-specific order to be read back to confirm it is accurate,
  - c. Follow up to ensure that the client-specific order is documented in the client record.

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<sup>1</sup> Certified practice registered psychiatric nurses may also make a diagnosis of a disease, disorder or condition that is within the autonomous scope of the nurse's certified practice designation and the nurse's individual competence.

<sup>2</sup> Reasonable refers to the common understanding that registrants of the psychiatric nursing profession would have as to what is appropriate in the situation.

7. Registered psychiatric nurses using documents that set out the usual care for a particular client group or client (e.g., pre-printed orders or order sets) make the information client-specific by adding the name of the individual client, making any necessary changes, dating their client-specific orders and signing with their unique identifier.
8. Registered psychiatric nurses identify the specific document (e.g., a decision support tool) in the client's record, including the name and the date of publication, when they reference that document in a client-specific order.
9. Registered psychiatric nurses follow the registered psychiatric nurse standards for *Acting within Autonomous Scope of Practice* and/or *Giving Client-specific Orders* when they change or cancel a client-specific order and are responsible and solely accountable for any changes that they make.
10. Registered psychiatric nurses communicate and collaborate with the professional who gave the client-specific order, the client and other members of the health care team when changing or cancelling a client-specific order.
11. Registered psychiatric nurses follow legal and ethical obligations regarding consent for the care referred to in their client-specific orders.

## Glossary

**Competence:** The integration and application of current knowledge, skills, attitudes, and judgment required to perform safely, ethically, and appropriately within an individual's practice.

**Decision support tools (DSTs):** Evidence-based documents used by nurses to support clinical judgment and decision-making by guiding the assessment, diagnosis and treatment of client-specific clinical problems. DSTs come in various forms and are created by organizations or specialists in a specific area of health care.

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