



Interpretive Document

THE GRADUATE NURSE: Scope of Practice

March 2018

The purpose of this interpretive document is to increase understanding of the scope of practice of graduate nurses and provide guidance for graduate nurses and for registered nurses in practice settings where graduate nurses are employed. This interpretive document will also provide information for managers, administrators, other health-care providers, employers, and stakeholders within the health-care system.

A graduate nurse is either a graduate of an approved or recognized entry-level nursing education program, or an internationally educated nurse (IEN) applicant who is eligible for a temporary practice permit to begin employment as a graduate nurse. Graduate nurses are issued a temporary permit that allows them to be employed while they meet all outstanding requirements for full licensure as a registered nurse. One requirement of registration is passing the National Council Licensure Examination (NCLEX) and another requirement may be submission of a satisfactory reference from their current employer.

CARNA's Position

A graduate nurse on a temporary register is authorized to perform all the restricted activities and other interventions a registered nurse can perform if the graduate nurse is competent to perform the intervention and it is relevant to the practice setting. Supervision of a graduate nurse's practice is not required in legislation. Graduate nurses are entry-level practitioners and their level of practice, autonomy and proficiency develops best with collaboration, mentoring, and support from registered nurse colleagues, managers, and other health-care team members.

A graduate nurse on the temporary register should not be assigned as the nurse in charge or left alone in a practice setting as the only nurse unless they have the necessary clinical experience and competencies to take on this role and responsibility.

Graduate nurses are expected to practice according to the *CARNA Practice Standards for Regulated Members* (2013), like all regulated members of CARNA, and to comply with the Canadian Nurses Association *Code of Ethics for Registered Nurses* (2017).

Scope of Practice

Graduate nurses and all regulated members of CARNA practise under a legislated definition of nursing. Schedule 24 of the *Health Professions Act* (2000) has a practice statement that describes the practice of registered nurses. Under the *Health Professions Act*, a graduate nurse is a regulated member on the temporary register of CARNA and has a temporary practice permit. The *Registered Nurses Profession Regulation* (2005) states:

The registration of a regulated member on the temporary register is valid for up to six months and each registration may be renewed no more than two times, unless, in the opinion of the Registration Committee, there are extenuating circumstances.
SECTION 6(4)

In 2009, amendments to the *Health Professions Act* were made to protect the title of graduate nurse and abbreviation “GN.” Changes will be made to the *Registered Nurses Profession Regulation* to reflect this amendment.

Graduate nurses on the temporary register are authorized to perform all restricted activities that a registered nurse is authorized to perform. However, this does not mean that a regulated member is authorized to perform any restricted activity in any situation in any practice setting. A graduate nurse must limit themselves to performing those restricted activities they are competent to perform and that are relevant to the practice setting where they are practising.

The CARNA document *Health Professions Act: Standards for the Performance of Restricted Activities* (2005) provides direction on the standards that must be met by all regulated members of CARNA when performing any restricted activity intervention.

CARNA or employers may place limits on the independent performance of restricted activities and other interventions by the graduate nurse until all registration requirements have been met. Employers should ensure adequate orientation and mentoring to support the graduate nurse in providing safe and competent nursing care.

A graduate nurse should not be assigned as the nurse in charge without the necessary clinical experience and competencies required for this role and responsibility. Nor should a graduate nurse be left alone in a practice setting without available registered nurse support unless they have experience in the role of charge nurse or have been mentored or supervised by a registered nurse before being placed in the role alone.

Both the graduate nurse and the employer need to identify what competencies, knowledge, skills, and experience are required in a specific practice setting to enable the graduate nurse to independently provide the care required. Both must also determine when the graduate nurse has the ability to independently perform a particular skill or

intervention or if the graduate nurse should seek supervision or guidance in specific instances.

The CARNA document *Entry-to-Practice Competencies for the Registered Nurses Profession (2013)*, includes a profile of newly graduated registered nurse practice, and what to reasonably expect. This profile includes:

During the first six months of employment, a newly graduated registered nurse is in transition, learning the role as a registered nurse in a particular setting (Duchscher, 2006; Ferguson & Day, 2006). They learn this new role by observing other registered nurses in the specific practice setting and within the social network of their workplace. Time is required to consolidate professional relationships, learn practice norms in that practice setting, and gain depth in their nursing practice knowledge and judgment. As they develop confidence in their new role, they assume higher levels of responsibility and manage complex clinical situations. They also recognize more subtle nuances of situations and patterns with more ease as they move to a more complex way of thinking and doing.

Supervision

Supervision of a graduate nurse's practice is not required in legislation. However, supervision may benefit the graduate nurse in increasing their ability to independently perform a particular skill or intervention with confidence and efficiency. Supervision is defined by CARNA as consultation and guidance by a regulated member of a regulated health profession in the practice setting. In those instances where a graduate nurse requires supervision, CARNA has indicated a condition specific to supervision on the temporary permit or an employer places supervision requirement or limitations on the practice of a graduate nurse in a particular practice setting. The supervision provided may be direct, indirect or indirect remote.

- **Direct supervision** means a regulated member is present in the practice setting at the point of care providing supervision at the side of the graduate nurse.
- **Indirect supervision** means a regulated member is readily available for guidance and consultation on the unit or in the same location where the care is provided, but is not directly at the side of the graduate nurse. In community health settings or in home care, the regulated member is physically present in the clinic setting or in the client's home.
- **Indirect-remote supervision** means a regulated member is available for guidance and consultation but is not physically present in the location where the care is provided. The regulated member may be available on an adjacent unit, within the four walls of the facility or agency or can be reached through the use of technology (e.g., telephone, pager or other electronic means) when the graduate nurse needs verbal assistance or guidance in providing client care.

Accountability

A graduate nurse should be their own advocate and can limit risk in their practice by accepting employment where they are provided with:

- policies and procedures for the graduate nurse and for the registered nurses who will mentor and advise them;
- a comprehensive orientation;
- a current and clear role description;
- a regular means to assess progress and address issues or concerns as they arise; and
- sufficient time to learn their role and the practice norms in the specific practice setting, in order to gain depth in their nursing practice knowledge and judgement.

Support in the Practice Setting

Support in the practice setting is especially important for graduate nurses so they are able to gain confidence, experience, knowledge and skills in a workplace that values and supports their contribution to the health-care team.

Experienced registered nurses have a responsibility to mentor and guide the graduate nurse. The role of mentoring is reinforced in the *Code of Ethics for Registered Nurses*, outlined in the responsibility statement under the value “Being Accountable,” one of the seven primary values central to nursing practice.

Employers share the responsibility of supporting graduate nurses to practise safely, competently and ethically by:

- encouraging and supporting experienced registered nurses to mentor graduate nurses;
- providing initial work experiences in the same practice environment and with similar client populations and avoid floating the graduate nurse to other settings;
- ensuring that workload and staff scheduling decisions are made considering the needs of the graduate nurse (e.g., providing sufficient time to discuss and plan care with colleagues and client receiving care and to receive feedback on their performance);
- encouraging graduate nurses to pose questions, engage in reflective practice and ask for assistance without being criticized;
- identifying and informing graduate nurses of the recourses available to support their practice;

- providing position-specific education and professional development through orientation, in-service education and mentorship programs;
- identifying the competencies required in a particular setting, position or situation of added responsibility and providing opportunities to meet the competencies before the graduate nurse is placed in such a situation; and
- providing ongoing constructive feedback via established formal evaluation processes.

Employers are encouraged to provide comprehensive orientation and mentoring for graduate nurses. Orientation should include key elements, such as information on policies, procedures, philosophies and role expectations and the time necessary for the graduate nurse to learn their role by observing and getting feedback from registered nurses in the specific practice setting and within the social network of their workplace.

Documents that Support the Graduate Nurse

The following documents will assist graduate nurses to make decisions about their practice based on adequate assessment of potential risks to clients, staff, other health professionals, and for themselves.

- ***Assignment of Client Care: Guidelines for Registered Nurses (CARNA, 2014)*** provides a decision tool to assess client risk factors and health-care needs and provides support in staff mix decision-making.
- ***Staff Mix Decision-making Framework for Quality Nursing Care (CNA, 2012, endorsed by CARNA Provincial Council September 2014)*** provides evidence-informed principles that support the use of best practices to determine, implement and evaluate nursing staff skill mix, staffing patterns and models for delivery of care.
- ***Entry-to-Practice Competencies for the Registered Nurses Profession (CARNA, 2013)*** describes the competencies expected for the new graduate from an approved nursing education program leading to initial entry to practice as a registered nurse and includes a profile of newly graduated registered nurse practice and what to reasonably expect.

Continued support of the graduate nurses is essential if we are to retain them in the workplaces as well as in the profession. It is important for graduate nurses to gain confidence, experience, knowledge, and skill in a workplace which values and supports their contribution to the health-care team.

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