

PROFESSIONAL INSPECTION

DOCUMENTATION STANDARD
VERIFICATION TOOL

THE THERAPEUTIC NURSING PLAN



Ordre
des infirmières
et infirmiers
du Québec

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LE GROUPE
flexidée
COMMUNICATEUR GRAPHIQUE

Production inoxidée

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Legal deposit

Library and Archives Canada, 2009
Quebec National Library and Archives, 2009
ISBN 978-2-89229-464-4 (printed version)
ISBN 978-2-89229-465-1 (PDF)
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Note – In accordance with OIIQ editorial policy,
the feminine is used to simplify the text.

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INSTRUCTIONS FOR EVALUATORS

This verification tool is intended to evaluate the application of the therapeutic nursing plan (TNP) documentation standard. It is comprised of two parts: part A pertains to the form of the TNP, while part B, to the clinical content of the TNP. Each part is subdivided into sections (*General Information, Assessment Findings, Clinical Follow-up*) in which indicators are grouped together.

It is advisable to select a certain number of charts in which a TNP has been documented and to complete a checklist for each. The program or unit concerned, the file number and the type of client group (hospitalization, residential care, outpatient or home follow-up) must be specified for each checklist.

Different types of answers are suggested in the section provided for this purpose:

- YES: to indicate that the indicator has been observed;
- NO: to indicate that the indicator has not been observed and should have been;
- N/A: for “not applicable”, that is, the indicator does not apply to the situation. In cases where the indicator applies to all situations, this box is cross-hatched.

Under certain indicators, a note is addressed to the evaluator to guide her interpretation of the indicator.

To carry out this evaluation, the evaluator must also check the nurse’s entries in various clinical documents, namely:

- the progress notes and any other permanent documentation tool;
- the nursing care and treatment plan (NCTP) and any other planning tool;
- the non-professionals’ work plan and any other relevant documentation tool.

Lastly, each page has an *Evaluator’s comments* section where the evaluator can note any information that might help users understand the evaluation.

PART A: FORM

General Information

Care unit / program:

File no.:

Type of client: Hospitalization Residential care Outpatient follow-up Home care follow-up

1. The nurse is accountable for the clinical decisions she makes and enters in the TNP.		YES	NO	N/A
Indicators	1.1 The TNP is determined or adjusted:			
	1.1.1. by a nurse or a CPN (candidate for the profession of nursing);			
	1.1.2. when by a CPN, only for activities she is authorized to engage in (see list in Appendix).			
	1.2 Every nurse or CPN who determines or adjusts the TNP signs her name.			
	1.3 CPNS' signatures are followed by their title.			
	1.4 Signatures are followed by their corresponding initials.			
1.5 The program or department is indicated to allow the client's clinical course to be followed throughout the continuum of care and services.				
2. The TNP is recorded permanently in the chart.		YES	NO	N/A
	2.1 The TNP is recorded in permanent ink			
	2.2 Any error is corrected in accordance with statutory rules (no deletions, no correction fluid).			

EVALUATOR'S COMMENTS

3. The TNP provides an evolving clinical profile of the client's priority problems and needs in order to ensure clinical follow-up.		YES	NO	N/A
Indicators	3.1 For each new problem or need, the nurse enters: 3.1.1. the date; <i>Note to the evaluator:</i> Check YES if the date is entered for each problem or need or if the date is entered at the beginning of problems and needs recorded at the same time.			
	3.1.2. the time; <i>Note to the evaluator:</i> Check YES if the time is entered for each problem or need or if the time is entered at the beginning of problems and needs recorded at the same time.			
	3.1.3. a number for each problem or need in chronological order;			
	3.1.4. the initials of the nurse who recorded the finding. <i>Note to the evaluator:</i> Check YES if the initials are entered for each problem or need or if they are entered at the end of problems and needs recorded at the same time.			
	3.2 For each problem that is resolved or each need that is satisfied , the nurse enters: 3.2.1. the date;			
	3.2.2. the time;			
	3.2.3. the initials of the nurse who recorded the resolution of the problem or the satisfaction of the need.			
	3.3 If a significant change is observed with respect to a problem or need, the nurse enters: 3.3.1. a dash in the boxes corresponding to the date and time the problem is resolved or the need is satisfied to indicate that there has been a change;			
	3.3.2. the new finding in chronological order, designated by the same number as the initial assessment finding for the problem or need;			
	3.3.3. the initials of the nurse who recorded the change.			
	3.4 When professionals are indicated in the section "Professional/Department Involved", the entry is generic (no names are provided).			

EVALUATOR'S COMMENTS

PART B: CLINICAL CONTENT (CONT'D.)

Clinical Follow-up

6. The TNP provides a record of the follow-up carried out by means of nursing directives.		YES	NO	N/A	
Indicators	6.1 Based on the data in the chart, directives that are crucial to the client's clinical follow-up are entered.			/ / / / /	
	<i>Note to the evaluator:</i> Check NO if some directives that are crucial to the client's clinical follow-up have not been entered.				/ / / / /
	6.2 The nursing directives entered:				
	• determine a specific (non-standard) intervention,				
	• <u>or establish an intervention strategy,</u>				
	• <u>or define a condition for implementation.</u>				
	6.3 Standard follow-up is entered as minimum information to record the clinical follow-up carried out in connection with the reason for hospitalization, residential care or follow-up (outpatient care or home care clients).				
	6.4 The directives concern the problems or needs to which they refer.				
	6.5 The directives respect the legal scope of practice of the different members of the nursing team.			/ / / / /	
	6.6 Clinical follow-up is adjusted (a directive is added or discontinued) when:				
	6.6.1. a finding of a new problem or need is made;				
	6.6.2. a problem is resolved or a need is satisfied;				
	6.6.3. a significant change is observed with respect to a problem or need already entered in the TNP;				
	6.6.4. the current clinical follow-up is ineffective.				
6.7 A relevant jurisdiction is entered in the progress notes or in another permanent documentation tool when:			/ / / / /		
6.7.1. a new directive is given;					
6.7.2. a directive is modified;					
6.7.3. a directive is discontinued.					
6.8 Where necessary, the information required to apply the directives is entered in the NCTP or in any other planning tool.					
6.9 Directives that concern non-professionals are indicated in their work plan or their assignment sheet in terms that are sufficiently explicit to ensure they are applied appropriately.					

EVALUATOR'S COMMENTS

APPENDIX

Regulation respecting the professional activities which may be engaged in by persons other than nurses

[...]

2. A candidate for the profession of nursing may engage in any professional activities that may be engaged in by a nurse, with the exception of the activities referred to in Schedule I, if she meets the following conditions:
 - 1° the candidate engages in the activities in a centre operated by an institution within the meaning of the Act respecting health services and social services (R.S.Q., c. S-4.2) or the Act respecting health services and social services for Cree Native persons (R.S.Q., c. S-5);
 - 2° the candidate has completed the integration program of the institution referred to in subparagraph (1) enabling her to consolidate the knowledge and skill needed to engage in the activities using the methods of care that she will be required to apply for that purpose, to demonstrate her ability to engage in the activities and to familiarize herself with the institution's policies and directives;
 - 3° the candidate engages in the activities under the supervision of a nurse possessing the relevant experience who is present on the floor where the activities are engaged in and in the care unit concerned, so that the nurse is able to intervene with the user on a rapid basis or respond to a consultation request from the candidate on a rapid basis; in the case of a long-term care or residential unit, the candidate shall engage in the activities under the supervision of a nurse possessing the relevant experience who is present in the building where the activities are engaged in, so that the nurse is able to intervene with the user or respond to a consultation request from the candidate within a short time;
 - 4° the candidate makes sure, before engaging in one of the said activities, that she possesses the requisite knowledge and skill ; if she does not possess the requisite knowledge and skill, she shall decline to engage in the activity until she has received the necessary training.

[...]

EXCLUDED PROFESSIONAL ACTIVITIES

1. Assessing the physical and mental condition of a symptomatic person in a triage situation, in an ambulatory clinic or through the medium of telecommunications;
2. Providing clinical monitoring of the condition of the following persons, including monitoring and adjusting the therapeutic nursing plan:
 - (1) a person about to give birth who is undergoing monitoring in the case of a high-risk pregnancy;
 - (2) a person who is in shock, a person with multitrauma or a person who needs to be resuscitated in an emergency department or service;
 - (3) a person undergoing hemodynamic monitoring through the insertion of catheters in the vascular system for the purpose of surveying cardiac function, blood volume and circulation;
3. Initiating diagnostic and therapeutic measures, according to a prescription;
4. Initiating diagnostic measures for the purposes of a screening operation under the Public Health Act;
5. Determining the treatment plan for wounds and alterations of the skin and teguments;
6. Taking telephone prescriptions;
7. Performing vaccinations as part of a vaccination operation under the Public Health Act;
8. Making decisions as to the use of restraint measures.

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