

Team Nursing Model/Approach During a Pandemic Crisis

Team Nursing Overview

Team Nursing model is based on philosophy in which groups of professional and non-professional nursing personnel work together to identify, plan, implement and evaluate comprehensive client-centered care. The key concept is a group (team) that works together toward a common goal that is, providing high quality, safe and comprehensive nursing care.

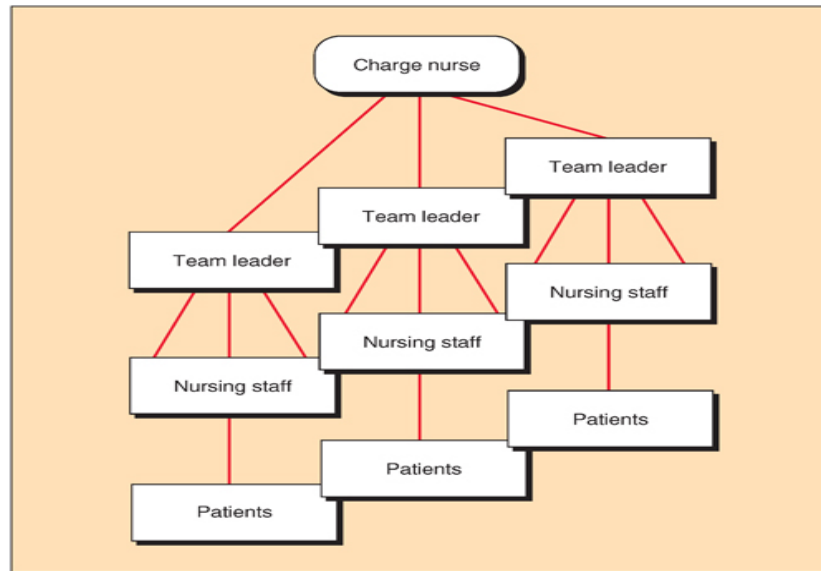


Image 1: Team Nursing Structure Example

Source: Marquis, B. & Huston, C. (2021). Leadership roles and management functions. Chapter 14: Organizing Patient Care

The Team Nursing model is employed due to the COVID-19 pandemic crisis. Health care workers (HCWs) who have useful skills **but lack experience in a specific areas can work in teams** supervised by those with relevant experience. Instead of individual HCWs caring for one or two patients, a team of HCWs, who amongst them possess a complete skill set and relevant experience, collectively care for a group of patients. To ensure high quality and safe patient care delivery is maintained throughout the team nursing model approach, based on competency level and scope of practice, team members to complete competency validation tools (CVT) as appropriate [CVT & education materials & resources are available on the Regional COVID-19 SharePoint: [KPSC COVID-19 Regional Education](#)

Successes within team nurses have noted that extensive team communication, both formal and informal, is essential and may include communication between the team leader and individual team members as well as regular team planning communication via frequent team huddles, frequent rounding, consistent communication, etc. to ensure high quality and safe delivery of patient care (Marquis & Huston, 2021). Team leaders should use consider each member's abilities for patient care when making patient assignments and allow autonomy for team members to promote high functioning teams (Marquis & Huston, 2021). Each Team Lead should engage in continual communication with the Unit Charge RN to ensure team members have appropriate breaks and respite care during their shift.

Team Nursing



Team Lead works with a team of nurses and ancillary staff to provide care for a group of patients



High quality and safe patient care through team collaboration, team communication, and team members practicing at the top of their scope of practice



Team leads use knowledge of skill level, education, qualification, and competency of every staff member to deliver high quality and safe patient care

Reference: AONL (2020). Team Based Nursing: Advocate Aurora Health.

Team Nursing Considerations:

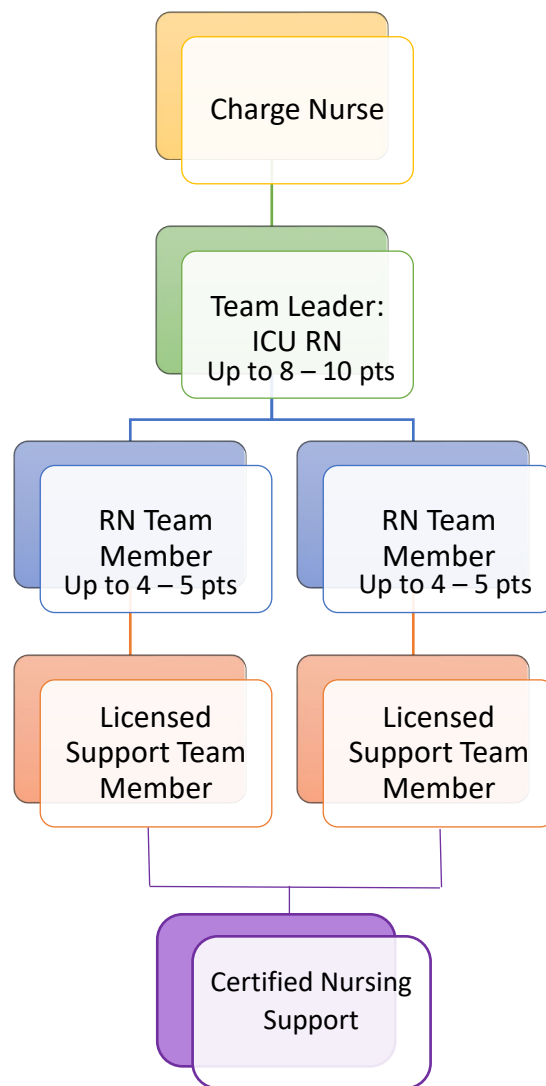
- To ensure high quality and safe patient care delivery is maintained throughout the team nursing model approach, based on competency level and scope of practice, team members to complete competency validation tools (CVT) as appropriate [CVT & education materials & resources are available on the Regional COVID-19 SharePoint: [KPSC COVID-19 Regional Education](#)]
- Unit manager or designee assigns a group of patients to a team;
- The composition of the team will vary depending on level of care and acuity of patients;
- **An RN is the leader of each team;**
- Each Team Lead should engage in continual communication with the Unit Charge RN to ensure team members have appropriate breaks and respite care during their shift;
- **Assignment of care and care team huddles: RNs assign duties to members of the care team and teams meet (“huddle”) regularly throughout the shift to reassess the plan for the day;**
- Bedside shift report: RNs report to each other at each patient’s bedside at every shift change and conduct a number of safety checks. This time is also used to allow patients and families to ask questions or raise concerns;
- Patient whiteboards: Each patient has a whiteboard near his or her bed with provider and care team members names, a list of the day’s appointments, care goals, anticipated date of discharge, and space for patients and families to leave messages for staff;
- Every provider in contact with a patient introduces him- or herself, states their role, and states the duty they are to perform for the patient;
- Patient shift assessment: An RN or licensed vocational nurse conducts the shift assessment;
- Initial patient assessment and orientation: A Registered Nurse (RN) or Licensed Vocational Nurse (LVN) conducts a patient assessment within 60 min of arrival to the unit and provides verbal information about various aspects of unit functioning;
- LVN/PCT reports to RN: assessments, vital signs values, I/O values, responses to care/treatments

Roles and Responsibilities in Team and Functional Nursing

Intensive Care Unit (ICU)

Team Leader Nurse (ICU RN)
<p><i>Team consists of:</i> <i>[based on scope of practice and competency level]:</i></p> <ul style="list-style-type: none"> • ICU RN Team Lead with: • RNs • Licensed Support Pt Care team members <p>ICU RN Team Lead can oversee up to 8 – 10 patients per team</p>
<p>Team Members RN or LVN:</p> <ul style="list-style-type: none"> • Non-critical patient assessment to include vital signs, input/output and drain management • Administration of non-critical medications • Intravenous care & maintenance • Catheterization insertion/care/maintenance (CAUTI Bundle) • Enema Administration (Fleets, Oil, Tap Water) • Specimen Collection • Assist with patient mobility to include range of motion (ROM) exercises, ambulation, turning/ repositioning • Assist with patient hygienic care (i.e. Bathing and toileting) • Assist with patient meals and feeding • Retrieval of medications from Pyxis • Glucose Accu Check (obtaining sample and documenting) • Observer of PPE donning and doffing (Spotter) • IV Start (Nurses with current competency) • IV fluid bag replacement • Other duties as assigned (within scope and competency) • Hourly rounding • Answering call lights • Respiratory Management <ul style="list-style-type: none"> ○ Ventilator/Trach Management ○ Oxygen Delivery Systems ○ Incentive Spirometer • Medication Administration • Blood & Blood Products Administration
<p>Invasive Monitoring and Management:</p> <ul style="list-style-type: none"> • PA Catheter / Arterial Line • External Pacemaker

Team Nursing Model ICU Example



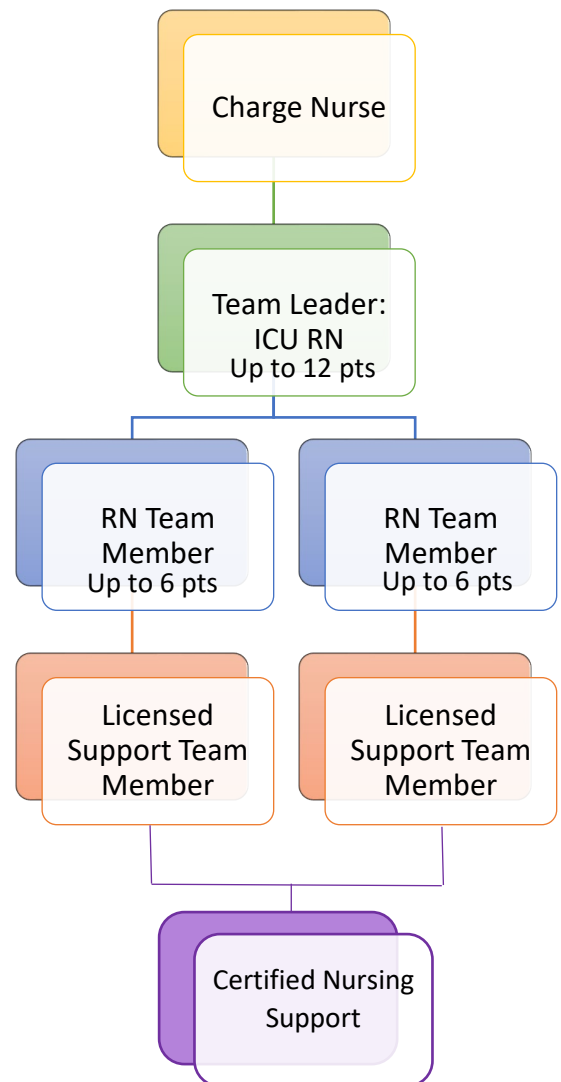
Each Team Lead should engage in continual communication with the Unit Charge RN to ensure team members have appropriate breaks and respite care during their shift.

Roles and Responsibilities in Team and Functional Nursing

Step Down Unit (SDU)

Team Leader Nurse (SDU RN)
<p><i>Team consists of:</i> <i>[based on scope of practice and competency level]:</i></p> <ul style="list-style-type: none"> • SDU RN Team Lead with: • RNs • Licensed Support Pt Care team members <p>SDU RN Team Lead may oversee up to 12 patients per team</p>
<p>Team Members RN or LVN:</p> <ul style="list-style-type: none"> • Non-critical patient assessment to include vital signs, input/output and drain management • Administration of non-critical medications • Intravenous care & maintenance • Catheterization insertion/care/maintenance (CAUTI Bundle) • Enema Administration (Fleets, Oil, Tap Water) • Specimen Collection • Assist with patient mobility to include range of motion (ROM) exercises, ambulation, turning/ repositioning • Assist with patient hygienic care (i.e. Bathing and toileting) • Assist with patient meals and feeding • Retrieval of medical from Pyxis • Glucose Accu Check (obtaining sample and documenting) • Observer of PPE donning and doffing (Spotter) • IV Start (Nurses with current competency) • IV fluid bag replacement • Other duties as assigned (within scope and competency) • Hourly rounding • Answering call lights • Respiratory Management <ul style="list-style-type: none"> ○ Ventilator/Trach Management ○ Oxygen Delivery Systems ○ Incentive Spirometer • Medication Administration • Blood & Blood Products Administration
<p>Certified Nursing Support:</p> <ul style="list-style-type: none"> • Hourly Rounding • Perform/report vital signs (BP, heart rate, resp rate, temp and O2 sat) to SDU nurse • Answering call lights • Assist with patient meals and feeding • Assist with patient mobility to include range of motion (ROM) exercises, ambulation, turning/ repositioning • Other duties as assigned

Team Nursing Model SDU Example



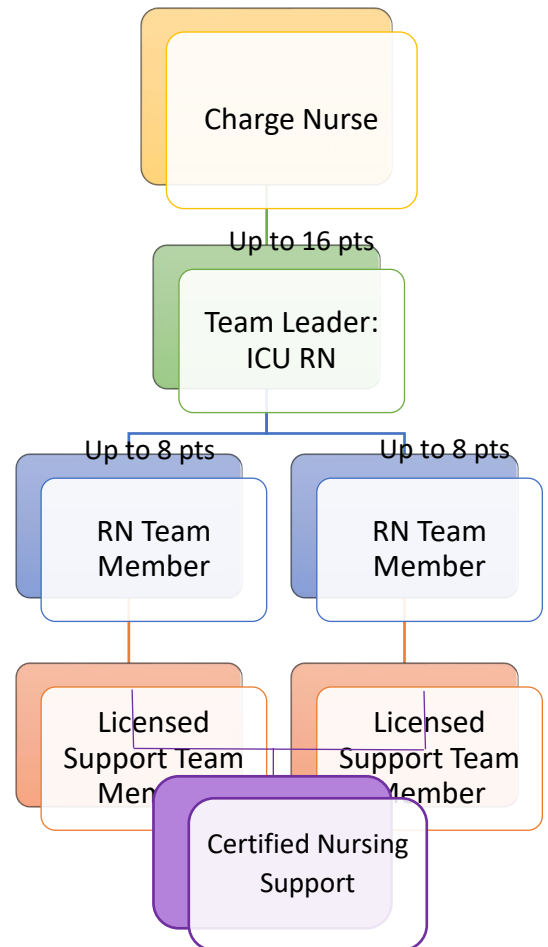
Each Team Lead should engage in continual communication with the Unit Charge RN to ensure team members have appropriate breaks and respite care during their shift.

Roles and Responsibilities in Team and Functional Nursing

Medical Surgical Telemetry (MST)

Team Leader Nurse (MST RN)
<p><i>Team consists of:</i> <i>[based on scope of practice and competency level]:</i></p> <ul style="list-style-type: none"> • MST RN Team Lead with: <ul style="list-style-type: none"> • RNs • Licensed Support Pt Care team members <p>MST RN Team Lead may oversee up to 16 patients per team</p>
<p>Team Members RN or LVN:</p> <ul style="list-style-type: none"> • Non-critical patient assessment to include vital signs, input/output and drain management • Administration of non-critical medications • Intravenous care & maintenance • Catheterization insertion/care/maintenance (CAUTI Bundle) • Enema Administration (Fleets, Oil, Tap Water) • Specimen Collection • Assist with patient mobility to include range of motion (ROM) exercises, ambulation, turning/ repositioning • Assist with patient hygienic care (i.e. Bathing and toileting) • Assist with patient meals and feeding • Retrieval of medical from Pyxis • Assist with patient hygienic care (i.e., bathing, toileting, etc.) • Glucose Accu-Check (obtaining sample and documenting) • Observer of PPE donning and doffing (Spotter) • IV Start • IV fluid bag replacement • Respiratory Management <ul style="list-style-type: none"> ○ Oxygen Delivery Systems ○ Incentive Spirometer • Medication Administration • Blood & Blood Products Administration • Other duties as assigned
<p>Certified Nursing Support:</p> <ul style="list-style-type: none"> • Hourly Rounding • Perform/report vital signs (BP, heart rate, resp rate, temp and O2 sat) to MST nurse • Answering call lights • Assist with patient meals and feeding • Assist with patient mobility to include range of motion (ROM) exercises, ambulation, turning/ repositioning • Transport of specimens to lab • Other duties as assigned

Team Nursing Model MST Example



Each Team Lead should engage in continual communication with the Unit Charge RN to ensure team members have appropriate breaks and respite care during their shift.

Roles and Responsibilities in Team and Functional Nursing
Inpatient Perioperative Nurses and Staff

Team Nurse: PACU Nurses	Team Nurse: OR Nurses	Team Nurse: Pre/Post Nurses
Based on competency level PACU nurses will be assigned to work in critical care setting/ Emergency Department as an RN in the Team nursing model.	Based on competency level OR nurses will be assigned to the medical surgical/step down setting as a RN in the Team nursing model. OR nurses with recent critical care experience (within 3 years), and existence of current ACLS certification may be considered for possible assignment to the critical care setting/ Emergency Department as a RN in the Team nursing model based on competency level.	Based on competency level Pre/Post nurses will be assigned to the medical surgical/step down or critical care setting as a RN in the Team nursing model. Pre/Post nurses with recent critical care experience (within 3 years), and existence of current ACLS certification may be considered for possible assignment to the critical care setting/ Emergency Department as a RN in the Team nursing model based on competency level.
PACU RN: <ul style="list-style-type: none"> • PACU nurses can assist in the ICUs (Team approach) 	OR RN: <ul style="list-style-type: none"> • Helping hands in Inpatient Setting or Emergency Department based on competency level and medical center needs • Manual Proning 	Pre/Post Nurses: <ul style="list-style-type: none"> • Mixed skills • Helping hands in Inpatient Setting or Emergency Department based on competency level and medical center needs
Ancillary staff, OR tech, Anesthesia tech, Scrub tech		
<ul style="list-style-type: none"> • Helping hands • Manual Proning • Runners • Ambulation & Mobility 		

Each Team Lead should engage in continual communication with the Unit Charge RN to ensure team members have appropriate breaks and respite care during their shift.



Roles and Responsibilities in Team and Functional Nursing

Overview of Assigned Functions in Team Nursing












Activity	RN	LVN	CNA/PCT
ADL's	X	X	X
Admission Assessment/ongoing assessment	X	X (data collection only)	VS, height/weight Report changes to RN
Ambulate pts	X	X	X
Appointment bookings			
Bladder Irrigation	X	X	
Blood Glucose monitoring	X	X	
Blood Transfusions	X	X (if certified)	Pick up blood VS only
Blood withdrawal	X	X	
Central Lines	X		
Chemotherapy	X		
Catheterization	X	X	
CPR/BLS	X	X	X
Chest tubes	X	X	Measure level of drainage
Discharge Procedure	X	X (routine teaching)	X (no teaching)
Documentation	X	X	X (VS, ADLs)
Drains	X	X	Empty only
Dressings	X	X	X (non-sterile)
EKGs	X	X	
Enemas	X	X	
Epidurals	X	X (monitor only)	VS only
Feeding Tubes	X	X	
Injections (SQ, ID, IM)	X	X	
Intake & Output	X	X	X
IV pumps	X	X	
IV (peripheral) starts/care/dc	X	X (if certified)	
Lab Data Interpretation	X	X	
Medications (PO, PR, SQ, IM, ID, eye, ear)	X	X	
Medications by inhalation	X	X	
Medications IV	X		
Narcotic administration	X	X	
Nasogastric tubes	X	X	Measure level of output only
Ostomy Care	X	X	Empty bag
PCA	X	X (Monitor only)	
Peripheral IV fluids (containing premixed electrolytes, nutrients, and vitamins)	X	X (if certified)	

Activity	RN	LVN	CNA/PCT
Hang, superimpose and regulate			
Peritoneal dialysis	X		
Post-operative care	X	X	X (VS, ADLs, Incentive Spirometry)
Post-mortem care	X	X	X (Assist)
PPN/TPN	X		
Restraints	X (Initiate)	X (Monitor)	X (Monitor)
ROM	X	X	X
Specimen Collection (sputum, blood, urine)	X	X (if blood certified)	X (no blood)
Specimen Collection (throat)	X	X	/
Suctioning	X	X	X (oral only)
Teaching	X	X (routine teaching only)	
Telemetry Monitoring	X	X	X (skin prep and apply leads)
Trach Care	X	X	
Transporting patient /Transfers	X	X	X
Vital Signs	X	X	X
Weights	X	X	X

Roles and Responsibilities in Team and Functional Nursing

Education Strategy, Tools, & Resources

Educational Strategy, Tools, & Resources will be available within the KPSC COVID-19 Regional Professional Development & Education SharePoint: [KPSC COVID-19 Regional Education](#). This includes:

 Donning and Doffing	 Management of Previously COVID Positive Patients
 Isolation Guidance	 Mask and Scrubs Guidelines
 IV Infusion Without Pump	 Medications (Hydroxychloroquine and Remdesivir)
 KPSC Regional Assistance and Placement Program	 Peri-Op
 Lean In-Helping Hands Education Curriculum	 Regional COVID-19 Drive-Thru Testing
	 Swab Competency Validation Tool

Inpatient Perioperative

Educational Strategy, Tools, & Resources specific to Inpatient Perioperative can be found within the following SharePoint sites:

[Pre/Post/PACU RN to Critical Care Team Nurse Checklist](#)

[OR RN to Medical-Surgical / Telemetry Team Nurse Checklist](#)

Scope and assistance for inpatient perioperative RNs may be individualized on a case by case basis using:

- Competency- self assessment
- Current competency checklist:
 - Pre/Post/PACU RN to critical care team nurse
 - OR RN to medical surgical/telemetry team nurse

References

Christian, M. (2006). Care During a Pandemic: Final Report of the Ontario Health Plan for an Influenza Pandemic (OHPIP) Working Group on Adult Critical Care Admission, Discharge and Triage Criteria, 1-25. http://www.cidrap.umn.edu/sites/default/files/public/php/21/21_report.pdf

Dickerson, J. & Latina, A. 2017. Team nursing: A collaborative approach improves patient care. Nursing 2020. Volume :47 Number 10, page 16 – 17.

Hasting, Stephanie, et.al. Introduction of a team-based care model in a general medical unit. 2003. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4940946>. Retrieved March 28, 2020.

Society of Critical Care Medicine (2013). Augmenting Critical Care Capacity During A Disaster. http://sccmmedia.sccm.org/documents/LMS/Augmenting-Critical-Care-Capacity-During-Disaster/story_html5.html