Standards of Clinical Nursing Practice and Role Delineations
Standards of Clinical Practice & Role Delineations

Acknowledgements

This document was prepared and written by the SGNA Practice Committee and adopted by the SGNA Board of Directors in 2009. It is published as a service to SGNA members.

SGNA Practice Committee 2009-10
LeaRae Herron-Rice, MSM, BSN, RN, CGRN, Chair
Rhonda L. Casey, MHA, BS, RN, CGRN
Michelle Day, BSN, RN, CGRN
Cynthia M. Friis, MEd, BSN, RN, BC
Donna Girard, BSN, RN, CGRN, Co-Chair
Jane D. Harker, MS, BSN, RN, CGRN
Michelle R. Juan, MSN, RN, CGRN
Mary K. Panther, BSN, RN, CGRN
Christine Sarisley, MSN, BSN, RN, CGRN
Tina Schaeublin, BSN, RN, CGRN

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The Society of Gastroenterology Nurses and Associates, Inc. (SGNA) presents this guideline for use in developing institutional policies, procedures, and/or protocols. Information contained in this guideline is based on published data and current practice.

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Preface
Gastroenterology nurses and associates perform some tasks independently. Some tasks depend upon collaboration with others, and some tasks depend on the performance or judgment of another member of the health care team. These components will differ significantly depending upon the nurse practice act in each state, professional or vocational licensure, educational background, and place of employment.

Standards are authoritative statements used by the nursing professions to describe the responsibilities for which practitioners are accountable. Standards of Clinical Nursing Practice include:

- Standards of Professional Performance for the Registered Nurse in the Gastroenterology and/or Endoscopy setting,
- Standards of Practice for the Registered Nurse in the Gastroenterology and/or Endoscopy setting, and
- Standards of Practice for the Licensed Practical/Vocational Nurse in the Gastroenterology and/or Endoscopy setting.

The standards for Registered Nurse (RN) are in accordance with the American Nurses Association (ANA) (ANA, 2004). The licensed practical/vocational nurse standards are in accordance with the National Federation of Licensed Practical Nurses, Inc. (2003).

This document provides examples for implementation of the Standards of Practice as they relate to the roles of: advanced practice nurses (APRN), registered nurses, licensed practical/vocational nurses (LPN/LVN), and nursing assistive personnel. Role delineations have been defined by the Society of Gastroenterology Nurses and Associates, Inc. and are included in this document. Gastroenterology nurses and associates should strive to meet each of the Standards of Practice either independently, collaboratively, or dependently. The Standards of Practice are valid in all health care settings.

Definition of Terms
Gastroenterology Nurse refers to practitioners (APRN, RN, LPN/LVN) in gastroenterology, hepatology, or endoscopy.

Gastroenterology (GI) Registered Nurse refers to Advanced Practice Registered Nurse (APRN) and Registered Nurse (RN).

Licensed Practical/Vocational nurse refers to Licensed Practical Nurse (LPN) and Licensed Vocational nurse (LVN).

Measurement criteria are key indicators of competent practice for each standard. For a standard to be met, all the listed measurement criteria must be met.

Nursing Assistive Personnel (NAP) refers to individuals who are trained to function in an assistive role in the gastroenterology setting.

Standards of Practice describe a competent level of clinical nursing practice.
Standards of Professional Performance describe a competent level of behavior in the professional role.
Standards of Professional Performance for the Registered Nurse in the Gastroenterology and/or Endoscopy Setting

**Standard I: QUALITY OF PRACTICE**

**Standard:** The GI Registered Nurse systematically enhances the quality and effectiveness of nursing practice.

**Rationale:** The systematic approach uses specific steps to promote and continuously improve patient care quality.

**Measurement Criteria:**

1. Participates in quality-of-care activities as appropriate to the individual's position, education and practice environment. These activities may include:
   a. identifying aspects of care important for quality monitoring (e.g., timely discharge);
   b. identifying indicators used to monitor quality and effectiveness of nursing care (e.g., use of reversal agents, return to baseline status);
   c. collecting data to monitor quality and effectiveness of nursing care;
   d. analyzing quality data to identify opportunities to improve care;
   e. formulating recommendations to improve nursing practice or patient outcomes;
   f. implementing activities to enhance the quality of nursing care;
   g. participating interdisciplinary teams that evaluate clinical practice or health care; and/or
   h. developing policies and procedures to improve quality of care.

2. Utilizes the results of quality-of-care activities to initiate changes in nursing practice.

**Standard II: PROFESSIONAL PRACTICE EVALUATION**

**Standard:** The GI Registered Nurse evaluates his/her own nursing practice in relation to professional practice standards, guidelines, and relevant statutes and regulations.

**Rationale:** The GI Registered Nurse is responsible for self-evaluation as well as soliciting constructive feedback from health care team members.

**Measurement Criteria:**

1. Engages in performance appraisal on a regular basis, identifying areas of strength as well as areas for professional practice development
2. Seeks constructive feedback regarding his/her own practice.
3. Takes action to achieve goals identified during performance appraisal.

4. Participates in peer review as appropriate.

5. Applies professional standards of care and guidelines for practice as a benchmark for his/her personal performance.

6. Demonstrates age-appropriate competency in a culturally and ethnically sensitive manner.

**Standard III: EDUCATION**

**Standard:** The GI Registered Nurse acquires and maintains current knowledge and competency which reflect current nursing practice.

*Rationale:* The GI Registered Nurse is primarily responsible for his/her own ongoing educational and professional development.

**Measurement Criteria:**

1. Acquires knowledge and skills appropriate to gastroenterology and endoscopy nursing.

2. Demonstrates a commitment to lifelong learning through self-reflection and inquiry to identify learning needs.

3. Demonstrates accountability for maintaining competency and participates in educational activities relevant to professional issues and trends in gastroenterology nursing practice.

**Standard IV: COLLEGIALITY**

**Standard:** The GI Registered Nurse contributes to the professional development of peers, colleagues, and others.

*Rationale:* The GI Registered Nurse has an obligation to support and advance the specialty and the profession by sharing knowledge and expertise. He or she has the opportunity to positively influence peers, colleagues, and others regarding health care issues, education, and practice.

**Measurement Criteria:**

1. Shares knowledge and skills with colleagues and others. This may be accomplished by a variety of methods, which may include:
   a. serving as a resource;
b. mentoring;

c. serving as a preceptor or instructor;

d. providing in-services, seminars, programs, or workshops;

e. acting as a role model; and/or

f. participating as an active member in professional and consumer organizations, contributing to professional publications, and presenting at professional meetings.

2. Provides peers with constructive feedback regarding their practice.

3. Contributes to an environment that is conducive to clinical education of nursing students as appropriate.

4. Utilizes appropriate interpersonal communication techniques to avoid defensive responses and resistance to changing practice.

5. Assists colleagues in building or maintaining the competencies necessary to provide safe, effective care to patients.

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<th>Standard V: ETHICS</th>
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**Standard:** The GI Registered Nurse integrates ethical provisions in all areas of practice.

*Rationale:* Care and service must be delivered without infringing upon basic human rights. The GI Registered Nurse is accountable to patients to safeguard these rights while providing appropriate nursing care.

**Measurement Criteria:**


3. Serves as a patient advocate, assisting patients with self-advocacy skills.

4. Delivers care in a non-judgmental and non-discriminatory manner that is sensitive to diversity, including a patient’s culture, race, religion, age, gender, sexual preference, ethnicity and personal preference.

5. Delivers care in a manner which preserves and protects patient autonomy, dignity, and rights.

6. Seeks available resources to help formulate ethical decisions.

7. Reports illegal, incompetent, and impaired practices.
Standard VI: COLLABORATION

Standard: The GI Registered Nurse collaborates with the patient, significant others, and health care providers in providing patient care.

Rationale: Continuity of service requires coordination and collaboration of health care delivery among all providers.

Measurement Criteria:

1. Communicates with the patient, significant others, and health care providers regarding patient care and the nurse's role in the provision of care.

2. Collaborates with other members of the health care team for patient care as needed.

3. Makes referrals, including provisions for continuity of care, as needed.

Standard VII: RESEARCH

Standard: The GI Registered Nurse integrates the findings of peer-reviewed, published scientific research in practice.

Rationale: Utilization of evidence-based research expands knowledge, enhances practice, and improves patient outcomes.

Measurement Criteria:

1. Utilizes interventions substantiated by valid, scientific research as appropriate to the individual's position, education, and practice environment.

2. Participates in research activities as appropriate to the individual's position, education, and practice environment, which may include:
   a. identifying clinical problems suitable for nursing research;
   b. participating in data collection;
   c. participating in a unit, organization, or community research committee or program;
   d. sharing research activities with others;
   e. conducting research;
   f. reading and critiquing research for application to practice; and/or
   g. using knowledge gained from research findings in the development and revision of policies and procedures.
Standard VIII: RESOURCE UTILIZATION

**Standard:** The GI Registered Nurse considers factors related to safety, efficacy, and cost in planning and delivering patient care.

*Rationale:* Maximizing resource utilization in the gastroenterology/endoscopy setting enhances the delivery of patient care.

**Measurement Criteria:**

1. Evaluates factors related to safety, effectiveness, and cost when two or more practice options would result in the same expected patient outcome.
2. Assigns tasks or delegates care based on the needs of the patient and the knowledge and competence of the provider selected.
3. Assists the patient and significant others in identifying and securing appropriate services available to address health-related needs.

Standard IX: LEADER

**Standard:** The GI Registered Nurse provides leadership in the GI/endoscopy practice setting and in the profession.

**Rationale:** The GI Registered Nurse provides direction and guidance to members of the healthcare team.

**Measurement Criteria:**

1. Engages in teamwork within their practice setting.
2. Works to create and maintain healthy work environments.
3. Demonstrates a willingness to lifelong learning for self and others.
4. Mentors others in gastroenterology.
5. Promotes advancement of the profession through participation within SGNA.
Standards of Practice for the Registered Nurse in the Gastroenterology and/or Endoscopy Setting

Standard I: ASSESSMENT

Standard: The GI Registered Nurse is accountable for collecting comprehensive data pertinent to the patient’s health or situation.

Rationale: Assessment by the GI Registered Nurse is essential to formulate a nursing diagnosis, create a plan of care, and make sound clinical judgments. Appropriate elements of data collection may be delegated to other members of the health care team.

Measurement Criteria:

1. Prioritizes data collection by the patient's immediate condition or needs and the relationship to the proposed intervention.

2. Collects pertinent data using appropriate assessment techniques.
   a. The nurse obtains data by interview, examination, observation, and review of health records.
   b. The nurse obtains data related to age-appropriate assessment and needs.
   c. Data include, but are not limited to:
      1) Perceptions and expectations related to health care.
      2) Function and status of significance to the gastroenterology/endoscopy patient, such as: airway patency, body image/need for privacy, current level of comfort or pain, physical limitations, communication barriers, elimination patterns, nutrition and hydration status, safety measures which may be needed, self-care deficits, skin integrity/color/turgor, venous access, and or the ability to swallow.
      3) Knowledge of health maintenance and practice of health promotion and disease prevention activities.
      4) Educational needs/developmental level.
      5) Previous access to and utilization of the health care systems.
      6) Current diagnosis(es), medications and treatment(s).
      7) Environmental, occupational, recreational, psychosocial, cultural and spiritual information.
      8) Past medical history.
      9) Review of body systems.

3. Collects data in a systematic and ongoing process.

4. Involves the patient, family, significant others, health care providers, and environment, if appropriate, when collecting data.

5. Ensures that relevant data are documented and retrievable.
**Standard II:** DIAGNOSIS

**Standard:** The GI Registered Nurse analyzes the assessment data to determine the nursing diagnoses.

*Rationale:* The GI Registered Nurse, using independent judgment and available data, formulates the nursing diagnoses upon which interventions are based.

**Measurement Criteria:**

1. Derives the nursing diagnosis from the patient assessment data. Gastroenterology/endoscopy examples may include:
   a. Potential adverse reactions related to sedation and analgesia.
   b. Potential safety risks related to alterations in level of consciousness.
   c. Potential for bleeding related to alterations in blood clotting mechanism.
   d. Knowledge deficit related to newly-diagnosed gastrointestinal disorder.

2. Confirms nursing diagnoses and risk factors with the patient, family, significant other, and health care providers, when possible and appropriate.

3. Documents diagnoses and risk factors, thereby facilitating and determining expected outcomes and contributing to a plan of care.

**Standard III:** OUTCOME IDENTIFICATION

**Standard:** The GI Registered Nurse identifies expected outcomes unique to the patient.

*Rationale:* The outcomes identified for a particular patient will drive the interventions selected to achieve those outcomes.

**Measurement Criteria:**

1. Derives culturally appropriate, expected outcomes from the diagnoses.

2. Documents expected outcomes as measurable goals a time frame for attainment. Gastroenterology/endoscopy examples may include:
   a. The patient will meet discharge criteria within [a specified time frame].
   b. The patient will successfully perform a return-demonstration of ostomy care prior to discharge.
   c. The patient's primary caregiver will correctly demonstrate administration of feeding via PEG/gastrostomy tube prior to discharge.
   d. The patient will identify the name, dose and frequency, purpose and potential side-effects of the medications prescribed.

3. Formulates and prioritizes outcomes collaboratively with the patient, family,
significant other, and health care providers.

4. Derives realistic and attainable outcomes that provide direction for continuity of care for the patient.

5. Modifies expected outcomes based on the status of the patient or evaluation of the situation.

**Standard IV: PLANNING**

**Standard:** The GI Registered Nurse develops a plan of care that prescribes interventions to attain expected outcomes.

*Rationale:* Effective planning is essential for appropriate interventions.

**Measurement Criteria:**

1. Promotes patient progression toward the previously-identified outcomes.

2. Individualizes the plan based on gastroenterology patient's conditions or needs, considering elements such as:
   a. the ability of the patient to tolerate preparation for diagnostic or therapeutic interventions;
   b. the patient/significant other's readiness to learn;
   c. the use of appropriate teaching methods;
   d. the skills necessary to comply with preparation and post-procedure instructions;
   e. any co-existing health conditions (e.g., TB, HIV, hepatitis); and
   f. the patient’s age and developmental level.

3. Develops the plan with the patient, family, significant others, and health care providers, when appropriate.

4. Ensures that the plan reflects current gastroenterology nursing practice and includes:
   a. priorities for nursing action;
   b. a logical sequence of actions to attain the outcome;
   c. current evidence-based practice;
   d. appropriate and available resource utilization;
   e. consideration of the patient's rights and responsibilities;
   f. a multidisciplinary approach to care; and
   g. current trends in research.

5. Documents the plan of care using standard terminology and language.

**Standard V: IMPLEMENTATION**
**Standard:** The GI Registered Nurse is responsible for the implementation, either personally or by delegation, of the interventions identified in the plan of care.

*Rationale:* The GI Registered Nurse implements interventions to ensure continuity of effective care; to prevent, correct or reduce identified risks; and to return the patient to the highest level of wellness attainable.

**Measurement Criteria:**

1. Utilizes evidence-based interventions which are consistent with the established plan of care. Examples may include:
   a. Intervening as necessary to ensure patient safety.
   b. Acting as a patient advocate.
   c. Ensuring modesty, privacy and confidentiality.
   d. Respecting diversity of the patient or group.

2. Implements interventions which comply with existing professional practice standards and institutional policies and procedures. Examples may include:
   a. Infection control;
   b. Sedation and analgesia;
   c. Radiation safety;
   d. Handling of hazardous materials; and
   e. Health teaching and promotion.

3. Implements interventions in a timely and safe manner.

4. Documents interventions in the identified plan.

5. Collaborates with nursing colleagues and others to implement the plan.

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**Standard VI: EVALUATION**

**Standard:** The GI Registered Nurse evaluates the patient's progress toward attainment of outcomes.

*Rationale:* Evaluation is essential to modify the plan of care, develop new interventions, and attain expected patient outcomes.

**Measurement Criteria:**

1. Conducts a systematic, ongoing, criterion-based evaluation of the outcomes, including elements such as:
   a. Response to diagnostic or therapeutic interventions;
   b. Level of understanding about disease process; and
   c. Demonstration of appropriate self-care techniques.
2. Utilizes ongoing assessment data to revise diagnoses and plan of care as needed to attain expected patient outcomes.

3. Involves the patient, family, significant others, and health care providers in the evaluation process when appropriate.

4. Documents patient’s results to the intervention.

Standards of Practice for the Licensed Practical/Vocational Nurse in the Gastroenterology and/or Endoscopy setting.

**Standard I: Education**

1. Complete a formal and approved education program in practical nursing.
2. Successfully pass the National Council Licensure Examination for practical nurses.
3. Acquire knowledge and skills applicable to gastroenterology nursing.
4. Responsible for maintaining the highest possible level of professional competency at all times.
5. Participate in continuing education and opportunities to enhance personal growth and professional development.

**Standard II: Legal/Ethical Status**

1. Respond appropriately in situations in which unprofessional conduct by a peer or other health care provider occurs.
2. Recognize and have a commitment to meet the ethical and moral obligations of practice of nursing.
3. Will not accept or perform professional responsibilities which the individual knows he/she is not competent to perform.

**Standard III: Practice**

1. Accept assigned responsibilities as an accountable member of the health care team (HCT).
2. Function within the limits of educational preparation and experience as related to the assigned duties.
3. Function with other members of the HCT in promoting and maintaining health and prevention of disease for the gastroenterology patient.
4. Know and utilize the nursing process in planning, implementing, and evaluating health services and nursing care for the individual patient or group.
a. Planning
   i. Data collection of health status of the individual patient.
   ii. Report information gained from data collection.
   iii. Identify patient outcomes.

b. Implementation
   i. Observe, record, and report significant changes which require intervention or different goals.
   ii. Apply nursing knowledge and skills to promote and maintain health and prevent disease.
   iii. Carry out therapeutic regimens and protocols under supervision according to institutional policy, state nurse practice act, and professional standards.

c. Evaluation
   i. Evaluate the plan of care for the gastroenterology patient.
   ii. Encourage patient and appropriate others to be involved in the evaluation process.
   iii. Collaborate with others to modify the plan of care.

5. Participate in the development of policies concerning the health and nursing needs of society and the roles and functions of the LPN/LVN.

References


Recommended Reading:


POSITION STATEMENT

Role Delineation of the Registered Nurse in a Staff Position in Gastroenterology

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Definitions
Role delineation is a description of the responsibilities and functions of a health care worker in a specific role, including the current activities common to this role.

Background
The role of the Registered Nurse (RN) has expanded with the changes in advancing technology and newly-defined patient needs. Recognizing that the role of the staff nurse in gastroenterology, hepatology, and/or endoscopy is still evolving, the following is a statement intended to broadly describe the responsibilities and functions of the RN in a staff role specializing in gastroenterology nursing. The roles that the nurse assumes depend on his/her basic nursing preparation, specialized formal or informal education, and clinical experiences. Certification as a gastroenterology registered nurse (CGRN) validates the acquisition of such skills and knowledge. RNs practice in a variety of settings, such as hospitals, private offices, ambulatory care centers, and clinics (SGNA, 2008). The RN functions within the scope of practice as defined by state nurse practice acts, job description of the employing facility, SGNA Standards of Clinical Nursing Practice and Role Delineation Statements (2009), and the Guide to the Code of Ethics for Nurses with Interpretive Statements (2008).

Position
The RN is accountable for the quality of nursing care rendered to patients. The RN assumes responsibility for assessing, planning, implementing, directing, supervising, evaluating direct and indirect nursing care, and identifying outcomes for patients in the gastroenterology setting. The RN is responsible for determining the education and competency level of assistive personnel to whom he or she is delegating (American Nurses Association [ANA], 2004). The specific patient populations to whom direct care is provided include adults, adolescents, or children with gastrointestinal disorders/diseases.

The role of the RN in gastroenterology includes, but is not limited to:

1. Systematically assessing the health status of individuals and record related health data,
2. Establishing nursing diagnoses,
3. Planning and implementing nursing interventions,
4. Providing health education and pre, intra, and post procedure education to patients and significant others,
5. Administering and evaluating pharmacological and other therapeutic treatment regimens mandated by the particular situation, evidence-based practice, and recent advancements in gastroenterology,
6. Evaluating outcomes of nursing intervention and initiating change when appropriate,
7. Making ethical and moral decisions surrounding patient care,
8. Acting sensitively with consideration to the diversity of the patient or group,
9. Assisting the physician during diagnostic and therapeutic procedures to promote optimal patient outcomes by team collaboration,
10. Responding to emergency situations to promote optimal patient outcomes by recognizing changes in the patient's health status,
11. Performing diagnostic studies as ordered by a physician,
12. Documenting patient data to ensure continuity in the provision and coordination of patient care,
13. Assisting in the management of follow up care,
14. Collaborating with other health care professionals to ensure quality and continuity of care,
15. Serving as a patient advocate, within the limits of the law,
16. Acting as a resource for others,
17. Serving as a mentor for other nurses,
18. Participating in continuing education and achieving/maintaining certification,
19. Participating in data collection for research using evidence-based practice to improve patient outcomes,
20. Monitoring performance by developing and participating in performance improvement activities, and
21. Participating as an active member in professional and consumer organizations, contributing to professional publications, and presenting at professional meetings.

References


Recommending reading

Approved by the SGNA Board of Directors March 1997, February 2001, February 2005
Revised October 2009.
POSITION STATEMENT

Role Delineation of the Licensed Practical/Vocational Nurse in Gastroenterology

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Definitions
Role delineation is a description of the responsibilities and functions of a health care worker in a specific role, including the current activities common to this role.

Background
Licensed Practical Nurses (LPN)/Licensed Vocational Nurses (LVN) practice in a variety of settings, such as hospitals, nursing homes, private offices, ambulatory surgery centers, and clinics (Kelsey, 2005). Recognizing that the role of the LPN/LVN in gastroenterology, hepatology, and/or endoscopy is still evolving, the following is a statement intended to broadly describe the responsibilities and functions of the LPN/LVN in this specialty. The roles which the LPN/LVN assumes depend on his/her basic nursing preparation, specialized formal or informal education, and clinical experiences. The LPN/LVN functions within the scope of practice as defined by state nurse practice acts, job description of the employing facility, SGNA Standards of Clinical Nursing Practice (2009), and the National Federation of Licensed Practical Nurses’ Nursing Practice Standards for the Licensed Practical/Vocational Nurse (2003).

Position
Under the supervision of a licensed registered nurse (RN) or physician, the LPN/LVN is accountable for the quality of nursing care he or she provides to patients and utilizing the nursing process, assumes responsibility for planning, implementing, directing, and evaluating nursing care for assigned patients in the gastroenterology/endoscopy setting. The specific patient populations to whom direct care is provided includes adults, adolescents, or children with gastrointestinal disorders/diseases.

The role of the LPN/LVN includes, but is not limited to:
1. Contributing to the planning, implementation, and evaluation of patient care,
2. Observing, recording, and reporting significant changes in the patient’s healthcare status,
3. Documenting patient data to ensure continuity in the provision and coordination of patient care,
4. Effectively communicate with patients, significant support person(s) and members of interdisciplinary health care team incorporating interpersonal and therapeutic communication skills (National Association for Practical Nurse
5. Administering and evaluating pharmacological and other therapeutic treatment regimens within the limitations of licensure and institutional policy,
6. Assisting the physician and/or Gastroenterology (GI) Registered Nurse during diagnostic and therapeutic procedures to promote optimal patient outcomes by team collaboration,
7. Performing diagnostic studies as ordered by a physician,
8. Assisting with follow-up care,
9. Collaborating with other health care professionals,
10. Acting as a resource for others,
11. Serving as a mentor for others,
12. Participating in continuing education which will lead to personal growth and professional development,
13. Participating in data collection for research, and evidence-based practice to improve patient outcomes,
14. Monitoring performance by developing and participating in quality management activities, and
15. Participating as an active member in professional and consumer organizations, contributing to professional publications, and presenting at professional meetings (NAPNES, 2007).

References


Recommended reading

POSITION STATEMENT

Role Delineation of Nursing Assistive Personnel
in Gastroenterology

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Definitions
Accountability refers to being responsible and answerable for actions or inactions of self or others in the context of delegation (NCSBN, 2005).

Delegation refers to entrusting the performance of a selected nursing task to an individual who is qualified, competent, and able to perform such tasks (ANA, 2005; National Council of State Boards of Nursing (NCSBN), 2005).

Nursing Assistive Personnel (formerly known as Unlicensed Assistive Personnel) refers to individuals who are trained to function in an assistive role in the gastroenterology setting. Nursing Assistive Personnel who have specialized training or education in a specific area (gastroenterology), may be further classified as Technicians, for example, GI assistants, GI technicians, or GTS (GI Technical Specialist) who have direct patient care responsibility and are supervised by a GI Registered Nurse (RN) (ANA, 2007).

Role delineation is a description of the responsibilities and functions of a healthcare worker in a specific role, including the current activities common to this role.

Supervision refers to the provision of guidance or direction, oversight, evaluation, and follow-up by the licensed nurse for the accomplishment of a nursing task delegated to nursing assistive personnel (ANA, 2005; NCSBN, 2005).

Background
To meet the challenges of continuing change in the health care industry, Nursing Assistive Personnel have become an integral part of the health care team in gastroenterology, hepatology, and endoscopy practice settings (Newhouse, Steinhauser & Berk, 2007; Kleinman & Saccomano, 2006).

Position
Nursing Assistive Personnel will only accept or perform responsibilities which the individual knows he/she is competent to perform. After demonstrating required competencies, Nursing Assistive Personnel contribute to optimal patient outcomes by providing delegated patient care activities within specified limits (NCSBN, 2005).
The role of the Nursing Assistive Personnel in gastroenterology includes but is not limited to:

1. Assisting in data collection to identify the patient's needs, problems, concerns or human responses, e.g., vital signs.
2. Assisting, under the direction of the GI Registered Nurse, in the implementation of the established plan of care.
3. Assisting the physician and GI Registered Nurse before, during, and after diagnostic and therapeutic procedures.
4. Providing and maintain a safe environment for the patient and staff (ANA, 2005) by complying with regulatory agency requirements and standards set forth by professional organizations and employers.
5. Acting sensitively with consideration to the diversity of the patient or group.
7. Knowledge of practice issues related to the field of gastroenterology.
8. Compliance with ethical, professional and legal standards inherent in patient care and professional conduct, e.g., patient's bill of rights.
9. Participate in quality management activities as directed.
10. Collaborating within the gastroenterology team and other healthcare professionals to ensure quality and continuity of care.

Nursing Assistive Personnel are encouraged to complete the GI Associate’s skill validation test and achieve the title GI Technical Specialist (GTS) (Heard, 2004).

References


Recommended Reading


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POSITION STATEMENT

Role Delineation of the Advanced Practice Registered Nurse in Gastroenterology

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Role delineation is a description of the responsibilities and functions of a health care worker in a specific role, including the current activities common to this role.

Background
The advanced practice nursing role in gastroenterology, hepatology, and endoscopy is still evolving. The following is a statement to broadly describe the responsibilities and functions of the Advanced Practice Registered Nurse (APRN) specializing in gastroenterology nursing. APRNs are differentiated from basic nursing practice by expansion, specialization, and advancement (American Nurses Association [ANA], 2003; Hamric, Spross, & Hanson, 2009). The APRN may be either a Clinical Nurse Specialist (CNS) or Nurse Practitioner (NP) who has completed an advanced degree in nursing (master's or doctorate) and who, through study and supervised clinical practice, has become an expert in a clinical area of nursing; in this instance, gastroenterology, hepatology, and/or endoscopy (ANA, 2004: Hamric et al., 2009). Additional specific training, credentials, and/or advanced practice certification may be required by the state in which the nurse practices. The scope of practice of the APRN is distinguished by the level of complexity, responsibility, and autonomy of practice. APRNs practice in a variety of settings, such as hospitals, private offices, ambulatory care centers, and clinics. The APRN functions within the scope of practice as defined by his or her graduate degree, the state nurse practice act, job description of the employing facility, SGNA Standards of Clinical Nursing Practice (2009), the American Nurses Association Nursing: Scope and Standards of Practice (2004), Guide to the Code of Ethics for Nurses with Interpretive Statements (2008), the American Academy of Nurse Practitioners Standards of Practice for Nurse Practitioners (2007), and the National Association of Clinical Nurse Specialists Statement on Clinical Nurse Specialist Practice and Education (2004).

Position
The APRN provides service through core competencies of direct care, consultation, research, expert guidance, leadership, ethical decision making, and collaboration (Hamric et al., 2009). The specific patient populations to whom direct care is provided include adults, adolescents, or children with gastrointestinal or hepatic disorders/diseases. The care provided may include, but is not limited to, advanced assessment, diagnosis, treatment/care planning, implementation, evaluation, patient education, and endoscopy.
procedures.

APRNs build upon the roles of Registered Nurse by exhibiting a greater depth and breadth of knowledge, an increased complexity of skills and interventions, and an advanced synthesis of data (ANA, 2004). The following are general statements describing the APRN role congruent with the ANA (2004) criteria:

The role of the APRN in gastroenterology includes, but is not limited to:

1. Advanced assessment of the GI patient,
2. Initiates and interprets diagnostics test and/or endoscopy procedures,
3. Systematically interprets clinical and diagnostic findings within normal and abnormal variations in making differential diagnoses,
4. Identifies patient outcomes that incorporate research evidence and are attainable through implementation of evidence-based practices,
5. Incorporates cost and clinical effectiveness when identifying outcomes to provide consistency and continuity of care among GI providers,
6. Recognizes assessment, diagnostic strategies, and therapeutic interventions for the plan of care that is based on current evidence, research, and expert knowledge,
7. Effectively collaborates interdisciplinary, multidisciplinary, and transdisciplinary with the health care team to implement the plan of care for GI patients (Hamric et al., 2009),
8. Incorporates expert knowledge and evidence-based research to develop strategies for promoting change in GI nursing care practices,
9. Provides leadership in the health care setting for the coordination of GI patient care services,
10. Coordinates system and community resources that improve the delivery of care for GI patients across continuaums,
11. Provides consultation through integration of clinical data, evidence, and theoretical framework,
12. Prescribes pharmacological agents and/or treatments within his or her prescriptive authority and state law,
13. Evaluates the use of pharmacological and non-pharmacological treatments,
14. Evaluates the effectiveness of interventions with regards to expected patient outcomes,
15. Monitoring performance by developing and participating in quality management activities,
16. Mentors nurses and other colleagues,
17. Participating in continuing education and achieving/maintaining certification and other professional credentials, and
18. Being a leader in professional and practice issues through active membership in professional and consumer organizations, publication of scholarly works, and presentations at professional meetings.
References


Recommended Reading


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SGNA Practice Committee 2009-10
LeaRae Herron-Rice, MSM, BSN, RN, CGRN, Chair
Rhonda L. Casey, MHA, BS, RN, CGRN
Michelle Day, BSN, RN, CGRN
Cynthia M. Friis, MEd, BSN, RN-BC
Donna Girard, BSN, RN, CGRN, Co-Chair
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Christine Sarisley, MSN, BSN, RN, CGRN
Tina Schaeublin, BSN, RN, CGRN