**Job Class Profile:** Psychiatric Licensed Practical Nurse II

**Pay Level:** CG-29  
**Point Band:** 622-675

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**JOB SUMMARY**

The Psychiatric Licensed Practical Nurse (PLPN) II, within their scope of practice, are responsible to provide practical mental health nursing and therapeutic care in the assessment process, assist with the implementation of care plans, collaborate with members of the multi-disciplinary healthcare team, and contribute to the treatment of patients. Work is performed in wards, clinics, or other units of a large mental or acute care hospital.

**Key and Periodic Activities**

— Participates in the development of a nursing care plan to meet the needs of patients and contributes to the comprehensive and holistic nursing assessment.

— Interviews and assess patients’ regarding their mental status and level of risk; interacts and engages in therapeutic relationships and builds rapport; instructs patients and families in their care and health and safety; assists other health disciplines with completion of assessments, meets with other team members to share and document reports in the patients’ profile. May suggest referrals to other professionals as appropriate.

— Performs nursing care such as bathes or assist patients with baths; takes temperature, pulse and respiration checks; prepares and administers medications and applies dressing changes, records intake and output of liquids and solids; assists in feeding and performs other tasks for the patients’ personal needs, and accompanies patients to other departments for testing (i.e. x-ray, EKG).

— Encourages healthy behaviour of patients by identifying antisocial or inappropriate behaviour and reports any behavioural changes to the registered nurse.

— Assists physicians in clinics by booking or coordinating patient appointments and reviewing information regarding the appointments with them. Also, arranges or pulls health records files, and assist patients in clinics with dressing changes.

— Makes frequent rounds, checks the condition or activity of patients; takes or assist patients with participation in leisure activities; and closely monitors their whereabouts and actions.

— Instructs/teaches patients regarding desirable behaviour, teaches life skills (i.e. housekeeping, social and self-help skills), or assist patients when working with other health professionals in rehabilitation programs.

— Answers telephone calls and responds appropriately.

— Participates in crisis intervention and stabilization activities.
### Key and Periodic Activities

- Participates in continuing education.
- May perform workload measurement activities.
- May organize and coordinate the work of student licensed practical nurses completing their preceptorship training.

### SKILL

#### Knowledge

**General and Specific Knowledge:**
- Psychiatric licensed practical nursing and related policies, procedures, trends and developments
- Supportive counselling
- Patient care, assessment, and treatments
- Equipment and technology as it relates to field
- Crisis intervention
- Community supports and agencies
- Current knowledge of trends, research and developments within nursing and related field

**Formal Education and/or Certification(s):**
- Minimum: 2 year diploma (Licensed Practical Nursing)
- Licensure from the College of Licensed Practical Nurses of Newfoundland and Labrador (CLPNNL)
- Post basic course in Mental Health
- May require BLS recertification annually, therapeutic crisis intervention, and suicide prevention training

**Years of Experience:**
- Minimum: 1 year of experience in Psychiatric Nursing

**Competencies:**
- Nursing assessment skills within scope of practice
- Skills in communication and interpersonal techniques and life teaching
- Ability to perform various therapies and procedures and operate various equipment
- Ability to work in a multi-disciplinary team and independently
- Computer skills

**Interpersonal Skills**

- A range of interpersonal skills are used to listen to information, ask questions to gather information, provide advice or counselling, resolve and deal with disputes and upset/angry patients often with the nurse in charge, provide care and comfort, provide information and advice to patients and their families regarding their condition and/or medications and its side effects, gain the cooperation of coworkers and other members of the healthcare team to work as part of a team to complete work issues and solve problems and with the supervisor to discuss any problems or concerns and instruct/mentor students.
- Communications occur with employees within the immediate work area, within and outside the
department and organization (i.e. community resources to provide supports for patients) and include supervisor, patients and their families, students, professional associations and advisors.

**EFFORT**

**Physical Effort**

— The demands of the job occasionally result in considerable fatigue, requiring periods of rest, and a need for strength and endurance.

— When providing direct patient care, constantly uses physical exertion and handling with objects less than 10 lbs (i.e. chairs, IVs, small machines, etc.), and occasionally is required to move, push or pull objects or patients between 10 – 50 lbs and over 50 lbs (i.e. wheelchairs, stretchers).

— Occasionally works in awkward or cramped positions and is required to bend and stretch when assisting patients with daily living activities such as showering or personal hygiene. Constantly walking when performing patient monitoring activities and regularly required to stand and move about. Regularly sits at a computer screen to observe and monitor patients who require constant observation.

— When performing patient care activities, regularly uses gross motor skills, maintains balance, and occasionally operate machinery or equipment which requires very controlled movement.

**Concentration**

— **Visual concentration** is required to observe patients (i.e. some of whom may be confused, disoriented, or suicidal).

— **Auditory concentration** is required to listen to patients requesting information, and to listen to patients interactions with each other and family members in order to prevent any conflicts or disruptive behaviour.

— **Other sensory demands required are smell** which is used to detect patients who may be smoking in inappropriate places and personal hygiene.

— A **high level of alertness and concentration** is required to observe patients who may be at risk, violent, or aggressive. Tasks which are repetitive and require alertness include observation of patients.

— There are **time pressures and deadlines** specifically to document patients care when they are under observation. **Interruptions** happen with patients requesting information. There is lack of control over the work pace due to the unpredictable number of admissions, discharges, emergencies, and changes in a patient’s situation/condition.

— **Eye/hand coordination** is required to give medications through injections, and when responding to or dealing with upset clients to ensure the safety of the patient, clients, and others.

— **Exact results and precision** are required when documenting or charting a patient’s information, when administering medications, taking a patient’s vital signs, and reporting on a patient’s condition.

**Complexity**

— Performs a series of tasks and activities that are similar/related in terms of the skills and knowledge and the tasks are usually well defined.
— Work tasks vary but are performed within scope of practice. Work involves the provision of practical mental health nursing and therapeutic care in the assessment process, assisting with implementation of care plans and contributing to the treatment of patients.
— Typical complexities include handling crisis situations with verbally and physically aggressive, psychotic patients and ensuring safety for everyone.
— Complexities are typically solved by consulting with other team members and manager; reviewing and following organizational policies and procedures; referring to various reference materials including the Compendium of Pharmaceuticals and Specialties (CPS) Manual for medication administration; and reviewing guidelines of CLPNNL, or organizational guidelines for fire, disaster, etc.

**RESPONSIBILITY**

**Accountability and Decision-Making**

— Work tasks and activities are highly monitored or controlled through the documented process in the patient’s care plan.
— Independent decisions within scope of practice are made concerning patients care and comfort, and when administering medication.
— Approval is required to administer non-routine medications and certain treatments, to change a patient’s care plan, change policies and procedures, purchase large supplies/equipment, and staffing decisions. Works under the general supervision of a registered nurse or physician.
— Interprets directions and applies guidelines when emergencies occur. Has some discretion to search patients’ room or belongings, if there is suspicion of inappropriate behaviour.
— May exercise a high degree of discretion and judgment during emergencies, crisis situations or when observing patients to ensure proper care and their health and safety. Decisions outside scope of practice must be made in collaboration with a registered nurse.
— Provides patient information to co-workers, physicians, and nurses, and provides advice or recommendations to patients and family members regarding their condition and medication side affects.

**Impact**

— Tasks and activities have an impact on the immediate work area, within and outside department/organization, and patients.
— Can either negatively or positively impact the quality of care provided to patients based on the care that is provided to them.
— There are impacts on processes and systems, information if it is not accurate and health and safety for everyone if proper care is not given and procedures not followed. The most significant impacts are on patients, their treatment and information provided to them.
— The types of errors that occur are medication errors, errors in documentation, and failure to make observation checks as per orders/policies.
— Any errors are mitigated as the work tasks and activities are highly monitored or controlled through the documented process in the patient’s care plan. Any incidents and occurrences are documented, and any decisions outside of the scope of practice are done in collaboration with a registered nurse in charge. Has license to practice and professional activities are monitored through the professional association.
Errors are typically identified within hours of occurrence.

Development and Leadership of Others

— Not responsible for the supervision of staff.
— Does have some development and leadership responsibilities such as provides orientation and on-the-job advice to new staff, and feedback to charge nurse regarding patient activities. May organize and coordinate the work of student licensed practical nurses doing their preceptorship training.

WORKING CONDITIONS

Environmental Working Conditions

— When performing direct patient care, required to use protective equipment and take universal precautions such as wearing gloves, masks, gowns, etc., proper footwear, washing hands and using sharps containers, following safety procedures/precautions, i.e. Back Injury Preventative Training, using mechanical lifts, paging emergency codes (i.e. code white) as required, and follow isolation procedures.
— There is a limited likelihood of receiving minor injuries or illness or receiving a partial and/or total disability.
— Constantly exposed to physical dangers or threats (i.e. when working with dementia and psychiatric patients), electrical shocks, unusual/distracting noise. Regularly exposed to wet or slippery surfaces, dirt/dust, and often works in awkward confining workspaces where there is lack of privacy. Occasionally, exposed to infectious diseases (i.e. MRSA, HINI, etc.), odours, bodily fluids, waste, and sharp objects (needles).