**Job Class Profile:** Psychiatric Nurse IIB

**Pay Level:** NS-32  
**Point Band:** 944-994

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**JOB SUMMARY**

The Psychiatric Nurse IIB is responsible for providing supervision and/or coordination of professional standards of psychiatric nursing care for a unit, program, or a specialized service. Work also involves administrative planning, organizing, and evaluating services, including participating in and implementing educational or promotional activities. May also perform some patient care work at the Psychiatric Registered Nurse I level.

**Key and Periodic Activities**

- Coordinates and organizes patient care assignments, delegates and directs the completion of work tasks including ensuring that standards of care are appropriate, coordinates the transfer of patients into and out of the unit/facility, guides the working relationships amongst the staff, troubleshoots day-to-day clinical and staffing issues, and liaises with departments within the organization to ensure effective day-to-day functioning. Provides advice, guidance, leadership, motivation and direction to staff, and organizes and facilitates staff meetings.

- Determines appropriate staffing levels including workload requirements, schedules and calls in extra staff to cover unit or liaises with the staffing department for same. Processes leave requests; organizes and submits payroll information, and provides input into staff performance appraisals.

- Completes an in-depth screening assessment for intake into a program or discharge from a hospital or program, determines patient risk, and makes recommendations for appropriate intervention/service or priority level of service. May provide individual intervention to patients such as identifying education needs, counseling, treatment options and/or crisis intervention, if required.

- Completes Occupational Health and Safety assessments, conducts safety inspections, investigates incidents and occurrences, determines if protocol, procedures and best practices are followed, monitors compliance with safe work practices, ensures equipment and machines are working properly, and documents activities.

- Completes workload measurement statistics, conducts chart audits, identifies discrepancies, investigates, and documents as appropriate. Prepares and submits departmental reports to the manager.

- Participates and represents the service/department on committees. Provides consultation to other units, departments and is a resource person for Mental Health issues in the region (i.e. Takes calls from professionals and families regarding how to access services in the region or provides information regarding availability or functioning of the services).
Key and Periodic Activities

- Attends departmental or team meetings and collaborates with manager, other staff, and physicians to review referrals and waitlist, develop and coordinate strategic programming and planning for department/unit which may involve evaluating and implementing clinical standards, policies, procedures, protocols, and quality initiatives.
- Coordinates conflicts or issues with patients, families, staff, physicians and other disciplines and promotes positive employee relations and cooperation among team members.
- Liaises with physicians, their offices, and hospital departments to organize admissions, transfers, and appropriate/safe bed assignments. Ensures the psychiatrist sees patients’ at high risk and advocates for the transfer of medically unstable patients. Provides updates regarding patients’ condition and requests evaluation or adjustment as required.
- Liaises with community partners for discharge planning, departments within the organization to ensure effective day-to-day functions, and follow up care planning.
- Collaborates and consults with team members regarding clinical issues and in-services, and monitors, if applicable, waitlist for services.
- Orders drugs, supplies, and stocks specialized medical carts for the department/unit.
- Advocates and coordinates services for patients; evaluates current resources and their availability; liaises with health care providers or community agencies/supports for services; and follows up as necessary.
- Provides intervention and support to families waiting for services and advocates for changes in priority, if necessary.
- Visits patients in their home, performs direct patient care, educates, counsels or accompanies them to appointments or programs.
- Consults, coordinates, or participates in family or case conferences with the multidisciplinary healthcare team to assess, monitor, treat and evaluate patients’ plan of care.
- Provides direct patient care activities such as completes a physical and/or mental health assessment, obtains patient history, admits patients to care facilities, teaches and counsels patients/families regarding diagnoses and treatment, reviews charts, checks/assesses vital signs and symptoms, administers and monitors medications and injections, attends patient rounds, and carries out physician orders. May also perform/arrange, evaluate, interpret diagnostic tests and procedures (i.e. X-rays, EKG, blood work, etc.), document information, maintain patient and staff safety, interpret physiological findings, and refer patient for discharge or ensures ongoing treatment plans are in place, if required.
- Completes risk assessments (i.e. self-harm, suicidal, aggressive behaviour, and coordinates referral/follow up care as appropriate). Assesses changes in patients’ condition, symptoms, needs, and concerns, reviews charts, documents and communicates pertinent information, and maintains accurate and detailed records.
- Responds to medical and psychiatric emergencies including code white (psychiatric emergency codes), and may have to physically restrain patients.
- May provide nursing on call services for crisis intervention, client care, emergency situations, etc.
- Organizes education sessions for staff, health care partners as well as the public, and develops and orientates new staff and students. Liaises with drug and product companies to arrange continuing education opportunities, and presents education topics to new employees and the public.
### Key and Periodic Activities

- Communicates, educates (i.e. provides health promotion, screening, and awareness information), and/or counsels patients and families regarding diagnoses, treatment and care, gives instructions on procedures, tests, etc. Facilitates, delivers, or coordinates educational events/presentations for groups, patients, families, health care professionals, and the public.
- Acts as a preceptor for nursing students providing orientation, supervision, education, and evaluation of their clinical placements.

### Skill

#### Knowledge

**General and Specific Knowledge:**
- Psychiatric nursing and related organizational and professional policies and procedures
- Patient diagnoses, assessment, treatment, and Mental Health Status Examination
- Medication preparation, administration, and side effects
- Addiction and treatments
- Therapeutic nursing counselling interventions
- Equipment and technology as it relates to field
- Current knowledge of trends, research and developments within nursing, psychiatry and related fields
- Community agencies, resources and services

**Formal Education and/or Certification(s):**
- Minimum: Undergraduate Degree in Nursing or a 3-year Diploma in Nursing and a Canadian Nurses Association (CNA) post basic certification in Psychiatric/Mental Health Nursing.
- Professional Designation of R.N. (Registration with the Association of Registered Nurses of Newfoundland and Labrador (ARNNL))
- Attends and receives continuous education and training which may include recertification (i.e. BCLS, First Aid, and Therapeutic Crisis Intervention Training).

**Years of Experience:**
- Minimum: 4-5 years of experience

**Competencies:**
- Individual and group counselling
- Critical thinking and computer skills
- Adult learning principles
- Ability to work in a multi-disciplinary team and independently
- Professional responsibility and accountability
- Ethical decision making
- Ability to communicate effectively

**Interpersonal Skills**
- A range of interpersonal skills are used to listen to and collect confidential information; and ask questions to patients, healthcare professionals, and others; conduct formal interviews (i.e.
patient history); provide care, comfort or nurturing; instruct/train/teach patients, families, students, and staff; coach and mentor staff; provide expert advice or counselling; resolve or de-escalate disputes; deal with upset/angry people; gain the cooperation of others and advocate or write letters to health providers or community resources/agencies on behalf of patients for services or equipment.

— Communications occur with patients and their families, other nurses, healthcare professionals/workers, employees, community groups/resources, manager, students, police, suppliers, sales representatives, government representatives, professional associations and advisors (i.e. Professional Practice, clinical educators).

— Most significant contact is with patients and their families, healthcare team members including physicians, and manager.

**EFFECT**

### Physical Effort

— Occasionally, the demands of the job result in considerable fatigue, requiring periods of rest and strength and endurance.

— Regularly moves or lifts equipment/machinery/supplies up to 10 lbs (i.e. meal trays, small supplies and equipment), regularly moves or lifts equipment/machinery/supplies (i.e. beds, meal trolleys, IV poles, monitors, wheel chairs, etc) up to 25 lbs and occasionally is required to restrain patients over 50 lbs.

— When performing patient related tasks, constantly walking or standing to provide care or to observe patients. Constant sitting when documenting patient information on the computer or counselling patients. Occasionally, required to drive to patients homes for visits or to accompany them to community agencies or resources.

— Regularly uses fine finger/precision work requiring steadiness and accurate movement/control such as when performing vital signs, physical assessments, drawing up medications, or working on the computer.

### Concentration

— **Visual concentration** is required to observe or monitor patients who may have alcohol or drugs in their possession, be at risk for self harm, suicide, aggressive or inappropriate behaviour, and to monitor units and departments for smoke (i.e. patients who smoke or would cause fires), and for their health and safety. **Visual concentration** is also used for driving purposes, to provide and conduct risk assessments, to complete charts/reports/documents, to read research articles and publications, administer medications, perform tests, to assess body language during counselling, and to work on the computer documenting patient information.

— **Auditory concentration** includes listening to patients when they are providing information (i.e. medical history, clinical interviews, etc.) or during counselling, listening for patient disturbances, and listening to doctors and co-workers for directions and discussions regarding patient care, to the report at the change of shift, other healthcare team members for direction, advice, understanding and information when conducting assessments (i.e. listening to patients heart and lungs using stethoscopes, and dopplers, etc.), and to listen for emergency codes.

— **Other sensory demands such as touch** are required to perform physical assessments (i.e. check patient for temperature changes, to palpate pulses or lesions), and provide care and
comfort to patients. Smell is also required to detect illness (i.e. odours from wounds), substance use, fire, or patients who may be smoking.

— Examples of repetition requiring alertness is performing risk assessments, administering medications, treatments, and tests, taking vital signs, and performing cardiopulmonary resuscitation (CPR). A higher level of concentration and alertness is required to monitor and observe patients who may be at risk for suicide, violent or inappropriate behaviours, and theirs and other patients’ safety, responding to code whites, and during fire alarms.

— May be subject to time pressures and deadlines when performing administrative responsibilities that have deadlines (i.e. payroll, scheduling of staff, and completion of performance appraisals), giving medications, and responding to emergencies such as volatile situations.

— Often has lack of control over the work pace when there are time pressures and deadlines due to emergencies or crisis situations, and due to the unpredictable number of patient admissions, and patients with a high level of acuity.

— Eye/hand coordination is required when giving injections, using equipment (i.e. glucometer, blood pressure monitor), and when working on the computer.

— Exact results and precision is required when conducting assessments (i.e. vital signs), conducting tests, documenting charts, administering or determining dosages of medications, completing surgical dressings, inserting IVs, and setting up and using equipment (i.e. IV, blood pressure cuff, catheter, etc.).

Complexity

— Tasks and activities are different, sometimes unrelated and require a broad range of skills and a diversity of knowledge.

— Work involves the supervision and/or coordination of professional standards of psychiatric nursing care, administrative planning, organizing and evaluating services, implementing educational or promotional activities and some patient care.

— Typical complexities include caring for a patient whose presentation of illness and issues change from minute to minute. Must be observant of these changes and be able to intervene as appropriate, if necessary.

— Complexities tend to be solved by obtaining advice from other nurses, the manager, discussing with doctors/other healthcare providers, social workers, counsellors, referring to training/experience, the internet, following guidelines, policies and procedures, manuals, policies, ARNNL standards/guidelines, code of ethics, and referring to the Mental Health Care and Treatment Act.

RESPONSIBILITY

Accountability and Decision-Making

— The structure of the work tasks and activities are moderately prescribed or controlled.

— Works independently and as part of an interdisciplinary team. Decisions are typically made with regards to ordering necessary supplies, developing processes that improve effectiveness of the service, accepting or discharging patients in a specific clinic, counselling approaches, patient appointments and schedules, increasing staffing levels depending on the acuity of the patients in the unit/department, approving leave requests, and delegating tasks to colleagues.
and support staff.
— Requires approval for media contact, funding for out of province resources, purchases over a specific amount, and policy or program changes.
— Exercises some discretion within predetermined limits when performing clinic activities such as treatments, interventions, and counselling; purchasing items to support staff; and organizing and coordinating education sessions for staff and others. May exercise a high degree of discretion and judgment when prescribing treatments, treating patients (especially in emergencies), and providing patients with medications. When reviewing physicians’ orders, there is some discretion and judgement used to interpret directions and apply guidelines to make decisions around a patient’s medication, treatment, or care. There is a high degree of discretion and judgment around a patient’s care during emergencies, to ensure their safety.

**Impact**

— Work activities have an impact on the patient, the immediate work area, and within and outside the department/clinic and organization.
— Work activities could either negatively or positively impact on the quality of care provided to patients and their families.
— Resources that are impacted are equipment, processes and systems, information, finances, material (i.e. community resources), and human resources, and health and safety. The most significant impacts are on the patients and the treatment, assistance and medication provided to them, and their health and safety.
— Tasks are generally prescribed and controlled based on professional standards and policies and procedures. Problems tend to be identified and solved quickly.
— The types of errors that could occur include a medication error. This is mitigated through the double checking of medications being administered and physicians’ orders, and the highly documented patient care plan. Other errors are incorrect assessment of patient condition, failure to report any decisions made regarding a patient who may be at high risk. Requires licensure to practice and their professional activities are monitored through their professional association. Administratively, errors can occur with regard to staffing levels and application of policies and procedures. Problems are typically identified within hours of problem identification.
— Provides information, advice, and recommendations to the manager, members of the interdisciplinary team including the staff, patients, their families, and the community.

**Development and Leadership of Others**

— Typically responsible for the direct and ongoing bargaining unit supervisory activities for a large size work group of employees (>10 employees).
— May provide other development and leadership responsibilities such as on-the-job advice, guidance, orientation, mentoring, and training to new staff.
— Additionally, may provide team lead responsibilities or participate in or represent the service on committees, act as a technical expert for the service/program, provide staff training, community education and health awareness, and may participate in projects related to the department.

**WORKING CONDITIONS**

**Environmental Working Conditions**
— Required to use protective equipment or follow precautions such as call Code White alarms if required, wear gloves, goggles, masks, gowns, appropriate footwear, and take preventative measures against the spread of diseases/infections (hand washing). Also, there is a requirement to practice safety techniques, i.e., follow working alone policy, Back Injury Prevention Program (BIPP), to use mechanical lifts, eye wash stations, and/or sliding board for lifting or moving patients.

— There is moderate likelihood of receiving minor cuts, bruises or acquiring minor illnesses, limited likelihood of receiving a fracture or other injuries, and receiving a partial or total disability, if all safety precautions are undertaken.

— There is constant exposure to unusual or distracting noise, regular exposure to conditions such as bodily fluids/waste, infectious diseases, hazardous chemicals, odours, sharp objects (i.e. needles), awkward confining spaces, lack of privacy when giving treatments, having discussions and sharing confidential information, and physical dangers or threats (i.e. from upset/aggressive patient and family members). Occasionally, there is exposure to dirt/dust/filth, glare (i.e. from computer), fire from patients’ inappropriate behaviours such as smoking in rooms or starting fires, and wet or slippery floors. May also be required to drive, sometimes in adverse weather conditions.