Overview

Riverside HealthCare’s Model of Professional Nursing Practice was developed around the concept of “Vigilance.” As the model evolved, the concept of “Vigilance” was important to operationalize at the individual, department, and organizational levels.

The interactions among the concept of vigilance and the organizational environment, care delivery environment, outcomes, and professional nursing characteristics and practices all contribute to effective care delivery and an optimal safe healthcare care journey for our patients, families, community, and care providers.

The model has integrated the values of the organization and therefore supports its mission.

Foundation of Nursing Practice

Nurses promote the optimal safe healthcare journey through caring and vigilant actions based on the watchful and continual oversight of the patient’s changing responses to healthcare needs and the care environment in order to maximize intended outcomes.

Organizational Environment

Processes and structures that occur outside the boundaries of the patient’s care unit that influence and support nursing practice and patient care.

Organizational Vigilance

The continual observation, detection, interpretation, and communication of the changing needs and expectations of external and internal sources that result in creating purposeful change.

- Integrity - Respect for human dignity and consistent promotion of fairness and honesty.
- Excellence - Striving for clinical, operational, and service excellence by fostering professional development, accountability, teamwork, and commitment to high quality.
- Partnerships - Cooperation with other care providers that is guided by open communication, trust, and shared decision-making.
- Stewardship - Prudent use of financial and human resources for the advantage of the communities served.
- Shared Governance - Organizational structures and processes that demonstrate a commitment to empower professional nursing staff’s and managers’ active engagement in policy- and decision-making. Nurses engaged in shared decision-making influence their professional practice environment and define, promote, and evaluate consistent nursing practice.
- Purposeful Change - Engagement in deliberate and meaningful change.
- Patient Centeredness - Structures and processes that promote compassion, empathy, and responsiveness to the needs, values, and expressed preferences of the patient and family.
- Standards of Practice - Guidelines and evidence-based rationale that promote consistent patient care throughout the organization.

Care Environment

Factors and conditions that occur within the boundaries of the care unit that can directly or indirectly influence the vigilance of nursing care for the patient and/or family. The care environment is highly influenced by vigilant management
Management Vigilance

The ongoing, continual oversight of the unit’s changing needs and responses which result in modification of fiscal, material, and human resources and expectations that impact patient care, nursing practice, and outcomes on the unit

- Resource Availability – The possession of tools, technology, people, and materials that are readily available to meet the needs of the patients and the workforce.
- Communication - The structures and processes of interactions between individuals in the care environment.
- Staff Capacity - The number, experience, and competency of staff.
- Information – The possession of available and appropriate data to process, manipulate, and organize in order to answer questions in a meaningful and useful manner.
- Team Competence - The supportive nature of the interrelationships between the individual and other caregivers.
- Care Delivery Model - The structures and processes by which the unit uses to organize and provide patient care.
- Peer Accountability - The act of holding team members and colleagues answerable for actions and outcomes.
- Culture of Inquiry – The promotion of expectations of calculated risk-taking, innovation, and reflection that generates new knowledge and practices.

(Nursing Care) Vigilance

The primary abilities the nurse needs to have for vigilant nursing care within the work environment. The nurse’s watchful, continual oversight of the patient’s changing needs and responses resulting in effective clinical judgments, nursing actions, and intended outcomes.

Levels of vigilance will vary based on:

- Needs and expectations of the patient/family related to complexity, predictability and, safety.
- Nurse’s experience and level of competence.
- Factors in the care and organizational environment.
- Advocacy - The ability to promote the needs of the patient and/or family during the healthcare journey.
- Surveillance - The ability to systematically observe, collect, analyze, interpret, and respond in an appropriate and timely manner.
- Situational Awareness - The ability of the nurse to accurately perceive elements in the environment that may impact patient care progression, workload, and unit status.
- Vigilant Actions - The ability of the nurse to create and implement actions reflective of current patient status or the anticipated risk for potential changes in the patient’s response and desired outcomes.
- Caring Relationship - The integration of knowledge, evidence, skills, judgment, and the unique connection between the patient and nurse impacting the “how” of providing care as well as the patients perception of being “cared for.”
- Pattern Detection - The ability to reflect on and recognize the meaning of cues that may indicate a change in status.
• Translation - The ability to effectively articulate findings, changes, and results to patients, their families, and other healthcare providers, based on assessment of teaching, learning, and information needs.

• Collaboration - The ability to partner with others to achieve intended outcomes.

**Professional Nursing Characteristics**

• Authority - Recognition and use of the nurse’s rights, power, and responsibility given them by Standards of Professional Practice and the “Nursing Code of Ethics” to use nursing knowledge, skill, and judgments that promote patient care and impact outcomes.

• Accountability – Acceptance of the responsibility for one’s actions, judgments, and the resulting outcomes.

• Autonomy – Recognition of the privilege to make decisions which are not subject to authoritative review by those outside a self-regulating professional body.

• Empowerment – Recognition of the importance of nursing practice, its unique contribution to patient- and family-centered care, and its impact on the goals of the organization. Nurses position themselves to influence decisions and resource allocation.

• Evidence Based Decision-Making - Systematic application of the best available evidence to evaluate options and make decisions in clinical situations.

• Professional Development - Engagement in reflective practice and ongoing learning.

• Competence- Possession of nursing knowledge and skills grounded in nursing standards of care.

**Outcomes**

The results that reflect what patients and healthcare providers planned for the healthcare experience. Intended outcomes reflect knowledge of the patient/patient populations’ healthcare needs, health trajectory, and family and community resources.

• Active Participation of Patient, Family, and Community – Purposeful involvement of the patient, family, and community in determining the intended result of the health care experience.

• Anticipated Needs - The needs patients and/or families foresee having within and as a result of the health care experience. The anticipated needs of the patient and family primarily reflect their perception and knowledge of their healthcare needs.

**Overall Outcome: Optimal Safe Healthcare Journey**

A healthcare experience that recognizes and respects the anticipated needs and intended outcomes of our patients and families in our organization and community.