

RNs Floating to Other Units

As a manager, I am sometimes asked to float registered nurses to other departments within our facility when the unit I manage is below census. At times, the RNs seem hesitant to float to other units and make comments about feeling the situation is unsafe. Can registered nurses be assigned in any clinical setting?

- Registered nurses enter the profession with the foundational knowledge to practice in any clinical setting, however over time their experience enhances some competencies and others are not further developed. Therefore, not all registered nurses will have all the required knowledge, skills and competencies to safely provide care to all patient populations in all settings.
- Nurses question and intervene to address unsafe conditions that interfere with their ability to provide safe, compassionate, competent and ethical care to those to whom they are providing care, and they support others who do the same. (1)
- Registered nurses advocate, intervene and participate with others, as needed, to ensure client safety. (2a)
- Registered nurses advocate and intervene in the client's best interest, and act to protect client, self and others from actual or perceived harm. (2b)
- Registered nurses contribute to the development and integration of quality improvement principles and activities into nursing practice. (2c)
- Registered nurses participate in the analysis, development, implementation and evaluation of practice and policy that guides delivery of care. (2d)
- These expectations of practice guide RNs as they determine if an assignment is appropriate and safe for their patients and for themselves.
- When aspects of care are beyond their level of competence, registered nurses will seek guidance and assistance from a competent practitioner in the new unit and/or request a different work assignment. In the meantime, the RN will remain with the person receiving care until another nurse is available to meet their care needs.
- Some factors which may provide a foundation for practice on a new unit include:
 - o Understanding of daily routines on the unit
 - o Knowing the location of supplies and equipment, particularly for urgent or emergent situations
 - o Understanding the skills and competencies required to care for patients on that unit
 - o Being familiar with the role and expectations for practice of the floating RN – how is it different than a RN employed on the unit? Is there clear communication about who the appropriate person to contact with questions or support?
 - o Collaboration between the unit manager or care coordinator on the new unit and the floating RN to determine how to best utilize the skills and competencies as an addition to current staffing. Pairing RNs together may be a great approach to meeting client care needs while providing adequate support to the floating RN.

RN is used to represent all SRNA members including NPs and RN(AAP)s.

Can managers recall a floating RN if the RN’s home unit becomes busy and the originally-scheduled complement of staff is required?

The most important considerations in any decision regarding assignment of RNs is safety of the patients in both units, and clear communication about expectations during this transition in care assignment. It is important that patients are cared for by a nursing care provider who has the knowledge, skill and judgment to best meet the care needs of the client. This may mean considering the RN who is floating as a temporary solution to the staffing need and having alternate RN options if the situation on either unit changes.

Employer policy should support you in this practice situation. Policy should address the process for floating staff from one unit to another ensuring sufficient nursing resources in both practice areas and having adequate supports in place for the nursing staff to find this situation safe and beneficial.

SRNA Resources

[Code of Ethics for registered nurses \(2017\)](#)

[Registered Nurse Practice Standards \(2019\)](#)

[Standards and Competencies for RN Specialty Practices \(2016\)](#)

Resource Key		
Number	Resource	Reference
1	Canadian Nurses Association (CNA) Code of Ethics (2017)	Ethical responsibility A4, page 8
2a	Registered Nurse Practice Standards (2019)	Indicator 6, page 4
2b	Registered Nurse Practice Standards (2019)	Indicator 7, page 4
2c	Registered Nurse Practice Standards (2019)	Indicator 10, page 4
2d	Registered Nurse Practice Standards (2019)	Indicator 11, page 4