



College of Nursing
of New Brunswick



NEW BRUNSWICK
NURSES UNION

Practice Guideline: **Registered Nurses and Nurse Practitioners Practicing with Limited Resources**



Mandate

Public protection through regulation of nurses in New Brunswick

Under the *Nurses Act*, the College of Nursing of New Brunswick (CNNB) is legally responsible for protecting the public by regulating registrants of the nursing profession in New Brunswick. Regulation makes this profession, as well as individual nurses, responsible for safe, competent, compassionate and ethical nursing practice.

Acknowledgements

CNNB thanks BCCNM for permission to adapt content from [10 Tips for Working with Limited Resources](#) (2022)

© College of Nursing of New Brunswick and New Brunswick Nurses Union. 2019. Revised September 2026.

Copyright © The College of Nursing of New Brunswick and The New Brunswick Nurses Union (NBNU), Fredericton, NB.

Commercial or for-profit redistribution of this document in part or in whole is prohibited except with the written consent of CNNB and NBNU. This document may be reproduced in part or in whole for personal or educational use without permission, provided that:

- due diligence is exercised in ensuring the accuracy of the materials reproduced;
- CNNB and NBNU are identified as the source; and
- the reproduction is not represented as an official version of the materials reproduced, nor as having been made in affiliation with, or with the endorsement of CNNB and NBNU.

Table of Contents

Mandate	2
Table of Contents	3
Introduction.....	4
Underlying Guiding Principles	4
What is Considered Abandonment?	4
Requests to Work Beyond Scheduled Shift	5
Strategies for RNs/NPs Practicing with Limited Resources.....	5
Assess and Set Priorities	5
Collaborate and Communicate.....	6
Document Safety Concerns	6
Strategies for Employers and Nurse Leaders when Practicing with Limited Resources.....	7
Assess and Set Priorities	7
Collaborate and Communicate.....	7
Monitor and Report	7
Additional Resources	8
References	9
Appendix A - Case Studies: RNs and NPs Practicing with Limited Resources	10
Case study 1: Excessive Hours or Overtime for RNs	10
Case study 2: Excessive Hours or Overtime for NPs	11
Case study 3: Floating to an Unfamiliar Unit.....	11
Case Study 4: Safety and Staff Skill Mix	11

Introduction

Registered nurses and nurse practitioners (RNs/NPs)¹ may find it challenging to meet their professional responsibilities in providing safe, competent, compassionate and ethical [nursing practice](#). In many situations, RNs/NPs are required to work with limited resources (e.g. working short staffed, working overtime, floating to an unfamiliar unit or working with an inadequate [skill mix](#)).

However, in all situations, RNs/NPs are expected to practice in accordance with the [Code of Conduct for Registered Nurses and Nurse Practitioners](#) and [standards of practice](#) along with relevant [federal and/or provincial legislation](#), and organizational requirements. The challenge is to prevent unsafe situations that could harm the [client](#). The strategies in this document help RNs/NPs reduce the risk of harm when practicing with limited resources.

Underlying Guiding Principles

- The client is the central focus of RNs/NPs nursing practice.
- RNs/NPs practice in a safe, competent, compassionate, and ethical manner regardless of the work situation.
- RNs/NPs do not abandon the client.
- Employers support RNs/NPs in meeting practice expectations and strive to maintain a [quality professional practice environment](#).

What is Considered Abandonment?

A concept that is important to consider when practicing with limited resources is abandonment. It is directly related to the [nurse-client relationship](#), which is formed for the purpose of meeting the client's needs. The relationship is planned, time-limited and goal directed, and RNs/NPs enter into the relationship with a commitment to ensuring safe, competent, compassionate, and ethical nursing practice. Once a nurse-client relationship has been established, RNs/NPs have the ethical and legal responsibility to provide nursing services for the assigned period of work or until the provision of

¹ CNNB is responsible for regulating registered nurses, graduate nurses, nurse practitioners and graduate nurse practitioners in New Brunswick, as such the abbreviation “RNs/NPs” is used in this document and refers to all aforementioned designations. Licensed practical nurses in New Brunswick are regulated by the Association of New Brunswick Licensed Practical Nurse.

services has been transferred to another appropriate provider. Abandonment occurs when an RN and/or an NP, inappropriately discontinues the nurse-client relationship, or fails to properly transfer accountability for ongoing services to another appropriate provider. Abandonment may apply when an RN/NP discontinues services without:

- negotiating a mutually acceptable withdrawal of service with the employer and/or client;
- arranging for suitable alternative, or replacement services; or
- allowing the employer a reasonable opportunity for alternative or replacement services to be provided.

For more information on abandonment, see the CNNB's [Fact Sheet: Abandonment](#).

Requests to Work Beyond Scheduled Shift

If you are requested to work beyond a scheduled shift, members of the New Brunswick Nurses Union (NBNU) can access the document *Guidelines for RNs When Requested to Work Beyond a Scheduled Shift* by logging into their NBNU account and navigating to the Forms section of the NBNU portal. Members with questions regarding this guideline are encouraged to contact the NBNU directly (see page 8 for contact information).

RNs/NPs who are not members of the NBNU should consult their employer policies for guidance related to requests to work beyond scheduled shifts. Refer to Appendix A for case study examples related to working with limited resources, including scenarios involving requests to work beyond a scheduled shift.

Strategies for RNs/NPs Practicing with Limited Resources

The strategies outlined below are intended to support safe, competent, compassionate, and ethical nursing practice in situations where resources are limited. If you find yourself practicing with limited resources, the following strategies may help guide your response in these situations (BCCNM, 2022):

Assess and Set Priorities

- Identify and prioritize client needs requiring immediate or urgent attention with your colleagues.
- Differentiate activities that are absolutely necessary from those that can be delayed, and modify clients' plans of care and/or delivery of services as necessary.

Collaborate and Communicate

- Advise leadership/supervisors/managers of the situation and if applicable, notify the most responsible provider when services cannot be provided as directed.
- Collaborate with team members to determine how best to meet clients' needs and prioritize services.
- Determine which task can be [delegated](#) to other team members.
- Inform clients, as appropriate, about changes required to address priorities and clearly explain the care or services they can expect. Ensure clients are aware of what to do or who to contact if their situation changes.
- Communicate any changes in client conditions to other members of the [health care team](#) and leadership/supervisors/managers as needed and reassign workload accordingly.
- When reassigned to an unfamiliar practice area, assess your knowledge, skills, and judgment in relation to the assignment. Discuss any competency concerns with the manager/supervisor and negotiate responsibilities that can be performed safely within your individual level of competence. Consult employer policies where available.
- Work with leadership/supervisors/managers to resolve concerns by proposing solutions that support safe, competent, compassionate, and ethical nursing practice.

Document Safety Concerns

- Document all services provided to clients in accordance with organizational policies and the CNNB [Standards for Documentation](#).
- Document concerns about the situation and provide a copy to your supervisor/manager as per your organizational process and complete an incident report when needed. Where applicable, document any concerns about the situation through the NBNU work situation report. Please refer to NBNU to access forms for all workplace settings.

Strategies for Employers and Nurse Leaders when Practicing with Limited Resources

If your organization/institution is faced with a shortage of RNs/NPs, here are strategies to make the situation safer:

Assess and Set Priorities

- Determine the [competencies](#) of the RNs/NPs practicing in the area affected by the situation. If more than one area is involved, the nursing supervisors or charge nurses should be consulted.
- Determine which support staff on hand is appropriate to assist with services.

Collaborate and Communicate

- When requiring an RN/NP to be reassigned to another practice area, consider a buddy approach– assign the RN/NP with an experienced RN/NP in that practice area. Refer to the employer policy if in place for guidance.
- When staff have been reassigned from another practice area, the manager/supervisor of the receiving area must consider the competency of the RN/NP when determining the assignment or delegation of tasks; ensuring RNs/NPs are practicing within their own level of competency.
- Once the situation has stabilized, the manager/supervisor will evaluate whether the RN/NP is required for the remainder of the shift if alternative solutions have not been put in place.
- Keep staff informed about the development of situations/solutions to address the problem.
- Work with staff to address any concerns around client/staff safety.
- Work with the RN/NP so they can be safely assigned duties within their current competencies.

Monitor and Report

- Monitor staffing situation(s) on an on-going basis and report to senior management in a [timely](#) manner.

Additional Resources

CNNB has several resources to help inform RNs/NPs of their accountabilities when working with limited resources:

- [Fact Sheet: Fitness to Practice](#)
- [Fact Sheet: Abandonment](#)
- [Fact Sheet: Reassignment to an Unfamiliar Practice Setting](#)
- [Practice Guideline: Resolving Professional Practice Issues](#)
- [Practice Guideline: Nursing Intraprofessional Collaboration](#)
- [Practice Guideline: Duty to Provide Care](#)

The [Canadian Nurses Protective Society](#) also has resources available for RNs/NPs that are working with limited resources:

- [Professional Liability During the Shortage](#)
- [Reduced Resources and Liability Risks](#)
- [Ask a Lawyer: Documentation During Staffing Shortages](#)

Lastly, RNs/NPs can contact the CNNB or NBNU for additional support.

CNNB

590 Brunswick St
Fredericton, NB
E3B 1H5
1-800-442-4417 (toll free)
506-458-8731 (locally)
Fax 506-459-2838

NBNU

103 Woodside lane
Fredericton, NB
E3C 2R9
1-800-442-4914 (toll free)
506-453-0820 (toll free)
Fax 506-453-082

References

British Columbia College of Nurses and Midwives. (2022). *10 tips for working with limited resources*.

<https://www.bccnm.ca/Documents/learning/WorkingwithLimitedResources10Tips.pdf>

Appendix A - Case Studies: RNs and NPs Practicing with Limited Resources

Disclaimer: The information provided in the following case studies is of a general nature and is not intended to address the circumstances of any particular individual or entity. These scenarios are based on themes and issues identified through consultations received by CNNB related to clinical practice. As each situation is fact specific, individual clinical judgment is required. If you have any questions regarding a particular situation, please contact the CNNB by email at consultation@cnnb-opinb.ca or NBNU at 1-800-442-4914.

Case study 1: Excessive Hours or Overtime for RNs

At the completion of the shift, the supervisor/nurse manager or designate tells the RN that they have to stay to work because no replacement was found for a colleague who called in absent.

Questions to ask yourself

Can the RN refuse to work overtime? Is it considered abandonment if the RN does not stay?

Answer

RNs must balance the [duty to provide care](#) for clients with an equal duty to ensure that they are fit to practice competently. An RN may refuse to work beyond their scheduled shift and withdraw from care due to [fitness to practice](#) when appropriate notice is provided.

Where fatigue or other factors compromise fitness to practice, the RN has a right and a duty to refuse additional hours. RNs should explain the reasons for refusal to work extra hours to the employer, request appropriate staffing support, and indicate how long they are able to stay while a replacement is found. When requests to work extra hours give rise to safety concerns, the RN should provide written documentation of their concerns to the employer. Having open communication and maintaining professionalism are key in these situations.

If the RN leaves without having a proper replacement, they *could* face disciplinary action from their employer and/or a complaint to CNNB regarding [professional misconduct](#). For further information, refer to CNNB's [Fact Sheet: Abandonment](#). NBNU members should consult the Guidelines for RNs When Requested to Work Beyond a Scheduled Shift which can be located through the [member portal](#) on the NBNU website.

Case study 2: Excessive Hours or Overtime for NPs

Questions to ask yourself

Can the NP refuse to work overtime?

Answer

Yes, like the RN, NPs may refuse to work beyond their scheduled shift and withdraw from care due to fitness to practice when appropriate notice is provided. If you're an NP and you are practicing with limited resources, the CNNB and the NBNU acknowledge that you have a more unique working situation, so please contact us for more specific guidance (see page 8 of this document for the contact information).

Case study 3: Floating to an Unfamiliar Unit

An RN has been asked to float to another setting without orientation.

Question to ask yourself

Can an RN refuse to be reassigned or float to another setting that is short staffed?

Answer

RNs may be reassigned to unfamiliar practice areas in certain situations, in accordance with employer policies. RNs have the professional responsibility for accepting only assignments within their competence and must assess their knowledge, skills, and abilities in relation to the reassignment.

If the RN identifies that they are not able to take a client assignment and provide safe, competent, compassionate and ethical nursing practice in a reassigned area, they remain responsible for providing care within their competency. Rather than refusing the assignment, the RN should discuss concerns and negotiate appropriate responsibilities with the supervisor or manager. While the RN may not be able to assume a full client assignment, they may be able to perform specific duties within their individual scope of practice. Employer policies should also be consulted where available.

Case Study 4: Safety and Staff Skill Mix

RNs on a particular unit may be without sufficient professional staff. They are concerned about client safety and worried about liability if a client is harmed.

Question to ask yourself

What are the RN's responsibilities when faced with inadequate skill mix?

Answer

The RN is responsible for identifying and prioritizing the necessary nursing services required to meet the essential needs of the clients and decide which aspects can be safely assigned or delegated to others. The RN should communicate changes in nursing services with clients in a way that instills trust.

Additionally, the RN is responsible for responding to and reporting unsafe situations (see strategies for RNs and NPs practicing with limited resources on page 4). The RN's employer should be notified in writing of the RN's concerns with a request for follow-up. Refer to the following document for more information concerning this issue: [*Guidelines for Interprofessional Collaboration: RNs and LPNs Working Together*](#) and [*Practice Guideline: Assigning, Delegating, Teaching and Supervising in Nursing Practice*](#).