



Patient Abandonment

POSITION STATEMENT

The Mississippi Board of nursing is a consumer protection agency with the authority to regulate the practice of nursing provided for by Mississippi Code of 1972, Annotated, Title 73, Chapter 15.

A position statement is a scope of practice determination made by the Board, as to whether performance of an action by a licensed nurse is within acceptable standards. Position statements are administrative and educational tools that can be used to assist providers, licensed nurses, and other interested parties in scope of practice determinations. Position statements of the Mississippi Board of Nursing are formulated in response to the Board's legally mandated charge to protect the public through safe nursing practice.

DESCRIPTION

In an effort to clarify the definition and use of the term "patient abandonment" as it is applied for disciplinary purposes; the Board of Nursing has adopted the following Position Statement on Patient Abandonment. This Statement is intended to be a guide to nurses and agencies/facilities.

SCOPE OF PRACTICE

For patient abandonment to occur, the nurse must have:

- **Accepted** the patient assignment, thus establishing a nurse-patient relationship; and
- **Severed** that nurse-patient relationship without giving a reasonable notice to the appropriate person (e.g., supervisor, employer) so that arrangements can be made for continuation of nursing care by others.

A nurse-patient relationship begins when the nurse accepts the assignment for patient care. Patient abandonment occurs when the nurse leaves the nursing assignment without transferring patient care and communicating specific patient information to an appropriate caregiver.

Definitions/Terms

"Nursing assignment" Nursing care functions or responsibilities which the nurse has been directed to perform by a person authorized to supervise, or direct the nurse; or independently assumed responsibility for, based on the nurse's qualifications and professional judgment.

"Transferring patient care" Reporting the condition, circumstances, and needs of all

patients under the nurse's care in oral or written form directly to another nurse or appropriate caregiver who acknowledges receipt and understanding of the report.

"Appropriate caregiver" State regulated health care professional whose scope of practice and qualifications include the transferred nursing care functions/responsibilities as defined in the agency's policies.

Examples of patient abandonment include, but are not limited to:

- Leaving the patient without adequately providing arrangements for coverage;
- Leaving abruptly without giving the supervisor or qualified person adequate notice for replacing the nurse;
- Leaving without reporting to the oncoming shift;
- Accepting an assignment of patient care and then leaving the nursing unit or patient care setting without notifying the qualified person; and
- Sleeping in the break room or in any empty patient room for a portion of the shift; thus, being unavailable to assigned patients.

Situations which are **NOT** considered to be patient abandonment, but which may be examples of personnel issues over which the Board has no jurisdiction are: (salary, work conditions, hiring and termination policies)

- No call/no show for work;
- Refusal to work mandatory overtime;
- Refusal to accept an assignment or a nurse-patient relationship;
- Refusal to work additional hours or shifts after the nurse has completed the scheduled shift of duty;
- Not returning from a scheduled leave of absence;
- Refusal to work in an unfamiliar, specialized, or "high tech" area when there has been no orientation, no educational preparation or employment experience;
- Resigning a position and not fulfilling the remaining posted work schedule; and
- Refusal to float to an unfamiliar unit.

Nurse Manager Accountability

During periods of staffing shortages, the nurse manager may need to reassign staff to different patient care areas and/or approve extended tours of duty for nurses. If a nurse has agreed to extend his hours of duty due to short staffing, but has informed the nurse manager of a limit to the extra hours he will work, the nurse manager is responsible for providing a qualified nurse who can accept the report and responsibility for the patients from the over-time nurse. The nurse manager is responsible for assessing the capabilities of personnel in relation to the patient's needs and plan of nursing care and for delegating or assigning nursing care functions to qualified personnel.

Both nurse managers and nurses in direct patient care positions are accountable for providing safe nursing care. During periods of short-staffing or limited numbers of qualified staff, it is essential that nurse managers and nursing staff work together to provide safe care to all patients in a manner consistent with the statute and regulations.

Although the determination of medical procedures and the patient's medical status is a medical decision, the Registered Nurse or Licensed Practical Nurse has the right and the obligation to question orders and decisions which are contrary to acceptable standards and to refuse to participate in procedures which may result in harm to the patient.

HISTORY

Original: 10/05/2001

