

Nursing Practice Standards



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Minister's comments

Health policy of the Lao PDR, as stated in the Tenth Party's Congress Resolution, takes Health Prevention and Promotion as primary, the quality, fair and justice treatment and service to all as significant. To achieve the said policy, it requires active participation, ownership, responsibility from all health professionals within the sector because we work as a team in which doctors, nurses, laboratory analysts and others are inseparable, with the same goal and objective that is to provide care willingly with quality and accessible to all, and the safety of patients is main priority.

The ministry of health has entered the second phrase of health reform with the aim of achieving Goal 3 of Sustainable Development Goals, ensuring universal access to healthcare and quality of care. The provision of quality healthcare is one of the most important components for living of the people, which requires systematic nursing service, support from local authority and all sectors concerned, cooperation from health professionals in order to gain the trust and satisfaction of the people.

Therefore, the development nursing standards such as nursing practice standards, job title classification, eight-hour working system and twelve-hour working system, and scope of the nursing practice is necessary for nursing profession. The standards will serve as a reference basis for the development of tools to be used to monitor, supervise, evaluate and control the quality of nursing service and will be the guidance towards unified nursing practice, continuous nurse development, and more importantly service users will receive quality and safe care.

As the leader of the ministry of health I would like to commend the nursing team for providing their tireless work, knowledge and skills in the development of this nursing practice standards, I would like to thank the Nam Theun 2 project for providing the financial support. I believe that all nurses will pay attention to perform their duties professionally with high responsibility and ethics.

Minister

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Preface

Nursing refers to the action that facilitates activities needed by the body, mind, mood and society of a person, family and community in order to restore health, rehabilitate, care and promote health with their own strengths based on their health status and needs. Nursing is also a chain of the supporting process, which include health promotion, disease prevention, recovery from illness, rehabilitation and dignified death based on scientific theories and arts of nursing. Provision of nursing means action performed by nurses in accordance with scientific theory and arts of nursing. Nursing practice must follow the principles, standards of nursing as the guidance for the practice to ensure that patients receive correct, safe and impartial nursing care.

Standards of nursing are necessary for nursing profession. It indicates the quality and is an important tool for quality control in nursing service. At the present, the Ministry of Health pays attention to improving the quality of service of central hospitals and modernizes them, especially by focusing on development of staff, nurses to make them competent, improve medical equipment with the aim of providing good quality of care to the people of all ethnic groups. In conjunction with these, nursing is the heart of service. In order to improve the quality of nursing to reach international standard equivalence, it is necessary to have standards of nursing practice in each sector because if the standards are in place, they will guide and unify the practice, and more importantly the service users will receive good quality of service. In addition, the standards are the tools to evaluate the performance of nurses. If there are no standards of nursing practice, the quality of nursing practice will not accurately known and nursing profession will lose trust. Therefore, it is the responsibility of all nurses to follow the standards of nursing practice.

The standards of nursing practice consists of two chapters such as service which has 10 standards and professional practice which has 6 standards and each standard has its own criteria.

Objectives:

- 1. To serve as a legal reference for the organization and implementation of nursing practice, and to set a direction for nurses to perform in the same direction;
- 2. To improve the quality of nursing service;
- 3. To serve as a tool to evaluate the performance of nurses.

The scope of application

This set of nursing practice standards applies to all nurses, nursing students and persons interested in it, aiming at practicing with patients in hospitals.

Standards of nursing practice

Chapter I: nursing service

Standard 1: nurses provide care for patients at a health facility continuously twenty fours a day:

Criteria:

- a) Eight hours working per day is divided into three shifts or twelve hours working per day is divided in two shifts;
- b) a nurse with a diploma is the leader of the team responsible for taking care of patients in each shift;
- c) take care of a patient individually based on a patient case;
- d) report patients' situation by cases and hand over the duties to the next shift.

Standards 2: use an autonomous nursing process in providing care for patients

2.1 consolidate a patient's information:

Criteria:

- a) information obtained from the assessment and needs of a patient in accordance with the patient status assessment template;
- b) information on physical condition, mind, mood, society and spirit;
- c) information from interviewing patients, close relatives, and staff taking part in the care and from relevant reports;
- d) systematically and consistently consolidate information;
- e) comprehensively record information in the patient's document and properly store it.

2.2 formal nursing diagnosis:

Criteria:

a) provide formal nursing diagnosis by prioritizing the importance of issue based on information obtained from patient's condition;

- b) provide formal nursing diagnosis which correlates between the needs of patients and causes of the issue;
- c) record the formal nursing diagnosis into a nurse's recording form to specify a nursing plan.

2.3 estimated outcomes from the nursing practice with available human resource Criteria:

- a) patients receive quality nursing service in accordance with the nursing plan based on standards set;
- b) patients and their relatives participate in the care;
- c) patients cooperate in the implementation of nursing plan.

2.4 create a nursing plan for an individual patient and provide nursing practice as assessed

Criteria:

- a) develop a nursing plan with the aim of addressing the problem and provide nursing to each patient as assessed;
- b) develop a nursing plan with a patient, relatives and staff concerned as appropriate;
- c) create a written nursing plan and provide consistent nursing care;
- d) adjust the nursing plan when the issue and symptoms of a patient change.

2.5 provide nursing based on activity and time specified in the nursing plan

Criteria:

- a) carry out nursing activity in the plan and time specified;
- b) recommend a patient, family and relatives to take part in the care;
- c) explain to a patient how to behave when having care in the hospital and at home;
- d) monitor any changes of patient's symptoms and record them.

2.6 compare the appropriateness of patient's changes with the expected outcome

- a) assess the change of nursing based on the estimation;
- b) consistently assess the issue of patient to adjust nursing diagnosis by comparing to the estimation and create a nursing plan as necessary;

 allow the patient and staff to take part in the care to participate in the assessment of appropriateness.

Standard 3: patient visit in each shift of the team responsible for the care

Criteria:

- a) immediately visit patients in the team's responsibility after handing over the report of shift rotation;
- b) assess the issue and symptoms of patients under its responsibility before providing nursing care;
- c) frequently visit a patient with serious illness or rapid changes;
- d) visit patients with less serious illness or slow changes after every nursing care and before handing over the task.

Standard 4: prevent patients from getting infection in the hospital

Criteria:

- a) wash hands with clean water and soap, dry hands with a clean towel/papers or use alcoholic hand rub before, during and after contacting patients if hands are not dirty with blood or other fluids (practice 5 time periods);
- b) use protective equipment appropriate to the duty that you perform for patients;
- c) apply nursing technics by using the principles of disinfection and sterilization;
- d) clean the environment of the team (working area of nurses and patient's rooms) at least twice per day;
- e) arrange patient's beds with the distance of at least one meter between each bed;
- f) separate patients with infectious disease from non-infectious patients;
- g) arrange the environment;
- h) correctly separate the garbage;
- i) do not put the needle cover back on; dispose needles and sharp objects in a punctureresistant, rigid, leak-resistant container.

Standard 5: provide hygiene education to service users and their relatives based on issue and needs

- a) prepare patient's physical and mind readiness before providing hygiene;
- b) provide hygiene appropriate to issue and needs of patients by focusing on patients' cooperation in taking care of themselves while in hospital and at home;
- c) ask patients or close care takers to repeat the steps to be taken to review the level of their understanding;
- d) prepare the place.

Standards 6: mobilize and maintain equipment/tools, materials and medicines necessary for patient nursing to make them ready for use at any time

Criteria:

- a) put equipment/tools in categories and label the date of sterilization and expiration to make it easy for use;
- b) prepare clean and sterilized equipment/tools and materials and enough medicines ready for use, and ensure that an emergency medicine cabinet is placed near the seriously-ill patients' room;
- c) clean, maintain and store equipment, tools, materials to prevent losses.

Standard 7: develop a plan prepare patients before discharging them from hospital to enable them to take care of themselves at home

- a) continuously evaluate the issue and needs of patients starting from the day of admission to the discharging day;
- b) assess the situation and level of readiness of patients to take care of themselves before discharging;
- c) inform patients how to take care of themselves at home such as monitoring abnormal symptoms, body sanitation, daily routine, appropriate food, rest and sleep, exercise, medicine taking, necessary first aid, and a follow-up check-up appointed by the doctor;
- d) explain to the patients, family and relatives how to continue providing care at home; if abnormal symptoms occurs, early check-up is needed;

e) in case the patient needs referral, the nurses need to summarize the issue and needs of the patient and fill in the document as well as to inform and seek assistance from the patient and relatives to before the referral.

Standards 8: encourage patients to adapt themselves to environment when being hospitalized

Criteria:

- a) arrange the place appropriate to illness situation;
- b) arrange the place tidily and place necessary materials near the patient;
- c) explain the rules of the division, section, unit, team and nursing system in the hospital;
- d) explain the illness situation to the patient and relatives.

Standard 9: promote and rehabilitate physical and mental potentials of the patient for selfcare

Criteria:

- a) assess the readiness of the patient for self-care;
- b) develop a self-care plan for the patient; facilitate and add additional activities in the daily routines of the patient when in the hospital and to continue at home;
- c) give the patients and their relatives the opportunity to ask or clarify their concerns;
- d) be a good adviser for the patients in self-care.

Standard 10: service users are satisfied with healthcare service

10.1 before health check

- a) arrange the place and environment to make it clean and easy to contact the public relations section;
- b) greet and welcome service users with smiles and be ready to assist them;
- c) categorize patients by asking for detailed information of symptoms, and prioritize patients for examination;
- d) explain the procedures for health check-up service in the out-patient department;

e) protect service users by forming a queue for check-up (their rights are not infringed).

10.2 during the health check

Criteria:

- a) assist service users as categorized to ensure that they receive a comfortable and safe care:
- b) when examining the body of service users, the doctor and nurse must work together;

10.3 post health check-up

- a) provide clear advice on methods of care to service users;
- b) provide hygiene education to service users and their families regarding self-care at home;
- c) explain the service use as recommended by the doctors;
- d) explain the methods of taking medicine in accordance with the caring plan after receiving medicines;
- e) evaluate the level of satisfaction of service users.

Chapter II: Professional practice

Standard 1: assess the quality and effectiveness of nursing practice

Criteria:

- a) visit patients in a team;
- b) monitor and supervise nursing practice;
- c) hold a meeting before and after performing nursing practice;
- d) hold a consultation meeting case by case.

Standard 2: perform self-evaluation of nursing practice based on the capacity of the nurse and the scope of nursing practice

Criteria:

- a) evaluate activities in accordance with the nurse's capacity;
- b) evaluate the implementation of technical nursing under the scope of nursing practice;
- c) evaluate the implementation of nursing practice based on nursing diagnosis and nursing plan after providing nursing every time;
- d) the healthcare team participates in the evaluation of the nursing practice.

Standards 3: nurses must consistently upgrade their knowledge and skills to meet the new situation

Criteria:

- a) participate in nursing activities and professional advancement such as technical exhibition, seminars, training...
- b) consistently seek to obtain knowledge, experience and expertise related to individual nurse's tasks.

Standard 4: participation, promotion and support the advancement of the healthcare team Criteria:

- a) exchange knowledge, experience, expertise with professional partners and others;
- b) provide constructive feedback on a colleague's performance;
- c) take part in the arrangement of the healthcare facility to make it as a model practice place for students.

Standard 5: nurses adhere to the ethics of nursing profession in their decision making and providing nursing care to patients

Criteria:

- a) provide nursing care without discrimination against classes, races, religions, gender and age in accordance with the ethics of profession;
- b) provide nursing care with the respect of the rights, privacy and dignity of patients;
- c) keep patients' information confidential;
- d) nurses treat the patients the same way as to treat themselves.

Standard 6: provide appropriate and the best nursing to patients

- a) the implementation of nursing activities focuses on safety and bringing the maximum benefits to the patients;
- b) assign the tasks to nurses in accordance with their knowledge and skills and suitable for service users;
- c) inform the service users and their relatives that the service is appropriate to the needs of the patients.

Annex

1. Eight-hour working system

- I. meaning: working eight hours per day means one nurse provides nursing care to patients eight hours per day which is equal to 40 hours per week. If the number of hours exceeds that figure, it will be counted and paid as non-office working hours.
- 1. One day (twenty four hours) is divided into three shifts:
 - Day shift, starting from 8:00-16:00
 - Evening shift, starting from 16:00-24:00
 - Night shift, starting from 24:00-8:00

2. Working calendar arrangement:

- 2.1 there are two days off in a week, it may be in succession or not succession.
- 2.2 The day shift works no more than 4-5 days in succession.
- 2.3 The evening shift works no more than 2-3 days in succession and cannot continue to work in the night shift.
- 2.4 The night shift works no more than 2 days in succession and cannot continue to work in the day shift.
- 3. Working calendar must be available on 25th of every month.
- 4. When asking for a day off, it shall be done before 15th of the month, the head of the unit must check how many nurses have already requested for a day off (depends on the appropriateness of each unit).
- 5. Directors of nursing division or chief of nursing section monitor performance of nurses in each shift and nursing administrative work.
- 6. If there is a need for taking leave/change the shift, a written request must be made and reported to the administrative division.
- 7. Duties and responsibilities of each shift:
 - 7.1 preparation for handing over the tasks
 - the incoming shift must arrives at least 15 minutes before the time.
 - Check and count equipment, patients and documents and hand over the shift.

- Before starting to work, nurses must prepare their personal stuff; they are not allowed to go outside the hospital for meals.
- Prepare food for the night shift (for example, 22:00-06:00 hours).
- In case the nurse working in the evening-night shifts has a class, meeting, the nurse shall take her own responsibility and sacrifice personal time for collective benefits.
- The out-going evening shift and the incoming night shift must sleep in the place provided by the hospital.
- Do not drink alcohol before coming to work.

Arrangement of working system for nurses

The duties of each team

The day team 08:00-16:00 hours

The day team works as follows: at 07:45 hand over the tasks and conduct nursing grand rounds every morning.

The nurse in charge:

- leads the team to visit patients in the unit under her responsibility.
- assigns an individual nurse to be responsible for a particular case.
- visits patients with the doctor.
- implements the doctor's treatment plan.
- explains the treatment and nursing that the patient receive case by case.
- coordinates with other sectors concerned.
- informs the patients and their relatives the caring system in the hospital.

Nurses who provide nursing care and protect the environment

- arrange environment and patient rooms to make them tidy.
- Take vitals and record it into the document.
- assess the patients' conditions.
- take care of the patients under their responsibility such as bathing, washing head,
 changing clothes.
- follow the caring plan such as preparing medicines, giving medicine at the right time, monitoring intravenous fluid, cleaning wound, taking specimens such as taking blood, stool, urine, sputum, monitoring the results of the analyses.
- transport the patients to have X-ray, ultrasound and electrocardiography (ECG), prepare patients for surgery, transfer patients to operating theater.
- receive new patients.
- transport patients to another building.

- refer the patients to another hospital.
- record nursing care at the time of care and specify conditions of patient correctly and completely.
- assign students to be responsible for a particular patient and supervise them in practical training.
- check documents before patients go home.
- give advice to the patients before they go home.
- at 15:30, prepare to hand over the tasks.

The evening team: 16:00-24:00 hours

The evening team works as follows: at 15:30 hand over the tasks and conduct nursing grand rounds.

The nurse in charge:

- leads the team to visit patients in the unit under her responsibility.
- assigns an individual nurse to be responsible for a particular case.
- assess the patients' conditions.
- implements the doctor's treatment plan and record it in the nurse book.
- explains the treatment and nursing that the patient receive case by case.
- coordinates with other sectors concerned.
- informs the patients and their relatives the rules of the hospital.

Nurses who provide nursing care and take care of environment

- arrange environment and patient rooms to make them tidy.
- take vitals and record it into the document.
- assess the patients' conditions.
- take care of the patients under their responsibility such as bathing, washing head, changing clothes.
- follow the care plan such as preparing medicines, giving medicine at the right time, monitoring intravenous fluid, cleaning wound, taking specimens such as taking blood, stool, urine, sputum, monitoring the results of the analyses.

- Transport the patients to have X-ray, ultrasound and electrocardiography (ECG),
- prepare patients for surgery, transport the patients to operating theater.
- receive new the patients.
- Transport the patients to another building.
- refer patients to another hospital.
- record nursing care at the time of care and specify condition of patient correctly and completely.
- assign students to be responsible for a particular patient and supervise them in practical training.
- check documents before patients go home.
- give advice to the patients before they go home.
- prepare equipment for specimens.
- at 23:30, prepare to hand over the tasks.

The night team: 24:00-08:00 hours

The night team works as follows: at 23:30 hand over the tasks and conduct nursing grand rounds.

The nurse in charge:

- assigns an individual nurse to be responsible for a particular case.
- coordinates with other sectors concerned.

Nurses who provide nursing care and look after environment

- arrange environment and patient rooms to make them tidy.
- take vitals and record it into the document.
- follow the caring plan such as preparing medicines, giving medicine at the right time, monitoring intravenous fluid, cleaning wound, taking specimens such as taking blood, stool, urine, sputum, monitoring the results of the analyses.
- direct patients to have X-ray, ultrasound and electrocardiography (ECG),
- prepare patients for surgery, transport the patients to operating theater.
- receive new patients.
- transfer patients to another building.

- refer patients to another hospital.
- record nursing care at the time of care and specify condition of patient correctly and completely.
- assign students to be responsible for a particular patient and supervise when conducting practical training.
- check documents before patients go home.
- give advice to the patients before they go home.
- submit patient statistics to administration division.
- at 07:30-08:00, prepare to hand over the tasks.

The detailed duties:

I. The detailed duties of the nurse in charge

- Check the daily nurse report in order to know the number of patients, the names
 of new patients, out-going patients, deaths, prepare to perform check-up, surgery
 and others.
- Check the individual patient report starting from the treatment orders to the report of nursing results in accordance with the symptoms of patients. If any imperfections were found, the in charge nurse must assign the nurses in service to address before handing over the tasks.
- Check the patients individually together with the in charge nurse who is in active service to find out the number and patients' symptoms as well as the transfer of work.
- Visit the patients every 2-3 hours.
- Check the cleanness and tidiness of the patient room.
- Check all necessary equipment, recording books and other books such as the incident recording book.
- Accept the tasks and examine the nursing plan in accordance with the kardex.
- Hold a team meeting to discuss the nursing issue and develop a nursing plan of the shift.
- Assign the tasks to each team member.

- Visit patients (in round) together with the doctors to provide care to patients.
- Separate the document or nurse chart of the patients who need special treatment in order to make it easy to record temperature, pulse, respiratory and blood pressure at each period and record any changes all the time.
- Visit patients and plan to provide nursing care with the team members.
- Visit intravenous fluids and plan to receive more fluid together with the medication nurse.
- Examine the patients' documents, record the order into the kardex, write prescriptions such as drug prescriptions, test orders, non-medication orders for the members to follow such as performing enema, retaining/removing nasogastric tubes, retaining/removing foley's catheter, caring perineum, cutting perineum, sponge bathing; label complete and accurate information on intravenous containers; and note down new medication, quantity of start does, quantity of single dose, quantity of course such as Chloroquine and curative medicines.
- Provide nursing care to an individual patient as needed.
- Ensure that patients receive medicines and take medicines at the right time.
- Monitor/evaluate the outcome of medication and treatment of patients.
- Record the report of patients under her responsibility into the chart (record the evaluation of nursing into the nursing template and summarize the chart).
- is responsible for reporting to the doctor in case a problem occurs to the patients.
- Facilitate/address the needs and issue of the patients and their relatives.
- Coordinate with the doctors, nurses, patients, patients' relatives and staff concerned.
- Give advice to team members and practical nursing trainees.
- Address issues arisen in the working process. If it is beyond the ability, report to higher level in vertical line.
- Assist to issue a discharge certificate and receive patients if the time permits and is responsible for reporting to the doctor
- Is responsible for the evaluation of issue and health of new patients and plan to provide nursing care.

- Is responsible for the care of patients who are transferred to another building.
- Give knowledge/hygiene education, including necessary health information to patients and their relatives.
- Plan to discharge the patients.
- Monitor each colleague's performance as assigned.
- Check the equipment, medicines and materials needed for the work of the next shift.
- Check the equipment that was used during the shift of the in charge nurse to make sure it is clean and stored properly.
- Assist colleagues to perform other duties in the building as appropriate.
- Hold a meeting to summarize the nursing care in the shift, including problems and obstacles
- Perform patient census.
- Record in the daily nurse report and prepare to transfer the tasks to the nurse in charge of the team in the next shift.

II. Duties of medication nurses

- 1. Receive-submit work.
- 2. Arrange-disseminate medicines based on times by following 6 correct principles, ensure the medicine is enough for all 24 hours.
- 3. Receive and check for accuracy and quantity of the medicine from the patient, explain and provide detailed information to the patients and their relatives about medicine they bought.
- 4. Tag the intravenous fluid correctly.
- 5. Arrange-disseminate medicine, start dose, single dose, medicine/new fluids by adhering to the 6 correct principles.
- 6. Start medication for new patients.
- 7. Report to the nurse in charge, the doctor when there is no medicine in stock.

^{***}round Chart (nurses' note, TPR sheet, Order,.....etc...) before handing over.

- 8. Explain/tell the patient each type of medicine that they can take.
- 9. Monitor round intravenous fluid and plan to provide fluid to the patients, including visiting and changing a set of intravenous fluid according to the time set.
- 10. Record the medication given to the patients in the medication template and the name of the giver.
- 11. Record the receipt of medication by the patient in the nurses' note, including the results of medication (evaluation).
- 12. Are responsible for returning medicine to the patients in case they return home/pass away, move to other buildings or the doctor stops or changes the medication.
- 13. Report to the nurse in charge when the patients encounter a problem.
- 14. Give knowledge/hygiene education, including necessary health information to patients and their relatives.
- 15. Assist colleagues to perform other duties in the building as appropriate.
- 16. Execute other duties as assigned.

III. The duties of the treatment nurses

- 1. Take vitals in accordance the time set and record it in the temperature note, report to the nurse in charge and medication nurses when the patients have a fever, abnormal blood pressure, low temperature in patients with a fever, and check the blood pressure again if it is abnormal.
- 2. Record in and out water, and dispose urine and spit.
- 3. Issue a discharging certificate if the patients go home in the evening and at night.
- 4. Receive and transfer patients when they move to another building, return home or move to another hospital.
- 5. Collect specimens, take blood, send it to the laboratory, and follow the results.
- Provide treatment to patients such as cleaning wound, performing enema, retaining/removing nasogastric tubes, caring perineum, cutting perineum, sponge bathing.
- 7. Prepare and transport the patient to the operating theater.
- 8. Transport the patient to the radiography theater.

- 9. Change clothes for patients, bed sheets and clean the patient's room.
- 10. Store the bed sheets of the patients who return home and clean the place.
- 11. Prepare nursing supplies to ensure their readiness and availability for nursing 24 hours, store, maintain and check the expiration date, and sterilize medical tools; prepare clean cotton wool, surgical cotton pads enough for the next day; check and steam equipment such as a tongue depressor, Foley's catheter set, cotton wool container, forceps and forceps container and others.
- 12. Check and note down equipment and materials needed for the next day, and count the items such as nursing documents, prescription, checkup order, fluids, gloves, garbage bags, detergent, soap, drink water for patients in special rooms, paper towel, cotton wool, surgical cotton pads, K-Y jelly, 70% alcohol, Dettol, dakin, acetone and others.
- 13. Report the broken equipment to the team leader, chief and deputy chiefs of nursing section, and write a request letter for repairing.
- 14. Ensure the cleanliness of nursing equipment such as a thermometer, sphygmomanometer, stethoscope, medical supply cart, wound care cart, blood taking, patient stretcher trolley, patient-wheel chair, IV fluid stand, male urinal, female urinal, document and document cart.
- 15. Look after the rooms to make sure they are clean and tidy at all time.
- 16. Look after the patient's clothes rooms to make sure they are clean and tidy at all time.
- 17. Look after the nurse's water closet to make sure it is clean and tidy at all time.
- 18. Give knowledge/hygiene education to the patients and their relatives.
- 19. Assist colleagues to perform other duties when the time permits such as rearrange the patient beds, change patients' clothes, receive new patients and transport patients to the X-ray Theater.
- 20. Execute other duties assigned by the nurse in charge or the team leader.
- 21. The evening shift dinning time is 17:30 hours.

Recommendations for Ward Round in accordance with nursing process

- 1. Visit the patients after taking the shift
- 2. Visit the patient at least every 2-4 hours.

- 3. Chat with the patients during the visit.
- 4. Prepare information to give advice and investigate the patient's illness history.
- 5. Observe the patients' condition during the visit.
- 6. Fulfill the needs of patients willingly and timely during the visit.
- 7. Record the patients' condition during the visit.
- 8. During the visit, the dialogue should be about nursing care.
- 9. Monitor and address the issue found during the visit all the time and continuously.
- 10. Examine and record the nursing correctly and appropriate to post visit.
- 11. Record the inspection and arrangement of the environment to make it clean and safe.
- 12. Record the examination of equipment and tools.
- 13. Consider the issue found during the visit and plan to address the issue.
- 14. Observe the nursing practice during the visit.

Recommendations for handing over the tasks

- 1. Prepare the information about care, nursing, personnel and equipment appropriately such as the type of medicine that is out of stock, equipment that is not there or not enough for providing the service to the patients so the team leader or the nurse in charge address these problems.
- 2. Visit the patients, examine the nursing record before handing over the tasks.
- 3. Visit the patient, personnel, environment and equipment before handing over the tasks.
- 4. Report to the team the nursing practices implemented and their results, and nursing practices that need to be carried out correctly and completely.
- 5. Report the nursing issues/nursing diagnosis in accordance with the guidance of nursing process.
- 6. The person who hands over the tasks and the person who receives the tasks must check the nursing record together.
- 7. The person who hands over the tasks and the person who receives the tasks must visit the patients together.
- 8. The person who hands over the tasks and the person who receives the tasks must check equipment, environment and personnel together.

- 9. There must be an explanation, inquiry and discussion about the future nursing directions between the person who hands over the tasks and the person who receives the tasks.
- 10. The time for handing over the tasks is 30-40 minutes.

Recommendations for patient admission

- 1. Prepare the beds and clothes appropriate to the patients.
- 2. Prepare nurse's chart, kardex, IV fluid stand, IV fluid tag, date of IV fluid start tag.
- 3. Prepare document for advising the patients and their relatives about the hospital's service.
- 4. Take the patient down from the patient trolley, introduce herself, and call the patient's name.
- 5. Inquire the illness history and take vitals.
- 6. Give advice about the place and the regulations of the hospital.
- 7. Give advice about food and medication time to the patients.
- 8. Start to give medicine as prescribed by the doctor, take blood or monitor the results of the blood test.
- 9. Report to the doctor in accordance with the hospital's policy.
- 10. Complete the nurse's chart.
- 11. Write the kardex plan for nursing.
- 12. Record the statistic of new patients.
- 13. Record nursing and issue a Temperature Pulse and Respiratory record.
- 14. Monitor and evaluate the result of nursing.

Recommendations for preparing medication

- 1. Prepare medicine from the kardex.
- 2. Prepare medicine based on time.
- 3. Record the patient's receipt of medicine into the medication card.
- 4. Plan to provide IV fluid to the patients.

Recommendations for patient visit with doctors

1. Prepare documents, test results, X-ray test results of each patient.

- 2. Prepare prescription sheets, test ordering forms to make sure that they enough and ready for use in the cart.
- 3. Prepare K-Y jelly and 70% alcohol for hand cleaning.
- 4. Prepare examination equipment such as torch, tongue depressor, stethoscope.
- 5. Politely communicate with doctors, patients and their relatives during the doctor's visit provide hygiene education to patients and their relatives.
- 6. Assist the doctor in the examination of patients such as throat examination, patient positioning, patients' body covering during the examination.
- 7. Assist the doctor in writing the prescription and test orders.
- 8. Explain, respond to questions, give advice on self-behavior to patients and their relatives.

Recommendations for recording treatment orders in the kardex

- 1. Write down the date of treatment order in the Date Column.
- 2. Write down the continuing order medicines in the Medications Column, and time into the Time Column in pencil after finish preparing medicines.
- 3. When the doctor orders to stop medication, cross out the medicine and the date of dedication with a pencil.
- 4. Write down a single treatment order in the Single Order Column, including medicine, fluids, blood transfusion and other treatments such as inserting NG tube, performing water enema, retaining Foley's catheter, surgery preparation; write down the performing/giving IV fluid time in the Time Column.
- 5. In case the patient is NPO, write down in the Diet Column with a pencil.
- 6. When receiving new patients, write down illness history in the History Column and develop a nursing care plan in the Nursing Care Plan Column such as vital signs every 4 hours in the Vital Signs Q4h Column (specify the time), record the fluid intake and outtake every 8 hours in the Q 8h Column (specify the time), changing the IV fluid and IV tube (specify time).
- 7. Put a mark in the box (□) in the Time Column with a pencil when the tasks have been completed.

- 8. The leader of the team check the kardex every day, delete the mark in the box (□) in the Time Column to prepare for the next medication.
- 9. Review, evaluate and adjust the nursing plan daily.
- 10. When transferring the patient to another ward, the kardex must be transferred with the patient.
- 11. When the patients return home, the kardex must be kept in the ward at least three days for the review of the past.

2. Twelve-hour working system/day

- I. Working twelve hours per day means that one nurse provides nursing care to patients 12 hours per day, which is equal 60 hours per week; the number of excessive working hours per week is 40 hours. It will be calculated and paid as non-office working hours.
 - 1. One day which has 24 hours is divided into two shifts as follows:
 - Day shift: starting from 08:00-20:00 hours
 - Evening shift: starting from 20:00-08:00 hours
 - 2. Working calendar arrangement:
 - 2.1 there are two days off in a week. It can be consecutive or non-consecutive.
 - 2.2 The day shift works no more than 3 consecutive days.
 - 2.3 The evening shift works no more than 2-3 consecutive days and cannot continue to take the day shift.
 - 3. Working calendar must be available on the 25 of every month.
 - 4. In case there is a request for a day off, it must be done before 15th of every month, and the leader of the team must check how many staff have already taken a day off (depending on the appropriateness of the unit)
 - 5. Directors of nursing division or nursing section monitor performance of nurses in each shift and nursing administration.
 - 6. In case there is a need for a day off/change the shift, a request letter must be made and nurses can exchange between themselves and report to the nursing division.

7. Duties and responsibilities of each shift

- 7.1 Preparation for handing over the tasks
 - The incoming shift must arrive at least 15 minutes before the time.
 - Check and count equipment, patients and documents and hand over the tasks.
 - Before starting to work, nurses must prepare their personal stuff; they are not allowed to go outside the hospital for meals.
 - Prepare food for the evening shift (for example, 22:00-06:00hours).
 - In case the nurse works in the evening-night shifts has class, meeting, she shall take responsibility and sacrifice personal time for collective benefits.

- The out-going evening shift and the incoming night shift must sleep in the place provided by the hospital.
- Do not drink alcohol before coming to work.

Arrangement of working system for nurses

Duties of each team

Day Team 08:00-20:00hours

The day team works as follows: at 07:45 hand over the tasks and conduct nursing grand rounds every morning.

The duties of the nurse in charge:

- leads the team to visit patients in the unit under her responsibility.
- assigns an individual nurse to be responsible for a particular case.
- visits patients with the doctor.
- implements the doctor's treatment plan.
- explains the treatment and nursing that the patient will receive case by case.
- coordinates with other sectors concerned.
- informs the patients and their relatives the caring system in the hospital.

Nurses who provide nursing care and take care of environment

- arrange environment and patient rooms to make them tidy.
- Take vitals and record it into the document.
- assess the patients' conditions.
- take care of the patients under their responsibility such as bathing, washing head, changing clothes.
- follow the care plan such as preparing medicines, giving medicine at the right time, monitoring intravenous fluids, cleaning wounds, taking specimens such as taking blood, stool, urine, sputum, and monitoring the results of the test.
- Transport the patients to have X-ray, ultrasound and electrocardiography (ECG),
- prepare patients for surgery, transport patients to operating theater.
- Receive new patients.
- Transport patients to another building.
- Refer patients to another hospital.

- Record nursing care at the time of care and specify conditions of patient correctly and completely.
- assign students to be responsible for a particular patient and supervise them in practical training.
- check documents thoroughly before discharging patients.
- give advice to the patients before discharging.
- at 19:30hours, prepare to hand over the tasks.

The evening team: 20:00-08:00hours

The evening team works as follows: at 19:30 hand over the tasks and conduct nursing grand rounds together.

The duties of the nurse in charge:

- leads the team to visit patients in the unit under her responsibility.
- assigns an individual nurse to be responsible for a particular case.
- assess the patients' conditions.
- implements the doctor's treatment plan and record it in the nurse book.
- explains the treatment and nursing that the patient will receive case by case.
- coordinates with other sectors concerned.
- informs the patients and their relatives the rules of the hospital.

Nurses who provide nursing care and take care of environment

- arrange environment and patient rooms to make them tidy.
- take vitals and record it into the document.
- assess the patients' conditions.
- take care of the patients under their responsibility such as bathing, washing head, changing clothes.
- follow the care plan such as preparing medicines, giving medicine at the right time, monitoring intravenous fluids, cleaning wound, taking specimens such as taking blood, stool, urine, sputum, monitoring the results of the analyses.
- transport the patients to have X-ray, ultrasound and electrocardiography (ECG),

- prepare patients for surgery, transfer patients to operating theater.
- receive new patients.
- transport patients to another building.
- refer patients to another hospital.
- record nursing care at the time of care and specify condition of patient correctly and completely.
- assign students to be responsible for a particular patient and supervise in practical training.
- check documents before discharging patients.
- give advice to the patients before discharging.
- prepare equipment for specimens.
- Submit the patients statistics to administrative division
- at 07:30, prepare to hand over the tasks.

The detailed duties:

I. The detailed duties of the nurse in charge:

- Checks the daily nurse reports in order to know the number of patients, the names
 of new patients, out-going patients, deaths, prepare to perform check-up, surgery
 and others.
- Checks the individual patient report starting from the treatment orders to the report of nursing results in accordance with the symptoms of patients. If any imperfections were found, the in charge nurse must assign the nurses in service to address before the handover of the tasks.
- Checks the patients individually together with the in charge nurse who is in active service to find out the number of patients and symptoms as well as the transfer of work.
- Visits the patients every 2-3 hours.
- Checks the cleanness and tidiness of the patient room.
- Checks all necessary equipment, recording books and other books such as the incident recording book.

- Receives the tasks and examine the nursing plan in accordance with the kardex.
- Holds a team meeting to discuss the nursing issue and develop a nursing plan of the shift.
- Assigns the tasks to each team member.
- Visits the patients together with the doctors.
- Separates the document or nurse chart of the patients who need special treatment
 in order to make it easy to record temperature, pulse, respiratory and blood
 pressure at each period and record any changes all the time.
- Visits the patients and plan to provide nursing care with the team members.
- Visits intravenous fluids and plan to receive more fluids together with the medication nurse.
- Examines the patients' documents, record the treatment order into the kardex, write prescriptions such as drug prescriptions, test orders, non-medication orders for the members to follow such as performing enema, retaining/removing nasogastric tubes, retaining/removing foley's catheter, caring perineum, cutting perineum, sponge bathing; label complete and accurate information on intravenous containers; and note down new medication, quantity of start does, quantity of single dose, quantity of course such as Chloroquine and curative medicines.
- Provides nursing care to an individual patient as needed.
- Ensures that patients receive and take medicines at the right time.
- Monitors/evaluates the outcome of medication and treatment of patients.
- Records the report of patients under her responsibility into the chart (record the evaluation of nursing into the nursing chart and summarize the chart).
- is responsible for reporting to the doctor in case a problem occurs to the patients.
- Facilitates/addresses the needs and issues of the patients and their relatives.
- Coordinates with the doctors, nurses, patients, patients' relatives and staff concerned.
- Gives advice to team members and practical nursing trainees.

- Addresses issues arisen in working process. If it is beyond the ability, report to higher level in vertical line.
- Assists to issue a discharge certificate and receive patients if the time permits and is responsible for reporting to the doctor
- Is responsible for the evaluation of issue and health situation of new patients and plan to provide nursing care.
- Is responsible for the care of patients transferred to other buildings.
- Gives knowledge/hygiene education, including necessary health information to patients and their relatives.
- Plans to discharge the patients.
- Monitors each colleague's performance as assigned.
- Checks the equipment, medicines and materials needed for the work of the next shift.
- Checks the equipment that was used during the shift of the in charge nurse to make sure it is clean and stored properly.
- Assists colleagues to perform other duties in the building as appropriate.
- Holds a meeting to summarize the nursing care in the shift, including problems and obstacles
- Performs the patient census.
- Records in the daily nurse report and prepare to transfer the tasks to the nurse in charge of the team in the next shift.
- ***round Chart (nurses' note, TPR sheet, Order,.....etc...) before handing over.

II. Duties of medication nurses

- 1. Receive-submit work.
- 2. Prepare-disseminate medicines based on times by following 6 correct principles, ensure that the medicine is enough for all 24 hours.
- 3. Receive and check for accuracy and quantity of the medicine from the patient, explain and provide detailed information to the patients and their relatives about medicine they bought.

- 4. Tag the intravenous fluid correctly.
- 5. Arrange-disseminate medicine, start dose, single dose, medicine/new fluids by adhering to the 6 correct principles.
- 6. Start medication for new patients.
- 7. Report to the nurse in charge, the doctor when there is no medicine in stock.
- 8. Explain/tell the patient each type of medicine that they can take.
- 9. Monitor round intravenous fluid and plan to provide fluid to the patients, including visiting and changing a set of intravenous fluid according to the time set.
- 10. Record the medication given to the patients in the medication template and the name of the giver.
- 11. Record the receipt of medication by the patient in the nurses' note, including the results of medication (evaluation).
- 12. Are responsible for returning medicine to the patients in case they return home/pass away, move to other buildings or the doctor stops or changes the medication.
- 13. Report to the nurse in charge when the patients encounter a problem.
- 14. Give knowledge/hygiene education, including necessary health information to patients and their relatives.
- 15. Assist colleagues to perform other duties in the building as appropriate.
- 16. Execute other duties as assigned.

III. The duties of the treatment nurses

- 1. Take vitals in accordance the time set and record it in the temperature note, report to the nurse in charge and medication nurses when the patients have a fever, abnormal blood pressure, low temperature in patients with a fever, and check the blood pressure again if it is abnormal.
- 2. Record water intake and outtake, and dispose urine and spit.
- 3. Issue a discharging certificate if the patients go home in the evening and at night.
- 4. Receive and transfer patients to another building, return home or move to another hospital.
- 5. Collect specimens, take blood, send it to the laboratory, and follow the results.

- 6. Provide care to the patients such as cleaning wound, performing enema, retaining/removing nasogastric tubes, caring perineum, cutting perineum, sponge bathing.
- 7. Prepare and transport the patients to the operating theater.
- 8. Transport the patients to the radiography theater.
- 9. Change clothes for the patients, bed sheets and clean the patient's room.
- 10. Store the bed sheets of the patients who return home and clean the place.
- 11. Prepare nursing supplies to ensure their readiness and availability for nursing 24 hours, store, maintain and check the expiration date, and re-sterilize medical tools; prepare clean cotton wool, surgical cotton pads enough for the next day; check and steam equipment such as a tongue depressor, Foley's catheter set, cotton wool container, forceps and forceps container and others.
- 12. Check and note down equipment and materials needed for the next day, and count the items such as nursing documents, prescription, checkup order, fluids, gloves, garbage bags, detergent, soap, drink water for patients in special rooms, paper towel, cotton wool, surgical cotton pads, K-Y jelly, 70% alcohol, Dettol, dakin, acetone and others.
- 13. Report the broken equipment to the team leader, chief and deputy chiefs of nursing section, and write a request letter for repairing.
- 14. Ensure the cleanliness of nursing equipment such as a thermometer, sphygmomanometer, stethoscope, medical supply cart, wound care cart, blood taking, patient stretcher trolley, patient-wheel chair, IV fluid stand, male urinal, female urinal, document and document cart.
- 15. Look after the rooms to make sure they are clean and tidy at all time.
- 16. Look after the patient's clothes rooms to make sure they are clean and tidy at all time.
- 17. Look after the nurse's water closet to make sure it is clean and tidy at all time.
- 18. Give knowledge/hygiene education to the patients and their relatives.
- 19. Assist colleagues to perform other duties when the time permits such as rearranging the patient beds, changing patients' clothes, receiving new patients and transporting patients to the X-ray Theater.
- 20. Execute other duties assigned by the nurse in charge or the team leader.

21. The evening shift dinner time is 17:30 hours.

Recommendations for Ward Round in accordance with nursing process

- 1. Visit the patients after taking the shift
- 2. Visit the patient at least every 2-4 hours.
- 3. Chat with the patients during the visit.
- 4. Prepare information to give advice and investigate the patient's illness history.
- 5. Observe the patients' condition during the visit.
- 6. Fulfill the needs of patients willingly and timely during the visit.
- 7. Record the patients' condition during the visit.
- 8. During the patient visit, the dialogue should be about nursing care.
- 9. Monitor and address the issue found during the patient visit all the time and continuously.
- 10. Examine and record the nursing correctly and appropriate for the post visit.
- 11. Record the inspection and arrangement of environment to make it clean and safe.
- 12. Record the examination of equipment and tools.
- 13. Consider the issues found during the visit and plan to address them.
- 14. Observe the nursing practice during the visit.

Recommendations for handing over the tasks

- 1. Prepare the information about care, nursing, personnel and equipment appropriately such as the type of medicine that is out of stock, equipment that is not there or not enough for providing the service to the patients so that the team leader or the nurse in charge can address these problems.
- 2. Visit the patients, examine the nursing record before handing over the tasks.
- 3. Visit the patients, personnel, environment and equipment before handing over the tasks.
- 4. Report to the team the nursing practices implemented and their results, and nursing practices that need that need to be carried out correctly and completely.

- 5. Report the nursing issues/nursing diagnosis in accordance with the guidance of nursing process.
- 6. The person who hands over the tasks and the person who receives the tasks must check the nursing records together.
- 7. The person who hands over the tasks and the person who receives the tasks must visit the patients together.
- 8. The person who hands over the tasks and the person who receives the tasks must check equipment, environment and personnel together.
- 9. There must be an explanation, inquiry and discussion about the future nursing directions between a person who hands over the tasks and the person who receives the tasks.
- 10. The time for handing over the tasks is 30-40 minutes.

Recommendations for patient admission

- 1. Prepare the beds and clothes appropriate to the patients.
- 2. Prepare nurse's chart, kardex, IV fluid stand, IV fluid tag, date of IV fluid start tag.
- 3. Prepare document for advising the patients and their relatives about the hospital's service.
- 4. Take the patient down from the patient trolley, introduce herself, and call the patient's name.
- 5. Inquire the illness history and take vitals.
- 6. Give advice about the place and the regulations of the hospital.
- 7. Give advice about food and medication time to the patients.
- 8. Start to give medicine as prescribed by the doctor, take blood or monitor the results of the blood test.
- 9. Report to the doctor in accordance with the hospital's policy.
- 10. Complete the nurse's chart.
- 11. Write the kardex plan for nursing.
- 12. Record the statistic of new patients.
- 13. Record nursing and issue a Temperature Pulse and Respiratory record.

14. Monitor and evaluate the result of nursing.

Recommendations for preparing medication

- 1. Prepare medicine from the kardex.
- 2. Prepare medicine based on time.
- 3. Record the patient's receipt of medicine into the medication card.
- 4. Plan to provide IV fluid to the patients.

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