

**Service:** Addictions Intensive Treatment Services, Inpatient Uni

Location: Nova Scotia Hospital, Purdy Building, 2 floor

**Program:** Addictions Withdrawal and Group Therapy

## **Nova Scotia Health Authority Inpatient Service Profile**

The purpose of this Profile is to provide Nurses with an overview of each service area.

<b>General Information</b>		
Service	Addiction Services  Intensive Treatment Service, Inpatient Unit	
Site	300 Pleasant Street, Dartmouth Nova Scotia, B2Y 3Z6  Nova Scotia Hospital, Purdy Building, 2 <sup>nd</sup> floor	
Brief description of the Unit	Voluntary program 3-7 day medically supervised withdrawal from substance of abuse 14 days group therapy	
Unit Orientation	Experienced RN's- 5 day orientation with a preceptor. Orientation to evening and night shift. Nurse educator involved in supporting PYXIS, methameasure education, as well as, addressing the learning needs of each individual staff. One week Mental Health and Addictions Orientation. Mandatory LMS education. LMS Concurrent Disorder Education-9 modules. Grad Nurses-10 day orientation with a preceptor. Orientation to evening and night shift. Nurse educator involved in supporting PYXIS, methameasure education, as well as, addressing the learning needs of each individual staff. One day NSHA Orientation. One week Mental Health and Addictions Orientation. Connected to the grad nurse education program offered by NSHA for on-going support. Mandatory LMS education. LMS Concurrent Disorder Education-9 modules.	

Number of Beds	16 beds, male, female, transgender clients

<u>Patient Care</u>				
Patient Population	Clients admitted to an inpatient bed have been assessed and it has been recommended that the client participate in a supervised medical withdrawal from their substance (s) of abuse (benzodiazepines, cocaine, crack, opioids, alcohol, marijuana, nicotine etc). This may take 3-7 days depending on the substance and amount the client was using.  Once the client has withdrawn, it may be recommended they stay for 14 day group programming.  Clients will receive individual interaction with members of the multi-disciplinary team, NRT if necessary, assistance and contacts to income assistance, housing if required.			
Average Patient Age Range	19-75 years of age. The majority are between 20-55 years			
Nursing Model of Care	Primary Nursing: X Team Nursing: Other: Total Patient Care: Modified Total Patient Care: Other:			

<u>Systems</u>		
Medication System	Traditional: Unit Dosage:X Other:  Other: PYXIS, Methameasure (methadone dispensing system)	
Scheduling	Manager: X Self:	
Average Number of Staff per Shift	Days: RN <u>3-4 LPN 1</u> Total 5 staff which includes a charge nurse Evenings: RN <u>1-2 LPN1-2</u> Total 3 staff  Nights: RN <u>1 LPN 1</u> Total 2 staff	
Service Hours	24 hours a day, 7 days a week	

Length of Shift	8hr: <u>X</u>	12 hr: <u>X</u>	Other:
	Other: Charge	nurse works 07	700-1700

<u>Staff</u>	
Staff Mix	RN: <u>75</u> % LPN: <u>25</u> %
Physician Coverage	On Call: X On Site: X
Multidisciplinary Team Members	Social Workers- Clinical therapists and Community Outreach Workers Discharge planner Recreation Therapist Psychologist Psychiatrist Administration staff Housekeeping Dietary

## **Required Skills, Qualifications & Experience**

## RN

Registered Nurses provide professional nursing services, deliver health education programs and provide consultative nursing services to promote, maintain and restore patient health.

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• Responsibilities	Direct Client care and coordination of that care within a ever-changing, dynamic environment.  Developing Therapeutic Working Relationships with the client Client care plan development and goal setting Supervising client's medical withdrawal. This includes assessment (CIWA, COWS), administration of medications, and consult with physicians. Client education and counseling Working with and communicating with a multidisciplinary team Supervision of LPN's Performing the charge nurse role after hours and weekends, which includes staff client assignment and assignment of unit duties Documentation
• Skills Required	Medication administration.  Working knowledge of medications used for withdrawal and the potential interaction with other prescribed medications  Assessment of signs of withdrawal symptoms  Assessment of intoxication  Excellent verbal and written communication skills  Physical and Mental Assessment skills

	Therapeutic relationship building Crisis intervention Urine drug screening interpretation and communication of results
Additional Responsibilities	Critical thinking skills Client advocacy Ability to work within a multi-disciplinary team
Additional     License/Certification/Educa     tion required	Non violent Crisis Intervention

**Completed by:** Charlene Casey-Gomes **Date:** July 29, 2015