

# A Nurse Assignment Tool to Optimize the Scope of Practice of Registered Nurses and Registered Practical Nurses



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## Background

This project examines how an evidence-informed Nurse Assignment Tool can support safe, equitable, and efficient care delivery in hospital settings. Nurse assignment decisions are influenced by a patient's clinical complexity staffing availability, skill mix, leadership support, and local implementation processes. In resource-constrained settings, the sustained use of clinical tools depends on their fit with existing workflows, the effectiveness of knowledge translation strategies, and how frontline nurses interpret and apply the strategies in practice (Nilsen, 2015). Accordingly, this study will explore factors associated with use, non-use, and adherence to a Nurse Assignment Tool to inform its sustainable implementation at West Nipissing General Hospital.

## Research Methodology

### Phase 1

We conducted an environmental scan and partnered with formal and informal leaders at WNGH.

### Phase 2

A Nursing Assignment Tool was developed and modified based on real-time feedback from nurses to guide and improve the process for assigning patients to either an RN or an RPN on the medical in-patient unit.

### Phase 3

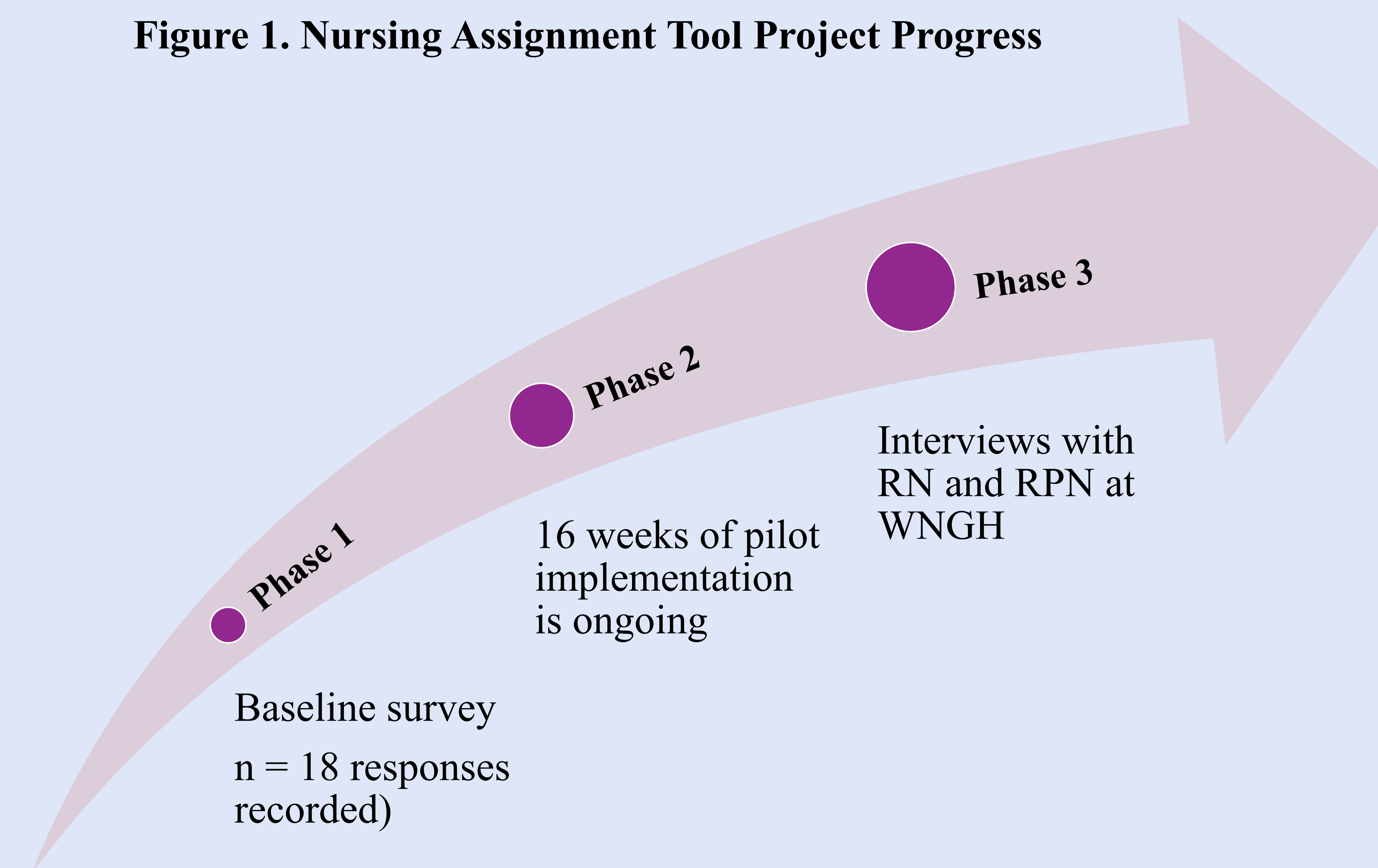
Implementation of the Nursing Assignment Tool will be scaled to more included more opportunities for use. Factors that impact use will be explored.

## Project Objectives

- ❑ Evaluate the implementation and practical use of a Nurse Assignment Tool in a tertiary hospital as an evidence-informed strategy to support safe patient assignment to Registered Nurses (RNs) and Registered Practical Nurses (RPNs).
- ❑ Describe the factors influencing the Nursing Assignment Tool use and non-use in the medical unit and emergency department.
- ❑ Understand how the tool supports assignment decisions while considering individual patient needs, context and other nursing related factors.

## Project Progress

Figure 1. Nursing Assignment Tool Project Progress



## Preliminary Findings

- ❑ A baseline survey was conducted to assess RN and RPN demographics and obtain early feedback on the draft Nurse Assignment Tool prior to implementation at WNGH.
- ❑ From December 2025 to January 2026 the tool was first used at WNGH, a total of 99 responses were recorded where patients were assigned to RN and RPN based on complexity of the patient, patient's past medical history and the availability of the staff.
- ❑ Based on suggestions provided by WNGH staff, the tool was redesigned and second round of data was collected, a total of 17 responses were recorded from the new admissions in NCU (Nursing Care Unit) at WNGH from January 30 – February 2026.
- ❑ Modifications were introduced early in Phase 2 to ensure the tool was well-suited to the clinical and organizational context.
- ❑ Preliminary findings indicate that 92% of patients requiring increased monitoring for potential complications are being assigned to RNs on the units.

## References

Nilsen, P. (2015). Making sense of implementation theories, models and frameworks. *Implementation Science*, 10(1), 53. <https://doi.org/10.1186/s13012-015-0242-0>