TEMPORARY REASSIGNMENT AND DEPLOYMENT OF NURSING STAFF POLICY

Policy Owner: Nursing Services / Human Resources
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1. PURPOSE

The purpose of this Policy is to establish clear guidelines for the temporary reassignment and deployment of nursing staff across wards and clinical areas based on patient-care needs, workload and operational requirements.

The Policy is intended to ensure that available nursing resources are utilised effectively, that staff remain productively engaged throughout their scheduled shifts, and that patient care and service delivery are not compromised by uneven workload distribution across departments.

2. SCOPE

This Policy applies to **all nursing staff** working at Redeemer's Health Village (RHV), including, but not limited to:

- Ward Nurses;
- ICU/Critical Care Nurses;
- Theatre/Perioperative Nurses;
- Emergency Department Nurses;
- NICU/Pediatric Nurses;
- Midwives;
- Dialysis Nurses;
- Outpatient/Clinic Nurses;
- Specialist and Procedure Nurses; and
- Other nursing personnel engaged by RHV.

3. POLICY STATEMENT

All Nurses are expected to commence work immediately upon clocking in and remain actively engaged in their assigned duties throughout their scheduled shift.

Where the workload or patient-care demand in a nurse's assigned unit, department or clinical area is low, the nurse may be **temporarily reassigned or directed to provide support in another area where there is a greater operational or patient-care need**.

Temporary reassignment may occur between wards, specialist units, departments or other clinical areas, provided that the assignment is appropriate to the nurse's competence, training, experience, professional scope of practice and any applicable clinical requirements.

Such temporary reassignment forms part of the nurse's normal work responsibilities and is intended to ensure effective utilisation of available nursing resources and continuity of patient care across the Hospital.

Temporary reassignment does not constitute a permanent change to the nurse's substantive department, unit or appointment. The nurse remains accountable to Nursing Management and shall work under the direction of the designated supervisor or Nurse-in-Charge of the receiving area during the period of deployment.

Nurses are expected to comply promptly and professionally with reasonable work-related instructions issued by the Head of Nursing Services, Assistant Head of Nursing, Nursing Supervisor, Nurse Manager, Nurse-in-Charge or another authorised supervisor.

4. PRINCIPLES OF DEPLOYMENT

Temporary deployment of nursing staff shall be guided by the following principles:

1. **Patient Care Priority:** Deployment decisions shall primarily be based on patient-care requirements and the need to maintain safe and effective staffing.
2. **Operational Need:** Staff may be deployed to areas experiencing increased workload, patient volume, staff shortages or other operational requirements.
3. **Effective Utilisation:** Where workload in one area is temporarily low, available nursing capacity may be utilised to support another area rather than remaining idle.
4. **Competence and Scope of Practice:** Nurses shall only be deployed to duties that are appropriate to their training, competence, experience and scope of practice.
5. **Fairness:** Deployment should be managed fairly and reasonably, taking account of operational requirements and avoiding unnecessary or arbitrary movement of staff.
6. **Supervision:** Nurses deployed to another area shall work under the direction of the designated supervisor or nurse in charge of that area for the duration of the deployment.
7. **Temporary Nature:** Deployment under this Policy is ordinarily temporary and does not constitute a permanent transfer unless formally communicated and approved through the appropriate process.

5. AUTHORITY TO REASSIGN STAFF

The following personnel may direct the temporary reassignment of nursing staff in accordance with this Policy:

- Head of Nursing Services;
- Assistant Head of Nursing;

- Nursing Supervisors;
- Nurse Managers/Unit Leads, where authorised; or
- Any other person formally authorised by Nursing Management.

Where possible, deployment decisions should be coordinated through the appropriate Nursing Supervisor to ensure that staffing requirements are considered across affected units.

Where deployment involves a **specialist clinical area**, the receiving unit's Nurse-in-Charge or appropriate clinical supervisor shall determine the duties that the deployed nurse may safely undertake.

6. PROCEDURE FOR TEMPORARY REASSIGNMENT

Where the workload in a nurse's assigned area is low, the relevant Nursing Supervisor or authorised officer may assess current staffing and operational requirements across other areas.

Where additional support is required elsewhere:

1. The nurse shall be informed of the area to which they are being temporarily deployed.
2. The nurse shall report to the designated supervisor or Nurse-in-Charge of the receiving area.
3. The receiving supervisor shall allocate duties appropriate to the nurse's competence, experience and scope of practice and the needs of the receiving unit.
4. Where the receiving area is a specialist unit, the receiving supervisor shall ensure that the nurse is provided with appropriate direction and supervision and is not assigned duties beyond their competence.
5. The nurse shall remain available to support the receiving unit for the period directed by the authorised supervisor.
6. Where the nurse is required to return to their substantive unit, the nurse shall return promptly upon instruction.
7. Where practicable, significant temporary deployments should be documented in the appropriate duty roster, deployment record or other approved nursing record.

7. RESPONSIBILITIES OF DEPLOYED NURSES

A nurse temporarily deployed to another area is expected to:

- Report promptly to the receiving unit;
- Carry out assigned duties professionally and responsibly;
- Comply with reasonable instructions from the designated supervisor;
- Maintain appropriate professional standards and patient confidentiality;
- Work within their competence, training and scope of practice;
- Communicate any patient-care concern promptly to the appropriate supervisor;

- Seek clarification where they are unfamiliar with a procedure or clinical requirement;
- Remain available for further deployment instructions where required; and
- Return to their substantive unit when instructed.

Temporary deployment does not relieve a nurse of their professional responsibilities or applicable Hospital policies and procedures.

8. CONCERNS ABOUT DEPLOYMENT

A nurse who has a legitimate concern about a temporary reassignment should communicate the concern respectfully to the relevant supervisor.

Examples of legitimate concerns may include:

- A task that falls outside the nurse's competence or scope of practice;
- A patient-safety concern;
- A conflict with an urgent clinical responsibility;
- A health or safety concern;
- A lack of the required competency for a specialist clinical procedure; or
- Another circumstance that may reasonably affect the nurse's ability to safely carry out the assignment.

Concerns should be raised through the appropriate supervisory channel and should not result in the nurse abandoning the assigned area or refusing reasonable instructions without first notifying the relevant supervisor.

Where immediate patient safety is at risk, the nurse must raise the concern immediately with the responsible Nursing Supervisor or other appropriate clinical authority.

9. PROHIBITED CONDUCT

The following conduct is inconsistent with this Policy:

- Leaving an assigned unit or clinical area without authorisation;
- Refusing a reasonable temporary deployment without a valid and justifiable reason;
- Remaining idle during scheduled working hours when there is an operational need elsewhere;
- Deliberately delaying compliance with a reasonable deployment instruction;
- Reporting to another unit without following the appropriate supervisory process;
- Leaving the receiving unit without authorisation; or
- Encouraging other staff to disregard reasonable deployment instructions.

10. ACCOUNTABILITY AND DISCIPLINARY ACTION

All nurses are expected to comply with reasonable and lawful work-related instructions issued by authorised Nursing Management.

Failure or refusal to comply with a reasonable work-related instruction, without a valid and justifiable reason, may constitute **insubordination** and may result in disciplinary action in accordance with the Hospital's Disciplinary Policy.

Any disciplinary action shall be considered based on the circumstances of the case, including the nature of the instruction, the reason for refusal, the employee's explanation and any other relevant facts.

Nothing in this Policy prevents an employee from raising a genuine patient-safety, professional or welfare concern through the appropriate channel.

11. RESPONSIBILITIES OF NURSING MANAGEMENT

Nursing Management is responsible for ensuring that the Policy is implemented fairly and consistently.

This includes:

- Monitoring staffing levels and workload across units and clinical areas;
- Ensuring deployment decisions are based on genuine operational or patient-care needs;
- Avoiding unnecessary deployment of staff;
- Ensuring deployed nurses receive appropriate supervision;
- Considering staff competence, training and scope of practice;
- Maintaining appropriate records of deployment where required;
- Addressing concerns raised by staff; and
- Reviewing deployment patterns to identify persistent staffing gaps.

Where a unit consistently requires additional nursing support, temporary reassignment should not be used as a substitute for appropriate workforce planning and recruitment.

12. RECORD KEEPING

Where required by Nursing Management, temporary staff deployments shall be documented through the approved roster, duty allocation sheet or deployment record.

Records should, where applicable, indicate:

- Name of the nurse;
- Substantive unit/department;
- Receiving unit/department;
- Date and shift;

- Duration of deployment; and
- Authorising supervisor.

Such records may be reviewed to identify recurring staffing shortages and inform workforce planning.

13. REVIEW AND COMPLIANCE

This Policy shall be communicated to all nursing staff and incorporated into relevant Nursing Services orientation and supervisory processes.

Nursing Management and Human Resources may periodically review compliance with the Policy and assess whether temporary deployment arrangements are effectively supporting patient care and operational efficiency.

Persistent staffing shortages identified through deployment patterns should be escalated to Management for appropriate workforce planning and recruitment action.

14. POLICY REVIEW

This Policy shall be reviewed periodically or earlier where operational requirements, organisational structures or relevant Hospital policies change.