NH Board of Nursing

Position Statement Regarding Abandonment

Nurses and nursing assistants have a professional responsibility to accept assignments based on their ability to provide safe, professional care of the client. They should accept assignments they have the competency to perform. Refusal to accept assignment does not constitute client abandonment. The NH Board of Nursing Administrative Rules (Nur 402.04 (b) (2) defines misconduct of this nature as follows: “Leaving an assignment without notifying the appropriate authority, whereby such departure endangers the health, safety and welfare of those individuals entrusted to the licensee’s care.”

It is the responsibility of the licensee to accept additional work assignments that maintain safe professional practice. Nurses should not be threatened with patient abandonment and potential loss of license when they are afraid that working additional hours will endanger patient safety. The administration of the facility or agency has the obligation to their clients and staff to provide a safe environment.

It is the responsibility of the administration to have appropriate staffing. If at the end of a shift, there is not sufficient staff for the next shift; failure of a licensee to agree to work a second shift is NOT considered patient abandonment. Health care facilities must have a policy defining mandatory overtime and be consistent in the implementation of that policy. Managers/supervisors must be aware that they are subject to discipline if they assign patient care to staff when they know, or have reason to believe, this assignment will affect the staff’s competence. Licensees who accept a second shift assignment must know that they can competently complete that shift without compromising patient care.

Examples of patient abandonment or neglect in the acute care, long term care, home care or community care setting might include but is not limited to:
1. A licensed person accepts an assignment and then leaves the assignment without notifying the supervisor or giving a status report to another qualified person who can assume the patient assignment.
2. The licensed person fails to complete the duties of an assignment or inform the supervisor of that failure.

The following examples are not considered abandonment or neglect:
1. The licensed person completes an agreed time assignment and notifies the supervisor or next shift person that he or she is leaving by providing a patient status report to the person qualified to assume the responsibilities.
2. The licensed person notifies the supervisor of not reporting for employment and never assumes a patient assignment or never reports for work.
3. The licensed person refuses to accept a patient assignment when there has been no orientation, no educational preparation or employment experience.

If a licensee reports for work, and based upon previous knowledge and experience believes there is a shortage of staff to provide safe care, the licensee should immediately notify the supervisor, and request additional staff, or seek guidance regarding providing care within the limited staffing pattern. Patient abandonment occurs when the licensed person, after accepting an assignment, leaves, and fails to transfer patient care responsibilities to another qualified person who can assume such responsibility. If
there are additional questions, the administrator, risk management staff or legal person familiar with health care issues should be contacted.