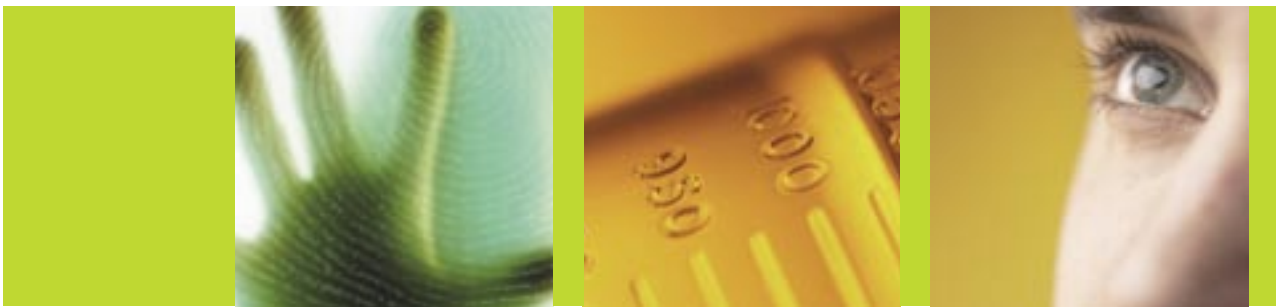


Competency Standards

for nurses in general practice



Glossary

Competency standards for registered and enrolled nurses in general practice An Australian Nursing Federation project funded by the Australian Government Department of Health and Ageing. The competency standards for nurses in general practice were developed by a University of South Australia project team led by Terri Gibson and Marie Heartfield. First published August 2005.

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Glossary¹

Advanced registered nurse

The advanced registered nurse might typically be described as:

- being prepared for evidence based practice through post registration qualifications/education;
- an active member of the nursing profession;
- accepting responsibility for complex situations which may encompass clinical, managerial, educational or research contexts;
- demonstrating leadership and initiating change;
- practising comprehensively as an interdependent team member;
- practising outside of single contexts or episodes of care;
- having particular breadth or depth of experience and knowledge;
- focused on outcomes for individuals and groups².

Chronic disease management items

Medicare rebates for the treatment of people with asthma, cancer, arthritis, diabetes, heart disease, mental illness and other chronic conditions.

These items replace the Enhanced Primary Care multi-disciplinary care planning items which are being phased out. Further information can be found on the following website, www.health.gov.au

Evidence based practice

Evidence based practice focuses on the need for health professionals to base their interventions and activities on the most up-to-date evidence or knowledge available. The evidence based approach acknowledges the difficulties faced by busy practitioners in keeping up to date with an ever-growing literature in health care and emphasises the importance of providing them with condensed information gathered through the systematic review of the international literature on a given topic.

Sackett and Rosenberg (1995) argue for the need to base health care practice on the best possible evidence; to critically appraise research reports for validity and usefulness; and to incorporate the rapidly growing body of evidence into health care practice. They suggest that evidence based practice is concerned with five linked ideas:

1. that clinical and other health care decisions should be based on the best patient-, population- and laboratory-based evidence;
2. the nature and source of the evidence to be sought depends on the particular clinical question;
3. the identification of the best available evidence requires the application of epidemiological, economic and biostatistical principles plus pathophysiology and personal experience;
4. this identification and appraisal of the evidence must be acted upon; and
5. there should be continuous evaluation of performance.

Further information on evidence based practice can be found on the following websites:

Australasian Cochrane Centre <http://www.cochrane.org.au>

Joanna Briggs Institute <http://www.joannabriggs.edu.au/about/home.php>

¹ Prepared with information from the NNO 2004 Glossary of terms ANF Melbourne www.anf.org.au/NNO.

² From Gibson T and Heartfield M 2005 Final report: Review of the competency standards for the advanced nurse unpublished.

Competence

The Australian Nursing and Midwifery Council use the following definition of competence:

The combination of skills, knowledge, attitudes, values, and abilities that underpin effective performance in a professional/occupational area.³

The Australian National Training Authority which was, until June 2005, the national body responsible for vocational education and training used the following definition:

*Competency (also competence) is the ability to perform tasks and duties to the standard expected in employment.*⁴

Competency standards

Competency standards are core standards that describe the current practice of nurses. These standards can be developed at the standard expected of those completing their education (ie the Australian Nursing and Midwifery Council's national competency standards for the registered nurse and the enrolled nurse) or they can reflect standards beyond that minimum level (ie competency standards for the advanced registered nurse).

The Australian Nursing and Midwifery Council says that the standards take account of the contemporary role of the registered nurse which covers clinical practice, management of care, counselling, health promotion, client advocacy, facilitation of change, clinical teaching, supervising, mentoring and research. They provide a benchmark for nurses in daily practice. They may be used for academic assessment, workplace performance review and for measuring continuing fitness to practice. The competency standards reflect the unique characteristics of nursing as well as broader attributes nurses have in common with other professions and occupations. In addition, they identify the knowledge, skills and attitudes required by nurses and reflect the complex nature of nursing activities.⁵

The State and Territory nurse regulatory authorities establish and maintain minimum standards and the processes for the regulation of nursing within Australia.

The Australian Nursing and Midwifery Council adds that (nurse) regulatory authorities apply the competency standards in order to:

- communicate to consumers the competency standards that they can expect of nurses;
- determine the eligibility for registration of people who have undertaken nursing courses in Australia;
- determine the eligibility for registration of nurses who wish to practise in Australia but have undertaken courses elsewhere;
- assess nurses who wish to return to work after being out of the work force for a defined period; and,
- assess qualified nurses who are required to show they are fit to continue working.

Nurses who are registered are required to demonstrate competence. They are accountable for their actions and they take responsibility for the supervision of enrolled nurses. In addition, they have a professional responsibility to maintain the standards in order to renew their license.⁶

³ ANMC 2004 Common competencies for registered nurses in Western Pacific and South East Asian Region ANMC Canberra

⁴ See glossary on www.anta.gov.au. The Australian Government announced in 2004 that ANTA would be abolished and responsibilities transferred back to the Department of Education, Science and Training.

⁵ See www.anmc.org.au

⁶ See www.anmc.org.au

Enrolled nurse (RN division 2 in Victoria)

A person licensed to practise, under State or Territory nurses legislation, as an enrolled nurse (registered nurse division 2 in Victoria). The Australian Nursing and Midwifery Council defines the enrolled nurse as, an associate to the registered nurse who demonstrates competence in the provision of patient-centred care as specified by the registering authority's license to practice, educational preparation and context of care.⁷

Expert registered nurse

The expert registered nurse is a person with specialised skills and knowledge, who is an authority in their chosen field of practice. In addition to the standards describing advanced nursing practice, the expert registered nurse would also demonstrate the following features:

- lateral thinking;
- challenging;
- autonomous;
- research focused;
- extensive knowledge;
- consultant;
- views situations globally;
- leader;
- visionary; and
- innovative.⁸

General practice

General practice is part of the Australian health care system and operates predominantly through private medical practices, which provide universal unreferral access to whole person medical care for individuals, families and communities. General practice care means comprehensive, coordinated and continuing medical care drawing on biomedical, psychological, social and environmental understandings of health.⁹

General practitioner

A general practitioner is a registered medical practitioner who is qualified and competent for general practice in Australia. A general practitioner:

- has the skills and experience to provide whole person, comprehensive, coordinated and continuing medical care; and
- maintains professional competence for general practice.

Midwife

A midwife is able to give the necessary supervision, care and advice to women during pregnancy, labour and the postpartum period, to conduct deliveries on (their) own responsibility and to care for the newborn and the infant. This care includes preventative measures, the detection of abnormal conditions in mother and child, the procurement of medical assistance and the execution of emergency measures in the absence of medical help. (They have) an important task in health counselling and education, not only for the women, but also within the family and the community. The work should involve antenatal education and preparation for parenthood and extends to certain

⁷ See www.anmc.org.au

⁸ Adapted from the proceedings of the ACCCN Standards Workshop cited in ACCCN 2002 Competency Standards for Specialist Critical Care Nurses ACCCN.

⁹ Royal Australian College of General Practitioners www.racgp.org.au

areas of gynaecology, family planning and child care. (They) may practise in hospitals, clinics, health units, domiciliary conditions or in any other service.¹⁰

Nurse practitioner

The nurse practitioner role is a new role in the Australian health care context and implementation of the role is at a State and Territory level. The nurse practitioner role is complementary to that of other health care providers and an integral part of multidisciplinary health care provision. There are benefits to both the community and the nursing profession for the recognition of nurse practitioners in Australia to be standardised and every effort should be made to ensure consistency between States and Territories. The National Nursing Organisations have developed the following criteria for the recognition of nurse practitioners:

1. Definition

A nurse practitioner is a registered nurse who has been authorised by the State or Territory regulatory authority to use the title. The authorisation process should ensure that the registered nurse applying has:

- a) undertaken appropriate post graduate education or equivalent to support their practice; and
- b) provided evidence of their ability to consistently practise autonomously and at an advanced level within an extended role.

2. Role and scope of practice

The role of the nurse practitioner is characterised by clinical assessment and therapeutic management of health and illness presentations within their scope of practice. This may include the initiation of diagnostic investigations, the prescription of medicines, and referral to other health care providers. Nurse practitioners practice in metropolitan, rural and remote areas of Australia, in both the public and private sectors, and in all clinical areas.

3. Educational preparation

The minimum educational level for nurse practitioner practice is preparation at Masters level or equivalent for the clinical area of practice, supported by relevant clinical experience.

4. Career structure

The career structure for nurse practitioners is part of the nursing clinical career stream.

5. Remuneration

The classification of nurse practitioner is included in nursing awards and agreements linked to specific remuneration which recognises the advanced level of practice and the additional responsibilities, and be aligned to the highest level in the clinical career stream.

6. Protection of the title

The title of nurse practitioner is protected in State and Territory Nurses Acts and similar legislation; making it an offence for use of the title by any other than those authorised to do so by the legislation.

7. Authorisation to practice

Authorisation to practice as a nurse practitioner is vested in the State and Territory nurse regulatory authorities in collaboration with the nursing profession.

8. Legislative support

Nurse practitioner practice is supported by changes to all relevant legislation.¹¹

¹⁰ International Confederation of Midwives <http://www.internationalmidwives.org/Statements/Definition%20of%20the%20Midwife.htm>

¹¹ NNO national consensus statement on the recognition of nurse practitioners in Australia issued in October 2003.

Nursing

Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of the health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environments, research, participation in shaping health policy and in patients and health systems management, and education are also key nursing roles.¹²

Primary health care

Primary health care is essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination. It forms an integral part both of the country's health system, of which it is the central function and main focus, and of the overall social and economic development of the community. It is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live and work, and constitutes the first element of a continuing health care process.¹³

Registered nurse (RN division 1 in Victoria)

A person licensed to practice, under State or Territory nurses legislation, as a registered nurse.

Scope of nursing practice

The Queensland Nursing Council uses the following definition of the scope of nursing practice:

The scope of nursing and midwifery practice is that which nurses and midwives are educated, competent and authorised to perform. The actual scope of an individual nurse's or midwife's practice is influenced by the:

- context in which they practice;
- client's health needs;
- level of competence, education and qualifications of the individual nurse or midwife; and
- service provider's policies.¹⁴

Specialisation

Implies a level of knowledge and skill in a particular aspect of nursing which is greater than that acquired during basic nursing education.¹⁵

Supervision

Supervision of enrolled nurses by registered nurses can be direct or indirect depending upon the competence of the enrolled nurse for the scope of nursing practice, the condition of the person receiving nursing care, and the context in which the care is given:

- Direct supervision: the registered nurse is actually present, observes, works with and directs the person who is being supervised.
- Indirect supervision: the registered nurse is easily contactable but does not directly observe the activities.

¹² International Council of Nurses www.icn.ch

¹³ The 1978 Declaration of Alma-Ata http://www.euro.who.int/AboutWHO/Policy/20010827_1

Some discussion about primary health care and primary care in general practice can be found on the following website of the Primary Health Care Research and Information Service http://www.phcris.org.au/resources/phc/about_PHC_mainframe.html

¹⁴ Queensland Nursing Council 2005 The scope of practice framework for nurses and midwives QNC Brisbane

¹⁵ ICN 1992 Guidelines on Specialization in Nursing ICN Geneva p 2