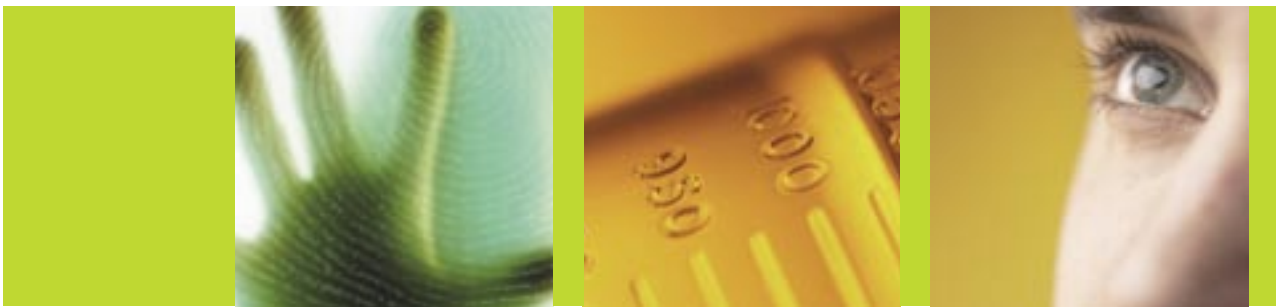


Competency Standards

for nurses in general practice



Tool-kit introduction

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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Tool-Kit introduction

Why has this website been developed?

This web-site has been developed to help you to start using the competency standards for nurses in general practice. Examples of the following have been included:

Nurses in general practice

- Self assessment tool;
- Sample professional development plan;
- Guidance on developing a professional portfolio;
- Resources to assist you to use the competency standards as your professional framework; and
- Assistance to review your scope of nursing practice.

General practitioners and practice managers

- Sample job descriptions and performance assessment tools;
- Assistance to review the scope of nursing practice for nurses employed in your general practice;
- Glossary of terms used in nursing.

Education providers

- To be developed

What is nursing?

The International Council of Nurses defines nursing as:

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.¹

Nurses work as part of the health care team and they are involved in health care at the primary, secondary and tertiary level. Nurses collaborate, refer and coordinate their activities with doctors, other nurses and midwives, and other health care providers. Nurses and midwives work closely with the individual or group accessing the health care services.

Nursing is not a series of tasks and the tool-kit provides assistance to review the scope of nursing practice and identify the health care to be provided by nurses in general practice.

Enrolled nurses are required to have professional supervision by registered nurses and general practitioners who employ only enrolled nurses will have to put in place a system where enrolled nurses can easily access professional support from a registered nurse.

¹ See www.icn.ch.

² Registered nurse (Division 2) in Victoria

What is primary health care?

Primary health care is defined in the World Health Organisation's Declaration of Alma-Ata (1978) as:

*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.*³

What are competency standards?

The Australian Nursing and Midwifery Council use the following definition⁴ of competence, *the combination of skills, knowledge, attitudes, values, and abilities that underpin effective performance in a professional/occupational area*⁵.

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

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

Competency standard *an industry-determined specification of performance which sets out the skills, knowledge and attitudes required to operate effectively in employment...*

Unit of competency *a component of a competency standard. A unit of competency is a statement of a key function or role in a particular job or occupation.*⁶

How can competency standards be used?

Competency standards can be used in many ways:

- Nurses use competency standards as their professional framework against which to measure performance and prepare a professional development plan so that competence is maintained and enhanced;
- Nurse regulatory authorities in each state and territory use competency standards to determine the eligibility of people applying for a licence to practice as a nurse and to assess nurses required to demonstrate continuing competence;
- Education providers in both the higher education and vocational education settings use competency standards as the framework for course development purposes; and
- Employers use competency standards for position description and performance assessment purposes.

How were these competency standards developed?

Competency standards for nurses in general practice were developed during 2004 by Marie Heartfield and Terri Gibson from the University of South Australia in conjunction with Royal College of Nursing Australia. The project to develop the standards was managed by the Australian Nursing Federation

³ The Declaration of Alma-Ata can be found on the following web-site, http://www.euro.who.int/AboutWHO/Policy/20010827_1

⁴ Adapted from the 2003 glossary in the International Council of Nurses' framework of competencies for the generalist nurse.

⁵ ANMC 2004 Common competencies for registered nurses in Western Pacific and South East Asian Region ANMC Canberra.

⁶ 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.

with funding from the Australian Government Department of Health and Ageing. More information on the project can be found in the publication on this website, Competency standards for nurses in general practice.

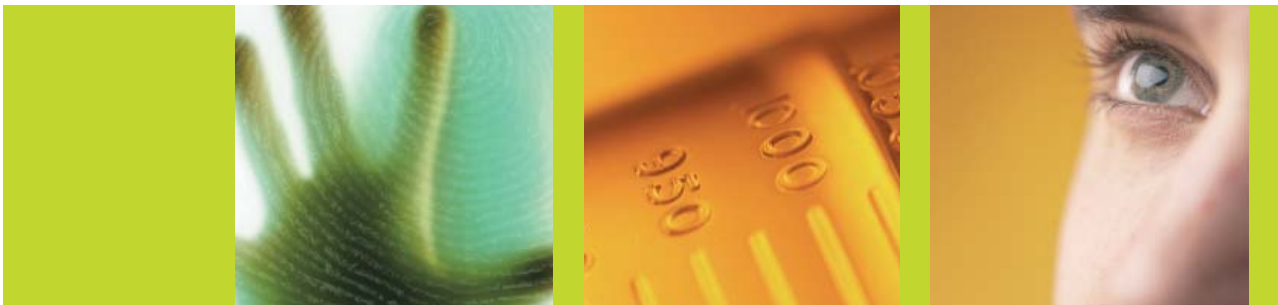
The competency standards for nurses in general practice were designed to accompany the national competency standards⁷ and to describe the work that is being undertaken by nurses working in general practice settings.

Please note that some nurses working in general practice will be working at an advanced level and/or in a specialist nursing role (eg gerontic or paediatric nurse specialist) and these nurses may use the competency standards for the advanced registered nurse or the competency standards prepared by their professional nursing organisations.

⁷ developed by the Australian Nursing and Midwifery Council.

Competency Standards

for nurses in general practice



An Australian Nursing Federation project funded by the Australian Government Department of Health and Ageing

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.

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¹ Registered nurse (division 1) in Victoria

² Registered nurse (division 2) in Victoria

1. Preamble

The project to develop competency standards for nurses in general practice was funded by the Australian Government Department of Health and Ageing and managed by the Australian Nursing Federation. A project team from the University of South Australia and Royal College of Nursing Australia, led by Ms Terri Gibson and Dr Marie Heartfield, developed the competency standards.

A project steering group guided the project and the membership included:

- **Julie Porritt** Australian Divisions of General Practice
- **Lyn LeBlanc** Australian Nursing and Midwifery Council
- **Lynne Walker** Australian Practice Nurses Association
- **Maryanne Craker** National Enrolled Nurse Association
- **Victoria Gilmore** Australian Nursing Federation

The general practice project was completed in February 2005 and the competency standards are now available for use in workplaces, education settings and other professional environments. They should be used as a framework for nurses to both assess their practice and to guide their professional development. The specialist competency standards must be used in conjunction with the core competency standards developed by the Australian Nursing and Midwifery Council and endorsed by the nurse regulatory authority in each state and territory. Nurses in all settings including general practice use the Australian Nursing and Midwifery Council's Code of Professional Conduct for Nurses and Midwives in Australia as well as the Code of Ethics for Nurses and Midwives in Australia (developed under the auspices of the Australian Nursing Federation, the Australian Nursing and Midwifery Council and Royal College of Nursing Australia).

The process for developing the competency standards for nurses in general practice included:

- consultation with nurses and other key stakeholders in cities and towns around Australia;
- review of the competency standards for the advanced nurse;
- observation of nurses working in a range of general practice settings; and
- meetings with experienced enrolled nurses working in other settings such as public hospitals, aged care facilities and the community.

Following analysis of the data collected during the consultation and observation phases, draft standards were prepared and validated during a series of meetings that included representatives of nurses working in general practice, their employers and others with whom they work such as other general practitioners. This was an essential step in the process to confirm that the competency standards reflect the professional practice of nurses working in general practice.

The competency standards for nurses in general practice are now ready to be used. They are a useful framework reflecting nursing practice in the general practice setting.

2. Introduction

The following sections describe the context in which nursing in general practice takes place and there is also some discussion about the way that primary health care provision in the general practice setting is developing. Any changes will involve nurses working in general practice and preparation by all health care providers needs to be happening now.

Background information is also provided about other issues such as the scope of practice for nurses, professional supervision of enrolled nurses, and the meaning of terms such as competency standards.

2.1 General practice

General practice is the centre of primary health care in Australia. General practice continues to have a focus on the health and well-being of individuals, however there are general practices that are expanding health services more broadly: (a) to groups of people such as those living in aged care facilities or people living in the community with a disease such as diabetes mellitus; and (b) to a population/public health approach such as immunisation programs and management of infectious illnesses in the community.

Primary health care in this setting is provided to Australians from birth to death. General practice remains the first point of contact for the majority of Australians when they have an illness or an injury. General practitioners play an important role in referring people for specialist services including medical, nursing and allied health care.

Ongoing care to people with chronic illnesses and disabilities is provided in general practice and it may be provided in conjunction with nurses and other health care employees working in the general practice. This care can also be provided in partnership with specialist medical practitioners and with other health care professionals such as nurses and allied health care providers in either the public or private health care systems.

Other primary health care services that are offered in general practice include health promotion and illness prevention interventions such as health screening, immunisation, and smoking cessation advice. Generally these are provided on an individual basis but opportunities are being taken to offer services in other ways as well including group education sessions and immunisation clinics.

Quality management strategies such as using evidence based health care to improve clinical outcomes are increasingly features of health care in the general practice setting for both nurses and general practitioners. Nurses and general practitioners however need the appraisal and evaluation skills so that they can effectively and efficiently use the evidence based resources that are available to them.

The majority of general practices are small businesses with general practitioners as the business owners. Some general practices are owned by corporations where all those working in the general practice are employees or contracted workers including the general practitioners.

Funding for general practice is from a mix of public and private sources. Australia has a universal insurance scheme known as Medicare. General practices have the option of: (a) bulk-billing patients for the service provided and claiming the Medicare payment directly from the Health Insurance Commission; or (b) charging the patient a fee for the service before the patient makes a Medicare claim. This fee may be greater than the amount claimable from Medicare so the patient may be required to pay the gap.

2.2 Nurses and general practice

Both registered and enrolled nurses have been employed in some general practices for many years. Nurses in general practice have often worked in isolation from their nursing peers although they have built strong professional relationships with the general practitioners with whom they work. This nursing isolation presented nurses with challenges such as access to information about available and relevant education and research findings that support the dynamic health care environment in which they work. General practice continues to evolve and nursing in general practice has also evolved and expanded and nurses in that setting have to find ways to keep up and maintain their competence.

The scope of nursing practice is defined as nursing practice for which nurses are educated, competent and authorised to perform³. The health needs of individuals or groups, the place where nursing care is being provided such as in general practice, the education of the nurse providing the care, the policies and protocols of the health care provider, and relevant legislation, all influence the scope of practice for nurses.

Registered nurses have a range of skills and knowledge they use in any health care setting. The skills include patient assessment, health care planning and evaluation as well as the ability to provide health care interventions. The breadth of presentations in a general practice setting may require nurses to expand their scope of practice.

For example

An experienced aged care nurse starts work in general practice but identifies that skills and knowledge in child health are needed as the general practice provides services to a population that includes many young families as well as older people. Growth and development, management of childhood diseases, immunisation, and asthma management may be some of the areas in which the nurses identifies they have limited skills and knowledge. The nurse could use any of the following to assist with developing competence in the child health area:

- education courses;
- supervised clinical experience, and/or
- reflective practice in conjunction with personal study, etc.

³ From Queensland Nursing Council 1998 Scope of nursing practice: Decision making framework QNC Brisbane

General practitioners and other employers can work together with nurses to identify when the nurses' scope of practice needs to be expanded and how that expansion will take place eg the general practice planning for nurses to provide women's health services would work with the nurses to ensure that they are competent including completion of the required courses, for example, in cervical screening.

Many of the nurse regulatory authorities in Australia are developing decision making frameworks to assist nurses and their employers to identify the scope of nursing practice and expand it where necessary.⁴ Decision making frameworks can also assist with identifying the professional supervisory arrangements needed for enrolled nursing work.

As required in legislation, enrolled nurses working in general practice are supervised by registered nurses⁵. Supervision can be direct, where the registered nurse is present, observes, works with and directs the enrolled nurses, or indirect where the registered nurse is easily contactable but does not directly observe the activities. The level of supervision required depends upon a number of factors including: the skills and knowledge of the enrolled nurse; the acuity and stability of the person receiving the nursing care; and the complexity of the nursing care being provided.

These professional supervisory arrangements must be in place irrespective of any other supervision including that provided by an employing general practitioner. In general practices employing enrolled nurses, arrangements for professional supervision should be developed and guidelines prepared to assist both the enrolled nurse and the supervising registered nurse.

While collaboration with health care colleagues and with individuals and groups requiring nursing care is the hallmark of nursing practice in any setting including general practice, registered nurses are autonomous health care professionals. Both registered and enrolled nurses have laws and regulations that guide their practice. Nurses, as licensed professionals, are required to be accountable and responsible for their own actions and they must be able to identify the nursing care for which they have the knowledge and skills to provide. It is also important that nurses in general practice seek out appropriate opportunities to develop knowledge and skills when the care in general practice is changing such as more responsibility for the education of people with diabetes and being prepared for this by completing an accredited course.

Significant Australian Government support for nurses commenced with the announcement included in the 2001/02 Australian Government Budget that practice incentive payments would be available for eligible practices employing nurses in general practice. Eligible general practices were in rural

⁴ See www.anmc.org.au for links to the web-sites of the nurse regulatory authorities

⁵ Note that in South Australia, enrolled nurses can apply to the nurse regulatory authority for authorisation to work without the supervision of a registered nurse

and remote areas, and in urban areas of workforce need ie where there are shortages of general practitioners. Funds were also allocated in that Budget for strategies such as:

- development of fact sheets about nursing in general practice;
- development of mentoring resources for nurses in general practice;
- support for nursing through the Divisions of General Practice network and the Australian Practice Nurse Association;
- provision of up-skilling and re-entry nursing scholarships;
- a study to scope nursing in general practice including educational opportunities; and
- development of competency standards for nurses in general practice.

Nurses in general practice are often involved in the business activities of the small business. They need to have knowledge about the business requirements including Medicare funding. This business knowledge is not a common feature of nursing practice in most other settings and nurses in general practice need to seek knowledge from a wide range of sources including networks established to assist general practitioners with their business activities.

It must be noted that the work undertaken by nurses in general practice is shaped by the way that services are remunerated in that setting. For example, at the time of writing, there are only a limited number of nursing services for which Medicare claims can be made in general practice⁶.

2.3 Competency standards

Nurses have used competency standards as their professional framework since the late 1980s when competency standards for registered nurses and for enrolled nurses were developed by the peak national body responsible for nursing regulation which is now known as the Australian Nursing and Midwifery Council⁷.

In the nursing profession, competency standards are used for example by:

- nurses as the professional framework against which to measure their own performance and prepare a professional development plan so that competence is maintained and enhanced;
- nurse regulatory authorities in each state and territory to determine the eligibility of people applying for a licence to practice as a nurse and to assess nurses required to demonstrate continuing competence;
- education providers in both the higher education and vocational education settings as the framework for course development purposes; and
- employers for position description and performance assessment purposes.

⁶ As at February 2005 these include items for wound care, immunisation and some cervical screening services

⁷ See www.anmc.org.au for further information about the Australian Nursing and Midwifery Council

The Australian Nursing and Midwifery Council uses a definition adapted from the 2003 glossary in the International Council of Nurses' framework of competencies for the generalist nurse to define competence as the combination of skills, knowledge, attitudes, values, and abilities that underpin effective performance in a professional/occupational area⁸.

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

Competency (also competence) the ability to perform tasks and duties to the standard expected in employment;

Competency standard an industry-determined specification of performance which sets out the skills, knowledge and attitudes required to operate effectively in employment...;

Unit of competency a component of a competency standard. A unit of competency is a statement of a key function or role in a particular job or occupation.⁹

Competency standards used by the nursing profession comprise a domain which is the overarching title for a cluster of competency units with a similar theme, and the units of competency or competency standard. The Australian Nursing and Midwifery Council's national competency standards include competency elements which are sub-units of the unit of competency.

The competency standards for the advanced registered nurse, the registered nurse in general practice, and the enrolled nurse in general practice include cues for each of the units of competency and these are designed to assist with understanding the competency standard. The cues included with the competency standards should not be used as a check list although they are a very useful guide to assist with assessing competence ie is the standard being met or what is required to demonstrate that the required level of competency is being achieved?

2.4 Other definitions

The phrase, individual and group, has been used in the competency standards so that there is consistency with the Australian Nursing and Midwifery Council's national competency standards. It is acknowledged that the term generally used in general practice is patient, although in some general practice settings, client is the preferred term.

⁸ ANMC 2004 Common competencies for registered nurses in Western Pacific and South East Asian Region ANMC Canberra

⁹ 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

3. Competency standards for registered nurses in general practice

3.1 Overview

Registered nurses in general practice must meet the Australian Nursing and Midwifery Council's national competency standards for registered nurses. In addition they should meet the competency standards prepared by the nursing profession for registered nurses in general practice.

Some registered nurses in general practice will be working at a higher level and they can refer to the competency standards for the advanced registered nurse in addition to the other two sets of competency standards relevant to registered nurses in general practice (ie the national competency standards for registered nurses and competency standards for registered nurses in general practice). Registered nurses in general practice who are preparing their professional development plan may use this set of standards as a framework.

Other registered nurses in general practice may find the nurse practitioner competency standards being prepared by the Australian Nursing and Midwifery Council to be a useful framework against which to measure or develop their competence¹⁰.

Registered nurses in general practice working with enrolled nurses should be aware of the relevant competency standards for enrolled nurses. They must also know the requirements relating to supervision and delegation of nursing care. This information can be obtained from the nurse regulatory authority in the state or territory in which the nurse is working¹¹.

¹⁰ See Gardner G Carryer J Dunn S and Gardner A 2005 Report to the Australian Nursing and Midwifery Council: Nurse Practitioner Standards Project ANMC Canberra

¹¹ Refer to the list of resources in section 5 for contact details for the nurse regulatory authorities

3.2 Role statement for the registered nurse in general practice¹²

The registered nurse in general practice demonstrates competence in the provision of primary health care centred on individuals and groups, in accordance with their educational preparation, professional nursing standards, relevant legislation and general practice context in an environment characterised by unpredictability and individual diversity across the lifespan.

While the role of the registered nurse in general practice varies according to the population profile of the general practice, the general practice structure, and employment arrangements, the registered nurse provides a combination of direct clinical care and management of clinical care systems in an environment which is often isolated from other nurses. This requires that s/he works collaboratively with others, internal and external to the general practice, to promote health care centred on individuals and groups.

In some general practices, the registered nurse autonomously conducts clinics, health assessments and chronic disease management programs as well as collaborating with general practitioners and other members of the multidisciplinary health care team as determined by the needs of individuals and groups, and the registered nurse's scope of practice and employment arrangement. The registered nurse may undertake their nursing role both within and external to the general practice, conducting assessments and health visits in the home and /or another community setting.

The relationships between nurses in general practice and the individuals/groups requiring nursing care usually extends beyond single episodes of care to meeting changing health care needs and priorities across the lifespan.

The registered nurse plays a pivotal role in health promotion, health maintenance and prevention of illness through provision of evidence based information and education to individuals, groups and communities. This requires a broad knowledge of resources available within the community and health care sectors to facilitate care to individuals/groups and the skills to communicate and educate.

The registered nurse in general practice also requires highly developed information literacy, management and coordination skills to enable the development and management of systems that ensure safety and quality. This includes recall, infection control and quality improvement systems.

All nurses have a responsibility to know and practice within their scope of practice relevant to their education and qualifications.

¹² Prepared as part of the competency standards project by the University of South Australia project team

Registered nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings.

Some registered nurses in general practice will be working at an advanced level and 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 groups.

Competency standards for the registered nurse in general practice

3.3 Australian Nursing and Midwifery Council's national competency standards for the registered nurse

Under review and the revised version will be available later in 2005

Professional and ethical practice

Competency Unit 1

Functions in accordance with legislation and common law affecting nursing practice.

Element 1.1

Demonstrates knowledge of legislation and common law pertinent to nursing practice.

Element 1.2

Fulfils the duty of care in the course of practice.

Element 1.3

Demonstrates knowledge of policies and procedural guidelines that have legal implications for practice.

Element 1.4

Identifies unsafe practice and responds appropriately to ensure a safe outcome.

Element 1.5

Recognises and acts upon breaches of law relating to practice.

3.4 Competency standards for registered nurses in general practice¹³

These competency standards must be read in conjunction with the national competency standards for the registered nurse

Professional practice

Registered nurses in general practice contribute to the development of health care in the general practice setting. They do this by engaging with developments in general practice and the nursing profession and applying this knowledge to the care of individuals and groups and the development of nursing in general practice. This includes understanding professional, legal and ethical standards as they apply to nursing within a primary health care setting.

1.1 Practice is based on primary, preventative care or early intervention health care approaches.

Examples may include:

- Integrates the principles of primary health care and primary care into nursing practice;
- Understands how the geographic, cultural and socioeconomic characteristics of the local community may impact on health of individuals;
- Respects individual and group rights to make their own health care decisions.

3.5 Competency standards for the advanced registered nurse

These competency standards must be read in conjunction with the national competency standards for the registered nurse

Conceptualises Practice

This domain contains competencies reflecting the ability of the advanced registered nurse to use theory, research evidence, observations and experience to think about practice in a way that considers factors other than the immediate event or circumstances to develop new questions, ideas and knowledge to enhance nursing practice and care for individuals and groups.

Competency standard 1

Uses best available evidence, observations and experience to plan, conduct and evaluate practice in ways which incorporate complexity and/or a multiplicity of elements.

The advanced registered nurse:

- Gathers and accurately evaluates evidence from a range of sources;
- Uses multiple approaches to decision making;
- Identifies typical patterns of responses from individuals and groups;
- Recognises important aspects of the situation;
- Makes qualitative distinctions based on previous experience;
- Considers possible and probable consequences of the situation for individuals and groups;

¹³ Registered nurses in general practice working with enrolled nurses should be aware of the relevant competency standards for enrolled nurses. They must also know the requirements relating to supervision and delegation of nursing care. This information can be obtained from the nurse regulatory authority in the state or territory in which the nurse is working.

<p>Competency Unit 2 Conducts nursing practice in a way that can be ethically justified.</p> <p>Element 2.1 Practises in accordance with the profession's code of ethics.</p> <p>Element 2.2 Demonstrates knowledge of contemporary ethical issues impinging on nursing.</p> <p>Element 2.3 Engages effectively in ethical decision making.</p> <p>Element 2.4 Ensures confidentiality of information.</p> <p>Competency Unit 3 Protects the rights of individuals and groups in relation to health care.</p> <p>Element 3.1 Acknowledge the rights of individuals/groups in the health care setting.</p> <p>Element 3.2 Acts to ensure that rights of individuals/groups are not compromised.</p> <p>Element 3.3 Involves the individual/group as an active participant in the process of care.</p> <p>Element 3.4 Respects the values, customs, spiritual beliefs and practices of individuals and groups.</p>	<p>1.2 Practices in accordance with nursing and general practice standards, codes, guidelines, legislation and regulation. Examples may include:</p> <ul style="list-style-type: none"> • Uses Australian Nursing and Midwifery Council codes and competency standards for registered and enrolled nurses and other relevant standards such as those for immunisation and asthma; • Uses general practice specific standards and guidelines such as the Royal Australian College of General Practitioners' Standards for General Practices and the Medicare requirements; • Contributes to review and modification of nursing and general practice standards, codes and guidelines. <p>1.3 Actively seeks out opportunities and resources to manage professional isolation. Examples may include:</p> <ul style="list-style-type: none"> • Becomes a member of general practice and/or professional organisations; • Establishes networks with other nurses and is involved with ongoing professional development; • Establishes opportunities for information sharing and support with other general practice health care professionals; • Identifies self care activities to assist with working in an isolated professional environment. <p>1.4 Recognises the need for ongoing education and training to maintain competence for nursing practice. Examples may include:</p> <ul style="list-style-type: none"> • Uses self assessment and peer review to regularly assess own competence for practice within the agreed scope of practice; • Identifies the need for updated knowledge base for practice;
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<ul style="list-style-type: none"> • Seeks additional clinical evidence to validate clinical decisions; • Initiates strategies to confirm/disconfirm data from additional sources; • Integrates data from all relevant sources; • Undertakes systematic and focussed surveillance that detects subtle changes in the situation for individuals and groups to inform assessment and decisions; • Utilises relevant previous experiences to inform decisions. <p>Competency standard 2 Uses health and/or nursing models as a basis for practice. The advanced registered nurse:</p> <ul style="list-style-type: none"> • Ensures practice is grounded in theoretical frameworks relevant to the context of care, for example nursing, primary health care, family centred or health outcomes models; • Contributes to the development of nursing and health care knowledge through reflection on practice. <p>Competency standard 3 Manages outcomes in complex clinical situations. The advanced registered nurse:</p> <ul style="list-style-type: none"> • Maintains focus when multiple concurrent stimuli are presented; • Incorporates risk/benefit analysis to inform nursing decisions; • Accurately identifies parameters for the safety of individuals and groups; • Ensures nursing decisions are justified in the specific context; • Monitors effects of autonomous nursing decisions; • Simultaneously and efficiently manages a range of activities. 	<ul style="list-style-type: none"> • Seeks additional clinical evidence to validate clinical decisions; • Initiates strategies to confirm/disconfirm data from additional sources; • Integrates data from all relevant sources; • Undertakes systematic and focussed surveillance that detects subtle changes in the situation for individuals and groups to inform assessment and decisions; • Utilises relevant previous experiences to inform decisions. <p>Competency standard 2 Uses health and/or nursing models as a basis for practice. The advanced registered nurse:</p> <ul style="list-style-type: none"> • Ensures practice is grounded in theoretical frameworks relevant to the context of care, for example nursing, primary health care, family centred or health outcomes models; • Contributes to the development of nursing and health care knowledge through reflection on practice. <p>Competency standard 3 Manages outcomes in complex clinical situations. The advanced registered nurse:</p> <ul style="list-style-type: none"> • Maintains focus when multiple concurrent stimuli are presented; • Incorporates risk/benefit analysis to inform nursing decisions; • Accurately identifies parameters for the safety of individuals and groups; • Ensures nursing decisions are justified in the specific context; • Monitors effects of autonomous nursing decisions; • Simultaneously and efficiently manages a range of activities.
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<p>Element 3.5 Provides for the spiritual, emotional and cultural needs of individuals/groups.</p>	<p>Element 3.6 Provides relevant and current health care information to individuals and groups in a form which facilitates their understanding.</p>	<p>Element 3.7 Encourages and supports individuals/groups in decision making.</p>	<p>Competency Unit 4 Accepts accountability and responsibility for own actions within nursing practice.</p>	<p>Element 4.1 Recognises own knowledge base/scope of competence.</p>	<p>Element 4.2 Consults with an experienced Registered Nurse when nursing care requires expertise beyond own scope of competence.</p>	<p>Element 4.3 Consults other health care professionals when individual/group needs fall outside the scope of nursing practice.</p>
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<ul style="list-style-type: none"> Supervises both enrolled and other registered nurses, and students of general practice health care; Educates nurses and students of general practice health care; Maintains skills in cardiopulmonary resuscitation and other first aid required in the setting. 	<p>Provision of clinical care Registered nurses in general practice have the knowledge and skill to provide comprehensive, episodic interventions and population based primary health care which includes planning and initiation of health monitoring and health maintenance. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care characterise the provision of clinical care in general practice settings.</p>	<p>2.1 Demonstrates comprehensive and accurate knowledge and skills in providing episodic and ongoing care that is responsive to individual and group circumstances and environments. Examples may include:</p> <ul style="list-style-type: none"> Conducts accurate comprehensive assessment of individuals and groups presenting without appointments to improve outcomes and minimise adverse events; Probes individual and group responses for more detailed information where necessary; Assesses and develops health care plans that direct health care interventions and activities by others; Considers access and affordability in planning and providing care for individuals and groups; Provides care in the general practice environment as well as in homes and other community settings; Identifies and provides comprehensive physical, psychosocial and emotional care for individuals and groups;
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<p>Adapts Practice This domain contains competencies reflecting the ability of the advanced registered nurse to draw on a wide repertoire of knowledge and processes to tailor nursing practice in complex and challenging clinical situations.</p>	<p>Competency standard 4 Anticipates and meets the needs of individuals and groups with complex conditions and/or in high risk situations. The advanced registered nurse:</p> <ul style="list-style-type: none"> Identifies priorities quickly using context specific knowledge; Incorporates risk/benefit analysis to inform nursing decisions; Accurately identifies parameters for the safety of individuals and groups; Ensures nursing decisions are justified in the specific context; Monitors effects of autonomous decisions; Responds constructively to unexpected or rapidly changing situations; Develops flexible and creative approaches to manage challenging clinical situations. 	<p>Competency standard 5 Integrates and evaluates knowledge and resources from different disciplines and health care teams to effectively meet the health care needs of individuals and groups. The advanced registered nurse:</p> <ul style="list-style-type: none"> Refers to and incorporates data from other health professionals when planning care; Uses collegial networks for referrals to meet the needs of individuals and groups; Develops and refocuses networks taking into account fluctuations and shifts in interdisciplinary alliances;
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Critical thinking and analysis

Competency Unit 5

Acts to enhance the professional development of self and others.

Element 5.1

Uses professional standards of practice to assess the performance of self.

Element 5.2

Recognises the need for and participates in professional development of self.

Element 5.3

Recognises the need for care of self.

Element 5.4

Contributes to the learning experiences and professional development of others.

Competency Unit 6

Values research in contributing to developments in nursing and improved standards of care.

Element 6.1

Acknowledges the importance of research in improving nursing outcomes.

Element 6.2

Incorporates research findings into nursing practice.

Element 6.3

Contributes to the process of nursing research

- Uses knowledge of existing conditions for individuals and groups, and their social circumstances, to inform nursing practice;

- Conducts health care clinics;
- Provides health care services in accordance with Medicare Benefits Schedule conditions;
- Assists with minor procedures undertaken by the general practitioner.

2.2 Initiates and conducts comprehensive health maintenance and health promotion in partnership with individuals, groups and the general practice team.

Examples may include:

- Undertakes health screening and health monitoring activities such as cardiac assessment including electrocardiographs and stress tests;
- Provides timely and accurate information and education;
- Undertakes care planning and reviews;
- Conducts independent and collaborative immunisation, wound care and chronic disease management clinics.

2.3 In collaboration with the general practice team conducts diagnostic activities.

- Examples may include:
- Demonstrates proficiency in health assessment skills;
 - Checks diagnostic results against client symptoms and previous results.

- Uses maturity and political astuteness to deal effectively with issues arising from complex collaborations;

- Clearly articulates the care requirements of individuals and groups using context specific knowledge and experience;
- Actively advocates for individuals and groups within and across health care teams and agencies;
- Manages care for individuals and groups across multi agency and interdisciplinary lines.

Competency standard 6

Seeks out and integrates evidence from a range of sources to improve health care outcomes.

The advanced registered nurse:

- Identifies appropriate sources of evidence according to the context;
- Is aware of and uses best available evidence to inform practice;
- Obtains expert advice as required;
- Uses outcomes of consultation to negotiate care;
- Selectively implements specific strategies based on expected outcomes;
- Makes decisions in partnership with individuals and groups according to their expressed needs;
- Ensures nursing practice is based on experience, clinical judgement, and statutory and common law requirements where a decision by an individual or group contravenes safe practice.

Competency standard 7

Safely interprets and modifies guidelines and practice to meet the health care needs of individuals and groups. The advanced registered nurse:

- Ensures protocols guide rather than direct practice;
- Responds effectively to unexpected or rapidly changing situations;

<p>Management of care</p> <p>Competency Unit 7 Carries out a comprehensive and accurate nursing assessment of individuals and groups in a variety of settings.</p> <p>Element 7.1 Uses a structured approach in the process of assessment.</p> <p>Element 7.2 Collects data regarding the health and functional status of individuals and groups.</p> <p>Element 7.3 Analyses and interprets data accurately.</p> <p>Competency Unit 8 Formulates a plan of care in collaboration with individuals and groups.</p> <p>Element 8.1 Establishes priorities for resolution of identified health needs in consultation with the individual/group.</p> <p>Element 8.2 Identifies expected outcomes including a time frame for achievement in collaboration with individuals and groups.</p> <p>Element 8.3 Develops and documents a plan of care to achieve optimal health, habilitation, rehabilitation or a dignified death.</p>	<p>2.4 Provides evidence based information, resources and education to assist individuals, groups and families to make health care decisions.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • Ensures that all information about chronic disease management, immunisation and wound care is accurate according to reliable sources; • Talks through with the individuals and groups the potential benefits and risks of health care interventions; • Considers the ongoing implications of the health of individuals and groups beyond the immediate episode of care; • Regularly reviews and updates individuals and group information and resources. <p>2.5 Modifies communication strategies according to individual and group circumstances.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • Monitors individual and group reactions during interactions and changes language or communication styles accordingly; • Provides appropriate counselling. <p>2.6 Collaborates with individuals, groups and the general practice team in decision making about the resources needed to provide clinical care.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • Considers ethical implications in decision making about allocation of health care resources. <p>Management of clinical care systems</p> <p>Registered nurses in general practice develop, coordinate and administer systems and processes which assist individuals, groups and the general practice team to</p>	<ul style="list-style-type: none"> • Identifies gaps between current practice and existing protocols and guidelines; • Initiates changes to protocols and guidelines to improve the care of individuals and groups in line with latest available evidence. <p>Leads Practice</p> <p>This domain contains competencies reflecting the ability of the advanced registered nurse to promote and improve nursing practice through leadership.</p> <p>Competency standard 8 Leads and guides the nursing team to promote optimum standards of care. The advanced registered nurse:</p> <ul style="list-style-type: none"> • Practices confidently as an individual while maintaining open communication and consulting with relevant members of the health team; • Bases practice on the use and where relevant modification of multiple standards and guidelines; • Ensures practice is grounded in appropriate frameworks; • Contributes to nursing knowledge through reflection on practice. <p>Competency standard 9 Shares information and resources to initiate improvements and/or innovation in nursing practice. The advanced registered nurse:</p> <ul style="list-style-type: none"> • Recognises the value of change and where beneficial pursues the introduction of changes such as new guidelines, protocols, skill mixes; • Supports quality improvement processes within the workplace; • Provides feedback on quality improvement processes to colleagues;
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Competency Unit 9
Implements planned nursing care to achieve identified outcomes within scope of competence.

Element 9.1

Provides planned care.

Element 9.2

Plans for continuity of care as appropriate.

Element 9.3

Educates individuals or groups to maintain and promote health.

Competency Unit 10

Evaluates progress toward expected outcomes and revises and revises plans in accordance with evaluation data.

Element 10.1

Determines the progress of individuals or groups towards planned outcomes.

Element 10.2

Revises nursing interventions in accordance with evaluation data and determines further outcomes.

Enabling

Competency Unit 11

Contributes to the maintenance of an environment which promotes safety, security and personal integrity of individuals and groups.

Element 11.1

Acts to enhance the safety of individuals and groups at all times.

anticipate and manage health care interventions and potential risks to facilitate quality client outcomes.

3.1 Uses best available research to inform clinical care management.

Examples may include:

- Collaborates with the division of general practice, general practice and health product provider representatives to access current information;
- Uses information technology skills to access current research, evidence, and or guidelines for practice;
- Initiates changes to practice guidelines and protocols based on evaluation of research outcomes and evidence;
- Participates in research taking place in the general practice setting.

3.2 Coordinates and reviews programs, registers and systems to facilitate quality individual and group health care outcomes.

Examples may include:

- Ensures that recall registers, pathology systems and individual and group documentation systems are continuously reviewed to achieve optimal outcomes;
- Collaborates with individuals, groups, general practitioners, other general practice staff and health care providers in the development and review of guidelines, protocols or templates;
- Participates in practice accreditation processes.

3.3 Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.

Examples may include:

- Understands the funding, billing and business systems used in the general practice;

- Personally contributes to quality improvement processes;

- Incorporates outcomes from quality improvement processes into nursing practice;

- Consistently uses structured feedback from individuals and groups, both formal and informal, for ongoing quality improvement.

Competency standard 10

Fosters and initiates research based nursing practice.

The advanced registered nurse:

- Identifies issues/problems in nursing practice as the basis for review and research;
- Critically evaluates existing research evidence for relevance to practice;
- Participates in the conduct of approved research where appropriate;
- Incorporates validated research evidence into nursing practice;
- Supports appropriate research conducted by others.

Competency standard 11

Acts as a mentor and role model for nurses and other health professionals.

The advanced registered nurse:

- Recognises the necessity for mutual respect of colleagues in the workplace and profession;
- Makes time available to listen to colleagues' professional concerns and requests;
- Provides advice and constructive criticism where appropriate.

Competency standard 12

Contributes to development of nursing knowledge, standards and resources through active participation at the broader professional level.

Element 11.2
Provides for the comfort needs of individuals and groups.

Element 11.3
Establishes, maintains and concludes caring, therapeutic and effective interpersonal relationships with individuals or groups.

Element 11.4
Applies strategies to promote individual/groups self esteem.

Element 11.5
Acts to maintain the dignity and integrity of individuals/groups.

Competency Unit 12
Communicates effectively with individuals and groups.

Element 12.1
Communicates using formal and informal channels of communication.

Element 12.2
Ensures documentation is accurate and maintains confidentiality.

Competency Unit 13
Manages effectively the nursing care of individuals and groups.

Element 13.1
Organises workload to facilitate planned nursing care for individuals and groups.

• Participates in practice accreditation processes;
• Updates practice and clinical policies and procedures.

3.4 Manages resources to promote optimal client care.

Examples may include:

- Understands public and private health care services;
- Maintains clinical data entry and retrieval;
- Develops/maintains clinical reports;
- Understands the implications of Health Insurance Commission information for care outcomes for individuals and groups.

3.5 Collects information about practice population profiles to inform health promotion and illness prevention strategies.

Examples may include:

- Develops/maintains clinical reports;
- Compiles statistics to contribute to local population health profiles.

Collaborative practice

Registered nurses in general practice build and engage in a broad range of collaborative and negotiated relationships with individuals, groups, the general practice team and other primary health care and service providers to achieve positive outcomes for individual and groups.

4.1 Ensures clinical nursing decisions are communicated to the general practice team.

Examples may include:

- Appropriately refers clients to general practitioners;
- Collaborates with general practitioners to develop guidelines and protocols;

The advanced registered nurse:

- Participates in organisational and/or professional committees, boards, working parties or forums;
- Contributes to written submissions about organisational or professional issues.

Competency standard 13

Facilitates education of individuals and groups, students, nurses and other members of the health care team.

The advanced registered nurse:

- Shares information and ideas;
- Takes on a teaching role for less experienced staff.

Competency standard 14

Acts as a resource for other nurses and members of the health care team

The advanced registered nurse:

- Ensures research findings are disseminated to colleagues;
- Shares a depth of knowledge gained through continuing education and nursing experiences.

Competency standard 15

Provides nursing as a resource to others through their capacity to practice outside single contexts and episodes of practice.

The advanced registered nurse:

- Facilitates care/support groups for individuals and groups;
- Answers inquiries about current practice in area of expertise.

Element 13.2

Delegates to others activities commensurate with their abilities and scope of practice.

Element 13.3

Uses a range of supportive strategies when supervising aspects of care delegated to others.

Element 13.4

Responds effectively in unexpected or rapidly changing situations.

Competency Unit 14

Collaborates with other members of the health care team.

Element 14.1

Recognises the role of members of the health care team in the delivery of health care.

Element 14.2

Establishes and maintains collaborative relationships with colleagues and members of the health care team.

Element 14.3

Participates with other members of the health care team and the individual/group in decision making.

- Is actively involved in community meetings, case conferences and care planning.

4.2 Participates in shared decision making about care delivery with individuals, groups and members of the general practice team.

Examples may include:

- Attends and contributes to practice meetings;
- Addresses safety and quality issues for individuals, groups, and others working in the general practice.

4.3 Recognises when to seek advice from other members of the general practice team or other health service providers about the care of individuals and groups.

Examples may include:

- Seeks advice when the needs of individuals and groups are beyond own abilities and education;
- Understands the roles of the allied health care team;
- Understands the roles of community agencies and service providers.

4.4 Shares information with the general practice team.

Examples may include:

- Communicates new information and research evidence;
- Communicates test results;
- Accurately documents the provision of nursing care.

continued on next page

4.5 Monitors local, community and population health developments and resources for integration into the care of individuals and groups.

Examples may include:

- Stays informed of local infectious diseases outbreaks;
- Shares information with relevant community groups in conjunction with public health services (eg primary schools);
- Incorporates current clinical guidelines into practice.

4.6 Liaises with relevant community and health care agencies for community development purposes and to facilitate continuity of care for individuals and groups in that community.

Examples may include:

- Liaises with health care services and providers;
- Develops partnerships with other health services where individuals and groups are referred;
- Manages internal and external referral processes and procedures.

4. Competency standards for enrolled nurses in general practice

4.1 Overview

Enrolled nurses in general practice must meet the Australian Nursing and Midwifery Council's national competency standards for enrolled nurses. In addition they should meet the competency standards prepared by the nursing profession for enrolled nurses in general practice.

Enrolled nurses in general practice must be aware of the supervisory arrangements that need to be in place and their responsibilities when nursing care is delegated to them. This information can be obtained from the nurse regulatory authority in the state or territory in which the nurse is working.¹⁴

¹⁴ Refer to the list of resources in section 5 for contact details for the nurse regulatory authorities

4.2 Role statement for enrolled nurses in general practice¹⁵

Nurses in general practice demonstrate competence in the provision of primary health care centred on individuals and groups, in accordance with their educational preparation, professional nursing standards, relevant legislation and practice context in an environment characterised by unpredictability and individual diversity across the lifespan.

While the role of the nurse varies according to the practice client population, practice structure, employment arrangement and category of nurse, most nurses provide a combination of direct clinical care and manage clinical care systems in an environment which is often isolated from other nurses. This requires that the nurse promotes health care centred on individuals and groups by working collaboratively with others both in and outside the general practice.

The enrolled nurse is legally required to be supervised by a registered nurse and is accountable and responsible for all aspects of delegated care¹⁶.

The relationship between nurses in general practice and individuals/groups usually extends beyond single episodes of care to meeting changing health care needs and priorities across the lifespan.

Both registered and enrolled nurses play a pivotal role in health promotion, health maintenance and prevention of illness through provision of evidence based information and education to individuals, groups and communities. This requires knowledge of resources available within the community and health care sectors to facilitate care for individuals and groups and the skills to communicate and educate.

All nurses in general practice need computer literacy skills. Enrolled nurses need to be able to use and maintain recall, infection control and quality improvement systems.

All nurses have a responsibility to know and practice within their scope of practice relevant to their education and qualifications. The enrolled nurse in general practice can assume responsibilities according to their education, experience and the availability of registered nurse supervision.

All nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings.

¹⁵ Prepared as part of the project by the University of South Australia project team

¹⁶ Note that in South Australia, enrolled nurses can apply to the nurse regulatory authority for authorisation to work without the supervision of a registered nurse

Competency standards for the enrolled nurse in general practice

4.3 Australian Nursing and Midwifery Council's national competency standards for the enrolled nurse

Professional and ethical practice

Competency Unit 1

Functions in accordance with legislation, policies and procedures affecting nursing practice.

Element 1.1

Demonstrates knowledge of legislation and common law pertinent to enrolled nursing practice.

Element 1.2

Demonstrates knowledge of organisational policies and procedures pertinent to enrolled nursing practice.

Element 1.3

Fulfils the duty of care in the course of enrolled nursing practice.

Element 1.4

Acts to ensure safe outcomes for individuals and groups by recognising and reporting the potential for harm.

Element 1.5

Reports practices that may breach legislation, policies and procedures relating to nursing practice to the appropriate person.

Competency Unit 2

Conducts nursing practice in a way that can be ethically justified.

Element 2.1

Acts in accordance with the nursing profession's codes.

4.4 Competency standards for the enrolled nurse in general practice

These competency standards must be read in conjunction with the national competency standards for the enrolled nurse

Professional practice

Enrolled nurses in general practice contribute to the development of health care in the general practice setting. They do this by keeping informed about developments in general practice and the nursing profession and applying this knowledge to the care of individuals and groups and the development of nursing in general practice. This includes an understanding of professional, legal and ethical standards as they apply to nursing within a primary health care setting.

1.1. Recognises that nursing in general practice is based on primary, preventative care or early intervention health care approaches.

Examples may include:

- Understands principles of primary health care and primary care;
- Understands the difference between providing nursing care in general practice and in hospital settings;
- Respects individuals and groups' rights to make their own health care decisions.

1.2 Practices in accordance with nursing and general practice standards, codes, guidelines, legislation and regulations.

Examples may include:

- Uses Australian Nursing and Midwifery Council codes and competency standards for enrolled nurses and considers other relevant standards such as those for immunisation and asthma;
- Uses general practice specific standards and guidelines such as the Royal Australian College of General Practitioners' Standards for General Practices and the Medicare requirements.

¹⁷ The enrolled nurse is legally required to be supervised by a registered nurse and is accountable and responsible for all aspects of delegated care. In South Australia, enrolled nurses can apply to the nurse regulatory authority for authorisation to work without the supervision of a registered nurse.

<p>Element 2.2 Demonstrates an understanding of the implications of these codes for enrolled nursing practice.</p> <p>Competency Unit 3 Conducts nursing practice in a way that respects the rights of individuals and groups.</p> <p>Element 3.1 Practises in accordance with organisational policies relevant to individual/group rights in the health care context.</p> <p>Element 3.2 Demonstrates an understanding of the rights of individuals/groups in the health care setting.</p> <p>Element 3.3 Liaises with others to ensure that the rights of individuals/groups are maintained.</p> <p>Element 3.4 Demonstrates respect for the values, customs, spiritual beliefs and practices of individuals and groups.</p> <p>Element 3.5 Liaises with others to ensure that the spiritual, emotional and cultural needs of individuals/groups are met.</p> <p>Element 3.6 Contributes to the provision of relevant health care information to individuals and groups.</p> <p>Competency Unit 4 Accepts accountability and responsibility for own actions within enrolled nursing practice</p> <p>Element 4.1 Recognises own level of competence.</p>	<p>1.3 Recognises the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships. Examples may include:</p> <ul style="list-style-type: none"> • Establishes opportunities for direct or indirect registered nurse supervision; • Overcomes professional isolation through networking with other nurses and involvement in ongoing professional development; • Becomes a member of general practice and/or professional organisations; • Identifies self care activities to assist with working in the general practice setting. <p>1.4 Recognises the need for ongoing education and training to maintain competence for nursing practice. Examples may include:</p> <ul style="list-style-type: none"> • Collaborates with the registered nurse and general practitioner to regularly assess competence for practice and need for updated knowledge base for practice; • Seeks out education and training opportunities when required to undertake new responsibilities; • Maintains skills in cardiopulmonary resuscitation and other basic first aid. <p>Provision of clinical care</p> <p>Enrolled nurses in general practice have the knowledge and skill to provide delegated care in the general practice setting in response to the diversity and need of individuals and groups. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care characterise the provision of clinical care in general practice settings.</p> <p>2. 1 Demonstrates knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments. Examples may include:</p> <ul style="list-style-type: none"> • Provides clinical care within the scope of education, experience and assessment of the need of individuals and groups; • Gathers relevant information from individuals and groups presenting without appointments and communicates this information appropriately to improve outcomes and minimise adverse events; • Recognises when a more detailed assessment of individuals and groups is required and seeks registered nurse or general practitioner assistance;
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<p>1.3 Recognises the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships. Examples may include:</p> <ul style="list-style-type: none"> • Establishes opportunities for direct or indirect registered nurse supervision; • Overcomes professional isolation through networking with other nurses and involvement in ongoing professional development; • Becomes a member of general practice and/or professional organisations; • Identifies self care activities to assist with working in the general practice setting. <p>1.4 Recognises the need for ongoing education and training to maintain competence for nursing practice. Examples may include:</p> <ul style="list-style-type: none"> • Collaborates with the registered nurse and general practitioner to regularly assess competence for practice and need for updated knowledge base for practice; • Seeks out education and training opportunities when required to undertake new responsibilities; • Maintains skills in cardiopulmonary resuscitation and other basic first aid. <p>Provision of clinical care</p> <p>Enrolled nurses in general practice have the knowledge and skill to provide delegated care in the general practice setting in response to the diversity and need of individuals and groups. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care characterise the provision of clinical care in general practice settings.</p> <p>2. 1 Demonstrates knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments. Examples may include:</p> <ul style="list-style-type: none"> • Provides clinical care within the scope of education, experience and assessment of the need of individuals and groups; • Gathers relevant information from individuals and groups presenting without appointments and communicates this information appropriately to improve outcomes and minimise adverse events; • Recognises when a more detailed assessment of individuals and groups is required and seeks registered nurse or general practitioner assistance; 	<p>1.3 Recognises the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships. Examples may include:</p> <ul style="list-style-type: none"> • Establishes opportunities for direct or indirect registered nurse supervision; • Overcomes professional isolation through networking with other nurses and involvement in ongoing professional development; • Becomes a member of general practice and/or professional organisations; • Identifies self care activities to assist with working in the general practice setting. <p>1.4 Recognises the need for ongoing education and training to maintain competence for nursing practice. Examples may include:</p> <ul style="list-style-type: none"> • Collaborates with the registered nurse and general practitioner to regularly assess competence for practice and need for updated knowledge base for practice; • Seeks out education and training opportunities when required to undertake new responsibilities; • Maintains skills in cardiopulmonary resuscitation and other basic first aid. <p>Provision of clinical care</p> <p>Enrolled nurses in general practice have the knowledge and skill to provide delegated care in the general practice setting in response to the diversity and need of individuals and groups. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care characterise the provision of clinical care in general practice settings.</p> <p>2. 1 Demonstrates knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments. Examples may include:</p> <ul style="list-style-type: none"> • Provides clinical care within the scope of education, experience and assessment of the need of individuals and groups; • Gathers relevant information from individuals and groups presenting without appointments and communicates this information appropriately to improve outcomes and minimise adverse events; • Recognises when a more detailed assessment of individuals and groups is required and seeks registered nurse or general practitioner assistance;
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Element 4.2
Recognises the differences in accountability and responsibility between registered nurses, enrolled nurses and unregulated care workers.

Element 4.3
Differentiates the responsibility and accountability of the registered nurse and enrolled nurse in the delegation of nursing care.

Critical thinking and analysis

Competency Unit 5
Demonstrates critical thinking in the conduct of enrolled nursing practice.

Element 5.1
Uses nursing standards to assess own performance.

Element 5.2
Recognises the need for and participates in continuing self/professional development.

Element 5.3
Recognises the need for care of self.

Competency Unit 6
Contributes to the formulation of care plans in collaboration with the registered nurse, individuals and groups.

Element 6.1
Accurately collects and reports data regarding the health and functional status of individuals and groups.

Element 6.2
Participates with the registered nurse and individuals and groups in identifying expected health care outcomes.

Element 6.3
Participates with the registered nurse in evaluation of progress of individuals and groups toward expected outcomes and reformulation of care plans.

- Distinguishes between respect for the privacy of individuals and groups and what is necessary to plan and provide health care;
- Considers access and affordability in planning and providing care for individuals and groups;
- Follows protocols when conducting health assessments and reviews;
- Considers existing conditions for individuals and groups in providing nursing care;
- Recognises potentially distressing situations for individuals and groups and provides reassurance and support accordingly;
- Recognises the influence of the bio psychosocial factors for individuals and groups on care decision making.

2.2 Collects and reports information about the health and functional status of individuals and groups.

Examples may include:

- Demonstrates technical proficiency in measuring and documenting vital signs and test results such as blood glucose readings, urinalysis, wound and skin checks;
- Demonstrates accurate use of spirometry, electrocardiographs and other health care technologies;
- Assesses wound healing and exudate amount, type, and colour.

2.3 Provides care for individuals and groups in consultation with the registered nurse and/or general practitioner.

Examples may include:

- Contributes to decision making about resources needed for clinical care;
- Assesses and monitors individuals and groups;
- Follows care plans, protocols or treatment regimes;
- Assists the registered nurse in conducting nurse led clinics;
- Assesses wound healing and modifies dressing regimes accordingly;
- Assists in the administration of medicines in accordance with legal and delegation and supervision requirements;
- Assists with minor procedures;
- Assists with immunisation, wound care and chronic disease management clinics.

2.4 Modifies communication strategies according to individual and group circumstances. Examples may include:

- Modifies communication style to accommodate cultural differences;

Management of care

Competency Unit 7

Manages nursing care of individuals and groups within the scope of enrolled nursing practice.

Element 7.1

Implements planned nursing care to achieve identified outcomes.

Element 7.2

Recognises and reports changes in the health and functional status of individuals/groups to the registered nurse.

Element 7.3

Ensures communication, reporting and documentation are timely and accurate.

Element 7.4

Organises workload to facilitate planned nursing care for individuals and groups.

Enabling

Competency Unit 8

Contributes to the promotion of safety, security and personal integrity of individuals and groups within the scope of enrolled nursing practice.

Element 8.1

Acts appropriately to enhance the safety of individuals and groups at all times.

Element 8.2

Establishes, maintains and concludes effective interpersonal communication.

Element 8.3

Applies appropriate strategies to promote the self esteem of individuals and groups.

Element 8.4

Acts appropriately to maintain the dignity and integrity of individuals and groups.

- Recognises that communication of information such as test results may impact on the wellbeing of individuals and groups;
- Recognises that the comprehension of individuals and groups may vary with health condition and wellbeing.

2.5. Liaises with the registered nurse and general practitioner in providing evidence-based health promotion and illness management information to individuals, groups and their families.

Examples may include:

- Recognises the need to provide information to improve or maintain health;
- Uses resources available within the practice to meet the needs of individuals and groups;
- Provides information and resources according to the needs of individuals and groups;
- Contributes to the review and update of information resources for individuals and groups.

Management of clinical care systems

Enrolled nurses in general practice administer and maintain the systems and processes which assist individuals, groups and the general practice team to anticipate and manage health care interventions and potential risks to facilitate quality client outcomes.

3.1 Uses relevant guidelines, protocols and systems as evidence for practice.

Examples may include:

- Uses guidelines, protocols or templates developed by registered nurses/general practitioners;
- Collaborates with registered nurses and general practitioners in development and review of guidelines and protocols.

3.2 Maintains programs, registers and systems to ensure appropriate clinical care provision.

Examples may include:

- Understands the funding, billing and business systems in general practice;
- Understands the importance and use of recall registers, pathology systems and documentation systems to assist in the care of individuals and groups;
- Uses guidelines, protocols or templates developed by the general practice team;
- Participates in quality improvement and general practice accreditation processes;

Competency Unit 9
Provides support and care to individuals and groups within the scope of enrolled nursing practice.

Element 9.1

Provides for the comfort needs of individuals and groups experiencing illness or dependence.

Element 9.2

Collaborates with the registered nurse and members of the health care team in the provision of nursing care to individuals and groups experiencing illness or dependence.

Element 9.3

Contributes to the health education of individuals or groups to maintain and promote health.

Element 9.4

Communicates with individuals and groups to enable therapeutic outcomes.

Competency Unit 10

Collaborates with members of the health care team to achieve effective health care outcomes.

Element 10.1

Demonstrates an understanding of the role of the enrolled nurse as a member of the health care team.

Element 10.2

Demonstrates an understanding of the role of members of the health care team in achieving health care outcomes.

Element 10.3

Establishes and maintains collaborative relationships with members of the health care team.

Element 10.4

Contributes to decision-making by members of the health care team.

- Updates general practice registers of community resources and health service personnel.

3.3 Manages resources to promote optimal care for individuals and groups.

Examples may include:

- Manages stocks and stores;
- Monitors cold chain systems;
- Manages sterilisation procedures and maintains standards;
- Documents to comply with standards such as those required for cold chain and sterilisation systems.

3.4 Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.

Examples may include:

- Effectively uses administrative systems designed to assist with the care of individuals and groups;
- Maintains clinical data systems including entry and retrieval processes.

Collaborative practice

Enrolled nurses in general practice build and engage in a broad range of collaborative and negotiated relationships with individuals, groups, the general practice team and other primary health care and service providers to achieve positive outcomes for individuals and groups.

4.1. Consults with the registered nurse and general practice team in making clinical decisions.

Examples may include:

- Appropriately refers clients to a registered nurse or general practitioner;
- Collaborates with registered nurses or general practitioners to develop guidelines and protocols.

4.2 Participates in shared decision making about care delivery with individuals, groups and members of the general practice team.

Examples may include:

- Attends and contributes to general practice meetings.

4.3 Recognises when to seek advice from the registered nurse and general practitioner about the care of individuals and groups.

Examples may include:

- Seeks advice when the needs of individuals and groups are beyond own abilities and education;
- Understands the roles of the allied health care team;
- Understands the roles of community agencies and service providers.

4.4. Shares information with the general practice team.

Examples may include:

- Seeks out and evaluates information and resources;
- Advises others about enrolled nurses' scope of practice;
- Seeks constructive feedback about performance;
- Accurately documents care provision.

4.5 Liaises with relevant community and health care agencies to facilitate continuity of care for individuals and groups.

Examples of practice may include:

- Is aware of local referral processes and procedures;
- Contributes to the development of partnerships with other health services where individuals and groups are referred;
- Undertakes delegated referral activities.

5. Resources¹⁸

5.1 Specialist nursing competency standards

Title	Contact details	Address details
Standards of practice for mental health nursing in Australia, 1995	Australian and New Zealand College of Mental Health Nurses	PO Box 126 Greenacres SA 5086 F: 02 9807 2602 E: sales@anzcmhn.org W: www.anzcmhn.org
Competency standards for occupational health nurses	Australian College of Occupational Health Nurses	PO Box 1205 Tullamarine VIC 3043 T: 03 9335 2577 F: 03 9335 3454 E: admin@acohn.com.au W: www.acohn.com.au
National standards of practice for diabetes educators, 2003	Australian Diabetes Educators Association	PO Box 3570 Weston ACT 2611 T: 02 6287 4822 F: 02 6287 4877 E: adeasec@ozemail.com.au W: www.adea.com.au
Competency standards for the specialist paediatric and child health nurse, 2000	Australian Confederation of Maternal and Child Health Nurses	PO Box 184 Midland WA 6936
Competency standards for the community health nurse	Australian Council of Community Nursing Services	31 Alma Road St Kilda VIC 3182 E. accns@bigpond.com.au T. 03 95365379 F. 03 95370287
Competency standards for continence nurse advisers, 2000	Continence Foundation of Australia (VIC Branch)	C/- St Georges Health Service 283 Cotham Road Kew VIC 3101 T: 03 9816 8266 F: 03 9816 8366 E: cfavic@continencevictoria.org W: www.continencevictoria.org.au
Competency standards for the advanced gastroenterology nurse, 2002	Gastroenterological Nursing College of Australia	PO Box 483 Boronia VIC 3155 T: 1300 788 155 F: 03 9801 6352 E: admin@genca.org W: www.genca.org
Competency standards for remote area nurses, 1999	Council of Remote Area Nurses Australia	PMB 203 Alice Springs NT 0872 T: 08 8953 5244 F: 08 8953 5245 E: crana@crana.org.au W: www.crana.org.au

Competency standards for gerontic nurses	Geriaction Inc	Suite 308, 282 Victoria Avenue Chatswood NSW 2067 T: 02 9412 2145 F: 02 9411 6618 E: info@geriaction.com.au W: www.crana.org.au
Advanced competency standards for sexual and reproductive health nurses, 2002	Australian Sexual Health Nurses Association	328–336 Liverpool Road Ashfield NSW 2131 T: 02 8752 4314 F: 02 9716 5073 W: www.ashna.com.au

5.2 Other Resources

Organisation	Contact
Chemotherapy clinical practice guidelines	Cancer Nurses Society of Australia Medical Foundation Building Level 5,92 Parramatta Road Camperdown NSW 2050 T: 02 9036 3100 F: 02 9036 3101 E: info@cnsa.org.au W: www.cnsa.org.au
The Australian Immunisation Handbook 8th Edition, 2003	W: http://www1.health.gov.au/immhandbook/ Note: Printed copies of the Australian Immunisation Handbook 8th Edition, 2003 are available from the Publications page of the Immunise Australia website; immunise.health.gov.au , by contacting the Immunisation Infoline on 1800 671 811 or by emailing handbook@health.gov.au .
Department of Health and Ageing	GPO Box 9848 Canberra ACT 2601 T: 02 6289 1555 E: enquires@health.gov.au W: www.health.gov.au
Health Insurance Commission	P: GPO Box 9822 in your Capital City T: 132 011 E: medicare@hic.gov.au W: www.hic.gov.au
Australian Nursing and Midwifery Council	PO Box 873, Dickson ACT 2602 T: 02 6257 7960 F: 02 6657 7955 E: anmc@anmc.org.au W: www.anmc.org.au

Nurse regulatory authorities	
Australian Capital Territory	PO Box 976, Civic Square ACT 2608 T: 02 6205 1595 F: 02 6205 1602 W: www.nursesboard.act.gov.au
New South Wales	PO Box K599, Haymarket NSW 1238 T: 02 9219 0222 F: 02 9281 2030 E: nursesreg@doh.health.nsw.gov.au W: www.nursesreg.nsw.gov.au
Victoria	Level 2, 595 Little Collins Street, Melbourne VIC 3000 T: 03 8635 1200 F: 03 8635 1248 W: www.nbv.org.au
Tasmania	PO Box 847, Sandy Bay TAS 7006 T: 03 6224 3991 F: 03 6224 3995 E: nbt@nursingboardtas.com.au W: www.nursingboardtas.org.au
Queensland	GPO Box 2928, Brisbane QLD 4001 T: 07 3223 5111 F: 07 3223 5115 W: www.qnc.gld.gov.au
Northern Territory	GPO Box 4221, Darwin NT 0801 T: 08 8999 4157 F: 08 8999 4196 E: healthprofessions.ths@nt.gov.au W: www.nbwa.org.au
Western Australia	Locked Bag 6, East Perth WA 6892 T: 08 9421 1100 F: 08 9421 1022 W: www.nursesboard.sa.gov.au
South Australia	PO Box 7176, Hutt Street, Adelaide SA 5000 T: 08 8223 9700 F: 08 8223 9707 W: www.nursesboard.sa.gov.au
Nursing organisations	
Australian Nursing Federation	PO Box 4239, Kingston ACT 2604 T: 02 6232 6533 F: 02 6232 6610 E: anfcanberra@anf.org.au W: www.anf.org.au
Australian Practice Nurses Association	1 Palmerston Crescent, South Melbourne VIC 3205 T: 03 9682 3820 F: 03 9682 1272 E: service@apna.asn.au W: www.apna.asn.au
The College of Nursing (incorporating the NSW College of Nursing)	Locked Bag 3030, Burwood NSW 1805 T: 02 9745 7500 F: 02 9745 7502 W: www.nursing.aust.edu.au
Royal College of Nursing Australia	PO Box 219, Deakin West ACT 2600 T: 02 6283 3400 F: 02 6282 3565 E: canberra@rcna.org.au W: www.rcna.org.au

Medical organisations

Australian Divisions of
General Practice

PO Box 4308, Manuka ACT 2603
T: 02 6228 0800
F: 02 6228 0899
E: adgpreception@adgp.com.au
W: www.adgp.com.au

Royal Australian College of General Practitioners

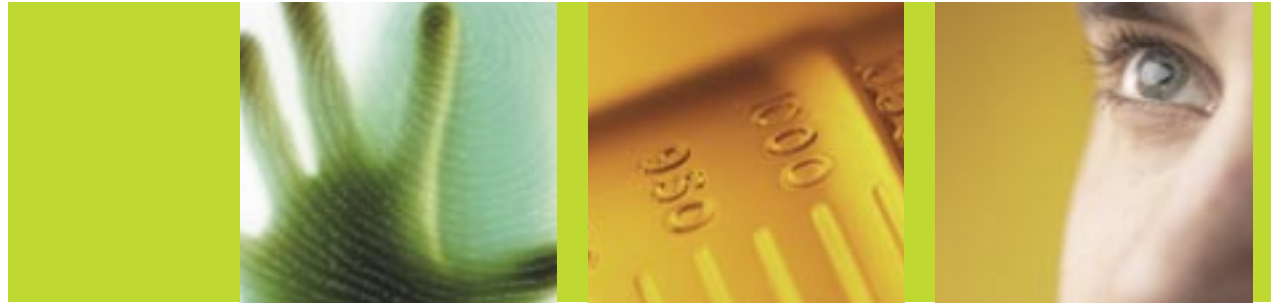
1 Palmerston Crescent, South Melbourne VIC 3205
T: 03 86199 0414
F: 03 8699 0400
E: racgp@racgp.org.au
W: www.racgp.org.au

Rural Doctors Association of Australia

PO Box 5361, Kingston ACT 2604
T: 02 6273 9303
F: 02 6273 9308
W: www.rdaa.com.au

Competency Standards

for nurses in general practice



Competency standards for the registered nurse in general practice

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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Competency standards for the registered nurse in general practice

Australian Nursing and Midwifery Council's national competency standards for the registered nurse

Under review and the revised version will be available later in 2005

Professional and ethical practice

Competency Unit 1

Functions in accordance with legislation and common law affecting nursing practice.

Element 1.1

Demonstrates knowledge of legislation and common law pertinent to nursing practice.

Element 1.2

Fulfils the duty of care in the course of practice.

Element 1.3

Demonstrates knowledge of policies and procedural guidelines that have legal implications for practice.

Element 1.4

Identifies unsafe practice and responds appropriately to ensure a safe outcome.

Element 1.5

Recognises and acts upon breaches of law relating to practice.

Competency standards for registered nurses in general practice¹

These competency standards must be read in conjunction with the national competency standards for the registered nurse

Professional practice

Registered nurses in general practice contribute to the development of health care in the general practice setting. They do this by engaging with developments in general practice and the nursing profession and applying this knowledge to the care of individuals and groups and the development of nursing in general practice. This includes understanding professional, legal and ethical standards as they apply to nursing within a primary health care setting.

1.1 Practice is based on primary, preventative care or early intervention health care approaches.

Examples may include:

- Integrates the principles of primary health care and primary care into nursing practice;
- Understands how the geographic, cultural and socio-economic characteristics of the local community may impact on health of individuals;
- Respects individual and group rights to make their own health care decisions.

Competency standards for the advanced registered nurse

These competency standards must be read in conjunction with the national competency standards for the registered nurse

Conceptualises Practice

This domain contains competencies reflecting the ability of the advanced registered nurse to use theory, research evidence, observations and experience to think about practice in a way that considers factors other than the immediate event or circumstances to develop new questions, ideas and knowledge to enhance nursing practice and care for individuals and groups.

Competency standard 1

Uses best available evidence, observations and experience to plan, conduct and evaluate practice in ways which incorporate complexity and/or a multiplicity of elements.

The advanced registered nurse:

- Gathers and accurately evaluates evidence from a range of sources;
- Uses multiple approaches to decision making;
- Identifies typical patterns of responses from individuals and groups;
- Recognises important aspects of the situation;
- Makes qualitative distinctions based on previous experience;
- Considers possible and probable consequences of the situation for individuals and groups;

¹ Registered nurses in general practice working with enrolled nurses should be aware of the relevant competency standards for enrolled nurses. They must also know the requirements relating to supervision and delegation of nursing care. This information can be obtained from the nurse regulatory authority in the state or territory in which the nurse is working.

Competency Unit 2

Conducts nursing practice in a way that can be ethically justified.

Element 2.1

Practises in accordance with the profession's code of ethics.

Element 2.2

Demonstrates knowledge of contemporary ethical issues impinging on nursing.

Element 2.3

Engages effectively in ethical decision making.

Element 2.4

Ensures confidentiality of information.

Competency Unit 3

Protects the rights of individuals and groups in relation to health care.

Element 3.1

Acknowledge the rights of individuals/groups in the health care setting.

Element 3.2

Acts to ensure that rights of individuals/groups are not compromised.

Element 3.3

Involves the individual/group as an active participant in the process of care.

Element 3.4

Respects the values, customs, spiritual beliefs and practices of individuals and groups.

1.2 Practices in accordance with nursing and general practice standards, codes, guidelines, legislation and regulation.

Examples may include:

- Uses Australian Nursing and Midwifery Council codes and competency standards for registered and enrolled nurses and other relevant standards such as those for immunisation and asthma;
- Uses general practice specific standards and guidelines such as the Royal Australian College of General Practitioners' Standards for General Practices and the Medicare requirements;
- Contributes to review and modification of nursing and general practice standards, codes and guidelines.

1.3 Actively seeks out opportunities and resources to manage professional isolation.

Examples may include:

- Becomes a member of general practice and/or professional organisations;
- Establishes networks with other nurses and is involved with ongoing professional development;
- Establishes opportunities for information sharing and support with other general practice health care professionals;
- Identifies self care activities to assist with working in an isolated professional environment.

1.4 Recognises the need for ongoing education and training to maintain competence for nursing practice.

Examples may include:

- Uses self assessment and peer review to regularly assess own competence for practice within the agreed scope of practice;
- Identifies the need for updated knowledge base for practice;

- Seeks additional clinical evidence to validate clinical decisions;
- Initiates strategies to confirm/disconfirm data from additional sources;
- Integrates data from all relevant sources;
- Undertakes systematic and focussed surveillance that detects subtle changes in the situation for individuals and groups to inform assessment and decisions;
- Utilises relevant previous experiences to inform decisions.

Competency standard 2

Uses health and/or nursing models as a basis for practice. The advanced registered nurse:

- Ensures practice is grounded in theoretical frameworks relevant to the context of care, for example nursing, primary health care, family centred or health outcomes models;
- Contributes to the development of nursing and health care knowledge through reflection on practice.

Competency standard 3

Manages outcomes in complex clinical situations. The advanced registered nurse:

- Maintains focus when multiple concurrent stimuli are presented;
- Incorporates risk/benefit analysis to inform nursing decisions;
- Accurately identifies parameters for the safety of individuals and groups;
- Ensures nursing decisions are justified in the specific context;
- Monitors effects of autonomous nursing decisions;
- Simultaneously and efficiently manages a range of activities.

Element 3.5

Provides for the spiritual, emotional and cultural needs of individuals/groups.

Element 3.6

Provides relevant and current health care information to individuals and groups in a form which facilitates their understanding.

Element 3.7

Encourages and supports individuals/groups in decision making.

Competency Unit 4

Accepts accountability and responsibility for own actions within nursing practice.

Element 4.1

Recognises own knowledge base/scope of competence.

Element 4.2

Consults with an experienced Registered Nurse when nursing care requires expertise beyond own scope of competence.

Element 4.3

Consults other health care professionals when individual/group needs fall outside the scope of nursing practice.

- Supervises both enrolled and other registered nurses, and students of general practice health care;
- Educates nurses and students of general practice health care;
- Maintains skills in cardiopulmonary resuscitation and other first aid required in the setting.

Provision of clinical care

Registered nurses in general practice have the knowledge and skill to provide comprehensive, episodic interventions and population based primary health care which includes planning and initiation of health monitoring and health maintenance. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care characterise the provision of clinical care in general practice settings.

2.1 Demonstrates comprehensive and accurate knowledge and skills in providing episodic and ongoing care that is responsive to individual and group circumstances and environments.

Examples may include:

- Conducts accurate comprehensive assessment of individuals and groups presenting without appointments to improve outcomes and minimise adverse events;
- Probes individual and group responses for more detailed information where necessary;
- Assesses and develops health care plans that direct health care interventions and activities by others;
- Considers access and affordability in planning and providing care for individuals and groups;
- Provides care in the general practice environment as well as in homes and other community settings;
- Identifies and provides comprehensive physical, psychosocial and emotional care for individuals and groups;

Adapts Practice

This domain contains competencies reflecting the ability of the advanced registered nurse to draw on a wide repertoire of knowledge and processes to tailor nursing practice in complex and challenging clinical situations.

Competency standard 4

Anticipates and meets the needs of individuals and groups with complex conditions and/ or in high risk situations.

The advanced registered nurse:

- Identifies priorities quickly using context specific knowledge;
- Incorporates risk/benefit analysis to inform nursing decisions;
- Accurately identifies parameters for the safety of individuals and groups;
- Ensures nursing decisions are justified in the specific context;
- Monitors effects of autonomous decisions;
- Responds constructively to unexpected or rapidly changing situations;
- Develops flexible and creative approaches to manage challenging clinical situations.

Competency standard 5

Integrates and evaluates knowledge and resources from different disciplines and health care teams to effectively meet the health care needs of individuals and groups.

The advanced registered nurse:

- Refers to and incorporates data from other health professionals when planning care;
- Uses collegial networks for referrals to meet the needs of individuals and groups;
- Develops and refocuses networks taking into account fluctuations and shifts in interdisciplinary alliances;

Critical thinking and analysis

Competency Unit 5

Acts to enhance the professional development of self and others.

Element 5.1

Uses professional standards of practice to assess the performance of self.

Element 5.2

Recognises the need for and participates in professional development of self.

Element 5.3

Recognises the need for care of self.

Element 5.4

Contributes to the learning experiences and professional development of others.

Competency Unit 6

Values research in contributing to developments in nursing and improved standards of care.

Element 6.1

Acknowledges the importance of research in improving nursing outcomes.

Element 6.2

Incorporates research findings into nursing practice.

Element 6.3

Contributes to the process of nursing research

- Uses knowledge of existing conditions for individuals and groups, and their social circumstances, to inform nursing practice;
- Conducts health care clinics;
- Provides health care services in accordance with Medicare Benefits Schedule conditions;
- Assists with minor procedures undertaken by the general practitioner.

2.2 Initiates and conducts comprehensive health maintenance and health promotion in partnership with individuals, groups and the general practice team.

Examples may include:

- Undertakes health screening and health monitoring activities such as cardiac assessment including electrocardiographs and stress tests;
- Provides timely and accurate information and education;
- Undertakes care planning and reviews;
- Conducts independent and collaborative immunisation, wound care and chronic disease management clinics.

2.3 In collaboration with the general practice team conducts diagnostic activities.

Examples may include:

- Demonstrates proficiency in health assessment skills;
- Checks diagnostic results against client symptoms and previous results.

- Uses maturity and political astuteness to deal effectively with issues arising from complex collaborations;
- Clearly articulates the care requirements of individuals and groups using context specific knowledge and experience;
- Actively advocates for individuals and groups within and across health care teams and agencies;
- Manages care for individuals and groups across multi agency and interdisciplinary lines.

Competency standard 6

Seeks out and integrates evidence from a range of sources to improve health care outcomes.

The advanced registered nurse:

- Identifies appropriate sources of evidence according to the context;
- Is aware of and uses best available evidence to inform practice;
- Obtains expert advice as required;
- Uses outcomes of consultation to negotiate care;
- Selectively implements specific strategies based on expected outcomes;
- Makes decisions in partnership with individuals and groups according to their expressed needs;
- Ensures nursing practice is based on experience, clinical judgement, and statutory and common law requirements where a decision by an individual or group contravenes safe practice.

Competency standard 7

Safely interprets and modifies guidelines and practice to meet the health care needs of individuals and groups.

The advanced registered nurse:

- Ensures protocols guide rather than direct practice;
- Responds effectively to unexpected or rapidly changing situations;

Management of care

Competency Unit 7

Carries out a comprehensive and accurate nursing assessment of individuals and groups in a variety of settings.

Element 7.1

Uses a structured approach in the process of assessment.

Element 7.2

Collects data regarding the health and functional status of individuals and groups.

Element 7.3

Analyses and interprets data accurately.

Competency Unit 8

Formulates a plan of care in collaboration with individuals and groups.

Element 8.1

Establishes priorities for resolution of identified health needs in consultation with the individual/group.

Element 8.2

Identifies expected outcomes including a time frame for achievement in collaboration with individuals and groups.

Element 8.3

Develops and documents a plan of care to achieve optimal health, habilitation, rehabilitation or a dignified death.

2.4 Provides evidence based information, resources and education to assist individuals, groups and families to make health care decisions.

Examples may include:

- Ensures that all information about chronic disease management, immunisation and wound care is accurate according to reliable sources;
- Talks through with the individuals and groups the potential benefits and risks of health care interventions;
- Considers the ongoing implications of the health of individuals and groups beyond the immediate episode of care;
- Regularly reviews and updates individuals and group information and resources.

2.5 Modifies communication strategies according to individual and group circumstances.

Examples may include:

- Monitors individual and group reactions during interactions and changes language or communication styles accordingly;
- Provides appropriate counselling.

2.6 Collaborates with individuals, groups and the general practice team in decision making about the resources needed to provide clinical care.

Examples may include:

- Considers ethical implications in decision making about allocation of health care resources.

Management of clinical care systems

Registered nurses in general practice develop, coordinate and administer systems and processes which assist individuals, groups and the general practice team to

- Identifies gaps between current practice and existing protocols and guidelines;
- Initiates changes to protocols and guidelines to improve the care of individuals and groups in line with latest available evidence.

Leads Practice

This domain contains competencies reflecting the ability of the advanced registered nurse to promote and improve nursing practice through leadership.

Competency standard 8

Leads and guides the nursing team to promote optimum standards of care.

The advanced registered nurse:

- Practices confidently as an individual while maintaining open communication and consulting with relevant members of the health team;
- Bases practice on the use and where relevant modification of multiple standards and guidelines;
- Ensures practice is grounded in appropriate frameworks;
- Contributes to nursing knowledge through reflection on practice.

Competency standard 9

Shares information and resources to initiate improvements and/or innovation in nursing practice.

The advanced registered nurse:

- Recognises the value of change and where beneficial pursues the introduction of changes such as new guidelines, protocols, skill mixes;
- Supports quality improvement processes within the workplace;
- Provides feedback on quality improvement processes to colleagues;

Competency Unit 9

Implements planned nursing care to achieve identified outcomes within scope of competence.

Element 9.1

Provides planned care.

Element 9.2

Plans for continuity of care as appropriate.

Element 9.3

Educates individuals or groups to maintain and promote health.

Competency Unit 10

Evaluates progress toward expected outcomes and reviews and revises plans in accordance with evaluation data.

Element 10.1

Determines the progress of individuals or groups towards planned outcomes.

Element 10.2

Revises nursing interventions in accordance with evaluation data and determines further outcomes.

Enabling

Competency Unit 11

Contributes to the maintenance of an environment which promotes safety, security and personal integrity of individuals and groups.

Element 11.1

Acts to enhance the safety of individuals and groups at all times.

anticipate and manage health care interventions and potential risks to facilitate quality client outcomes.

3.1 Uses best available research to inform clinical care management.

Examples may include:

- Collaborates with the division of general practice, general practice and health product provider representatives to access current information;
- Uses information technology skills to access current research, evidence, and or guidelines for practice;
- Initiates changes to practice guidelines and protocols based on evaluation of research outcomes and evidence;
- Participates in research taking place in the general practice setting.

3.2 Coordinates and reviews programs, registers and systems to facilitate quality individual and group health care outcomes.

Examples may include:

- Ensures that recall registers, pathology systems and individual and group documentation systems are continuously reviewed to achieve optimal outcomes;
- Collaborates with individuals, groups, general practitioners, other general practice staff and health care providers in the development and review of guidelines, protocols or templates;
- Participates in practice accreditation processes.

3.3 Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.

Examples may include:

- Understands the funding, billing and business systems used in the general practice;

- Personally contributes to quality improvement processes;
- Incorporates outcomes from quality improvement processes into nursing practice;
- Consistently uses structured feedback from individuals and groups, both formal and informal, for ongoing quality improvement.

Competency standard 10

Fosters and initiates research based nursing practice.

The advanced registered nurse:

- Identifies issues/problems in nursing practice as the basis for review and research;
- Critically evaluates existing research evidence for relevance to practice;
- Participates in the conduct of approved research where appropriate;
- Incorporates validated research evidence into nursing practice;
- Supports appropriate research conducted by others.

Competency standard 11

Acts as a mentor and role model for nurses and other health professionals.

The advanced registered nurse:

- Recognises the necessity for mutual respect of colleagues in the workplace and profession;
- Makes time available to listen to colleagues' professional concerns and requests;
- Provides advice and constructive criticism where appropriate.

Competency standard 12

Contributes to development of nursing knowledge, standards and resources through active participation at the broader professional level.

Element 11.2

Provides for the comfort needs of individuals and groups.

Element 11.3

Establishes, maintains and concludes caring, therapeutic and effective interpersonal relationships with individuals or groups.

Element 11.4

Applies strategies to promote individual/groups self esteem.

Element 11.5

Acts to maintain the dignity and integrity of individuals/ groups.

Competency Unit 12

Communicates effectively with individuals and groups.

Element 12.1

Communicates using formal and informal channels of communication.

Element 12.2

Ensures documentation is accurate and maintains confidentiality.

Competency Unit 13

Manages effectively the nursing care of individuals and groups.

Element 13.1

Organises workload to facilitate planned nursing care for individuals and groups.

- Participates in practice accreditation processes;
- Updates practice and clinical policies and procedures.

3.4 Manages resources to promote optimal client care.

Examples may include:

- Understands public and private health care services;
- Maintains clinical data entry and retrieval;
- Develops/maintains clinical reports;
- Understands the implications of Health Insurance Commission information for care outcomes for individuals and groups.

3.5 Collects information about practice population profiles to inform health promotion and illness prevention strategies.

Examples may include:

- Develops/maintains clinical reports;
- Compiles statistics to contribute to local population health profiles.

Collaborative practice

Registered nurses in general practice build and engage in a broad range of collaborative and negotiated relationships with individuals, groups, the general practice team and other primary health care and service providers to achieve positive outcomes for individual and groups.

4.1 Ensures clinical nursing decisions are communicated to the general practice team.

Examples may include:

- Appropriately refers clients to general practitioners;
- Collaborates with general practitioners to develop guidelines and protocols;

The advanced registered nurse:

- Participates in organisational and/or professional committees, boards, working parties or forums;
- Contributes to written submissions about organisational or professional issues.

Competency standard 13

Facilitates education of individuals and groups, students, nurses and other members of the health care team.

The advanced registered nurse:

- Shares information and ideas;
- Takes on a teaching role for less experienced staff.

Competency standard 14

Acts as a resource for other nurses and members of the health care team

The advanced registered nurse:

- Ensures research findings are disseminated to colleagues;
- Shares a depth of knowledge gained through continuing education and nursing experiences.

Competency standard 15

Provides nursing as a resource to others through their capacity to practice outside single contexts and episodes of practice.

The advanced registered nurse:

- Facilitates care/support groups for individuals and groups;
- Answers inquiries about current practice in area of expertise.

Element 13.2

Delegates to others activities commensurate with their abilities and scope of practice.

Element 13.3

Uses a range of supportive strategies when supervising aspects of care delegated to others.

Element 13.4

Responds effectively in unexpected or rapidly changing situations.

Competency Unit 14

Collaborates with other members of the health care team.

Element 14.1

Recognises the role of members of the health care team in the delivery of health care.

Element 14.2

Establishes and maintains collaborative relationships with colleagues and members of the health care team.

Element 14.3

Participates with other members of the health care team and the individual/group in decision making.

- Is actively involved in community meetings, case conferences and care planning.

4.2 Participates in shared decision making about care delivery with individuals, groups and members of the general practice team.

Examples may include:

- Attends and contributes to practice meetings;
- Addresses safety and quality issues for individuals, groups, and others working in the general practice.

4.3 Recognises when to seek advice from other members of the general practice team or other health service providers about the care of individuals and groups.

Examples may include:

- Seeks advice when the needs of individuals and groups are beyond own abilities and education;
- Understands the roles of the allied health care team;
- Understands the roles of community agencies and service providers.

4.4 Shares information with the general practice team.

Examples may include:

- Communicates new information and research evidence;
- Communicates test results;
- Accurately documents the provision of nursing care.

continued on next page

4.5 Monitors local, community and population health developments and resources for integration into the care of individuals and groups.

Examples may include:

- Stays informed of local infectious diseases outbreaks;
- Shares information with relevant community groups in conjunction with public health services (eg primary schools);
- Incorporates current clinical guidelines into practice.

4.6 Liaises with relevant community and health care agencies for community development purposes and to facilitate continuity of care for individuals and groups in that community.

Examples may include:

- Liaises with health care services and providers;
- Develops partnerships with other health services where individuals and groups are referred;
- Manages internal and external referral processes and procedures.

Competency Standards

for nurses in general practice



Competency standards for the enrolled nurse in general practice

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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Competency standards for the enrolled nurse in general practice¹

Australian Nursing and Midwifery Council's national competency standards for the enrolled nurse

Professional and ethical practice

Competency Unit 1

Functions in accordance with legislation, policies and procedures affecting nursing practice.

Element 1.1

Demonstrates knowledge of legislation and common law pertinent to enrolled nursing practice.

Element 1.2

Demonstrates knowledge of organisational policies and procedures pertinent to enrolled nursing practice.

Element 1.3

Fulfils the duty of care in the course of enrolled nursing practice.

Element 1.4

Acts to ensure safe outcomes for individuals and groups by recognising and reporting the potential for harm.

Element 1.5

Reports practices that may breach legislation, policies and procedures relating to nursing practice to the appropriate person.

Competency Unit 2

Conducts nursing practice in a way that can be ethically justified.

Element 2.1

Acts in accordance with the nursing profession's codes.

Competency standards for the enrolled nurse in general practice

These competency standards must be read in conjunction with the national competency standards for the enrolled nurse

Professional practice

Enrolled nurses in general practice contribute to the development of health care in the general practice setting. They do this by keeping informed about developments in general practice and the nursing profession and applying this knowledge to the care of individuals and groups and the development of nursing in general practice. This includes an understanding of professional, legal and ethical standards as they apply to nursing within a primary health care setting.

1.1. Recognises that nursing in general practice is based on primary, preventative care or early intervention health care approaches.

Examples may include:

- Understands principles of primary health care and primary care;
- Understands the difference between providing nursing care in general practice and in hospital settings;
- Respects individuals and groups' rights to make their own health care decisions.

1.2 Practices in accordance with nursing and general practice standards, codes, guidelines, legislation and regulations.

Examples may include:

- Uses Australian Nursing and Midwifery Council codes and competency standards for enrolled nurses and considers other relevant standards such as those for immunisation and asthma;
- Uses general practice specific standards and guidelines such as the Royal Australian College of General Practitioners' Standards for General Practices and the Medicare requirements.

¹ The enrolled nurse is legally required to be supervised by a registered nurse and is accountable and responsible for all aspects of delegated care. In South Australia, enrolled nurses can apply to the nurse regulatory authority for authorisation to work without the supervision of a registered nurse.

Element 2.2

Demonstrates an understanding of the implications of these codes for enrolled nursing practice.

Competency Unit 3

Conducts nursing practice in a way that respects the rights of individuals and groups.

Element 3.1

Practises in accordance with organisational policies relevant to individual/group rights in the health care context.

Element 3.2

Demonstrates an understanding of the rights of individuals/groups in the health care setting.

Element 3.3

Liaises with others to ensure that the rights of individuals/groups are maintained.

Element 3.4

Demonstrates respect for the values, customs, spiritual beliefs and practices of individuals and groups.

Element 3.5

Liaises with others to ensure that the spiritual, emotional and cultural needs of individuals/groups are met.

Element 3.6

Contributes to the provision of relevant health care information to individuals and groups.

Competency Unit 4

Accepts accountability and responsibility for own actions within enrolled nursing practice

Element 4.1

Recognises own level of competence.

1.3 Recognises the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships.

Examples may include:

- Establishes opportunities for direct or indirect registered nurse supervision;
- Overcomes professional isolation through networking with other nurses and involvement in ongoing professional development;
- Becomes a member of general practice and/or professional organisations;
- Identifies self care activities to assist with working in the general practice setting.

1.4 Recognises the need for ongoing education and training to maintain competence for nursing practice.

Examples may include:

- Collaborates with the registered nurse and general practitioner to regularly assess competence for practice and need for updated knowledge base for practice;
- Seeks out education and training opportunities when required to undertake new responsibilities;
- Maintains skills in cardiopulmonary resuscitation and other basic first aid.

Provision of clinical care

Enrolled nurses in general practice have the knowledge and skill to provide delegated care in the general practice setting in response to the diversity and need of individuals and groups. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care characterise the provision of clinical care in general practice settings.

2. 1 Demonstrates knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments.

Examples may include:

- Provides clinical care within the scope of education, experience and assessment of the need of individuals and groups;
- Gathers relevant information from individuals and groups presenting without appointments and communicates this information appropriately to improve outcomes and minimise adverse events;
- Recognises when a more detailed assessment of individuals and groups is required and seeks registered nurse or general practitioner assistance;

Element 4.2

Recognises the differences in accountability and responsibility between registered nurses, enrolled nurses and unregulated care workers.

Element 4.3

Differentiates the responsibility and accountability of the registered nurse and enrolled nurse in the delegation of nursing care.

Critical thinking and analysis

Competency Unit 5

Demonstrates critical thinking in the conduct of enrolled nursing practice.

Element 5.1

Uses nursing standards to assess own performance.

Element 5.2

Recognises the need for and participates in continuing self/professional development.

Element 5.3

Recognises the need for care of self.

Competency Unit 6

Contributes to the formulation of care plans in collaboration with the registered nurse, individuals and groups.

Element 6.1

Accurately collects and reports data regarding the health and functional status of individuals and groups.

Element 6.2

Participates with the registered nurse and individuals and groups in identifying expected health care outcomes.

Element 6.3

Participates with the registered nurse in evaluation of progress of individuals and groups toward expected outcomes and reformulation of care plans.

- Distinguishes between respect for the privacy of individuals and groups and what is necessary to plan and provide health care;
- Considers access and affordability in planning and providing care for individuals and groups;
- Follows protocols when conducting health assessments and reviews;
- Considers existing conditions for individuals and groups in providing nursing care;
- Recognises potentially distressing situations for individuals and groups and provides reassurance and support accordingly;
- Recognises the influence of the bio psychosocial factors for individuals and groups on care decision making.

2.2 Collects and reports information about the health and functional status of individuals and groups.

Examples may include:

- Demonstrates technical proficiency in measuring and documenting vital signs and test results such as blood glucose readings, urinalysis, wound and skin checks;
- Demonstrates accurate use of spirometry, electrocardiographs and other health care technologies;
- Assesses wound healing and exudate amount, type, and colour.

2.3 Provides care for individuals and groups in consultation with the registered nurse and/or general practitioner.

Examples may include:

- Contributes to decision making about resources needed for clinical care;
- Assesses and monitors individuals and groups;
- Follows care plans, protocols or treatment regimes;
- Assists the registered nurse in conducting nurse led clinics;
- Assesses wound healing and modifies dressing regimes accordingly;
- Assists in the administration of medicines in accordance with legal and delegation and supervision requirements;
- Assists with minor procedures;
- Assists with immunisation, wound care and chronic disease management clinics.

2.4 Modifies communication strategies according to individual and group circumstances. Examples may include:

- Modifies communication style to accommodate cultural differences;

Management of care

Competency Unit 7

Manages nursing care of individuals and groups within the scope of enrolled nursing practice.

Element 7.1

Implements planned nursing care to achieve identified outcomes.

Element 7.2

Recognises and reports changes in the health and functional status of individuals/groups to the registered nurse.

Element 7.3

Ensures communication, reporting and documentation are timely and accurate.

Element 7.4

Organises workload to facilitate planned nursing care for individuals and groups.

Enabling

Competency Unit 8

Contributes to the promotion of safety, security and personal integrity of individuals and groups within the scope of enrolled nursing practice.

Element 8.1

Acts appropriately to enhance the safety of individuals and groups at all times.

Element 8.2

Establishes, maintains and concludes effective interpersonal communication.

Element 8.3

Applies appropriate strategies to promote the self esteem of individuals and groups.

Element 8.4

Acts appropriately to maintain the dignity and integrity of individuals and groups.

- Recognises that communication of information such as test results may impact on the wellbeing of individuals and groups;
- Recognises that the comprehension of individuals and groups may vary with health condition and wellbeing.

2.5. Liaises with the registered nurse and general practitioner in providing evidence-based health promotion and illness management information to individuals, groups and their families.

Examples may include:

- Recognises the need to provide information to improve or maintain health;
- Uses resources available within the practice to meet the needs of individuals and groups;
- Provides information and resources according to the needs of individuals and groups;
- Contributes to the review and update of information resources for individuals and groups.

Management of clinical care systems

Enrolled nurses in general practice administer and maintain the systems and processes which assist individuals, groups and the general practice team to anticipate and manage health care interventions and potential risks to facilitate quality client outcomes.

3.1 Uses relevant guidelines, protocols and systems as evidence for practice.

Examples may include:

- Uses guidelines, protocols or templates developed by registered nurses/general practitioners;
- Collaborates with registered nurses and general practitioners in development and review of guidelines and protocols.

3.2 Maintains programs, registers and systems to ensure appropriate clinical care provision.

Examples may include:

- Understands the funding, billing and business systems in general practice;
- Understands the importance and use of recall registers, pathology systems and documentation systems to assist in the care of individuals and groups;
- Uses guidelines, protocols or templates developed by the general practice team;
- Participates in quality improvement and general practice accreditation processes;

Competency Unit 9

Provides support and care to individuals and groups within the scope of enrolled nursing practice.

Element 9.1

Provides for the comfort needs of individuals and groups experiencing illness or dependence.

Element 9.2

Collaborates with the registered nurse and members of the health care team in the provision of nursing care to individuals and groups experiencing illness or dependence.

Element 9.3

Contributes to the health education of individuals or groups to maintain and promote health.

Element 9.4

Communicates with individuals and groups to enable therapeutic outcomes.

Competency Unit 10

Collaborates with members of the health care team to achieve effective health care outcomes.

Element 10.1

Demonstrates an understanding of the role of the enrolled nurse as a member of the health care team.

Element 10.2

Demonstrates an understanding of the role of members of the health care team in achieving health care outcomes.

Element 10.3

Establishes and maintains collaborative relationships with members of the health care team.

Element 10.4

Contributes to decision-making by members of the health care team.

- Updates general practice registers of community resources and health service personnel.

3.3 Manages resources to promote optimal care for individuals and groups.

Examples may include:

- Manages stocks and stores;
- Monitors cold chain systems;
- Manages sterilisation procedures and maintains standards;
- Documents to comply with standards such as those required for cold chain and sterilisation systems.

3.4 Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.

Examples may include:

- Effectively uses administrative systems designed to assist with the care of individuals and groups;
- Maintains clinical data systems including entry and retrieval processes.

Collaborative practice

Enrolled nurses in general practice build and engage in a broad range of collaborative and negotiated relationships with individuals, groups, the general practice team and other primary health care and service providers to achieve positive outcomes for individuals and groups.

4.1. Consults with the registered nurse and general practice team in making clinical decisions.

Examples may include:

- Appropriately refers clients to a registered nurse or general practitioner;
- Collaborates with registered nurses or general practitioners to develop guidelines and protocols.

4.2 Participates in shared decision making about care delivery with individuals, groups and members of the general practice team.

Examples may include:

- Attends and contributes to general practice meetings.

4.3 Recognises when to seek advice from the registered nurse and general practitioner about the care of individuals and groups.

Examples may include:

- Seeks advice when the needs of individuals and groups are beyond own abilities and education;
- Understands the roles of the allied health care team;
- Understands the roles of community agencies and service providers.

4.4. Shares information with the general practice team.

Examples may include:

- Seeks out and evaluates information and resources;
- Advises others about enrolled nurses' scope of practice;
- Seeks constructive feedback about performance;
- Accurately documents care provision.

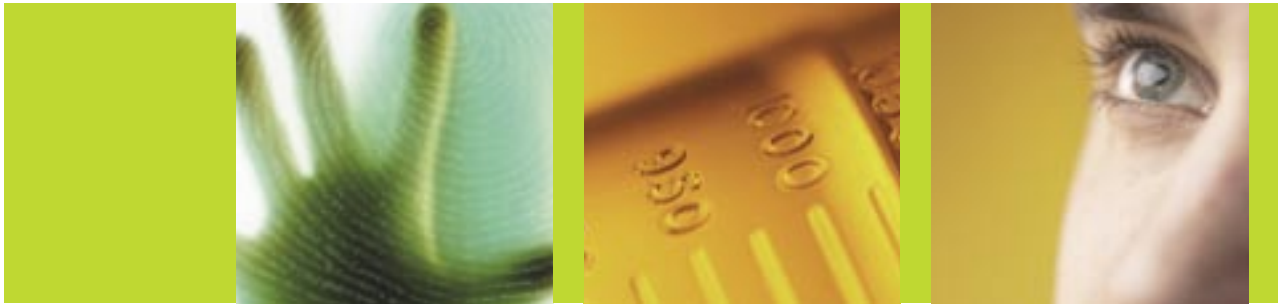
4.5 Liaises with relevant community and health care agencies to facilitate continuity of care for individuals and groups.

Examples of practice may include:

- Is aware of local referral processes and procedures;
- Contributes to the development of partnerships with other health services where individuals and groups are referred;
- Undertakes delegated referral activities.

Competency Standards

for nurses in general practice



Role statement for the registered nurse in general practice

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Role statement for the registered nurse in general practice¹

The registered nurse in general practice demonstrates competence in the provision of primary health care centred on individuals and groups, in accordance with their educational preparation, professional nursing standards, relevant legislation and general practice context in an environment characterised by unpredictability and individual diversity across the lifespan.

While the role of the registered nurse in general practice varies according to the population profile of the general practice, the general practice structure, and employment arrangements, the registered nurse provides a combination of direct clinical care and management of clinical care systems in an environment which is often isolated from other nurses. This requires that s/he works collaboratively with others, internal and external to the general practice, to promote health care centred on individuals and groups.

In some general practices, the registered nurse autonomously conducts clinics, health assessments and chronic disease management programs as well as collaborating with general practitioners and other members of the multidisciplinary health care team as determined by the needs of individuals and groups, and the registered nurse's scope of practice and the employment arrangement. The registered nurse may undertake their nursing role both within and external to the general practice, conducting assessments and health visits in the home and /or another community setting.

The relationships between nurses in general practice and the individuals/groups requiring nursing care usually extends beyond single episodes of care to meeting changing health care needs and priorities across the lifespan.

The registered nurse plays a pivotal role in health promotion, health maintenance and prevention of illness through provision of evidence based information and education to individuals, groups and communities. This requires a broad knowledge of resources available within the community and health care sectors to facilitate care to individuals/groups and the skills to communicate and educate.

The registered nurse in general practice also requires highly developed information literacy, management and coordination skills to enable the development and management of systems that ensure safety and quality. This includes recall, infection control and quality improvement systems.

All nurses have a responsibility to know and practice within their scope of practice relevant to their education and qualifications.

Registered nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings.

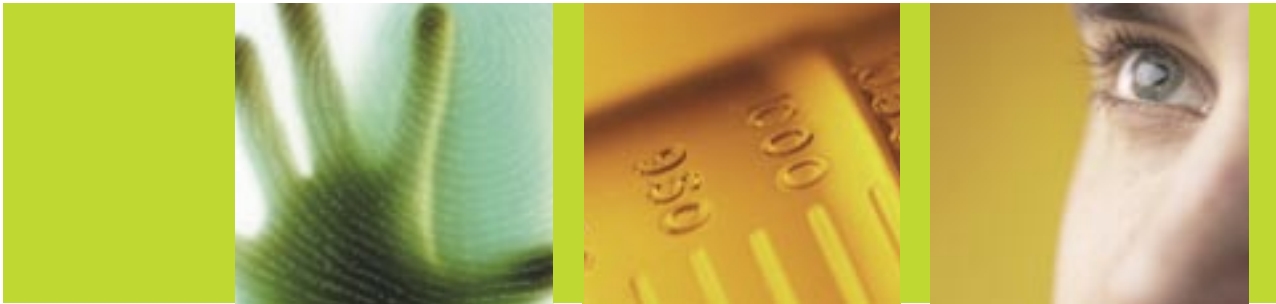
¹ Prepared as part of the project by the University of South Australia project team.

Some registered nurses in general practice will be working at an advanced level and 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 groups.

Competency Standards

for nurses in general practice



Using the competency standards for professional development purposes

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Using the competency standards for professional development purposes

Checklist

Step 1	Self-assessment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 2	Professional development plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 3	Professional portfolio	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 4	Reflection on nursing practice	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 5a	Peer assessment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 5b	Employer assessment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 5c	Review of professional development plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 6	Evaluation	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Step 1. Self assessment

Complete the self assessment against the national competency standards for registered or enrolled nurses¹ and the competency standards for registered or enrolled nurses in general practice.

See also:

Self-assessment for the registered nurse in general practice

Self-assessment for the enrolled nurse in general practice

Step 2. Professional development plan

Prepare a professional development plan for the next 12 months using the units of competency that you are NOT confident that you meet. A professional development plan outlines your learning needs and your professional goals as you maintain competence and further develop your nursing practice.

Aim to develop goals that are:

- Specific
- Measurable
- Achievable
- Realistic
- Time-framed (set start and finish dates)²

See also:

Professional development plan (registered nurse)

Professional development plan (registered nurse)

Template for a professional development plan

¹ Registered nurse (division 2) in Victoria

² College of Dietitians of Ontario Quality Assurance Program 2004 SDL Tool <http://www.cdo.on.ca/>

Step 3. Professional portfolio

Develop a professional portfolio.

A professional portfolio is a comprehensive record of your professional roles. It is updated on an annual basis at the minimum. A professional portfolio is a confidential document although you can use copies of some of the information when applying for a new position or a pay increase, applying to undertake some further education, or when audited by the nurse regulatory authority for the purposes of continuing competence.

See also:

Professional portfolio (registered nurse)

Professional portfolio (enrolled nurse)

Step 4. Reflection on nursing practice

Reflect on your competence as a nurse working in the general practice setting.

Key issues to reflect upon when reviewing an event at work are³:

- What happened? What did you do? What did others do?
- Why was it an important event for you? What were the best things about the event? What were the worrying things about the event?
- What would you do differently next time? What is needed to be done by you so that you can be more effective next time?

Step 5. Assessment

Arrange a performance assessment by a peer and/or your employer so that you have other perspectives on your current level of competence and your professional development plans.

You may need to review your professional development plans after this step.

See also:

Performance management tool for registered nurses in general practice

Performance management tool for enrolled nurses in general practice

A peer is a nursing colleague who, for example, may be working in the same general practice or at another general practice in your local area, or is a member of your professional network. You should have professional respect for the peer that you select to assist you to assess your competence and prepare your professional goals.

A useful resource may be the Australian Government's recently released mentoring fact sheets for nursing in general practice and these can be found on the Department of Health and Ageing website, www.health.gov.au.

³ Nurse Board of Western Australia 2004 Professional portfolio www.nbwa.org.au

⁴ Registered Nurses Association of British Columbia Professional development: A short guide to meeting continuing competency requirements <http://www.rnabc.bc.ca/>

Asking a peer for feedback⁴:

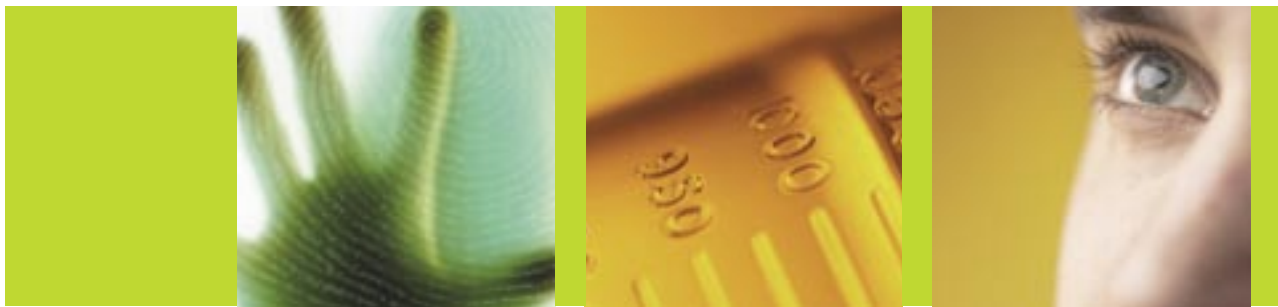
- Arrange a time and place so that you are not interrupted;
- Brief the peer in advance on what you want to talk about ie your nursing practice in general practice;
- Raise some of your issues about your nursing practice in general practice eg use your self assessment or examples of reflection on practice;
- Ask the peer about your strengths (what do I do well?) and weaknesses (where do I need to improve?);
- Discuss your personal development plan and analyse if it will achieve your goals;
- Listen to the feedback that you are given;
- Ask questions and seek clarification;
- Keep the notes that you make during the peer assessment and reflect constructively on these at a later time.

Step 6. Evaluation

Evaluate your progress using the self-assessment tool and monitoring your achievement of the goals set in the professional development plan.

Competency Standards

for nurses in general practice



Self-assessment for the registered nurse in general practice

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Competency standards for the registered nurse

NOTE

For self-assessment purposes, the following two parts must be completed:

Part 1. Australian Nursing and Midwifery Council's national competency standards for the registered nurse (these standards are under review and the revised version will be available later in 2005);

Part 2. Competency standards for the registered nurse in general practice.

PART 1

Australian Nursing and Midwifery Council's national competency standards for the registered nurse

Professional and ethical practice		Are you confident that you meet this element of competency?	
Competency Unit 1 I function in accordance with legislation and common law affecting nursing practice.	Element 1.1 I demonstrate knowledge of legislation and common law pertinent to nursing practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.2 I fulfil the duty of care in the course of practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.3 I demonstrate knowledge of policies and procedural guidelines that have legal implications for practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.4 I identify unsafe practice and respond appropriately to ensure a safe outcome.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.5 I recognise and act upon breaches of law relating to practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 2 I conduct nursing practice in a way that can be ethically justified.	Element 2.1 I practice in accordance with the profession's code of ethics.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 2.2 I demonstrate knowledge of contemporary ethical issues impinging on nursing.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 2.3 I engage effectively in ethical decision making.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 2.4 I ensure confidentiality of information	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Competency Unit 3 I protect the rights of individuals and groups in relation to health care.	Element 3.1 I acknowledge the rights of individuals/groups in the health care setting.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.2 I act to ensure that rights of individuals/groups are not compromised.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.3 I involve the individual/group as an active participant in the process of care.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.4 I respect the values, customs, spiritual beliefs and practices of individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.5 I provide for the spiritual, emotional and cultural needs of individuals/groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.6 I provide relevant and current health care information to individuals and groups in a form which facilitates their understanding.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.7 I encourage and support individuals/groups in decision making.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 4 I accept accountability and responsibility for my own actions within nursing practice.	Element 4.1 I recognise my own knowledge base/scope of competence.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 4.2 I consult with an experienced registered nurse when nursing care requires expertise beyond my own scope of competence.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 4.3 I consult other health care professionals when individual/group needs fall outside the scope of nursing practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Critical thinking and analysis		Are you confident that you meet this element of competency?	
Competency Unit 5 I act to enhance the professional development of myself and others.	Element 5.1 I use professional standards of practice to assess my performance.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 5.2 I recognise the need for and participate in professional development.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 5.3 I recognise the need for care of self.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 5.4 I contribute to the learning experiences and professional development of others.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Competency Unit 6 I value research in contributing to developments in nursing and improved standards of care.	Element 6.1 I acknowledge the importance of research in improving nursing outcomes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 6.2 I incorporate research findings into nursing practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 6.3 I contribute to the process of nursing research	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Management of care		Are you confident that you meet this element of competency?	
Competency Unit 7 I carry out a comprehensive and accurate nursing assessment of individuals and groups in a variety of settings.	Element 7.1 I use a structured approach in the process of assessment.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 7.2 I collect data regarding the health and functional status of individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 7.3 I analyse and interpret data accurately.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 8 I formulate a plan of care in collaboration with individuals and groups.	Element 8.1 I establish priorities for resolution of identified health needs in consultation with the individual/ group.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 8.2 I identify expected outcomes including a time frame for achievement in collaboration with individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 8.3 I develop and document a plan of care to achieve optimal health, habilitation, rehabilitation or a dignified death.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 9 I implement planned nursing care to achieve identified outcomes within my scope of competence.	Element 9.1 I provide planned care.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 9.2 I plan for continuity of care as appropriate.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 9.3 I educate individuals or groups to maintain and promote health.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 10 I evaluate progress toward expected outcomes and review and revise plans in accordance with evaluation data.	Element 10.1 I determine the progress of individuals or groups towards planned outcomes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 10.2 I revise nursing interventions in accordance with evaluation data and determine further outcomes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Enabling		Are you confident that you meet this element of competency?	
Competency Unit 11 I contribute to the maintenance of an environment which promotes safety, security and personal integrity of individuals and groups.	Element 11.1 I act to enhance the safety of individuals and groups at all times.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 11.2 I provide for the comfort needs of individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 11.3 I establish, maintain and conclude caring, therapeutic and effective interpersonal relationships with individuals or groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 11.4 I apply strategies to promote individual/groups self esteem.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 11.5 I act to maintain the dignity and integrity of individuals/ groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 12 I communicate effectively with individuals and groups.	Element 12.1 I communicate using formal and informal channels of communication.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 12.2 I ensure documentation is accurate and maintain confidentiality.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 13 I manage effectively the nursing care of individuals and groups.	Element 13.1 I organise workload to facilitate planned nursing care for individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 13.2 I delegate to others activities commensurate with their abilities and scope of practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 13.3 I use a range of supportive strategies when supervising aspects of care delegated to others.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 13.4 I respond effectively in unexpected or rapidly changing situations.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 14 I collaborate with other members of the health care team.	Element 14.1 I recognise the role of members of the health care team in the delivery of health care.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 14.2 I establish and maintain collaborative relationships with colleagues and members of the health care team.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 14.3 I participate with other members of the health care team and the individual/group in decision making.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Competency standards for the registered nurse in general practice

PART 2

Competency standards for the registered nurse in general practice

<p>Professional practice Registered nurses in general practice contribute to the development of health care in the general practice setting. They do this by engaging with developments in general practice and the nursing profession and applying this knowledge to the care of individuals and groups and the development of nursing in general practice. This includes understanding professional, legal and ethical standards as they apply to nursing within a primary health care setting.</p>	<p>Are you confident that you meet this unit of competency?</p>	
<p>1.1 I practice based on primary, preventative care or early intervention health care approaches. Examples may include:</p> <ul style="list-style-type: none"> • I integrate the principles of primary health care and primary care into nursing practice; • I understand how the geographic, cultural and socio-economic characteristics of the local community may impact on health of individuals; • I respect individual and group rights to make their own health care decisions. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>1.2 I practice in accordance with nursing and general practice standards, codes, guidelines, legislation and regulation. Examples may include:</p> <ul style="list-style-type: none"> • I use Australian Nursing and Midwifery Council codes and competency standards for registered and enrolled nurses and other relevant standards such as those for immunisation and asthma; • I use general practice specific standards and guidelines such as the Royal Australian College of General Practitioners' Standards for General Practices and the Medicare requirements; • I contribute to review and modification of nursing and general practice standards, codes and guidelines. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

<p>1.3 I actively seek out opportunities and resources to manage professional isolation.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I am a member of general practice and/or professional organisations; • I establish networks with other nurses and I am involved with ongoing professional development; • I establish opportunities for information sharing and support with other general practice health care professionals; • I identify self care activities to assist with working in an isolated professional environment. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>1.4 I recognise the need for ongoing education and training to maintain competence for nursing practice.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I use self assessment and peer review to regularly assess my own competence for practice within the agreed scope of practice; • I identify the need for updated knowledge base for practice; • I supervise both enrolled and other registered nurses, and students of general practice health care; • I educate nurses and students of general practice health care; • I maintain skills in cardiopulmonary resuscitation and other first aid required in the setting. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>Provision of clinical care</p> <p>Registered nurses in general practice have the knowledge and skill to provide comprehensive, episodic interventions and population based primary health care which includes planning and initiation of health monitoring and health maintenance. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care, characterise the provision of clinical care in general practice settings.</p>		<p>Are you confident that you meet this unit of competency?</p>
<p>2.1 I demonstrate comprehensive and accurate knowledge and skills in providing episodic and ongoing care that is responsive to individual and group circumstances and environments.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I conduct accurate comprehensive assessment of individuals and groups presenting without appointments to improve outcomes and minimise adverse events; • I probe individual and group responses for more detailed information where necessary; • I assess and develop health care plans that direct health care interventions and activities by others; • I consider access and affordability in planning and providing care for individuals and groups; • I provide care in the general practice environment as well as in homes and other community settings; • I identify and provide comprehensive physical, psychosocial and emotional care for individuals and groups; • I use knowledge of existing conditions for individuals and groups, and their social circumstances, to inform nursing practice; • I conduct health care clinics; • I provide health care services in accordance with Medicare Benefits Schedule conditions; • I assist with minor procedures undertaken by the general practitioner. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

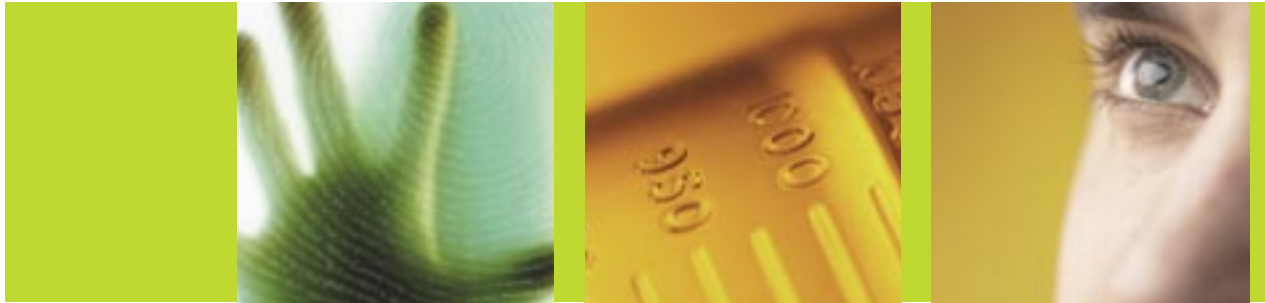
<p>2.2 I initiate and conduct comprehensive health maintenance and health promotion in partnership with individuals, groups and the general practice team.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I undertake health screening and health monitoring activities such as cardiac assessment including electrocardiographs and stress tests; • I provide timely and accurate information and education; • I undertake care planning and reviews; • I conduct independent and collaborative immunisation, wound care and chronic disease management clinics. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>2.3 I conduct diagnostic activities in collaboration with the general practice team.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I demonstrate proficiency in health assessment skills; • I check diagnostic results against client symptoms and previous results. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>2.4 I provide evidence based information, resources and education to assist individuals, groups and families to make health care decisions.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I ensure that all information about chronic disease management, immunisation and wound care is accurate according to reliable sources; • I talk through with the individuals and groups the potential benefits and risks of health care interventions; • I consider the ongoing implications of the health of individuals and groups beyond the immediate episode of care; • I regularly review and update individuals and group information and resources. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>2.5 I modify communication strategies according to individual and group circumstances.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I monitor individual and group reactions during interactions and change my language or communication styles accordingly; • I provide appropriate counselling. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>2.6 I collaborate with individuals, groups and the general practice team in decision making about the resources needed to provide clinical care.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I consider ethical implications in decision making about allocation of health care resources. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

<p>Management of clinical care systems Registered nurses in general practice develop, coordinate and administer systems and processes which assist individuals, groups and the general practice team to anticipate and manage health care interventions and potential risks to facilitate quality client outcomes.</p>	<p>Are you confident that you meet this unit of competency?</p>	
<p>3.1 I use best available research to inform clinical care management. Examples may include:</p> <ul style="list-style-type: none"> • I collaborate with the division of general practice, general practice and health product provider representatives to access current information; • I use information technology skills to access current research, evidence, and or guidelines for practice; • I initiate changes to practice guidelines and protocols based on evaluation of research outcomes and evidence; • I participate in research taking place in the general practice setting. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>3.2 I coordinate and review programs, registers and systems to facilitate quality individual and group health care outcomes. Examples may include:</p> <ul style="list-style-type: none"> • I ensure that recall registers, pathology systems and individual and group documentation systems are continuously reviewed to achieve optimal outcomes; • I collaborate with individuals, groups, general practitioners, other general practice staff and health care providers in the development and review of guidelines, protocols or templates; • I participate in practice accreditation processes. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>3.3 I demonstrate proficiency in the use of information management technology and systems to inform clinical care management. Examples may include:</p> <ul style="list-style-type: none"> • I understand the funding, billing and business systems used in the general practice; • I participate in practice accreditation processes; • I update practice and clinical policies and procedures. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>3.4 I manage resources to promote optimal client care. Examples may include:</p> <ul style="list-style-type: none"> • I understand public and private health care services; • I maintain clinical data entry and retrieval; • I develop/maintain clinical reports; • I understand the implications of Health Insurance Commission information for care outcomes for individuals and groups. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>3.5 I collect information about practice population profiles to inform health promotion and illness prevention strategies. Examples may include:</p> <ul style="list-style-type: none"> • I develop/maintain clinical reports; • I compile statistics to contribute to local population health profiles. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

<p>Collaborative practice</p> <p>Registered nurses in general practice build and engage in a broad range of collaborative and negotiated relationships with individuals, groups, the general practice team and other primary health care and service providers to achieve positive outcomes for individual and groups.</p>	<p>Are you confident that you meet this unit of competency?</p>	
<p>4.1 I ensure clinical nursing decisions are communicated to the general practice team.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I appropriately refer clients to general practitioners; • I collaborate with general practitioners to develop guidelines and protocols; • I am actively involved in community meetings, case conferences and care planning. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.2 I participate in shared decision making about care delivery with individuals, groups and members of the general practice team.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I attend and contribute to practice meetings; • I address safety and quality issues for individuals, groups, and others working in the general practice. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.3 I recognise when to seek advice from other members of the general practice team or other health service providers about the care of individuals and groups.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I seek advice when the needs of individuals and groups are beyond own abilities and education; • I understand the roles of the allied health care team; • I understand the roles of community agencies and service providers. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.4 I share information with the general practice team.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I communicate new information and research evidence; • I communicate test results; • I accurately document the provision of nursing care. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.5 I monitor local, community and population health developments and resources for integration into the care of individuals and groups.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I stay informed of local infectious diseases outbreaks; • I share information with relevant community groups in conjunction with public health services (eg primary schools); • I incorporate current clinical guidelines into practice. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.6 I liaise with relevant community and health care agencies for community development purposes and to facilitate continuity of care for individuals and groups in that community.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I liaise with health care services and providers; • I develop partnerships with other health services where individuals and groups are referred; • I manage internal and external referral processes and procedures. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

Competency Standards

for nurses in general practice



Professional development plan (registered nurse)

Professional development plan¹ (registered nurse)

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity	Evaluation
Self assessment 1 July 2004 Review 15 January 2005	Core competency unit 1 I function in accordance with legislation and common law affecting nursing practice.	This is a high priority for me as I am out-of-date. Review the legislation relevant to nursing in [state/territory]. Buy a book on law and nursing and review a chapter every month. Attend a seminar/workshop on nursing and the law or health law.	I have copies of the legislation and other relevant documents and I have reviewed them. I have purchased a text-book and I have reviewed chapters on negligence and vicarious liability, and consent to treatment but I need to finish reviewing the book. I have booked into the ANF Branch's seminar on nursing and the law.
Self assessment 1 July 2004 Review 15 January 2005	Core competency unit 7 Carries out a comprehensive and accurate nursing assessment of individuals and groups in a variety of settings.	This is also high priority. Develop improved mental health assessment skills by: A. Looking at the resources available including text-books, short courses and journal articles; B. Reflecting on current skills when assessing patients; C. Raising the issue through the professional nursing organisation and the local network of nurses working in general practice; D. Discussing a potential plan of action with the employer/ general practitioner; E. Consulting the mental health liaison team in the area about any assistance they can offer.	I have reviewed resources that are available and I am reflecting on my mental health assessment skills but I would like to arrange to work with an expert mental health nurse so I am planning to speak to my employer about this during January.

¹ IMPORTANT – keep your activities as you may need to change the plan during the year

<p>Self assessment 1 July 2004</p> <p>Review 1 July 2005</p>	<p>Registered nurses in general practice competency unit 1.1 Practice is based on primary, preventative care or early intervention health care approaches.</p>	<p>Important.</p> <p>Improve my understanding of the preventive care approach used in this general practice and work with the general practitioners to increase the role of nurses in this approach to patient care:</p> <p>A. Reviewing the resources in the general practice including the RACGP guidelines;</p> <p>B. Considering competence in relation to preventive health care interventions, for example, older people;</p> <p>C. Discussing the nursing role in preventive health care at the next general practice meeting.</p>	<p>The general practice is very proactive in preventative health care strategies.</p> <p>I have reviewed the RACGP red book (guidelines for preventive activities in general practice).</p> <p>I am increasingly involved in the preventive health care strategies for older people and I am developing skills and knowledge about preventive health care strategies for children and young people.</p>
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SAMPLE

Competency Standards

for nurses in general practice



Professional development plan (registered nurse)

Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

¹ College of Dietitians of Ontario Quality Assurance Program 2004 SDL Tool <http://www.cdo.on.ca/>

Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

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Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

¹ College of Dietitians of Ontario Quality Assurance Program 2004 SDL Tool <http://www.cdo.on.ca/>

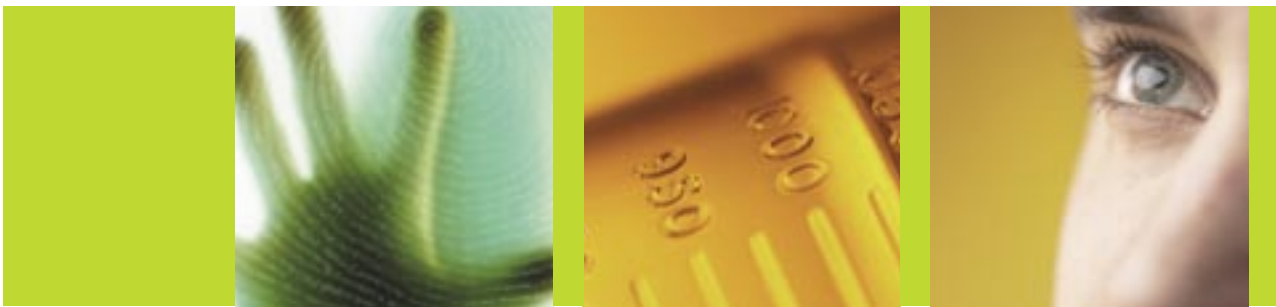
Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

¹ College of Dietitians of Ontario Quality Assurance Program 2004 SDL Tool <http://www.cdo.on.ca/>

Competency Standards

for nurses in general practice



Professional portfolio (registered nurse)

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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Professional portfolio (registered nurse)

What is a professional portfolio?

A professional portfolio is a comprehensive record of your professional roles. It is updated on an annual basis at the minimum. A professional portfolio is a confidential document although you can use copies of some of the information when applying for a new position or a pay increase, applying to undertake some further education, or when audited by the nurse regulatory authority for the purposes of continuing competence.

Examples of professional portfolios can be found on the web-site of the Nurses Board of Western Australian (www.nbwa.org.au) and in the 3LP section of Royal College of Nursing Australia's website (www.rcna.org.au).

How do I prepare a professional portfolio?

- Gather all the information that you have about your career including: job descriptions; references; and a resumé or curriculum vitae;
- Collect copies of the following: education transcripts; any records of attendance at continuing education sessions; presentations that you have made; and a list of committee memberships;
- Purchase an appropriate folder and plastic sleeves to store the documents;
- Consider the Australian Nursing and Midwifery Council's national competency standards for the registered nurse and the competency standards for registered nurses in general practice and assess the information you need to demonstrate that you meet each standard (note that it may be difficult to produce evidence for every unit of competency but you can use a reflection on your practice as another form of evidence);
- Include your self assessment against the competency standards and your professional development plans;
- Collect resources such as the relevant nursing legislation, the competency standards and the codes for nurses.

Sample index for the professional portfolio

1. Curriculum vitae
2. Qualifications
 - 2.1 Records of qualifications including undergraduate and postgraduate studies
 - 2.2 Nursing registration papers/license to practice
3. Record of employment including job descriptions
 - 3.1 Current employment
 - 3.2 Previous employment
4. Self-assessment
5. Professional development plan
6. Competency standards (see following examples)
 - 6.1 Australian Nursing and Midwifery Council national competency standards for the registered nurse
 - 6.2 Competency standards for the registered nurse in general practice

Examples for the sections on competency standards for registered nurses

Refer to the full set of the competency standards to guide you in preparing this part of your professional portfolio.

Registered nurse competency unit 2

Conducts nursing practice in a way that can be ethically justified.

For example:

- Include the code of ethics for nurses in Australia and any other readings that you may have done on the issue of ethics;
- Include the privacy principles relevant to the health setting.

Registered nurse competency unit 5

Acts to enhance the professional development of self and others.

For example:

- Include records of attendance at formal and informal education sessions;
- Maintain information about subscriptions and access to professional journals;
- Keep a record and copies of any education sessions conducted including informal teaching sessions in the general practice (note that it may be useful to keep a record in your diary and update the record on a regular basis).

Registered nurse competency unit 7

Carries out a comprehensive and accurate nursing assessment of individuals and groups in a variety of settings.

For example:

- Select information to keep in this section about your system for assessment of individual and groups;
- Include information about specific education completed to enhance your assessment skills eg reading articles on mental health assessments or attendance at a workshop on paediatric assessment skills.

Registered nurse in general practice

Registered nurse in general practice

Competency unit 1.3

Actively seeks out opportunities and resources to manage professional isolation.

For example:

- Include membership details for your professional nursing organisations;
- Keep a record of opportunities to network with professional peers such as those convened by the local division.

**Registered nurse in general practice
Competency unit 2.1**

Demonstrates comprehensive and accurate knowledge and skills in providing episodic and ongoing care that is responsive to individual and group circumstances and environments.

For example:

- Reflect on episodes where your strengths or weaknesses have been obvious and how you have addressed the weaknesses and promoted the strengths.

**Registered nurse in general practice
Competency unit 2.2**

Initiates and conducts comprehensive health maintenance and health promotion in partnership with individuals, groups and the general practice team.

For example:

- Record of some of the health maintenance and health promotion strategies used by you in the general practice.

**Registered nurse in general practice
Competency unit 2.3**

In collaboration with the general practice team conducts diagnostic activities.

For example:

- Include a list of diagnostic activities that you are competent to conduct;
- Keep a record of any competency assessment activities that you have completed;
- Refer to continuing education programs that you have completed to support diagnostic testing activities.

**Registered nurse in general practice
Competency unit 3.1**

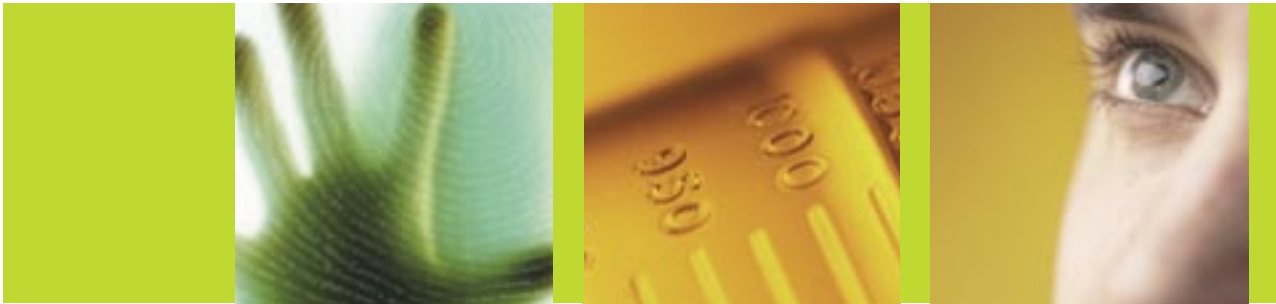
Uses best available research to inform clinical care management.

For example:

- Keep a record of the clinical care research materials that you have reviewed;
- Reflect on the way that research findings are incorporated into your practice.

Competency Standards

for nurses in general practice



Sample job description for a registered nurse in general practice

Sample job description for a registered nurse in general practice

Competency standards can be used as a framework for a job description for a nurse working in general practice. Note that not all the units of competency are included in this sample job description although nurses have a professional responsibility to meet all the units. The order of the units have been re-arranged and some examples have been changed to meet the needs of the specific general practice

Title

Registered nurse (registered nurse division 1 in Victoria)

Position profile

Providing nursing care to patients presenting at the general practice

Performance appraisal

3 months after commencement and every 12 months thereafter

Key criteria

- Registered nurse licensed to practice in [state/territory];
- Experience working in a primary health care setting;
- Experience working with older people and people with chronic illnesses;
- Able to work as part of a small team;
- Excellent communication skills with patients, their families and with the other members of the general practice team.

Reports to

[for example: General practitioner managing the general practice]

Job requirements¹

1. Demonstrates comprehensive and accurate knowledge and skills in providing episodic and ongoing care that is responsive to individual and group circumstances and environments.
 - Conducts accurate comprehensive assessment of individuals and groups presenting without appointments to improve outcomes and minimise adverse events;
 - Assesses and develops health care plans that direct health care interventions and activities by others;
 - Provides care in the general practice environment as well as in homes and other community settings;
 - Identifies and provides comprehensive physical, psychosocial and emotional care for individuals and groups;
 - Conducts health care clinics;
 - Provides health care services in accordance with Medicare Benefits Schedule conditions;
 - Assists with minor procedures undertaken by the general practitioner.

¹ Using the competency standards for a registered nurses in general practice.

2. Initiates and conducts comprehensive health maintenance and health promotion in partnership with individuals, groups and the general practice team.
 - Undertakes health screening and health monitoring activities such as cardiac assessment including electrocardiographs and stress tests;
 - Involved in chronic disease management activities such as preparing a management plan, coordinating care, and providing education about self-help strategies;
 - Provides timely and accurate information and education;
 - Undertakes care planning and reviews;
 - Conducts immunisation, wound care and chronic disease management clinics.
3. Conducts diagnostic activities in collaboration with the general practice team.
 - Demonstrates proficiency in health assessment skills;
 - Checks diagnostic results against client symptoms and previous results.
4. Provides evidence based information, resources and education to assist individuals, groups and families to make health care decisions.
 - Ensures that all information about chronic disease management, immunisation and wound care is accurate according to reliable sources;
 - Considers the ongoing implications of the health of individuals and groups beyond the immediate episode of care;
 - Regularly reviews and updates individuals and group information and resources.
5. Uses best available research to inform clinical care management.
 - Collaborates with the division of general practice, general practice and health product provider representatives to access current information;
 - Initiates changes to practice guidelines and protocols based on evaluation of research outcomes and evidence;
 - Participates in research taking place in the general practice setting.
6. Coordinates and reviews programs, registers and systems to facilitate quality individual and group health care outcomes.
 - Ensures that recall registers, pathology systems and individual and group documentation systems are continuously reviewed to achieve optimal outcomes;
 - Collaborates with individuals, groups, general practitioners, other general practice staff and health care providers in the development and review of guidelines, protocols or templates;
 - Monitors infection control processes in the general practice including compliance with sterilisation guidelines;
 - Maintains the cold chain systems and other medicine storage systems;
 - Participates in practice accreditation processes.

7. Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.
 - Understands the funding, billing and business systems used in the general practice;
 - Participates in practice accreditation processes;
 - Updates practice and clinical policies and procedures.

8. Ensures clinical nursing decisions are communicated to the general practice team.
 - Appropriately refers clients to general practitioners;
 - Collaborates with general practitioners to develop guidelines and protocols;
 - Is actively involved in community meetings, case conferences and care planning.

9. Participates in shared decision making about care delivery with individuals, groups and members of the general practice team.
 - Attends and contributes to practice meetings;
 - Addresses safety and quality issues for individuals, groups, and others working in the general practice.

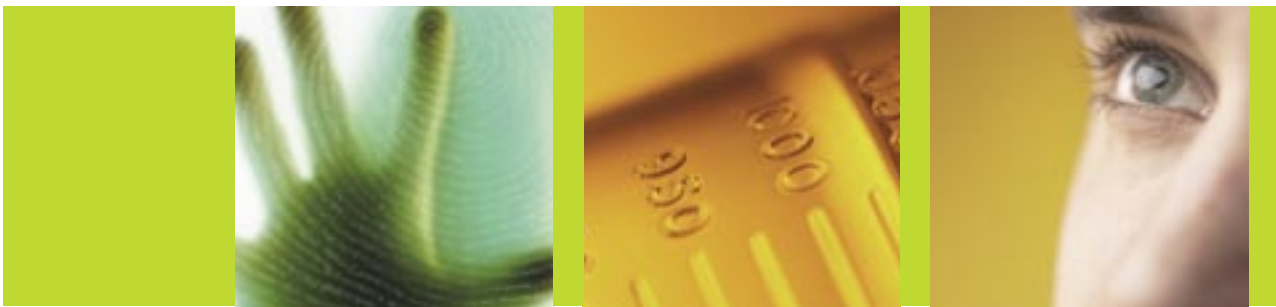
10. Recognises the need for ongoing education and training to maintain competence for nursing practice.
 - Uses self assessment and peer review to regularly assess own competence for practice within the agreed scope of practice;
 - Identifies the need for updated knowledge base for practice;
 - Supervises both enrolled and other registered nurses, and students of general practice health care;
 - Educates nurses and students of general practice health care;
 - Maintains skills in cardiopulmonary resuscitation and other first aid required in the setting.

Employment conditions

[insert relevant details]

Competency Standards

for nurses in general practice



Performance management tool for registered nurses in general practice

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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Performance management tool for registered nurses in general practice

Name: _____

Refer to the job description for further information about each of the competency elements. Note that this tool must not be used for disciplinary purposes.

Step 1

The registered nurse undertakes a self assessment against the elements and prepares a professional development plan for discussion with the employer/supervisor.

Step 2

The employer/supervisor completes the assessment and discusses the assessment and the professional development plan with the registered nurse.

Step 3

The registered nurse and the employer/supervisor, following negotiation, agree on the professional development plan that will be supported by the employer/supervisor and the necessary plans are made eg organise further education, arrange clinical supervision etc.

1. Recognises the need for ongoing education and training to maintain competence for nursing practice.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

2. Demonstrates comprehensive and accurate knowledge and skills in providing episodic and ongoing care that is responsive to individual and group circumstances and environments.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

3. Initiates and conducts comprehensive health maintenance and health promotion in partnership with individuals, groups and the general practice team.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

4. In collaboration with the general practice team conducts diagnostic activities.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

5. Provides evidence based information, resources and education to assist individuals, groups and families to make health care decisions.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

6. Modifies communication strategies according to individual and group circumstances.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

7. Uses best available research to inform clinical care management.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

8. Coordinates and reviews programs, registers and systems to facilitate quality individual and group health care outcomes.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

9. Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

10. Collects information about practice population profiles to inform health promotion and illness prevention strategies.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

11. Ensures clinical nursing decisions are communicated to the general practice team.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

12. Participates in shared decision making about care delivery with individuals, groups and members of the general practice team.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

13. Recognises when to seek advice from other members of the general practice team or other health service providers about the care of individuals and groups.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

14. Shares information with the general practice team.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

15. Monitors local, community and population health developments and resources for integration into the care of individuals and groups.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

16. Liaises with relevant community and health care agencies for community development purposes and to facilitate continuity of care for individuals and groups in that community.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Achievements since the previous review of performance:

Strong points:

Limitations:

Plan:

Overall comments:

Nurse signature:

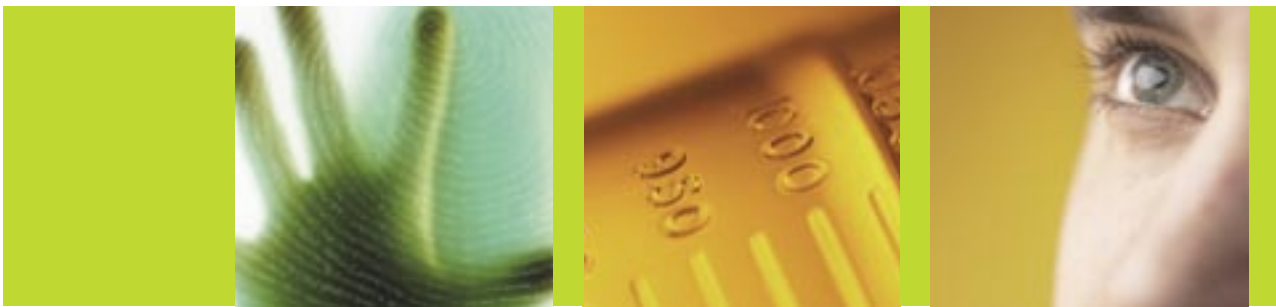
Employer signature:

Date:

Due date for next review of performance:

Competency Standards

for nurses in general practice



Scope of nursing practice

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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Scope of Nursing Practice

What is the scope of nursing practice?

The International Council of Nurses' definition of nursing is:

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 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.¹

ICN adds in the position statement on the scope of nursing practice that, *the scope of nursing practice is not limited to specific tasks, functions or responsibilities but includes direct care giving and evaluation of its impact, advocating for patients and for health²...*

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.³*

The Australian Council for Safety and Quality in Healthcare recently defined the scope of clinical practice for doctors as:

Describing the extent of an individual doctor's clinical practice within a particular organisation based on the individual's credentials, competence, performance and professional suitability, and the need for the organisation to suit this process.⁴

How is the scope of nursing practice identified?

The information on this page has been prepared using the Queensland Nursing Council's scope of practice framework for nurses and midwives which was the first such framework produced in Australia for nurses, however other nurse regulatory authorities are preparing guidelines to assist nurses and their employers to assess and enhance the scope of nursing practice.

The scope of nursing practice will vary from nurse to nurse and from general practice to general practice. It is recommended that the employer and the nurse work together to identify the scope of practice needed in the general practice and identify where or whether expansion is required. The registered nurse involved in supervising an enrolled nurse⁵ must be involved in identifying the scope of nursing practice for the enrolled nurse.

The nurse needing to develop additional knowledge and skills required in the general practice setting should be supported by the employer.

¹ See www.icn.ch

² See www.icn.ch

³ Queensland Nursing Council 2005 The scope of practice framework for nurses and midwives QNC Brisbane.

⁴ See www.safetyandquality.org for more information on the credentialing and defining the scope of clinical practice project.

⁵ Registered nurse (division 2) in Victoria.

The Queensland Nursing Council uses the following principles for expanding the scope of practice of registered nurses and midwives:⁶

Principles for expanding the scope of practice of registered nurses and midwives

1. The primary motivation to expand the scope of practice for registered nurses and midwives is to meet clients' health needs and to improve health outcomes.
2. Any expansion of the scope of practice enhances existing aspects of professional practice.
3. The expansion in the registered nurse's or midwife's scope of practice is:
 - lawful;
 - appropriate for the context;
 - consistent with standards acceptable to the nursing profession and nursing/midwifery organisations; and
 - consistent with the service provider's policies.
4. Expansion of the scope of practice is based on appropriate consultation and planning.
5. The registered nurse/midwife expanding their practice:
 - is already practising at an advanced level;
 - has the appropriate education;
 - is assessed as competent;
 - understands their degree of accountability.
6. A competent health professional has assessed the competence of the registered nurse or midwife who will incorporate the activity into their practice.

If all six principles are met then it is safe to proceed with the expansion, BUT, if the context changes, the principles must be reapplied.

How is the scope of nursing practice identified for enrolled nurses?

Enrolled nurses work under the professional supervision of a registered nurse. Registered nurses need to be involved in developing the scope of nursing practice for enrolled nurses. The principles used in the Queensland Nursing Council's scope of nursing practice document for advancing the scope of practice for enrolled nurses are:

1. The primary motivation for the delegation of the nursing activity is to meet clients' health needs and to improve health outcomes.
2. The change in the scope of practice...is:
 - lawful;
 - appropriate for the context;
 - consistent with standards acceptable to the profession and nursing/midwifery organisations; and
 - consistent with the service provider's policies.
3. There has been appropriate consultation and planning.
4. The enrolled nurse accepting the delegated activity:
 - agrees to accept the activity;
 - has the appropriate education;
 - is assessed as competent; and
 - understands their degree of accountability.

⁶ Queensland Nursing Council 2005 The scope of practice framework for nurses and midwives QNC Brisbane.

5. A registered nurse has assessed the competence of the person who will perform the activity.
6. Processes exist for ensuring:
 - continuing education
 - assessment of competence, and
 - appropriate clinically-focused supervision.

If all six principles are met, then it is safe to proceed with the delegation, BUT if the context changes, the principles must be reapplied.⁷

What is the role of the enrolled nurse in general practice?

Role statement for enrolled nurses in general practice⁸

Nurses in general practice demonstrate competence in the provision of primary health care centred on individuals and groups, in accordance with their educational preparation, professional nursing standards, relevant legislation and practice context in an environment characterised by unpredictability and individual diversity across the lifespan.

While the role of the nurse varies according to the practice client population, practice structure, employment arrangement and category of nurse, most nurses provide a combination of direct clinical care and manage clinical care systems in an environment which is often isolated from other nurses. This requires that the nurse promotes health care centred on individuals and groups by working collaboratively with others both in and outside the general practice.

The enrolled nurse is legally required to be supervised by a registered nurse and is accountable and responsible for all aspects of delegated care.⁹

The relationship between nurses in general practice and individuals/groups usually extends beyond single episodes of care to meeting changing health care needs and priorities across the lifespan.

Both registered and enrolled nurses play a pivotal role in health promotion, health maintenance and prevention of illness through provision of evidence based information and education to individuals, groups and communities. This requires knowledge of resources available within the community and health care sectors to facilitate care for individuals and groups and the skills to communicate and educate.

All nurses in general practice need computer literacy skills. Enrolled nurses need to be able to use and maintain recall, infection control and quality improvement systems.

All nurses have a responsibility to know and practice within their scope of practice relevant to their education and qualifications. The enrolled nurse in general practice can assume responsibilities according to their education, experience and the availability of registered nurse supervision.

All nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings.

⁷ Queensland Nursing Council 2005 The scope of practice framework for nurses and midwives QNC Brisbane.

⁸ Prepared as part of the project to develop competency standards for nurses in general practice by the University of South Australia project team.

⁹ Note that in South Australia, enrolled nurses can apply to the nurse regulatory authority for authorisation to work without the supervision of a registered nurse.

What is the role of the registered nurse in general practice?

Role statement for the registered nurse in general practice¹⁰

The registered nurse in general practice demonstrates competence in the provision of primary health care centred on individuals and groups, in accordance with their educational preparation, professional nursing standards, relevant legislation and general practice context in an environment characterised by unpredictability and individual diversity across the lifespan.

While the role of the registered nurse in general practice varies according to the population profile of the general practice, the general practice structure, and employment arrangements, the registered nurse provides a combination of direct clinical care and management of clinical care systems in an environment which is often isolated from other nurses. This requires that s/he works collaboratively with others, internal and external to the general practice, to promote health care centred on individuals and groups.

In some general practices, the registered nurse autonomously conducts clinics, health assessments and chronic disease management programs as well as collaborating with general practitioners and other members of the multidisciplinary health care team as determined by the needs of individuals and groups, and the registered nurse's scope of practice and employment arrangement. The registered nurse may undertake their nursing role both within and external to the general practice, conducting assessments and health visits in the home and/or another community setting.

The relationships between nurses in general practice and the individuals/groups requiring nursing care usually extends beyond single episodes of care to meeting changing health care needs and priorities across the lifespan.

The registered nurse plays a pivotal role in health promotion, health maintenance and prevention of illness through provision of evidence based information and education to individuals, groups and communities. This requires a broad knowledge of resources available within the community and health care sectors to facilitate care to individuals/groups and the skills to communicate and educate.

The registered nurse in general practice also requires highly developed information literacy, management and coordination skills to enable the development and management of systems that ensure safety and quality. This includes recall, infection control and quality improvement systems.

All nurses have a responsibility to know and practice within their scope of practice relevant to their education, qualifications and context.

Registered nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings.

¹⁰ Prepared as part of the project to develop competency standards for nurses in general practice by the University of South Australia project team.

Questions that need to be asked when identifying the scope of nursing practice

- What is the profile of the population using the general practice and what could the nurse be doing to improve health outcomes for the population?
- What education has the nurse completed?
- What is the previous experience of the nurse?
- What additional education does the nurse need to provide this nursing care?
- Is the scope of practice used by nurses in other settings?
- What is the legal position ie does Australian and/or State/Territory Government legislation and regulations permit nurses to deliver the care being considered as part of the nursing scope of practice?
- What are the risks and benefits?
- Are there policies and procedures in place to support the nurse providing this care in general practice?
- How will competency assessment take place if the nurse is expanding their scope of nursing practice eg formal accreditation, supervision by another experienced health care provider?
- Is there any reluctance on behalf of the nurse in taking on this new responsibility? And what are the reasons for this reluctance?
- How will this new responsibility impact on the workload of the nurse?

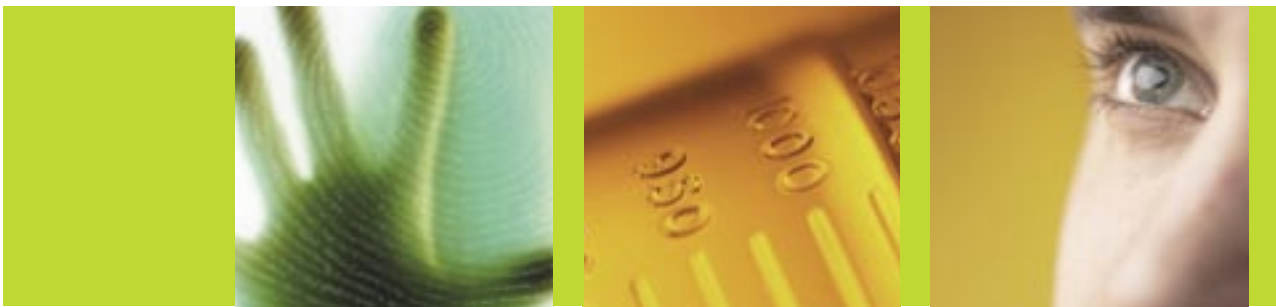
Sample only

1. Improved management of people with chronic diseases by involving the registered nurse in the assessment and management of people with diabetes

Assess the needs of the patients accessing the general practice	Assess the situation	Assess the risks and benefits	Assess the supports	Plan	Implement	Evaluate
<p>Improve the care provided to people with diabetes as there are increasing numbers of people presenting with diabetes</p>	<p>General practitioner has kept up-to-date with the medical management of diabetes</p> <p>The registered nurse is keen to take on this responsibility but has not been involved with patients with diabetes for several years and acknowledges that she needs to update her knowledge and skills</p> <p>The Division has access to a diabetes nurse educator who is running a series of education sessions for nurses</p> <p>There are resources available from Diabetes Australia, the Australian Diabetes Society and from the Australian Government Department of Health and Ageing</p> <p>Management of people with diabetes is a usual nursing role and there are no new legal issues associated with this expansion of the registered nurse's scope of practice</p>	<p>Improved health outcomes for people with diabetes</p> <p>Better assessment of people identified as at high risk of developing diabetes</p> <p>Reduced workload for the general practitioners</p> <p>Increased income for the general practice</p> <p>Less time for registered nurse to undertake other duties in the general practice</p> <p>Lost time during the education period</p>	<p>Registered nurse attends the Division's education program and any other local courses</p> <p>Arrangements are made for the nurse to work with the diabetes educator once a week for 4 weeks</p> <p>The general practitioner and the nurse will prepare guidelines for the management of people with diabetes in the general practice including preventive health strategies and health promotion activities</p> <p>The registered nurse will contact the diabetes nurse educator at least once a month to review the nursing care being provided to patients in the general practice with diabetes</p>	<p>Registered nurse will:</p> <ul style="list-style-type: none"> • assess patients and draft management plans in consultation with the general practitioner • provide education sessions for the patient including their self-management activities • keep up-to-date about the local resources available for people with diabetes including services and support groups • manage the recall register for patients with diabetes • organise health promotion materials in the waiting areas and in the general practice newsletter • provide an assessment and education service for patients identified as at a high risk of developing diabetes • monitor the information that is released about diabetes and bring it to the attention of the general practice team 	<p>Registered nurse is:</p> <ul style="list-style-type: none"> • assessing patients and drafting management plans in consultation with the general practitioner • providing education sessions for the patient including their self-management activities • keeping up-to-date about the local resources available for people with diabetes including services and support groups • managing the recall register for patients with diabetes • organising health promotion materials in the waiting areas and in the general practice newsletter • providing an assessment and education service for patients identified as at a high risk of developing diabetes • monitoring the information that is released about diabetes and bringing it to the attention of the general practice team 	<p>AT 6 MONTHS</p> <p>People with diabetes are returning for follow-up as planned</p> <p>People with diabetes report greater confidence in their self-management strategies [number] of patients at high risk of diabetes have been assessed with [number] identified as having diabetes</p> <p>Registered nurse continues to review patient care with the diabetes educator every month</p> <p>Registered nurse is planning to complete the diabetes educators course this year</p> <p>Workload for the registered nurse is satisfactory</p> <p>Income has increased</p>

Competency Standards

for nurses in general practice



Professional supervision of enrolled nurses

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Professional supervision of enrolled nurses¹

What is the difference between registered nurses and enrolled nurses?

Registered nurses have completed a Bachelor level education program or they may have completed a 3–4 year hospital based education program if they were educated prior to the formal transfer of nursing education into the higher education sector².

Enrolled nurses have completed a certificate IV or diploma level qualification or a 1–2 year hospital based education program if they were educated prior to the formal transfer of nursing education into the vocational education sector.

Enrolled nurses are associates to the registered nurse and are generally required to have a registered nurse as a professional supervisor when providing nursing care.³

What does supervision of enrolled nurses mean?

Supervision of enrolled nurses by registered nurses can be direct or indirect depending on: 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.

The employer must ensure that supervisory arrangements are in place.

Some of the nurse regulatory authorities have produced policy statements and guidelines for delegation to and supervision of enrolled nurses and these must be considered by employers of enrolled nurses. The Australian Nursing and Midwifery Council has guidelines on delegation and supervision (see www.anmc.org.au).

There are also decision making frameworks being developed by the nurse regulatory authorities to assist registered nurses and enrolled nurses make decisions about the way that nursing work is delegated to enrolled nurses.

¹ Registered Nurse (Division 2) in Victoria.

² Prior to the formal transfer into the higher education sector of education for registered nurses, some registered nurses completed diploma level qualifications at a college of advanced education.

³ Most states and territories have legislation that requires enrolled nurses to be supervised by registered nurses but note that enrolled nurses in South Australia can apply to be exempted from the requirement to be supervised by a registered nurse (see www.nurseboard.sa.gov.au)

Enrolled nurses may report to the general practitioner and the general practitioner can delegate aspects of patient care to the enrolled nurse if the following issues have been addressed by the registered nurse, the enrolled nurse and the employer:

Example of a decision making framework

1. The primary motivation for the delegation of the nursing activity is to meet clients' health needs and to improve health outcomes.
2. The change in the scope of practice (for the enrolled nurse) is:
 - lawful;
 - appropriate for the context;
 - consistent with standards acceptable to the nursing profession and nursing / midwifery organisations; and
 - consistent with the service provider's policies.
3. There has been appropriate consultation and planning.
4. The enrolled nurse accepting the delegated activity:
 - agrees to accept the activity;
 - has the appropriate education;
 - is assessed as competent; and
 - understands their degree of accountability.
5. A registered nurse has assessed the competence of the person who will perform the activity.
6. Processes exist for ensuring:
 - continuing education;
 - assessment of competence; and
 - appropriate clinically-focused supervision.

If all six principles are met, then it is safe to proceed with the delegation, BUT if the context changes, the principles must be reapplied.⁴

How can professional supervision be provided?

1. The general practice employs both registered and enrolled nurses and there is a registered and an enrolled nurse present during working hours.

Direct and indirect supervision can occur depending on the competence of the enrolled nurse and the nursing care that s/he is providing.

2. The general practice employs both registered and enrolled nurses but they work on different days of the week (eg the registered nurse works Monday, Tuesday and Friday and the enrolled nurse works on Wednesday and Thursday)

Indirect supervision is provided. The registered nurse must have an opportunity to assess competence for the nursing care that is provided when the enrolled nurse is working without direct supervision and must be contactable if the enrolled nurse needs assistance because of a change in the condition of the patient or the context of care changes.

⁴ Queensland Nursing Council 2005 The scope of practice framework for nurses and midwives QNC Brisbane.

The registered nurse initially, and when identified by either the registered or the enrolled nurse, provides direct supervision of the enrolled nurse as they review the nursing care that will be provided without direct supervision by the enrolled nurse to see that they:

- agree to accept the activity;
- have the appropriate education;
- are assessed as competent; and
- understand their degree of accountability.⁵

The employer must provide opportunities for review of competence including the initial orientation period and regular opportunities for the registered nurse and the enrolled nurse to work together eg every 6 months and when the scope of nursing practice is changing.

General practitioners should work with the registered nurse and the enrolled nurse so that the appropriate policies and procedures are in place to guide the care provided by the enrolled nurse. The policies should include guidance for the enrolled nurse when they consider themselves not competent to provide the nursing care. Policies must be in place to assist with professional supervision when direct supervision is not occurring as the enrolled nurse needs to be able to contact their professional supervisor when necessary eg regular phone calls or site visits.

3. The general practice employs an enrolled nurse only and uses a registered nurse employed by the Division of General Practice or the corporation to provide professional supervision

Indirect supervision is provided. The registered nurse must have an opportunity to assess competence for the nursing care that is provided when the enrolled nurse is working without direct supervision.

The registered nurse initially, and when identified by either the registered or the enrolled nurse, provides direct supervision of the enrolled nurse as they review the nursing care that will be provided without direct supervision by the enrolled nurse to see that they:

- agree to accept the activity;
- have the appropriate education;
- are assessed as competent; and
- understand their degree of accountability.⁶

The division or the corporation and the employer must provide opportunities for review of competence including the initial orientation period and regular opportunities for the registered nurse and the enrolled nurse to work together eg every 6 months and when the scope of nursing practice is changing. For example, the enrolled nurse expanding their scope of practice will generally require clinical supervision by a registered nurse until competence is achieved.

General practitioners should work with the registered nurse and the enrolled nurse so that the appropriate policies and procedures are in place to guide the care provided by the enrolled nurse. The policies should include guidance for the enrolled nurse when they consider themselves not competent to provide the nursing care. Policies should be in place to assist with professional supervision when direct supervision is not occurring as the enrolled nurse needs to be able to contact their professional supervisor when necessary eg regular phone calls or site visits.

⁵ From the Queensland Nursing Council 2005 The scope of practice framework for nurses and midwives QNC Brisbane.

⁶ From the Queensland Nursing Council 2005 The scope of practice framework for nurses and midwives QNC Brisbane.

Competency Standards

for nurses in general practice



Advanced registered nurses

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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Advanced registered nurses

What is an 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 groups¹.

How can nurses in general practice use the competency standards for the advanced registered nurse?

Registered nurses who have completed their self-assessment against the Australian Nursing and Midwifery Council's national competency standards and the competency standards for the registered nurse in general practice and find that they are confident that they meet the competency standards can assess themselves against the competency standards for the advanced registered nurse. A professional development plan can be developed based on the areas that require additional knowledge, skills and/or experience.

You can also use other specialist nursing competency standards as your professional development framework eg national standards for diabetes educators or the competency standards for specialist paediatric and child health nurses (*see Resources for registered nurses in general practice).

Are there competency standards for the advanced enrolled nurse?

Competency standards for the advanced enrolled nurse are being prepared and they will be available in the near future. Contact the Canberra office of the ANF on anfcanberra@anf.org.au for further information about the release of the publication.

Competency standards for the advanced registered nurse

(Note that these competency standards have been designed to build on the Australian Nursing and Midwifery Council's national competency standards for the registered nurse.)

Conceptualises Practice

This domain contains competencies reflecting the ability of the advanced registered nurse to use theory, research evidence, observations and experience to think about practice in a way that considers factors other than the immediate event or circumstances to develop new questions, ideas and knowledge to enhance nursing practice and care for individuals and groups.

¹ From Gibson T and Heartfield M 2005 Final report: Review of the competency standards for the advanced nurse unpublished.

Competency standard 1

Uses best available evidence, observations and experience to plan, conduct and evaluate practice in ways which incorporate complexity and/or a multiplicity of elements.

The advanced registered nurse:

- Gathers and accurately evaluates evidence from a range of sources;
- Uses multiple approaches to decision making;
- Identifies typical patterns of responses from individuals and groups;
- Recognises important aspects of the situation;
- Makes qualitative distinctions based on previous experience;
- Considers possible and probable consequences of the situation for individuals and groups;
- Seeks additional clinical evidence to validate clinical decisions;
- Initiates strategies to confirm/disconfirm data from additional sources;
- Integrates data from all relevant sources;
- Undertakes systematic and focussed surveillance that detects subtle changes in the situation for individuals and groups to inform assessment and decisions;
- Utilises relevant previous experiences to inform decisions.

Competency standard 2

Uses health and/or nursing models as a basis for practice.

The advanced registered nurse:

- Ensures practice is grounded in theoretical frameworks relevant to the context of care, for example, nursing, primary health care, family centred or health outcomes models;
- Contributes to the development of nursing and health care knowledge through reflection on practice.

Competency standard 3

Manages outcomes in complex clinical situations.

The advanced registered nurse:

- Maintains focus when multiple concurrent stimuli are presented;
- Incorporates risk/benefit analysis to inform nursing decisions;
- Accurately identifies parameters for the safety of individuals and groups;
- Ensures nursing decisions are justified in the specific context;
- Monitors effects of autonomous nursing decisions;
- Simultaneously and efficiently manages a range of activities.

Adapts Practice

This domain contains competencies reflecting the ability of the advanced registered nurse to draw on a wide repertoire of knowledge and processes to tailor nursing practice in complex and challenging clinical situations.

Competency standard 4

Anticipates and meets the needs of individuals and groups with complex conditions and/ or in high risk situations.

The advanced registered nurse:

- Identifies priorities quickly using context specific knowledge;
- Incorporates risk/benefit analysis to inform nursing decisions;
- Accurately identifies parameters for the safety of individuals and groups;
- Ensures nursing decisions are justified in the specific context;
- Monitors effects of autonomous decisions;
- Responds constructively to unexpected or rapidly changing situations;
- Develops flexible and creative approaches to manage challenging clinical situations.

Competency standard 5

Integrates and evaluates knowledge and resources from different disciplines and health care teams to effectively meet the health care needs of individuals and groups.

The advanced registered nurse:

- Refers to and incorporates data from other health professionals when planning care;
- Uses collegial networks for referrals to meet the needs of individuals and groups;
- Develops and refocuses networks taking into account fluctuations and shifts in interdisciplinary alliances;
- Uses maturity and political astuteness to deal effectively with issues arising from complex collaborations;
- Clearly articulates the care requirements of individuals and groups using context specific knowledge and experience;
- Actively advocates for individuals and groups within and across health care teams and agencies;
- Manages care for individuals and groups across multi-agency and interdisciplinary lines.

Competency standard 6

Seeks out and integrates evidence from a range of sources to improve health care outcomes.

The advanced registered nurse:

- Identifies appropriate sources of evidence according to the context;
- Is aware of and uses best available evidence to inform practice;
- Obtains expert advice as required;
- Uses outcomes of consultation to negotiate care;
- Selectively implements specific strategies based on expected outcomes;
- Makes decisions in partnership with individuals and groups according to their expressed needs;
- Ensures nursing practice is based on experience, clinical judgement, and statutory and common law requirements where a decision by an individual or group contravenes safe practice.

Competency standard 7

Safely interprets and modifies guidelines and practice to meet the health care needs of individuals and groups.

The advanced registered nurse:

- Ensures protocols guide rather than direct practice;
- Responds effectively to unexpected or rapidly changing situations;
- Identifies gaps between current practice and existing protocols and guidelines;
- Initiates changes to protocols and guidelines to improve the care of individuals and groups in line with latest available evidence.

Leads Practice

This domain contains competencies reflecting the ability of the advanced registered nurse to promote and improve nursing practice through leadership.

Competency standard 8

Leads and guides the nursing team to promote optimum standards of care.

The advanced registered nurse:

- Practices confidently as an individual while maintaining open communication and consulting with relevant members of the health team;
- Bases practice on the use and where relevant modification of multiple standards and guidelines;
- Ensures practice is grounded in appropriate frameworks;
- Contributes to nursing knowledge through reflection on practice.

Competency standard 9

Shares information and resources to initiate improvements and/or innovation in nursing practice.

The advanced registered nurse:

- Recognises the value of change and where beneficial pursues the introduction of changes such as new guidelines, protocols, skill mixes;
- Supports quality improvement processes within the workplace;
- Provides feedback on quality improvement processes to colleagues;
- Personally contributes to quality improvement processes;
- Incorporates outcomes from quality improvement processes into nursing practice;
- Consistently uses structured feedback from individuals and groups, both formal and informal, for ongoing quality improvement.

Competency standard 10

Fosters and initiates research based nursing practice.

The advanced registered nurse:

- Identifies issues/problems in nursing practice as the basis for review and research;
- Critically evaluates existing research evidence for relevance to practice;
- Participates in the conduct of approved research where appropriate;
- Incorporates validated research evidence into nursing practice;
- Supports appropriate research conducted by others.

Competency standard 11

Acts as a mentor and role model for nurses and other health professionals.

The advanced registered nurse:

- Recognises the necessity for mutual respect of colleagues in the workplace and profession;
- Makes time available to listen to colleagues' professional concerns and requests;
- Provides advice and constructive criticism where appropriate.

Competency standard 12

Contributes to development of nursing knowledge, standards and resources through active participation at the broader professional level.

The advanced registered nurse:

- Participates in organisational and/or professional committees, boards, working parties or forums;
- Contributes to written submissions about organisational or professional issues.

Competency standard 13

Facilitates education of individuals and groups, students, nurses and other members of the health care team.

The advanced registered nurse:

- Shares information and ideas;
- Takes on a teaching role for less experienced staff.

Competency standard 14

Acts as a resource for other nurses and members of the health care team

The advanced registered nurse:

- Ensures research findings are disseminated to colleagues;
- Shares a depth of knowledge gained through continuing education and nursing experiences.

Competency standard 15

Provides nursing as a resource to others through their capacity to practice outside single contexts and episodes of practice.

The advanced registered nurse:

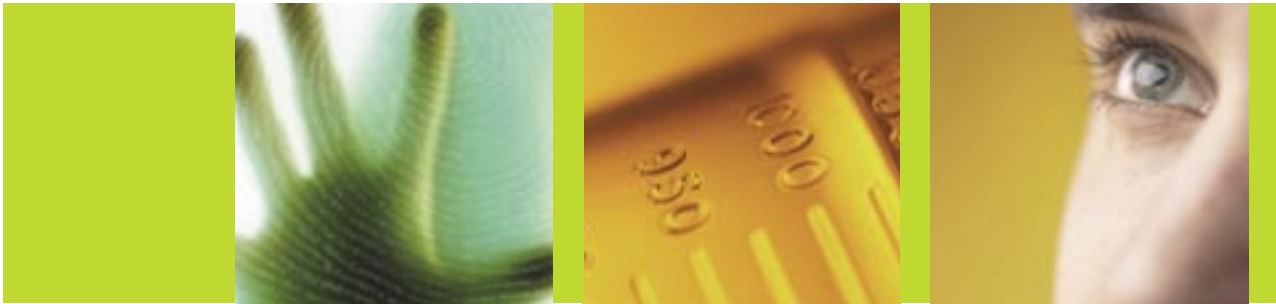
- Facilitates care/support groups for individuals and groups;
- Answers inquiries about current practice in area of expertise.

For example:

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity	Evaluation
5 July 2005	<p>Competency standard 10 Fosters and initiates research based nursing practice.</p> <p>The advanced registered nurse:</p> <ul style="list-style-type: none"> • Identifies issues/problems in nursing practice as the basis for review and research; • Critically evaluates existing research evidence for relevance to practice; • Participates in the conduct of approved research where appropriate; • Incorporates validated research evidence into nursing practice; • Supports appropriate research conducted by others. 	<p>During the next 12 months Identify an issue in my nursing practice to review and research.</p> <p>Review the literature.</p> <p>Consider the ethical implications of undertaking this research in, for example, the general practice or the Division.</p> <p>Ask the general practitioners about their methods for identifying the issue.</p> <p>Prepare a proposal for consideration by the general practice to investigate the issue.</p>	<p>1 July 2005 I have identified an issue in my nursing practice to review and research - Incidence in older people of problems swallowing medicines and the strategies that can be used so that appropriate medicines are taken. I have reviewed the literature relating to older people and swallowing medicines.</p> <p>I have discussed the project with the general practitioners as I would like to undertake a pilot in this general practice using an action research methodology.</p> <p>Within the next 3 months, I need to prepare the proposal and consider the ethical implications.</p>

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

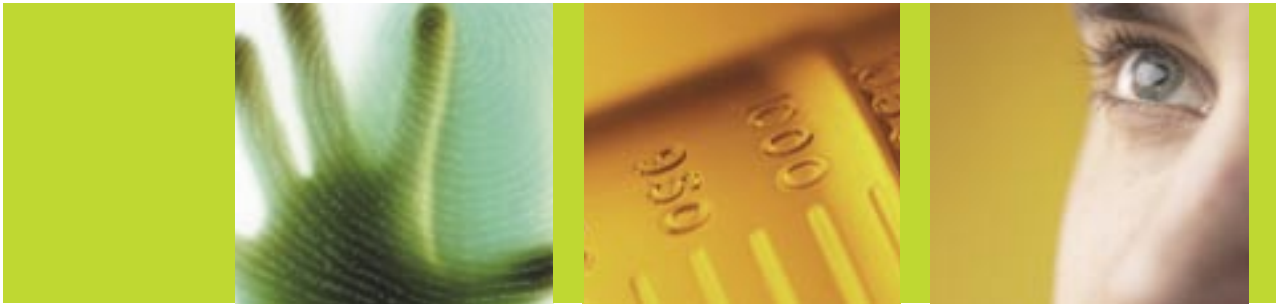
Some discussion about primary health care and primary care in general practice can be found on the following website of the Primary Health Care Research and Information Service http://www.phcris.org.au/resources/phc/about_PHC_mainframe.html

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

Competency Standards

for nurses in general practice



Role statement for the enrolled nurse in general practice

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Role statement for the enrolled nurse in general practice¹

Nurses in general practice demonstrate competence in the provision of primary health care centred on individuals and groups, in accordance with their educational preparation, professional nursing standards, relevant legislation and practice context in an environment characterised by unpredictability and individual diversity across the lifespan.

While the role of the nurse varies according to the practice client population, practice structure, employment arrangement and category of nurse, most nurses provide a combination of direct clinical care and manage clinical care systems in an environment which is often isolated from other nurses. This requires that the nurse promotes health care centred on individuals and groups by working collaboratively with others both in and outside the general practice.

The enrolled nurse is legally required to be supervised by a registered nurse and is accountable and responsible for all aspects of delegated care¹.

The relationship between nurses in general practice and individuals/groups usually extends beyond single episodes of care to meeting changing health care needs and priorities across the lifespan.

Both registered and enrolled nurses play a pivotal role in health promotion, health maintenance and prevention of illness through provision of evidence based information and education to individuals, groups and communities. This requires knowledge of resources available within the community and health care sectors to facilitate care for individuals and groups and the skills to communicate and educate.

All nurses in general practice need computer literacy skills. Enrolled nurses need to be able to use and maintain recall, infection control and quality improvement systems.

All nurses have a responsibility to know and practice within their scope of practice relevant to their education and qualifications. The enrolled nurse in general practice can assume responsibilities according to their education, experience and the availability of registered nurse supervision.

All nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings.

¹ Note that in South Australia, enrolled nurses can apply to the nurse regulatory authority for authorisation to work without the supervision of a registered nurse.

Competency Standards

for nurses in general practice



Self-assessment for the enrolled nurse in general practice

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Competency standards for the enrolled nurse¹

NOTE

For self-assessment purposes, the following two parts must be completed:

Part 1. Australian Nursing and Midwifery Council's national competency standards for the enrolled nurse;

Part 2. Competency standards for the enrolled nurse in general practice.

PART 1

Australian Nursing and Midwifery Council's national competency standards for the enrolled nurse

Professional and ethical practice		Are you confident that you meet this element of competency?	
Competency Unit 1 I function in accordance with legislation, policies and procedures affecting nursing practice.	Element 1.1 I demonstrate knowledge of legislation and common law pertinent to enrolled nursing practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.2 I demonstrate knowledge of organisational policies and procedures pertinent to enrolled nursing practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.3 I fulfil the duty of care in the course of enrolled nursing practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.4 I act to ensure safe outcomes for individuals and groups by recognising and reporting the potential for harm.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 1.5 I report practices that may breach legislation, policies and procedures relating to nursing practice to the appropriate person.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 2 I conduct nursing practice in a way that can be ethically justified.	Element 2.1 I act in accordance with the nursing profession's codes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 2.2 I demonstrate an understanding of the implications of these codes for enrolled nursing practice.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

¹ Registered nurse (Division 2) in Victoria.

Competency Unit 3 I conduct nursing practice in a way that respects the rights of individuals and groups.	Element 3.1 I practise in accordance with organisational policies relevant to individual/group rights in the health care context.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.2 I demonstrate an understanding of the rights of individuals/groups in the health care setting.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.3 I liaise with others to ensure that the rights of individuals/groups are maintained.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.4 I demonstrate respect for the values, customs, spiritual beliefs and practices of individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.5 I liaise with others to ensure that the spiritual, emotional and cultural needs of individuals/groups are met.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 3.6 I contribute to the provision of relevant health care information to individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 4 I accept accountability and responsibility for my own actions within enrolled nursing practice	Element 4.1 I recognise my own level of competence.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 4.2 I recognise the differences in accountability and responsibility between registered nurses, enrolled nurses and unregulated care workers.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 4.3 I differentiate the responsibility and accountability of the registered nurse and enrolled nurse in the delegation of nursing care.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Critical thinking and analysis		Are you confident that you meet this element of competency?	
Competency Unit 5 I demonstrate critical thinking in the conduct of enrolled nursing practice.	Element 5.1 I use nursing standards to assess my own performance.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 5.2 I recognise the need for and participate in continuing self/professional development.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 5.3 I recognise the need for care of self.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Competency Unit 6 I contribute to the formulation of care plans in collaboration with the registered nurse, individuals and groups.	Element 6.1 I accurately collect and report data regarding the health and functional status of individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 6.2 I participate with the registered nurse and individuals and groups in identifying expected health care outcomes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 6.3 I participate with the registered nurse in evaluation of progress of individuals and groups toward expected outcomes and reformulation of care plans.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Management of care		Are you confident that you meet this element of competency?	
Competency Unit 7 I manage nursing care of individuals and groups within the scope of enrolled nursing practice.	Element 7.1 I implement planned nursing care to achieve identified outcomes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 7.2 I recognise and report changes in the health and functional status of individuals/groups to the registered nurse.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 7.3 I ensure communication; reporting and documentation are timely and accurate.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 7.4 I organise my workload to facilitate planned nursing care for individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Enabling		Are you confident that you meet this element of competency?	
Competency Unit 8 I contribute to the promotion of safety, security and personal integrity of individuals and groups within the scope of enrolled nursing practice.	Element 8.1 I act appropriately to enhance the safety of individuals and groups at all times.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 8.2 I establish, maintain and conclude effective interpersonal communication.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 8.3 I apply appropriate strategies to promote the self esteem of individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 8.4 I act appropriately to maintain the dignity and integrity of individuals and groups.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Competency Unit 9 I provide support and care to individuals and groups within the scope of enrolled nursing practice.	Element 9.1 I provide for the comfort needs of individuals and groups experiencing illness or dependence.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 9.2 I collaborate with the registered nurse and members of the health care team in the provision of nursing care to individuals and groups experiencing illness or dependence.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 9.3 I contribute to the health education of individuals or groups to maintain and promote health.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 9.4 I communicate with individuals and groups to enable therapeutic outcomes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Competency Unit 10 I collaborate with members of the health care team to achieve effective health care outcomes.	Element 10.1 I demonstrate an understanding of the role of the enrolled nurse as a member of the health care team.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 10.2 I demonstrate an understanding of the role of members of the health care team in achieving health care outcomes.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 10.3 I establish and maintain collaborative relationships with members of the health care team.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Element 10.4 I contribute to decision-making by members of the health care team.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Competency standards for the enrolled nurse in general practice

PART 2

Competency standards for the enrolled nurse in general practice²

<p>Professional practice</p> <p>Enrolled nurses in general practice contribute to the development of health care in the general practice setting. They do this by keeping informed about developments in general practice and the nursing profession and applying this knowledge to the care of individuals and groups and the development of nursing in general practice. This includes an understanding of professional, legal and ethical standards as they apply to nursing within a primary health care setting.</p>	<p>Are you confident that you meet this unit of competency?</p>	
<p>1.1. I recognise that nursing in general practice is based on primary, preventative care or early intervention health care approaches.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I understand principles of primary health care and primary care; • I understand the difference between providing nursing care in general practice and in hospital settings; • I respect individuals and groups' rights to make their own health care decisions. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>1.2 I practice in accordance with nursing and general practice standards, codes, guidelines, legislation and regulations.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I use Australian Nursing and Midwifery Council codes and competency standards for enrolled nurses and consider other relevant standards such as those for immunisation and asthma; • I use general practice specific standards and guidelines such as the Royal Australian College of General Practitioners' Standards for General Practices and the Medicare requirements. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

² The enrolled nurse is legally required to be supervised by a registered nurse and is accountable and responsible for all aspects of delegated care. In South Australia, enrolled nurses can apply to the nurse regulatory authority for authorisation to work without the supervision of a registered nurse.

<p>1.3 I recognise the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I establish opportunities for direct or indirect registered nurse supervision; • I overcome professional isolation through networking with other nurses and involvement in ongoing professional development; • I am a member of general practice and/or professional organisations; • I identify self care activities to assist with working in the general practice setting. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>1.4 I recognise the need for ongoing education and training to maintain competence for nursing practice.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I collaborate with the registered nurse and general practitioner to regularly assess my competence for practice and need for updated knowledge base for practice; • I seek out education and training opportunities when required to undertake new responsibilities; • I maintain skills in cardiopulmonary resuscitation and other basic first aid. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>Provision of clinical care</p> <p>Enrolled nurses in general practice have the knowledge and skill to provide delegated care in the general practice setting in response to the diversity and need of individuals and groups. This acknowledges that ongoing relationships between the nurse and individuals and groups and primary health care characterise the provision of clinical care in general practice settings.</p>		<p>Are you confident that you meet this unit of competency?</p>
<p>2. 1 I demonstrate knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I provide clinical care within the scope of education, experience and assessment of the need of individuals and groups; • I gather relevant information from individuals and groups presenting without appointments and communicates this information appropriately to improve outcomes and minimise adverse events; • I recognise when a more detailed assessment of individuals and groups is required and seek registered nurse or general practitioner assistance; • I distinguish between respect for the privacy of individuals and groups and what is necessary to plan and provide health care; • I consider access and affordability in planning and providing care for individuals and groups; • I follow protocols when conducting health assessments and reviews; • I consider existing conditions for individuals and groups in providing nursing care; • I recognise potentially distressing situations for individuals and groups and provides reassurance and support accordingly; • I recognise the influence of the bio psychosocial factors for individuals and groups on care decision making. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

<p>2.2 I collect and report information about the health and functional status of individuals and groups.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I demonstrate technical proficiency in measuring and documenting vital signs and test results such as blood glucose readings, urinalysis, wound and skin checks; • I demonstrate accurate use of spirometry, electrocardiographs and other health care technologies; • I assess wound healing and exudate amount, type, and colour. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>2.3 I provide care for individuals and groups in consultation with the registered nurse and/or general practitioner.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I contribute to decision making about resources needed for clinical care; • I assess and monitor individuals and groups; • I follow care plans, protocols or treatment regimes; • I assist the registered nurse in conducting nurse led clinics; • I assess wound healing and modify dressing regimes accordingly; • I assist in the administration of medicines in accordance with legal and delegation and supervision requirements; • I assist with minor procedures; • I assist with immunisation, wound care and chronic disease management clinics. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>2.4 I modify communication strategies according to individual and group circumstances.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I modify communication style to accommodate cultural differences; • I recognise that communication of information such as test results may impact on the wellbeing of individuals and groups; • I recognise that the comprehension of individuals and groups may vary with health condition and wellbeing. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>2.5. I liaise with the registered nurse and general practitioner in providing evidence-based health promotion and illness management information to individuals, groups and their families.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I recognise the need to provide information to improve or maintain health; • I use available resources within the practice to meet the needs of individuals and groups; • I provide information and resources according to the needs of individuals and groups; • I contribute to the review and update of information resources for individuals and groups. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

<p>Management of clinical care systems</p> <p>Enrolled nurses in general practice administer and maintain the systems and processes which assist individuals, groups and the general practice team to anticipate and manage health care interventions and potential risks to facilitate quality client outcomes.</p>	<p>Are you confident that you meet this unit of competency?</p>	
<p>3.1 I use relevant guidelines, protocols and systems as evidence for practice.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I use guidelines, protocols or templates developed by registered nurses/ general practitioners; • I collaborate with registered nurses and general practitioners in development and review of guidelines and protocols. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>3.2 I maintain programs, registers and systems to ensure appropriate clinical care provision.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I understand the funding, billing and business systems in general practice; • I understand the importance and use of recall registers, pathology systems and documentation systems to assist in the care of individuals and groups; • I use guidelines, protocols or templates developed by the general practice team; • I participate in quality improvement and general practice accreditation processes; • I update general practice registers of community resources and health service personnel. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>3.3 I manage resources to promote optimal care for individuals and groups.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I manage stocks and stores; • I monitor cold chain systems; • I manage sterilisation procedures and maintain standards; • I document to comply with standards such as those required for cold chain and sterilisation systems. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>3.4 I demonstrate proficiency in the use of information management technology and systems to inform clinical care management.</p> <p>Examples may include:</p> <ul style="list-style-type: none"> • I effectively use administrative systems designed to assist with the care of individuals and groups; • I maintain clinical data systems including entry and retrieval processes. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

<p>Collaborative practice Enrolled nurses in general practice build and engage in a broad range of collaborative and negotiated relationships with individuals, groups, the general practice team and other primary health care and service providers to achieve positive outcomes for individuals and groups.</p>	<p>Are you confident that you meet this unit of competency?</p>	
<p>4.1. I consult with the registered nurse and general practice team in making clinical decisions. Examples may include:</p> <ul style="list-style-type: none"> • I appropriately refer clients to a registered nurse or general practitioner; • I collaborate with registered nurses or general practitioners to develop guidelines and protocols. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.2 I participate in shared decision making about care delivery with individuals, groups and members of the general practice team. Examples may include:</p> <ul style="list-style-type: none"> • I attend and contribute to general practice meetings. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.3 I recognise when to seek advice from the registered nurse and general practitioner about the care of individuals and groups. Examples may include:</p> <ul style="list-style-type: none"> • I seek advice when the needs of individuals and groups are beyond own abilities and education; • I understand the roles of the allied health care team; • I understand the roles of community agencies and service providers. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.4. I share information with the general practice team. Examples may include:</p> <ul style="list-style-type: none"> • I seek out and evaluate information and resources; • I advise others about enrolled nurses' scope of practice; • I seek constructive feedback about performance; • I accurately document care provision. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4.5 I liaise with relevant community and health care agencies to facilitate continuity of care for individuals and groups. Examples of practice may include:</p> <ul style="list-style-type: none"> • I am aware of local referral processes and procedures; • I contribute to the development of partnerships with other health services where individuals and groups are referred; • I undertake delegated referral activities. 	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

Competency Standards

for nurses in general practice



Professional development plan (enrolled nurse)

Professional development plan¹ (enrolled nurse²)

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity	Evaluation
Self assessment 1 July 2004 Review 15 January 2005	Core competency unit 1 Functions in accordance with legislation, policies and procedures affecting nursing practice.	This is a high priority for me as I am out-of-date. Review the legislation relevant to nursing in [state/territory]. Buy a book on law and nursing and review a chapter every month. Attend a seminar/workshop on nursing and the law or health law.	I have copies of the legislation and other relevant documents and I have reviewed them. I have purchased a text-book and I have reviewed chapters on negligence and vicarious liability, and consent to treatment but I need to finish reviewing the book. I have booked into the ANF Branch's seminar on nursing and the law.
Self assessment 1 July 2004 Review 15 January 2005	Core competency unit 5 Demonstrates critical thinking in the conduct of enrolled nursing practice.	Complete self-assessment against the competency standards so that I can identify my strengths and weaknesses. Discuss my nursing practice and my role within the general practice with the supervising registered nurse.	I have completed the self-assessment and I have prepared this professional development plan. The registered nurse and I have started having a short meeting on the day where we are both working to discuss clinical issues and to consider areas where I can expand my knowledge and skills. The registered nurse and I have plans to discuss my role with the general practitioners within the next 3 months.

¹ IMPORTANT – keep your activities as you may need to change the plan during the year.

² Registered nurse (division 2) in Victoria.

<p>Self assessment 1 July 2004</p> <p>Review 1 July 2005</p>	<p>Core competency unit 8 Contributes to the promotion of safety, security and personal integrity of individuals and groups within the scope of enrolled nursing practice.</p>	<p>Very important.</p> <p>Review my safety and quality of care role in the general practice:</p> <ul style="list-style-type: none"> • What do I do if I see something going wrong? • How should I review my role to ensure that I am providing safe and high quality nursing care? • What are we doing in the general practice to reduce adverse events and errors? • What are the high risk areas in my role? 	<p>I have reviewed the policies and procedures and considered the standards for general practice.</p> <p>I have looked at the work I do and I developed a list of areas of risk and I have started doing some investigations into risk reduction in these areas.</p> <p>I have arranged for safety and quality to be on the agenda of the general practice meetings and we have started a register of adverse events and near misses that all the staff can use.</p>
<p>Self assessment 1 July 2004</p> <p>Review 1 July 2005</p>	<p>Enrolled nurse in general practice competency unit 1.4 Recognises the need for ongoing education and training to maintain competence for nursing practice.</p>	<p>Important.</p> <p>Undertake some ongoing education relevant to my nursing work in general practice.</p>	<p>I have booked into a course on nursing and the law.</p> <p>I am looking for a local course that will update my knowledge and skills relating to infection control.</p>
<p>Self assessment 1 July 2004</p> <p>Review 1 July 2005</p>	<p>Enrolled nurse in general practice competency unit 3.1 Manages resources to promote optimal care for individuals and groups.</p>	<p>Very important.</p> <p>Review the sterilisation procedures used and update my knowledge and skills.</p> <p>Consider the documentation requirements and assess whether they are being met.</p>	<p>I am looking for a local course that will update my knowledge and skills relating to infection control.</p> <p>I have found the information about the sterilising equipment being used and I have discussed the equipment and the processes with the practice manager who is contacting the local representative to arrange an update.</p>

Competency Standards

for nurses in general practice



Professional development plan (enrolled nurse)

Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

¹ College of Dietitians of Ontario Quality Assurance Program 2004 SDL Tool <http://www.cdo.on.ca/>

Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

¹ College of Dietitians of Ontario Quality Assurance Program 2004 SDL Tool <http://www.cdo.on.ca/>

Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

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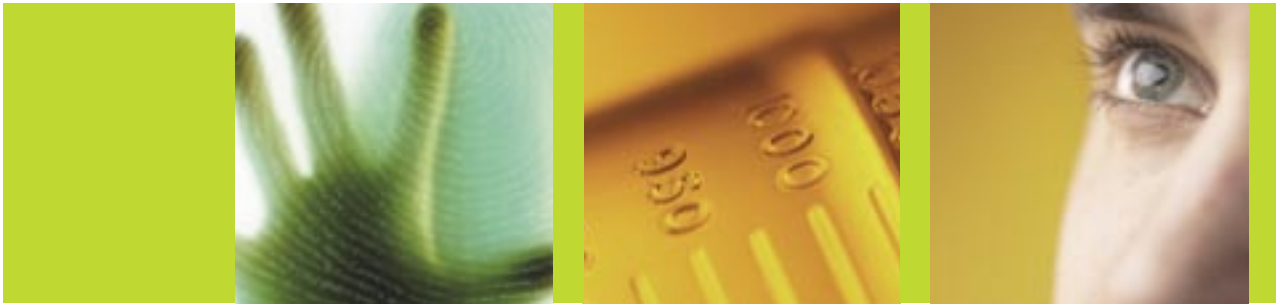
Professional development plan

Date	Units of competency 'I need to do further work to consistently meet this unit of competency'	Professional development activity Specific; Measurable; Achievable; Realistic; Time-framed (set start and finish dates) ¹	Evaluation

¹ College of Dietitians of Ontario Quality Assurance Program 2004 SDL Tool <http://www.cdo.on.ca/>

Competency Standards

for nurses in general practice



Professional portfolio (enrolled nurse)

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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Professional portfolio (enrolled nurse¹)

What is a professional portfolio?

A professional portfolio is a comprehensive record of your professional roles. It is updated on an annual basis at the minimum. A professional portfolio is a confidential document although you can use copies of some of the information when applying for a new position or a pay increase, applying to undertake some further education, or when audited by the nurse regulatory authority for the purposes of continuing competence.

Examples of professional portfolios can be found on the web-site of the Nurses Board of Western Australian (www.nbwa.org.au) and in the 3LP section of Royal College of Nursing Australia's website (www.rcna.org.au).

How do I prepare a professional portfolio?

- Gather all the information that you have about your career including: job descriptions; references; and a resumé or curriculum vitae;
- Collect copies of: education transcripts; records of attendance at continuing education sessions; presentations that you have made; and lists of membership of any committees;
- Purchase an appropriate folder and plastic sleeves to store the documents;
- Consider the Australian Nursing and Midwifery Council's national competency standards for enrolled nurses and the competency standards for enrolled nurses in general practice and assess the information you need to demonstrate that you meet each standard (note that it may be difficult to produce evidence for every unit of competency but you can use a reflection on your practice as another form of evidence) ;
- Include your self assessment against the competency standards and your professional development plans;
- Collect resources such as the relevant nursing legislation, the competency standards and the codes for nurses.

Sample index for the professional portfolio

1. Curriculum vitae
2. Qualifications
 - 2.1 Records of qualifications including enrolled nursing course
 - 2.2 Nursing registration papers/license to practice
3. Record of employment including job descriptions
 - 3.1 Current employment
 - 3.2 Previous employment
4. Self-assessment
5. Professional development plan
6. Competency standards (see following examples)
 - 6.1 Australian Nursing and Midwifery Council national competency standards for the enrolled nurse
 - 6.2 Competency standards for the enrolled nurse in general practice

¹ Registered nurse (division 2) in Victoria.

Examples for the sections on competency standards for enrolled nurses

Refer to the full set of the competency standards to guide you in preparing this part of your professional portfolio.

Enrolled nurse competency unit 1

Functions in accordance with legislation, policies and procedures affecting nursing practice.

For example:

- Keep copies of the relevant legislation, policies and procedures affecting your nursing practice.

Enrolled nurse competency unit 4

Accepts accountability and responsibility for own actions within enrolled nursing practice

For example:

- Refer to your self-assessment and any other processes that you have undertaken to assess own competence;
- Keep copies of any documents prepared by the nurse regulatory authority about delegation and supervision.

Enrolled nurse competency unit 6

Contributes to the formulation of care plans in collaboration with the registered nurse, individuals and groups.

For example:

- Keep a record of the type of care plans you are involved with formulating and the policies and procedures that are in place to support this activity;
- Refer to continuing education programs that have assisted you to improve your contribution eg nursing care of the person with asthma.

Enrolled nurse in general practice

Competency unit 1.3

Recognises the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships.

For example:

- Maintain a record of your current supervisory arrangement and reflect on the way that it works for you;
- Refer to your job description which should include the professional supervision arrangements;
- Document the professional networks that you use such as the professional nursing organisation or the nursing meetings arranged by the local division of general practice.

Enrolled nurse in general practice

Competency unit 3.1

Uses relevant guidelines, protocols and systems as evidence for practice.

For example:

- Keep a list of the relevant guidelines, protocols and systems that you use as evidence for practice;
- Record your involvement in any reviews of guidelines and protocols.

Enrolled nurse in general practice**Competency unit 3.2**

Maintains programs, registers and systems to ensure appropriate clinical care provision.

For example:

- Maintain a list of the programs, registers and systems that you use in the general practice;
- Keep records of your involvement in quality improvement activities in the general practice.

Competency Standards

for nurses in general practice



Job description for an enrolled nurse in general practice

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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Sample job description for an enrolled nurse¹ in general practice

Competency standards can be used as a framework for a job description for a nurse working in general practice. Note that not all the units of competency are included in this sample job description although nurses have a professional responsibility to meet all the units. The order of the units have been re-arranged and some examples have been changed to meet the needs of the specific general practice.

Title

Enrolled nurse (registered nurse division 2 in Victoria)

Position profile

Providing nursing care to patients presenting at the general practice

Professional supervisor

Senior registered nurse in the general practice

Reports to

General practitioner, senior registered nurse

Performance appraisal

3 months after commencement and every 12 months thereafter

Key criteria

- Enrolled nurse licensed to practice in [state/territory];
- Experience working in a primary health care setting;
- Experience working with older people and people with chronic illnesses;
- Able to work as part of a small team;
- Excellent communication skills with patients, their families and with the other members of the general practice team.

Job requirements²

1. Demonstrates knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments.
 - Provides clinical care to individuals as agreed with the general practitioners and the supervising registered nurse;
 - Gathers relevant information from individuals and groups presenting without appointments and communicates this information appropriately to improve outcomes and minimise adverse events;
 - Recognises when a more detailed assessment of individuals and groups is required and seeks registered nurse or general practitioner assistance;
 - Follows protocols when conducting health assessments and reviews.

¹ Registered nurse (Division 2) in Victoria.

² Using the competency standards for enrolled nurses in general practice.

2. Collects and reports information about the health and functional status of individuals and groups.
 - Demonstrates technical proficiency in measuring and documenting vital signs and test results such as blood glucose readings, urinalysis, wound and skin checks;
 - Demonstrates accurate use of spirometry, electrocardiographs and other health care technologies;
 - Assesses wound healing and exudate amount, type, and colour.
3. Provides care for individuals and groups in consultation with the registered nurse and/or general practitioner.
 - Follows care plans, protocols or treatment regimes;
 - Assists the registered nurse in conducting nurse led clinics;
 - Assesses wound healing and modifies dressing regimes accordingly;
 - Assists with minor procedures;
 - Assists with immunisation, wound care and chronic disease management clinics.
5. Liaises with the registered nurse and general practitioner in providing evidence-based health promotion and illness management information to individuals, groups and their families.
 - Uses resources available within the practice to meet the needs of individuals and groups;
 - Provides information and resources according to the needs of individuals and groups;
 - Contributes to the review and update of information resources for individuals and groups.
6. Recognises the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships.
 - Accesses registered nurses for professional supervision;
 - Involved in ongoing professional development;
7. Recognises the need for ongoing education and training to maintain competence for nursing practice.
 - Seeks out education and training opportunities when required to undertake new responsibilities;
 - Maintains skills in cardiopulmonary resuscitation and other basic first aid.
8. Uses relevant guidelines, protocols and systems as evidence for practice.
 - Collaborates with registered nurses and general practitioners in development and review of guidelines and protocols.
9. Maintains programs, registers and systems to ensure appropriate clinical care provision.
 - Contributes to the funding, billing and business systems in general practice;
 - Assists with maintaining the recall registers, pathology systems and documentation systems to assist in the care of individuals and groups;
 - Uses guidelines, protocols or templates developed by the general practice team;
 - Participates in quality improvement and general practice accreditation processes.

10. Manages resources to promote optimal care for individuals and groups.
 - Manages stocks and stores used in the general practice;
 - Monitors cold chain systems;
 - Manages sterilisation procedures and maintains standards;
 - Documents to comply with standards such as those required for cold chain and sterilisation systems.

11. Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.
 - Effectively uses administrative systems designed to assist with the care of individuals and groups;
 - Maintains clinical data systems including entry and retrieval processes.

12. Recognises when to seek advice from the registered nurse and general practitioner about the care of individuals and groups.
 - Seeks advice when the needs of individuals and groups are beyond own abilities and education;
 - Understands the roles of community agencies and service providers.

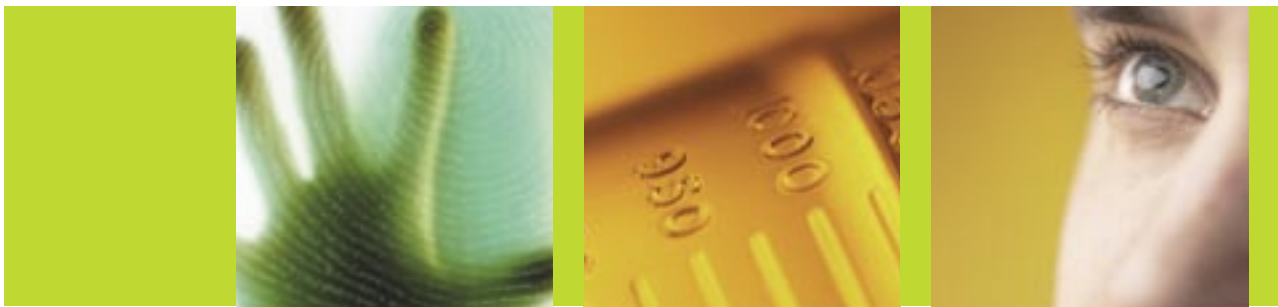
Employment conditions

[insert relevant details]

SAMPLE

Competency Standards

for nurses in general practice



Performance management tool for enrolled nurses in general practice

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Performance management tool for enrolled nurses¹ in general practice

Name: _____

Refer to the job description for further information about each of the competency elements. Note that this tool must not be used for disciplinary purposes.

Step 1

The enrolled nurse undertakes a self assessment against the elements and prepares a professional development plan for discussion with the employer/supervisor.

Step 2

The employer/supervisor completes the assessment and discusses the assessment and the professional development plan with the enrolled nurse.

Step 3

The enrolled nurse and the employer/supervisor, following negotiation, agree on the professional development plan that will be supported by the employer/supervisor and the necessary plans are made eg organise further education, arrange clinical supervision etc.

1. Practices in accordance with nursing and general practice standards, codes, guidelines, legislation and regulations.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

¹ Registered nurse (Division 2) in Victoria.

2. Recognises the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

3. Recognises the need for ongoing education and training to maintain competence for nursing practice.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

4. Demonstrates knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

5. Collects and reports information about the health and functional status of individuals and groups.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

6. Provides care for individuals and groups in consultation with the registered nurse and/or general practitioner.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

7. Modifies communication strategies according to individual and group circumstances.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

8. Uses relevant guidelines, protocols and systems as evidence for practice.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

9. Maintains programs, registers and systems to ensure appropriate clinical care provision.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

10. Demonstrates proficiency in the use of information management technology and systems to inform clinical care management.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
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Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

11. Consults with the registered nurse and general practice team in making clinical decisions.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

12. Recognises when to seek advice from the registered nurse and general practitioner about the care of individuals and groups.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

13. Liaises with relevant community and health care agencies to facilitate continuity of care for individuals and groups.

Self-assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Employer assessment

AGREE	1	2	3	4	5	DISAGREE
-------	---	---	---	---	---	----------

Comments

Achievements since the previous review of performance:

Strong points:

Limitations:

Plan:

Overall comments:

Nurse signature:

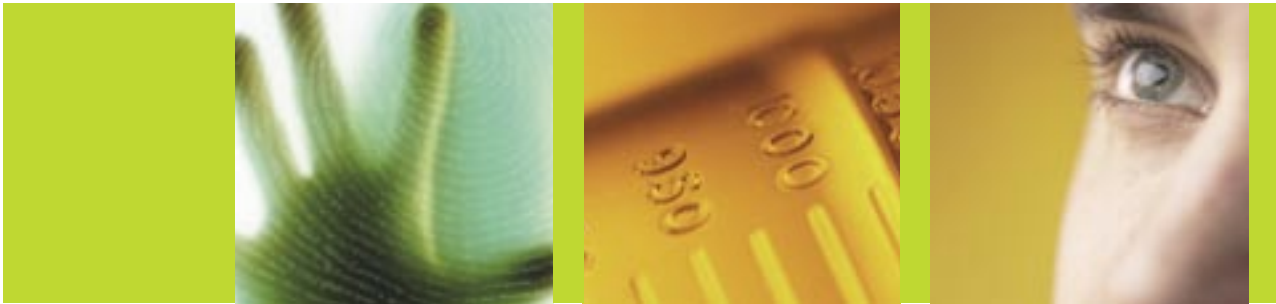
Employer signature:

Date:

Due date for next review of performance:

Competency Standards

for nurses in general practice



Using the competency standards for employment purposes

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Using the competency standards for employment purposes

Checklist

Step 1	Identify key competency standards for employment purposes	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 2	Job description	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 3	Advertisement	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 4	Interview	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 5	Performance assessment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Step 6	Scope of nursing practice	Yes <input type="checkbox"/>	No <input type="checkbox"/>

The competency standards for nurses in general practice have been developed following analysis of the work undertaken by nurses in general practice settings. This information can be used to develop job descriptions, to assess performance, and redesign roles including expansion of the scope of nursing practice.

Step 1

Identify the units of competency (ie the skills, knowledge and attitudes) required by the nurse in your general practice.

You do not need to select all the units of competency but it is likely that you will select key ones from both the national competency standards and the competency standards for nurses in general practice.

Step 2

Prepare a job description using the competency standards that you have selected.

See also:

Sample job description for registered nurses

Sample job description for enrolled nurses¹

Step 3

Develop an advertisement based on the units of competency that you have selected.

Step 4

Prepare a set of interview questions that will assist you to gather information from applicants about their skills, knowledge and attitudes. For the interview questions use the key competency standards you identified to develop the job description.

¹ Registered nurse (division 2) in Victoria

Step 5

Develop a performance assessment tool from the job description.

See also:

Performance management tool for registered nurses in general practice

Performance management tool for enrolled nurses in general practice

Note that in the tool-kit different competency standards were used in the sample job descriptions and in the performance assessment resources. You would have the same key competency standards in the job description and in the performance assessment tool.

Step 6

Work with the registered nurse, or the enrolled nurse and their supervising registered nurse, to identify the scope of nursing practice required in the general practice. A series of questions have been posed in the scope of nursing practice resource to assist you to identify the scope of practice for nurses employed in the general practice and to expand the scope of nursing practice as required.

This step may occur as part of the employment process or at a regular review of performance. It may also take place at the request of the nurse or when a job redesign is being considered.

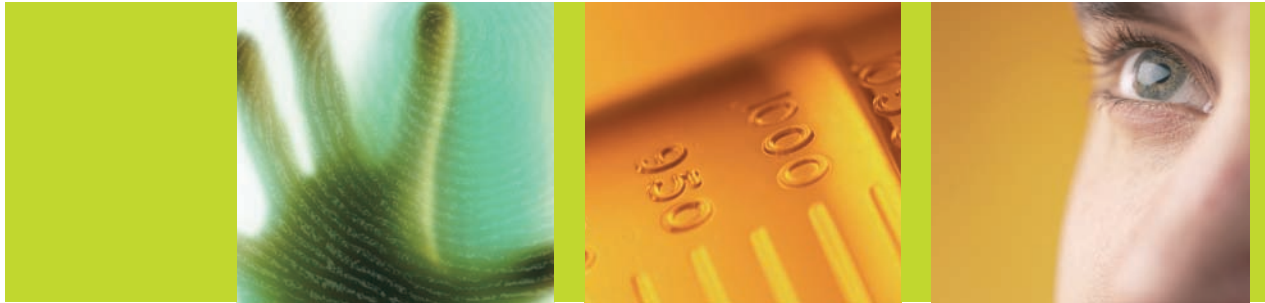
See also:

Scope of nursing practice

Collaborate with the nurse to identify their learning needs as the scope of nursing practice is expanded or when performance is not at the standard outlined in the job description.

Competency Standards

for nurses in general practice



Orientation/induction for the registered nurse

Orientation/induction for the registered nurse

This is an example of an orientation or induction package for a registered nurse commencing work in a general practice setting. It provides guidance on the skills and knowledge that the registered nurse should have soon after commencement of work in a general practice.

The example may look overwhelming for general practices other than large business models, but this is one example only of using the competency standards to prepare an orientation or induction package for a nurse commencing in general practice. This example has been designed for a registered nurse who has not worked in general practice so it is a very comprehensive package. Registered nurses with experience working in general practice would require a modified orientation or induction with an emphasis on the policies and procedures used in the general practice.

Some Divisions of General Practice may develop the modules as a self-directed learning package for general practices to use when they employ a registered nurse. Nurses can use the modules as a self-directed learning package but the general practitioner should be available at regular intervals to address issues raised as the nurse works through the modules.

Step 1

Select the units of competency required by registered nurses soon after commencement in the general practice. Generally these would be the key competency standards included in the job description. High priorities for orientation/induction should be the competency standards that directly impact on the provision of high quality and safe patient care.

Step 2

Develop an outline of the learning objectives based on the selected units of competency.

Step 3

Prepare the resources needed to meet the learning objectives (see following sample plan).

Step 4

Plan for the orientation/induction of the nurse commencing work in the general practice (see following sample timetable).

Sample timetable

Day 1	Day 2	Day 3	Day 4	Day 5
<p>AM</p> <p>Overview and tour of the general practice.</p> <p>Complete any human resource management activities eg employment contract, payroll forms, etc.</p> <p>Provide information about the patient population and the services provided.</p> <p>Discuss the learning objectives and identify the learning priorities for week one.</p> <p>Meet with members of the general practice team and learn about others involved with the general practice.</p> <p>PM</p> <p>Partner with the nurse or the general practitioner to become familiar with the health care provided in that setting.</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Introduction to module one (see following sample plan).</p> <p>PM</p> <p>Partner with the nurse or the general practitioner to become familiar with the health care provided in that setting.</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Introduction to module two (see following sample plan).</p> <p>PM</p> <p>Partner with the receptionist staff to become familiar with their role.</p> <p>Debrief session (ie how are things going?).</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Introduction to module three (see following sample plan).</p> <p>PM</p> <p>Start providing nursing care within the scope of their nursing practice.</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Introduction to module four (see following sample plan).</p> <p>PM</p> <p>Evaluate preparation for practice and make plans to overcome any gaps in knowledge and skills.</p> <p>Plan for follow-up in 4 weeks and at 3 months.</p> <p>Review the learning objectives.</p> <p>Debrief session (ie how are things going?).</p>

Sample orientation/induction plan

Learning objectives ¹	Examples of elements that would be included in the modules	Examples of resources that can be utilised
<p>By the end of module one the registered nurse will:</p> <p>Carry out a comprehensive and accurate nursing assessment of individuals and groups in a variety of settings.</p> <p>Formulate a plan of care in collaboration with individuals and groups.</p> <p>Implement planned nursing care to achieve identified outcomes within scope of competence.</p> <p>Evaluate progress toward expected outcomes and reviews and revises plans in accordance with evaluation data.</p> <p>Demonstrate comprehensive and accurate knowledge and skills in providing episodic and ongoing care that is responsive to individual and group circumstances and environments.</p> <p>Initiate and conduct comprehensive health maintenance and health promotion in partnership with individuals, groups and the general practice team.</p> <p>In collaboration with the general practice team conduct diagnostic activities.</p> <p>Provide evidence based information, resources and education to assist individuals, groups and families to make health care decisions.</p> <p>Modify communication strategies according to individual and group circumstances.</p> <p>Collaborate with individuals, groups and the general practice team in decision making about the resources needed to provide clinical care.</p>	<p>Comprehensive assessment of individuals and groups presenting without appointments to improve outcomes and minimise adverse events.</p> <p>Development of health care plans that direct health care interventions and activities by others.</p> <p>Care in the general practice environment as well as in homes and other community settings.</p> <p>Comprehensive physical, psychosocial and emotional care for individuals and groups.</p> <p>Health care services in accordance with Medicare Benefits Schedule conditions.</p> <p>Minor procedures undertaken by the general practitioner.</p> <p>Health screening and health monitoring activities such as cardiac assessment including electrocardiographs and stress tests.</p> <p>Immunization, wound care and chronic disease management services.</p>	<p>The Health Insurance Commission for guidelines on Medicare and the Pharmaceutical Benefits Scheme. www.hic.gov.au</p> <p>The Royal Australian College of General Practitioners for information about standards for general practice. www.racgp.org.au</p> <p>The state and territory health departments for information about their guidelines, legislation and regulation relevant to nursing and general practice (follow the links from www.fed.gov.au and www.anmc.org.au for state and territory specific information).</p> <p>The Australian Government for the information for consumer outlining a range of preventative health care strategies available for older people in Australia. http://www.seniors.gov.au/internet/seniors/publishing.nsf/Content/Preventative+care</p> <p>The Australian Government Department of Health and Ageing for a range of guidelines and other resources in a range of areas such as asthma and diabetes. www.health.gov.au and look for the A-Z section.</p> <p>Employer's policies and procedures.</p>

¹ These have been selected from the competency standards for nurses in general practice and the national competency standards for the registered nurse.

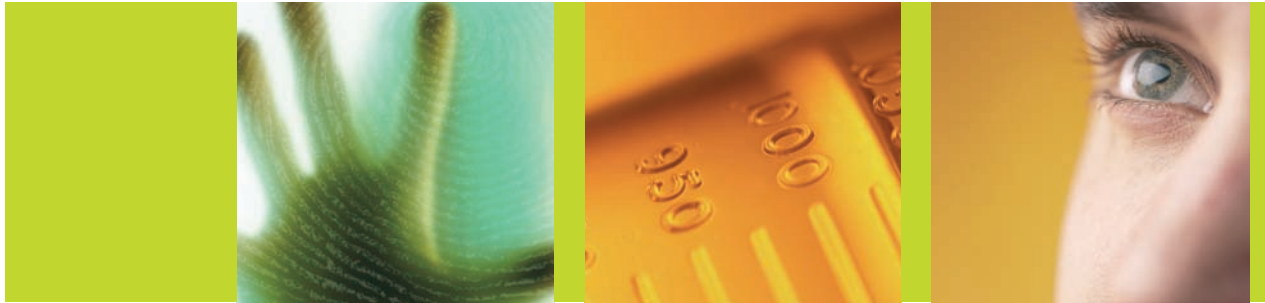
Learning objectives	Examples of elements that would be included in the modules	Examples of resources that can be utilised
<p>By the end of module two the registered nurse will:</p> <p>Use best available research to inform clinical care management.</p> <p>Coordinate and review programs, registers and systems to facilitate quality individual and group health care outcomes.</p> <p>Demonstrate proficiency in the use of information management technology and systems to inform clinical care management.</p> <p>Manage resources to promote optimal client care.</p> <p>Collect information about practice population profiles to inform health promotion and illness prevention strategies.</p>	<p>Recall registers, pathology systems and individual and group documentation systems.</p> <p>Practice accreditation processes.</p> <p>Funding, billing and business systems used in the general practice.</p> <p>Clinical data entry and retrieval systems.</p> <p>Clinical reports.</p> <p>Health Insurance Commission information for care outcomes for individuals and groups.</p> <p>Statistics to contribute to local population health profiles.</p>	<p>Information about the systems used in the general practice including:</p> <p>Recall registers and pathology systems;</p> <p>General practice accreditation processes;</p> <p>Funding and billing systems;</p> <p>Clinical data and other documentation systems.</p>

Learning objectives	Examples of elements that would be included in the modules	Examples of resources that can be utilised
<p>By the end of module three the registered nurse will:</p> <p>Contribute to the maintenance of an environment which promotes safety, security and personal integrity of individuals and groups.</p> <p>Communicate effectively with individuals and groups.</p> <p>Manage effectively the nursing care of individuals and groups.</p> <p>Collaborate with other members of the health care team.</p> <p>Ensure clinical nursing decisions are communicated to the general practice team.</p> <p>Participate in shared decision making about care delivery with individuals, groups and members of the general practice team.</p> <p>Recognise when to seek advice from other members of the general practice team or other health service providers about the care of individuals and groups.</p> <p>Share information with the general practice team.</p> <p>Monitor local, community and population health developments and resources for integration into the care of individuals and groups.</p> <p>Liaise with relevant community and health care agencies for community development purposes and to facilitate continuity of care for individuals and groups in that community.</p>	<p>Role of members of the health care team in the delivery of health care.</p> <p>Roles of the allied health care team.</p> <p>Internal and external referral processes and procedures.</p> <p>Guidelines and protocols.</p> <p>Practice meetings.</p> <p>Safety and quality issues for individuals, groups, and others working in the general practice.</p> <p>Roles of community agencies and service providers.</p> <p>Reporting of test results.</p> <p>Documenting the provision of nursing care.</p>	<p>Information about:</p> <p>Members of the general practice health care team;</p> <p>Allied health care providers used by the general practice team;</p> <p>Community services generally used by the general practice;</p> <p>Guidelines and protocols used in the general practice;</p> <p>Safety and quality activities in place and the external guidelines that are used (eg RACGP standards for general practice)</p> <p>Systems for safe management of pathology results;</p> <p>Practice meetings and the agenda and reporting mechanisms used;</p> <p>Documentation systems.</p>

Learning objectives	Examples of elements that would be included in the modules	Examples of resources that can be utilised
<p>By the end of module four the registered nurse will:</p> <p>Function in accordance with legislation and common law affecting nursing practice.</p> <p>Conduct nursing practice in a way that can be ethically justified.</p> <p>Protect the rights of individuals and groups in relation to health care.</p> <p>Accept accountability and responsibility for own actions within nursing practice.</p> <p>Practice based on primary, preventative care or early intervention health care approaches.</p> <p>Practice in accordance with nursing and general practice standards, codes, guidelines, legislation and regulation.</p> <p>Actively seek out opportunities and resources to manage professional isolation.</p> <p>Recognise the need for ongoing education and training to maintain competence for nursing practice.</p>	<p>Knowledge of legislation and common law pertinent to nursing practice.</p> <p>Knowledge of policies and procedural guidelines that have legal implications for practice.</p> <p>Identify unsafe practice and responds appropriately to ensure a safe outcome.</p> <p>Systems for recognising and acting upon breaches of law relating to practice.</p> <p>Confidentiality of information.</p> <p>Knowledge base/scope of competence.</p> <p>Processes to consult with other health care professionals when individual/group needs fall outside the scope of nursing practice.</p> <p>Principles of primary health care and primary care into nursing practice.</p> <p>Geographic, cultural and socio-economic characteristics of the local community.</p> <p>Policies for supervision of both enrolled and other registered nurses, and students of general practice health care.</p> <p>Skills in cardiopulmonary resuscitation and other first aid required in the setting.</p>	<p>The Australian Government Department of Health and Ageing for information about guidelines, legislation and regulation relevant to general practice. www.health.gov.au</p> <p>The Health Insurance Commission for guidelines on Medicare and the Pharmaceutical Benefits Scheme. www.hic.gov.au</p> <p>The Royal Australian College of General Practitioners for information about standards for general practice. www.racgp.org.au</p> <p>The state and territory health departments for information about their guidelines, legislation and regulation relevant to nursing and general practice (follow the links from www.fed.gov.au and www.anmc.org.au for state and territory specific information).</p> <p>The nurse regulatory authorities' codes, standards, guidelines and policies including supervision and delegation (follow the links from www.anmc.org.au).</p> <p>The Office of the Australian Privacy Commissioner for information about the Privacy Principles and the principles relevant to health care providers such as general practices. www.privacy.gov.au</p> <p>The Australian Government Department of Health and Ageing for guidelines about communicable diseases. http://www.health.gov.au/internet/wcms/publishing.nsf/Content/Communicable%20Diseases%20Australia-1</p> <p>The Australian Government Department of Veteran's Affairs. www.dva.gov.au</p> <p>The National Health and Medical Research Council for information and guidelines for health research and on cultural competency. www.nhmrc.gov.au</p> <p>The Australian Government for the information for consumer outlining a range of preventative health care strategies available for older people in Australia. http://www.seniors.gov.au/internet/seniors/publishing.nsf/Content/Preventative+care</p> <p>The Australian Government Department of Health and Ageing for a range of guidelines and other resources in a range of areas such as asthma and diabetes. www.health.gov.au and look for the A-Z section.</p> <p>Some discussion about primary health care and primary care in general practice on the following website of the Primary Health Care Research and Information Service. http://www.phcris.org.au/resources/phc/about_PHC_mainframe.html</p> <p>Employer's policies and procedures.</p> <p>Information about the local area including geographic, cultural and socio-economic characteristics as well as the health indicators.</p> <p>Providers of advanced first aid.</p>

Competency Standards

for nurses in general practice



Orientation/induction for the enrolled nurse

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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Orientation/induction for the enrolled nurse¹

This is an example of an orientation or induction package for an enrolled nurse commencing work in a general practice setting. It provides guidance on the skills and knowledge that the enrolled nurse should have soon after commencement of work in a general practice.

The example may look overwhelming for general practices other than large business models, but this is one example only of using the competency standards to prepare an orientation or induction package for a nurse commencing in general practice. This example has been designed for an enrolled nurse who has not worked in general practice so it is a very comprehensive package. Enrolled nurses with experience working in general practice would require a modified orientation or induction with an emphasis on the policies and procedures used in the general practice.

Enrolled nurses are orientated/inducted by a registered nurse who assesses the competence of the enrolled nurse and establishes their scope of nursing practice, in conjunction with the general practitioner or other employer.

Step 1

Select the units of competency required by the enrolled nurse soon after commencement in the general practice. Generally these would be the key competency standards included in the job description. High priorities for orientation/induction should be the competency standards that directly impact on the provision of high quality and safe patient care.

Step 2

Develop an outline of the learning objectives based on the selected units of competency (see the sample induction/orientation plan).

Step 3

Prepare the resources needed to meet the learning objectives (see following sample induction/orientation plan).

Step 4

Plan for the orientation/induction of the nurse commencing work in the general practice (see following sample timetable).

¹ Registered nurse (division 2) in Victoria

Sample timetable

Day 1	Day 2	Day 3	Day 4	Day 5
<p>AM</p> <p>Overview and tour of the general practice.</p> <p>Provide information about the patient population and the services provided.</p> <p>Discuss the learning objectives and identify the learning priorities for week one.</p> <p>Meet with members of the general practice team and learn about others involved with the general practice.</p> <p>PM</p> <p>Partner with the registered nurse to become familiar with the health care provided in that setting.</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Introduction to module one (see following sample plan).</p> <p>PM</p> <p>Partner with the registered nurse to become familiar with the health care provided in that setting.</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Introduction to module two (see following sample plan).</p> <p>PM</p> <p>Partner with the receptionist staff to become familiar with their role as part of the general practice team.</p> <p>Debrief session (ie how are things going?).</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Introduction to module three (see following sample plan).</p> <p>PM</p> <p>Start providing nursing care within the scope of their nursing practice and under the supervision of the registered nurse.</p> <p>Review the learning objectives.</p>	<p>AM</p> <p>Establish the scope of nursing practice and the supervisory arrangements.</p> <p>PM</p> <p>Evaluate the preparation for practice and make plans to overcome any gaps in knowledge and skills.</p> <p>Plan for follow-up in 4 weeks and at 3 months.</p> <p>Review the learning objectives.</p> <p>Debrief session (ie how are things going?).</p>

Sample induction/orientation plan

Learning objectives ¹	Examples of elements that would be included in the modules	Examples of resources that can be utilised
<p>By the end of module one the enrolled nurse will:</p> <p>Contribute to the formulation of care plans in collaboration with the registered nurse, individuals and groups.</p> <p>Manage nursing care of individuals and groups within the scope of enrolled nursing practice.</p> <p>Demonstrate knowledge and skill in providing delegated episodic and ongoing care that is responsive to individual and group circumstances and environments.</p> <p>Collect and report information about the health and functional status of individuals and groups.</p> <p>Provide care for individuals and groups in consultation with the registered nurse and/or general practitioner.</p> <p>Liaise with the registered nurse and general practitioner in providing evidence-based health promotion and illness management information to individuals, groups and their families.</p>	<p>Data regarding the health and functional status of individuals and groups.</p> <p>Nursing care to achieve identified outcomes.</p> <p>Care plans, protocols or treatment regimes.</p> <p>Systems for reporting changes in the health and functional status of individuals/groups to the registered nurse.</p> <p>Communication, reporting and documentation systems.</p> <p>Clinical care within the scope of education, experience and assessment of the need of individuals and groups.</p> <p>Individuals and groups presenting without appointments.</p> <p>Assessment of individuals and groups and when to seek registered nurse or general practitioner assistance.</p> <p>Protocols when conducting health assessments and reviews.</p> <p>Technical proficiency in measuring and documenting vital signs and test results such as blood glucose readings, urinalysis, wound and skin checks.</p> <p>Use of spirometry, electrocardiographs and other health care technologies.</p> <p>Wound healing and exudate amount, type, and colour.</p> <p>Administration of medicines in accordance with legal, and delegation and supervision requirements.</p> <p>Minor procedures performed by the general practitioner.</p> <p>Immunization, wound care and chronic disease management services.</p> <p>Information to improve or maintain health.</p> <p>Resources available within the practice to meet the needs of individuals and groups.</p>	<p>Care planning used in the general practice.</p> <p>Registered nurse working with the enrolled nurse to identify the scope of nursing practice for the enrolled nurse including health assessments, wound care, administration of medicines, assistance with procedures, etc..</p> <p>Documentation systems used in the general practice.</p> <p>Systems for managing people presenting without appointments.</p> <p>Policies and protocols for health assessments and reviews including the role of the enrolled nurse.</p> <p>Resources available for people using the general practice.</p>

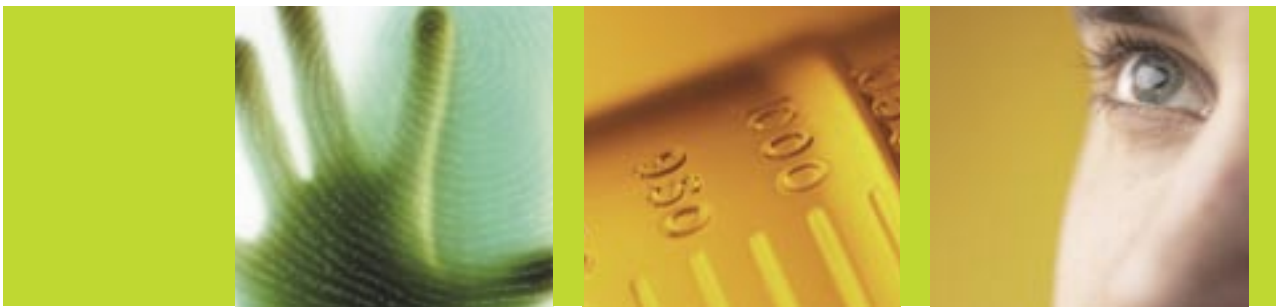
¹ These have been selected from the competency standards for nurses in general practice and the national competency standards for the enrolled nurse.

Learning objectives	Examples of elements that would be included in the modules	Examples of resources that can be utilised
<p>By the end of module two the enrolled nurse will:</p> <p>Practice in accordance with nursing and general practice standards, codes, guidelines, legislation and regulations.</p> <p>Conduct nursing practice in a way that respects the rights of individuals and groups.</p> <p>Accept accountability and responsibility for own actions within enrolled nursing practice</p> <p>Recognise that nursing in general practice is based on primary, preventative care or early intervention health care approaches.</p> <p>Recognise the responsibility and implications of enrolled nursing practice in general practice including professional supervisory relationships.</p>	<p>Knowledge of legislation and common law pertinent to enrolled nursing practice in the general practice setting.</p> <p>Knowledge of organisational policies and procedures pertinent to enrolled nursing practice.</p> <p>Reporting systems for practices that may breach legislation, policies and procedures.</p> <p>Organisational policies relevant to individual/group rights in the health care context.</p> <p>Identification of own level of competence.</p> <p>Principles of primary health care and primary care.</p> <p>Differences between providing nursing care in general practice and in hospital settings.</p> <p>Direct and/or indirect registered nurse supervision.</p> <p>Assessment of competence for practice and need for updated knowledge base for practice.</p> <p>Skills in cardiopulmonary resuscitation and other basic first aid.</p>	<p>The Australian Government Department of Health and Ageing for information about guidelines, legislation and regulation relevant to general practice. www.health.gov.au</p> <p>The Health Insurance Commission for guidelines on Medicare and the Pharmaceutical Benefits Scheme. www.hic.gov.au</p> <p>The Royal Australian College of General Practitioners for information about standards for general practice. www.racgp.org.au</p> <p>The state and territory health departments for information about their guidelines, legislation and regulation relevant to nursing and general practice. Follow the links from www.fed.gov.au and www.anmc.org.au for state and territory specific information.</p> <p>The nurse regulatory authorities' codes, standards, guidelines and policies including supervision and delegation. Follow the links from www.anmc.org.au</p> <p>The Office of the Australian Privacy Commissioner for information about the Privacy Principles and the principles relevant to health care providers such as general practices. www.privacy.gov.au</p> <p>The Australian Government Department of Health and Ageing for guidelines about communicable diseases. http://www.health.gov.au/internet/wcms/publishing.nsf/Content/Communicable%20Diseases%20Australia-1</p> <p>The Australian Government Department of Veteran's Affairs. www.dva.gov.au</p> <p>The National Health and Medical Research Council for information and guidelines for health research and on cultural competency. www.nhmrc.gov.au</p> <p>The Australian Government for the information for consumers outlining a range of preventative health care strategies available for older people in Australia. http://www.seniors.gov.au/internet/seniors/publishing.nsf/Content/Preventative+care</p> <p>The Australian Government Department of Health and Ageing for a range of guidelines and other resources in a range of areas such as asthma and diabetes. www.health.gov.au and look for the A-Z section.</p> <p>Some discussion about primary health care and primary care in general practice on the following website of the Primary Health Care Research and Information Service. http://www.phcris.org.au/resources/phc/about_PHC_mainframe.html</p> <p>Employer's policies and procedures.</p> <p>Information about the local area including geographic, cultural and socio-economic characteristics as well as the health indicators.</p> <p>Providers of advanced first aid.</p>

Learning objectives	Examples of elements that would be included in the modules	Examples of resources that can be utilised
<p>By the end of module three the enrolled nurse will:</p> <p>Contribute to the promotion of safety, security and personal integrity of individuals and groups within the scope of enrolled nursing practice.</p> <p>Collaborate with members of the health care team to achieve effective health care outcomes.</p> <p>Consult with the registered nurse and general practice team in making clinical decisions.</p> <p>Participate in shared decision making about care delivery with individuals, groups and members of the general practice team.</p> <p>Recognise when to seek advice from the registered nurse and general practitioner about the care of individuals and groups.</p> <p>Liaise with relevant community and health care agencies to facilitate continuity of care for individuals and groups.</p>	<p>Safety and quality systems that are in place.</p> <p>Collaboration with the registered nurse and members of the health care team in the provision of nursing care to individuals and groups experiencing illness or dependence.</p> <p>Health education of individuals or groups to maintain and promote health.</p> <p>Understanding of the role of the enrolled nurse as a member of the health care team.</p> <p>Understanding of the role of members of the health care team in achieving health care outcomes.</p> <p>Collaborative relationships with members of the health care team.</p> <p>Referral of clients to a registered nurse or general practitioner.</p> <p>General practice meetings.</p> <p>Roles of the allied health care team.</p> <p>Roles of community agencies and service providers.</p> <p>Local referral processes and procedures.</p>	<p>Policies and procedures used in the general practice.</p> <p>Information about the roles of the health care team involved with the care of patients in the general practice.</p> <p>Information about the community and health care agencies used by the general practice.</p> <p>General practice meetings.</p>

Competency Standards

for nurses in general practice



Course outline

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Course outline

Aim

To introduce nurses to the competency standards for nurses in general practice and demonstrate their use for professional development purposes.

Objective

By the end of the session participants' will have:

- Discussed the use of the competency standards for nurses in general practice for professional development purposes;
- Reviewed the resources available on the competency standards website and their relevance to nurses in general practice, practice managers and general practitioners.

Mode of Delivery

- One 3-hour workshop

Content

1. Brief explanation of what competency standards are and why the tool-kit was developed.
2. Overview of the process of developing the competency standards tool-kit.
3. Demonstrate practical uses of the competency standards tool-kit including:
 - 3.1 Self-assessment using competency standards;
 - 3.2 Professional development planning;
 - 3.3 Developing a professional portfolio;
 - 3.4 Performance assessment by a peer and/or employer.
4. Identify key resources that will be useful for self-assessment, professional development planning, professional portfolio development and performance assessment including:
 - 4.1 Competency standards for nurses in general practice;
 - 4.2 Using competency standards for professional development purposes;
 - 4.3 Self-assessment tool;
 - 4.4 Professional development plan template;
 - 4.5 Professional portfolio resource;
 - 4.6 Resources for nurses in general practice.
5. Discuss other uses for the competency standards and other competency standards that may be relevant.
6. List and briefly discuss the resources available on the competency standards website:
 - Tool-kit introduction;
 - Competency standards for nurses in general practice;
 - Competency standards for the registered nurse in general practice;

- Competency standards for the enrolled nurse in general practice;
- Role statement for the registered nurse in general practice;
- Using the competency standards for professional development purposes;
- Self-assessment for the registered nurse in general practice;
- Professional development plan (registered nurse);
- Template for a professional development plan;
- Professional portfolio (registered nurse);
- Sample job description for a registered nurse in general practice;
- Performance management tool for registered nurses in general practice;
- Scope of nursing practice;
- Professional supervision of enrolled nurses;
- Advanced registered nurses;
- Resources for registered nurses in general practice;
- Glossary;
- Role statement for enrolled nurses in general practice;
- Self-assessment for the enrolled nurse in general practice;
- Professional development plan (enrolled nurse);
- Template for a professional development plan;
- Professional portfolio (enrolled nurse);
- Sample job description for an enrolled nurse in general practice;
- Performance management tool for enrolled nurses in general practice;
- Resources for enrolled nurses in general practice;
- Using the competency standards for employment purposes;
- Orientation/induction for the registered nurse;
- Orientation/induction for the enrolled nurse;
- Course outline;
- Online evaluation form.

Instructional Resources

1. Copy of key resources for each participant
2. Overhead projector or PowerPoint presentation
3. White board

Assessment/Evaluation

1. Group discussion
2. Questioning
3. Course evaluation form

Competency Standards

for nurses in general practice



- Resources for registered nurses in general practice
> [View web page](#)
- Resources for enrolled nurses in general practice
> [View web page](#)

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