



performance of work in the nursing and midwifery industries

Where the term 'nurse' is used it includes all licensed classifications including, but not limited to: registered nurse, midwife, enrolled nurse, nurse practitioner.

Work in the nursing and midwifery industries is carried out by a team of nurses and midwives and/or support workers with varying roles and varying levels of education.

The nursing or midwifery team is led by a registered nurse or midwife who assesses, plans and evaluates nursing or midwifery work and guides its implementation.

Registered and enrolled nurses and midwives are primarily responsible for direct patient care, and should ensure that this priority is reflected in the work which they undertake.

Employers should ensure that sufficient, appropriate support staff is available to enable nurses and midwives to meet their patient care responsibilities.

The priority of the nursing and midwifery professions is the provision of high quality nursing and midwifery care to people using the health care system.

The environments within which nursing and midwifery takes place should be controlled by nurses and midwives to ensure that the many aspects of nursing and midwifery work are undertaken by persons who have had appropriate nursing and midwifery preparation.

Work of a domestic, housekeeping or clerical nature is more appropriately carried out by personnel employed to undertake such activities.

The Australian Nursing Federation recommends the adoption of the following guidelines:

1. Activities associated with housekeeping and cleaning are performed by domestic staff. Examples of such work include arranging of flowers or watering plants, moving furniture and beds, sweeping, washing and mopping floors, washing patient's clothes, cleaning furniture, including beds, trolleys and lockers and changing curtains. In the absence of domestic staff the nurse should ensure that the immediate patient environment is clean and safe. In operating suites, isolation and special areas the responsibility of the nurse should be specified in the hospital/agency nursing practice manual. When technical equipment is in use in the patient environment, cleaning of such equipment may be a nursing responsibility, and if so, should be specified in the nursing practice manual.
2. The nurse has the responsibility to maintain the optimal nutritional state of the patient, including assisting with eating or drinking, ensuring that the food supplied is appropriate to the dietary requirements or limitations of the patient's condition, and recording the amount of food consumed or rejected by the patient before the tray is removed. Other activities associated with the food service are performed by kitchen staff, eg. routine preparation and delivery of meals and refreshments and routine collection and washing of trays and utensils.

3. All messenger and transport services are performed by support staff, eg delivering specimens, request slips, memos or bulletins, collecting records, obtaining and transferring laboratory results and reports and transporting equipment. Having evaluated the circumstances, the nurse may decide to accompany patients (including patients who are deceased) during transport.
4. Stock-taking and maintenance of supplies are performed by support staff. Examples include prewashing, washing, mending, ironing, delivering linen, and ordering stationery, food, disposable equipment and other routinely used items.
5. Only clerical duties associated with recording information related to direct nursing and midwifery care are the responsibility of nurses or midwives. All other clerical duties are performed by support staff or clerical staff at the direction of the nurse in charge. Examples include completing business records such as bed occupancy reports and other various forms; entering, filing, posting or otherwise recording entries in the patient's notes (other than nursing records); routine answering of phones; and arranging routine appointments with clinics or private doctors.
6. The nurse or midwife has the responsibility to ensure the implementation and evaluation of medication regimes and other treatments. Endorsed nurse/midwife practitioners or advanced practice nurses may also prescribe medications within the relevant jurisdictional legal framework.
7. Medical practitioners should carry out functions for which the nurse has not received appropriate training; or the nurse does not consider themselves to be competent; or there is no written order signed by the person delegating the task; or responsibility has been delegated by other than the medical practitioner who is accountable and responsible for the activity; or medical practitioners are usually responsible for the activity, and for which no health service or nurse registering authority policies exist.

endorsed by federal council december 1989

reviewed and re-endorsed november 1996

reviewed and re-endorsed august 2005

reviewed and re-endorsed november 2008