



The complexities of defining nurse practitioner scope of practice in the Australian context

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Summary

Aims: To explore the legislative and regulatory constraints that defines nurse practitioner scope of practice within the Australian context.

Background: Nurse practitioners have been endorsed to practice in Australia for over 13 years. However, despite this lengthy period, there still remains confusion amongst newly endorsed nurse practitioners and their employers as to what determines the scope of their practice in Australia.

Design: A review of available policy and regulatory documents related to the Australian operational requirements for nurse practitioner scope of practice cited within or referred to by the Nursing and Midwifery Board of Australia.

Data sources: Data were collected over a 2-month period in 2013. This utilized the current standards, codes and guidelines cited by the Nursing and Midwifery Board of Australia related to scope of practice and nurse practitioner, as well as legislation and regulation referred to in relation to nurse practitioner practice. Information was also obtained through government health

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and professional organization websites. All information in the literature regarding current and past status, and nomenclature of advanced practice nursing was considered relevant.

Implications for nursing: Providing a means of interpreting the determinants of nurse practitioner scope of practice within Australia.

Conclusions: The factors that determine nurse practitioner scope of practice, education, clinical experience, and competence leading to endorsement, are straightforward. However, the context of clinical practice, including jurisdictional restrictions, is major barriers to the expression of nurse practitioner scope of practice. These restrictions, although not insurmountable, continue to hinder nurse practitioners from practicing to their full scope of practice.

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1. Introduction

In Australia the nurse practitioner role has a regulated scope of practice requiring endorsement by the Nursing and Midwifery Board of Australia, which is built on the foundation of the registered nurse scope of practice. Project work to develop the nurse practitioner role in Australia commenced in New South Wales over 20 years ago, with the first nurse practitioner endorsed to practise in 2001 ([The National Nursing and Nursing Education Taskforce N3ET, 2005](#)).

A nurse practitioner's role at times appears to have unlimited boundaries to practice, despite this potential in reality there are so many barriers to implementing care that actual practice can be highly restricted. The term scope of practice is used to describe that which the nurse or midwife is educated, competent and authorized to perform ([NMBA, 2013d](#)). A nurse may be taught to perform a particular scope of practice, but not be competent. A nurse might feel competent, but not be qualified. A nurse may have completed education and been deemed competent, but not be authorized to provide the care. To meet the Nursing and Midwifery Board of Australia's (NMBA) requirements for scope of practice, a nurse must be all three – educated, competent and authorized. However, despite this definition, there remains confusion amongst registered nurses preparing to become nurse practitioners, their employers and colleagues as to the factors that determine nurse practitioner scope of practice in Australia. This confusion is further confounded when jurisdictional regulatory and legislative changes affecting nurse practitioner's scope of practice may change without broader consultation or dissemination to endorsed nurse practitioners delivering services ([Ramis, Wu, & Pearson, 2013](#)). Although defining nurse practitioner scope of practice internationally is well documented throughout nursing literature over the past five decades there have been few reviews of how these requirements can be interpreted from an operational perspective ([Brady, 1989](#); [De Witt & Ploeg, 2005](#); [Duffield, Gardner, Chang, & Catling-Paull, 2009](#); [Pulcini, Jelic, Gul, & Loke, 2010](#); [Scanlon, Cashin, Watson, & Bryce, 2012](#); [Sheperd, 1992](#); [Stasa, Cashin, Buckley, & Donoghue, 2013](#)). The purpose of this paper is to examine current national, State and Territory legislation and regulation within Australia to identify factors that condition the expression of a nurse practitioner's scope of practice.

2. Background

2.1. Nurse practitioners within the Australian Health Care System

Free public hospital care has existed nationally in Australia since the 1970s and has continued under the Medicare scheme as a result of the National Health Reform Agreement, endorsed by the Council of Australian Governments (COAG) in 2011 ([Healy, 2012](#)). Whilst the Federal government largely funds hospitals through the COAG agreement, hospitals are administered at the State and Territory level ([Healy, 2012](#)). The key priorities that drive Australian health-care policy and practice today are universal access to quality care for all Australians, equity in service provision to all consumers irrespective of their ethnicity, socioeconomic or geographic status, and financial sustainability in meeting health challenges whilst delivering appropriate clinical care ([Centre for International Economics, 2013](#)). As such, the introduction of any new health worker role into this health, disability and aged care landscape needs to be adaptable to the existing and evolving aspects of practice.

The nurse practitioner scope includes, but is not limited to, advanced health assessment, diagnosis and management, referral, medicines prescribing, and the ordering and interpretation of diagnostic investigations ([Centre for International Economics, 2013](#)). In Australia, the title of nurse practitioner is protected under the Health Practitioner Regulation National Law Act 2009 (the National Law). A nurse practitioner is a registered nurse, experienced in a specific area of clinical practice, educated at Masters level, and endorsed by the NMBA. Currently there are 1058 NPs endorsed in Australia ([NMBA, 2013d](#)), although the number actually employed as a nurse practitioner is unknown. Nurse practitioners work across the spectrum of health care delivery and have differing scopes of practice, which are partly governed by their local practicing environment as well as Federal and State/Territory government regulatory and legislative requirements. These requirements may change without formal notice and may alter nurse practitioner practice significantly ([King et al., 2012](#)).

2.2. Methods

To understand the operational requirements for nurse practitioner scope of practice, a review was undertaken of policy and regulatory documents cited and referred to on the NMBA

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