

Nursing Workforce

A Registered Nurse (RN) has successfully completed an undergraduate degree of Nursing and both demonstrates competence in the field and is registered under the Australian Health Practitioner Regulation National Law as a registered nurse.

The scope of practice of an RN is that in which nurses are educated, competent to perform and permitted by law. The full scope of practice of an individual nurse is influenced by the practise context and the health needs of patients, and the levels of confidence and competence of the nurse.

“RNs determine, coordinate and provide safe, quality nursing. This practice includes comprehensive assessment, development of a plan, implementation and evaluation of outcomes. As part of practice, RNs are responsible and accountable for supervision and the delegation of nursing activity to enrolled nurses (ENs) and others.”¹

An EN has completed no less than 12 months of education or hospital based training (Diploma of Nursing) and has been deemed competent in their ability to practise. EN’s are required to be registered with the Australian Health Practitioner Regulation National Law as an enrolled nurse and provide nursing care under the direct or indirect supervision of an RN.

Supervision

NMBA has developed supervision guidelines to be used by nurses under supervision, persons providing supervision to nurses or midwives and decision-makers involved in supervision arrangements.

There are several reasons that nurses will have supervision arrangements, and the guidelines have been implemented to operationalise the 10 key principles ‘that are central to safe and effective supervision of a nurse.

The appropriate levels of supervision provides assurance to the community that a nurses practice is safe and does not place the public at risk, as patients have a right to expect safe, competent and evidence-based nursing care at all times, and this includes care that is given by nurses under supervisory arrangements². The guidelines also lists the different levels of supervision, such as professional, managerial or clinical supervision which is a part of delegated care. The responsibilities and reporting requirements of all parties are also included in this document.

A supervisor is a ‘suitably qualified and experienced enrolled or registered nurse, with more than two years’ experience as a nurse and has completed a supervisor course. A supervisor must be:

- Working and registered in the same registration category with NMBA in which the supervisee is seeking registration or re-registration
- Registered with no conditions relating to unsatisfactory professional performance or unprofessional conduct³

¹ Registered Nurse standards for practice

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/registered-nurse-standards-for-practice.aspx>

² Supervision guidelines for Nursing & Midwifery, pg.1, NMBA 2015

³ *Ibid* pg.9

'In relation to consumer care activities delegated to another person by a RN from a nursing plan of care, clinically focussed supervision includes:

- Providing education, guidance and support for individuals who are performing the delegated activity
- Directing the individuals performance
- Monitoring and evaluating outcomes, especially the consumers response to the activity

The person delegating the activity and the person accepting the delegation must both agree to the level of clinically focussed supervision that will be provided. ⁴

Delegation

The Nursing and Midwifery Board of Australia's (NMBA) Registered Nurse Standards for Practice give the following explanation in regards to the delegation of nursing activity to enrolled nurses and others:

"Delegation is the relationship that exists when an RN delegates aspects of their nursing practice to another person such as an enrolled nurse, a student nurse or a person who is not a nurse, which the RN is competent to perform and which they would normally perform themselves. The RN who is delegating retains accountability for the decision to delegate.

They are also accountable for monitoring of the communication of the delegation to the relevant persons and for the practice outcomes. Both parties share the responsibility of making the delegation decision, which includes assessment of the risks and capabilities."⁵

The decision-making tool developed by the NMBA states that delegation can occur from one member of the multi-disciplinary healthcare team to another member of the health care team of a different discipline, or to a less experienced member of the same discipline'.⁶

The roles and responsibilities of delegation are listed in the decision-making tool, and something of importance to note in the acceptance of the delegation is as follows:

'Activities delegated to another person by a registered nurse cannot be delegated by that person to any other individual, unless they have since obtained the autonomous authority to perform the activity. If changes in the context occur that necessitate re-delegation, a person without that autonomous authority must consult with a registered nurse'⁷

Decision-making in nursing practice

- EN Standards for practice, specifically indicators provided in Standard 3 note the following in relation to the accountability and responsibility on enrolled nurses:
 - 3.2 Demonstrates responsibility and accountability for nursing care provided
 - 3.3 Recognises the RN as the person responsible to assist EN decision-making and provision of care

⁴ A national framework for the development of decision-making tools for nursing and midwifery practice <https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Frameworks.aspx>

⁵ Enrolled Nurse standards for practice <https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/FAQ/Enrolled-nurse-standards-for-practice.aspx>

⁶ A national framework for the development of decision-making tools for nursing and midwifery practice <https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Frameworks.aspx>

⁷ Ibid

- 3.8 Provides support and supervision to assistants in nursing (however titled) and to others⁸ providing care, such as EN students, to ensure care is provided as outlined within the plan of care and according to institutional policies, protocols and guidelines.
- EN's can, where appropriate, educate and support other (unregulated) health care workers (however titled) related to the provision of care

Delegation and Supervision of non-nurses

A non-nurse is any person who is not registered to practise as an enrolled or registered nurses (or midwife) and could include any of the following occupations:

- Support workers also known as unregulated/unlicensed health care workers
 - Disability support workers will fit in this category
- Assistants in nursing, personal care assistants, orderlies and ward attendants
- Aboriginal or Torres Strait Islander health worker,
- Carer, family member, volunteer or other person involved with the person receiving health care.

'Support workers may have a care-worker qualification, or not, but they are not bound by professional standards or professional regulation. These support are individually accountable for their own actions and accountable to the RN for delegated actions.

The safe delegation of aspects of nursing to this classification of staff is limited to non-complex components of personal care and routine, client-specific activities that require a narrow range of skill or knowledge.⁹

The decision-making framework also states that 'in some jurisdictions, legislation specifically prohibits the delegation of nursing care to non-nurses'.¹⁰

⁸ Enrolled Nurse standards for practice

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/FAQ/Enrolled-nurse-standards-for-practice.aspx>

⁹ A national framework for the development of decision-making tools for nursing and midwifery practice

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Frameworks.aspx>

¹⁰ Ibid pg. 16