# Rural and remote nursing: Same scope of practice or different?

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# Presentation overview

**Introduction to my research**
**Scope of practice overview and discussion**
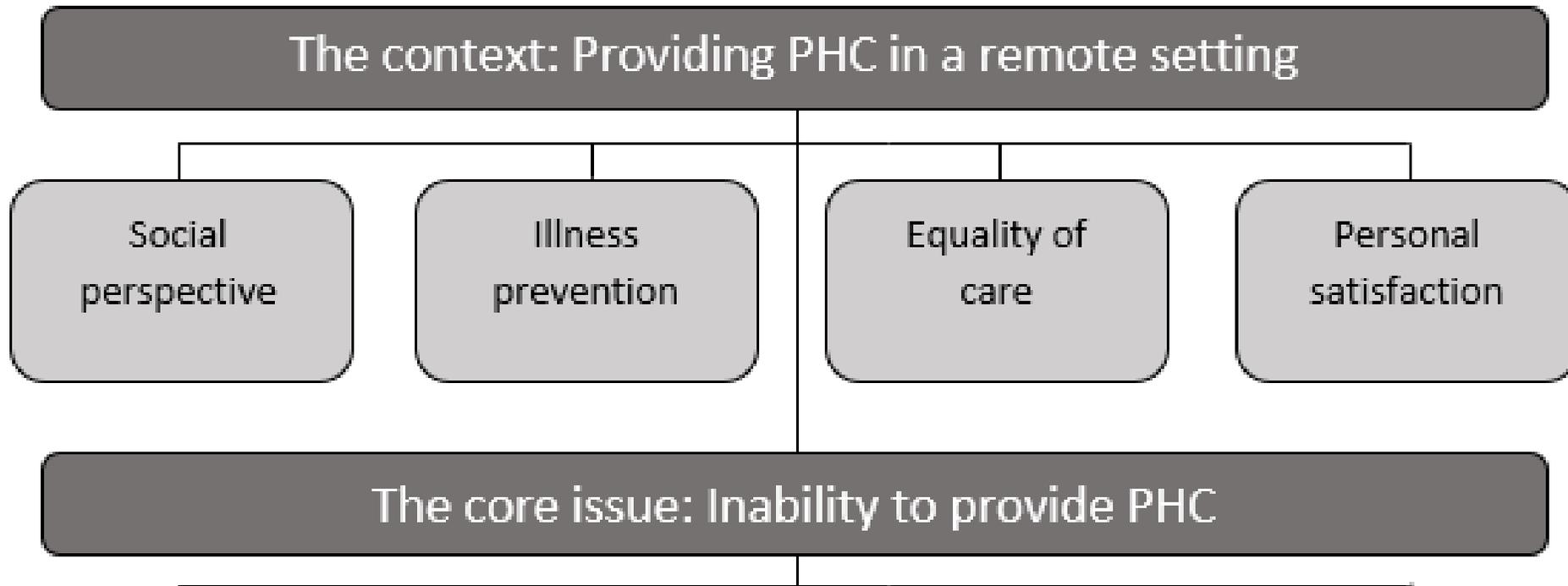**Documenting competence**
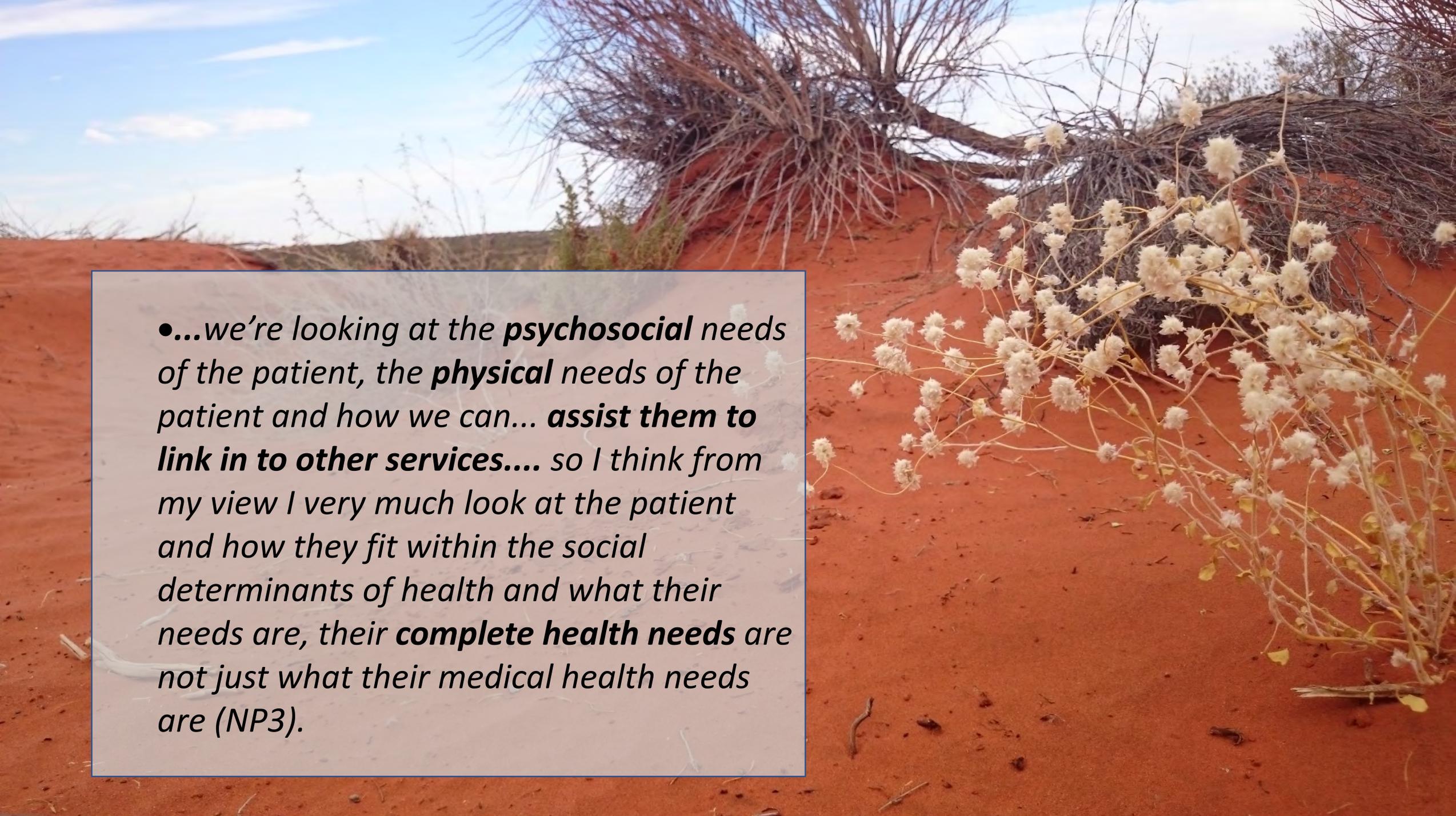**Post-graduate education options**

# Alma Ata definition of PHC

*"**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**."*

*(The Alma Alta Declaration, W.H.O., 1978, p. 6).*

# What does it mean to nurses to 'provide PHC' ?



**The context: Providing PHC in a remote setting**

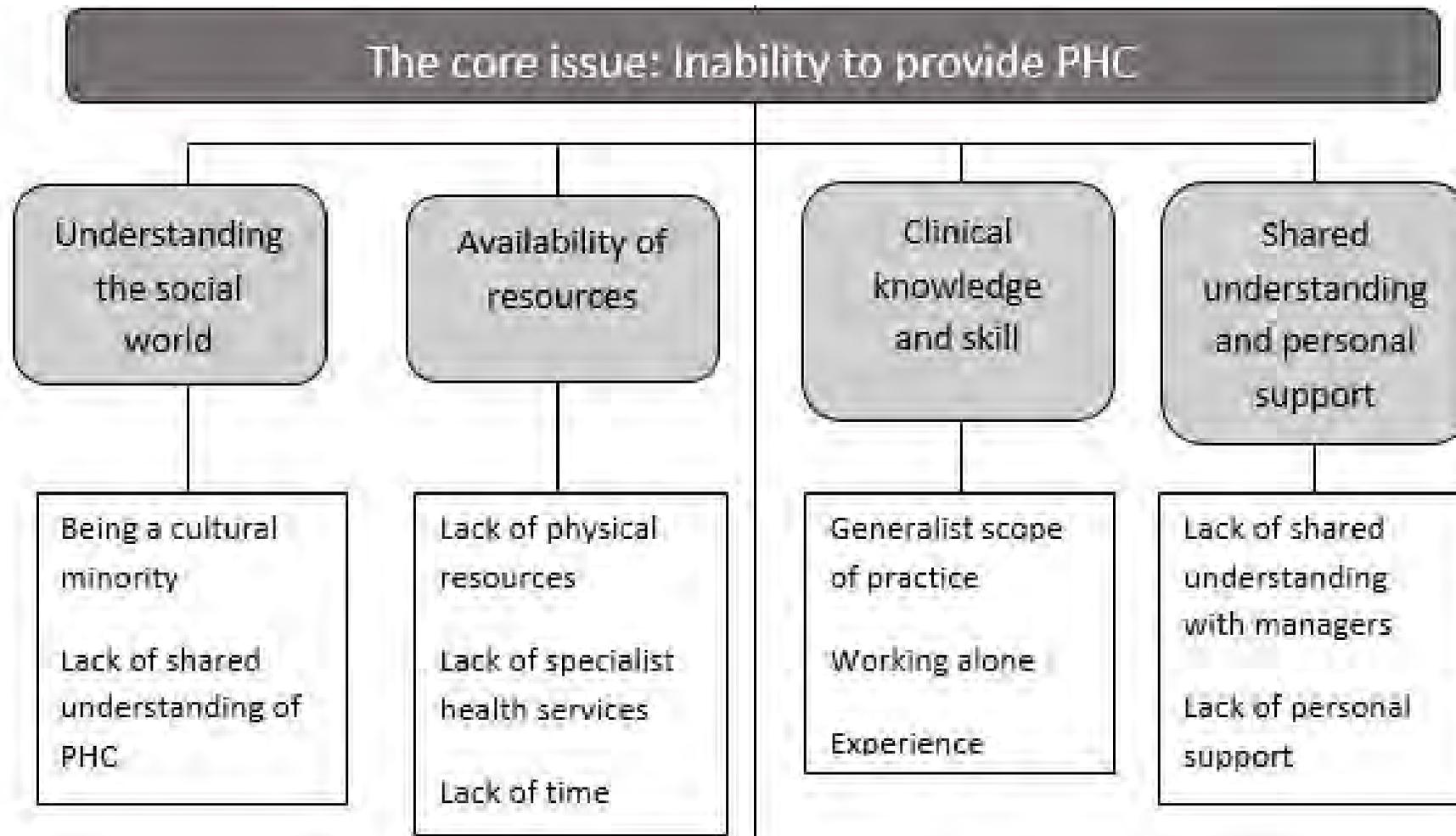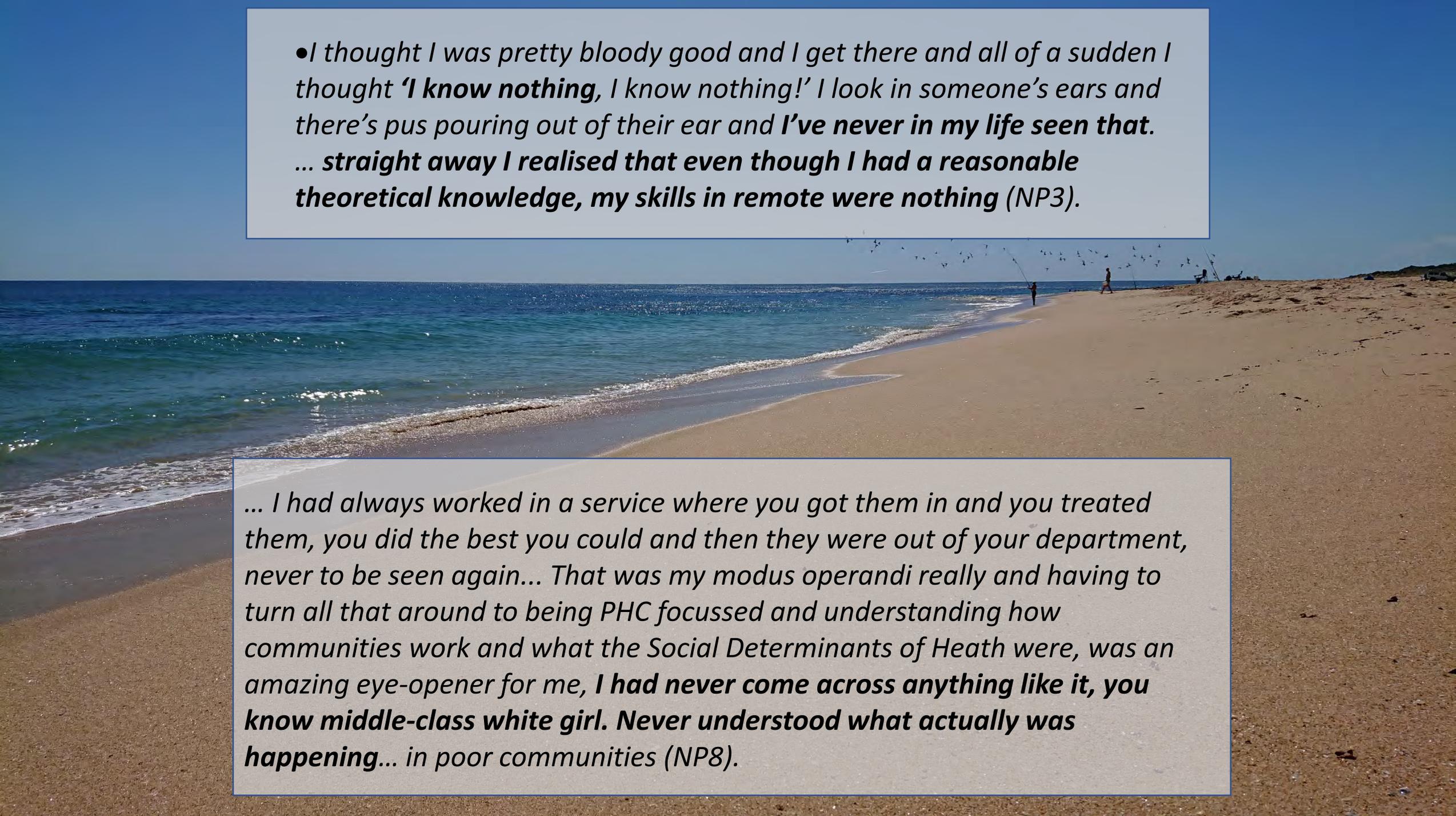| Social perspective | Illness prevention | Equality of care | Personal satisfaction |

**The core issue: Inability to provide PHC**

●*...we're looking at the **psychosocial** needs of the patient, the **physical** needs of the patient and how we can... **assist them to link in to other services....** so I think from my view I very much look at the patient and how they fit within the social determinants of health and what their needs are, their **complete health needs** are not just what their medical health needs are (NP3).*
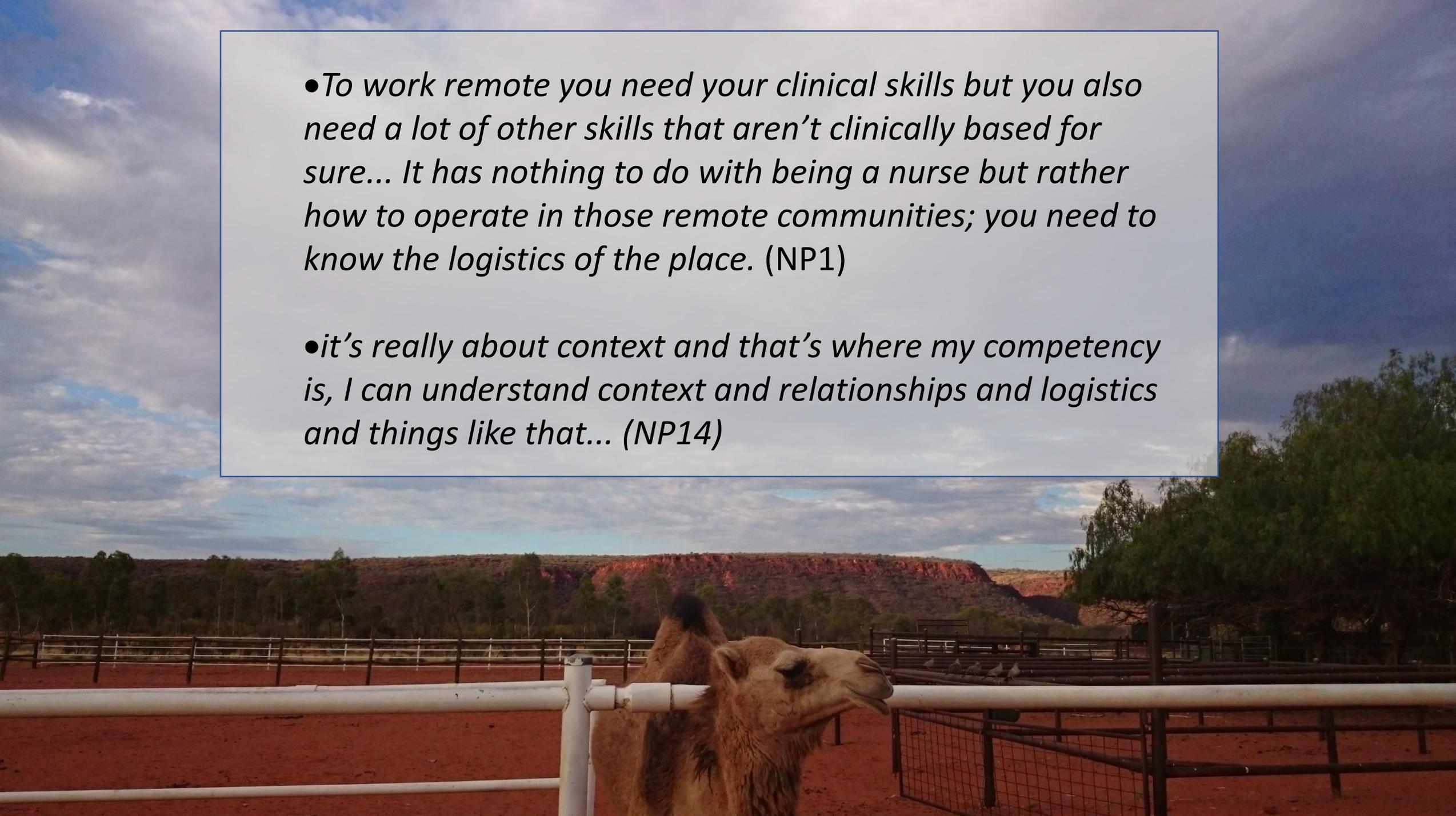
# An overview of the theory

The core issue: Inability to provide PHC

| Understanding the social world | Availability of resources | Clinical knowledge and skill | Shared understanding and personal support |
|---|---|---|---|
| Being a cultural minority<br><br>Lack of shared understanding of PHC | Lack of physical resources<br><br>Lack of specialist health services<br><br>Lack of time | Generalist scope of practice<br><br>Working alone<br><br>Experience | Lack of shared understanding with managers<br><br>Lack of personal support |

•I thought I was pretty bloody good and I get there and all of a sudden I thought **'I know nothing,** I know nothing!' I look in someone's ears and there's pus pouring out of their ear and **I've never in my life seen that**. ... **straight away I realised that even though I had a reasonable theoretical knowledge, my skills in remote were nothing** (NP3).

... I had always worked in a service where you got them in and you treated them, you did the best you could and then they were out of your department, never to be seen again... That was my modus operandi really and having to turn all that around to being PHC focussed and understanding how communities work and what the Social Determinants of Heath were, was an amazing eye-opener for me, **I had never come across anything like it, you know middle-class white girl. Never understood what actually was happening**... in poor communities (NP8).

•*To work remote you need your clinical skills but you also need a lot of other skills that aren't clinically based for sure... It has nothing to do with being a nurse but rather how to operate in those remote communities; you need to know the logistics of the place.* (NP1)

•*it's really about context and that's where my competency is, I can understand context and relationships and logistics and things like that... (NP14)*

# An overview of the theory
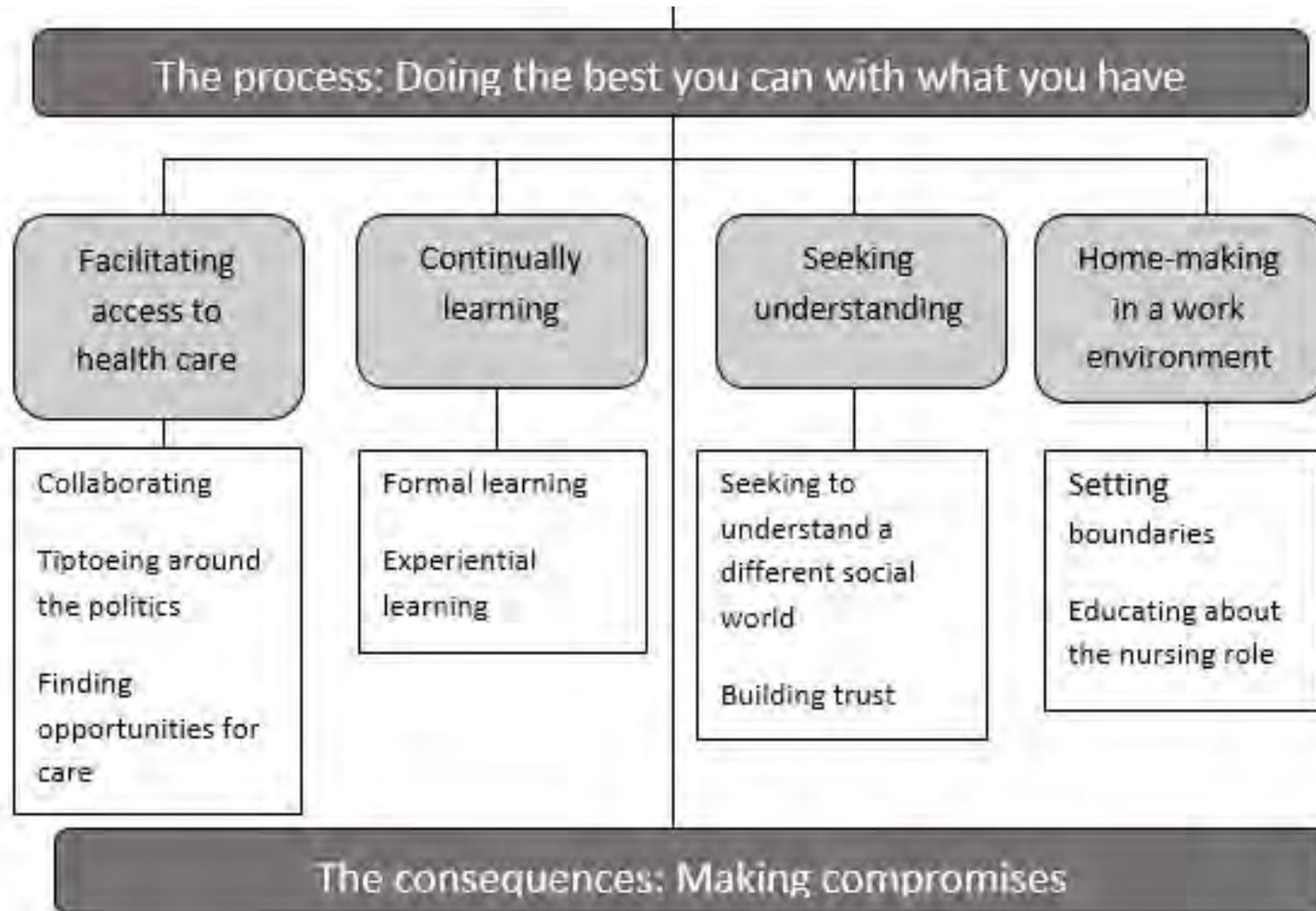
*...you know a little bit about a lot,* so yes you can provide holistic care... but if you are looking at care from life to death across the lifespan in all aspects you can generally provide _**some**_ care but it's going to depend on your background and how you came to be a RAN ... and some people are more inclined to; chronic disease...[or]children...[or]palliative care and so you may provide better care in an aspect of the lifespan and what you do in other aspects is you provide **some** care (NP14)

*... the scope of practice remote area nurses are **expected** to have **is huge** and ... **it's scary** sometimes ... you're faced with something that you have little or no training in basically, but...if you don't do it or **give it a go,** is anyone else going to be able to? or do we try and evac this person at the cost of many thousands of dollars and inconvenience to them? ...the questions are pretty big sometimes (RAN1).*

Legislation and scope of practice

- Nurses Act
- Nurses Rules and Regulations
- Poisons Act and Poisons regulations
- AN&MC Competencies
- Professional Codes of Conduct for Nurses in Australia
- Common Law.
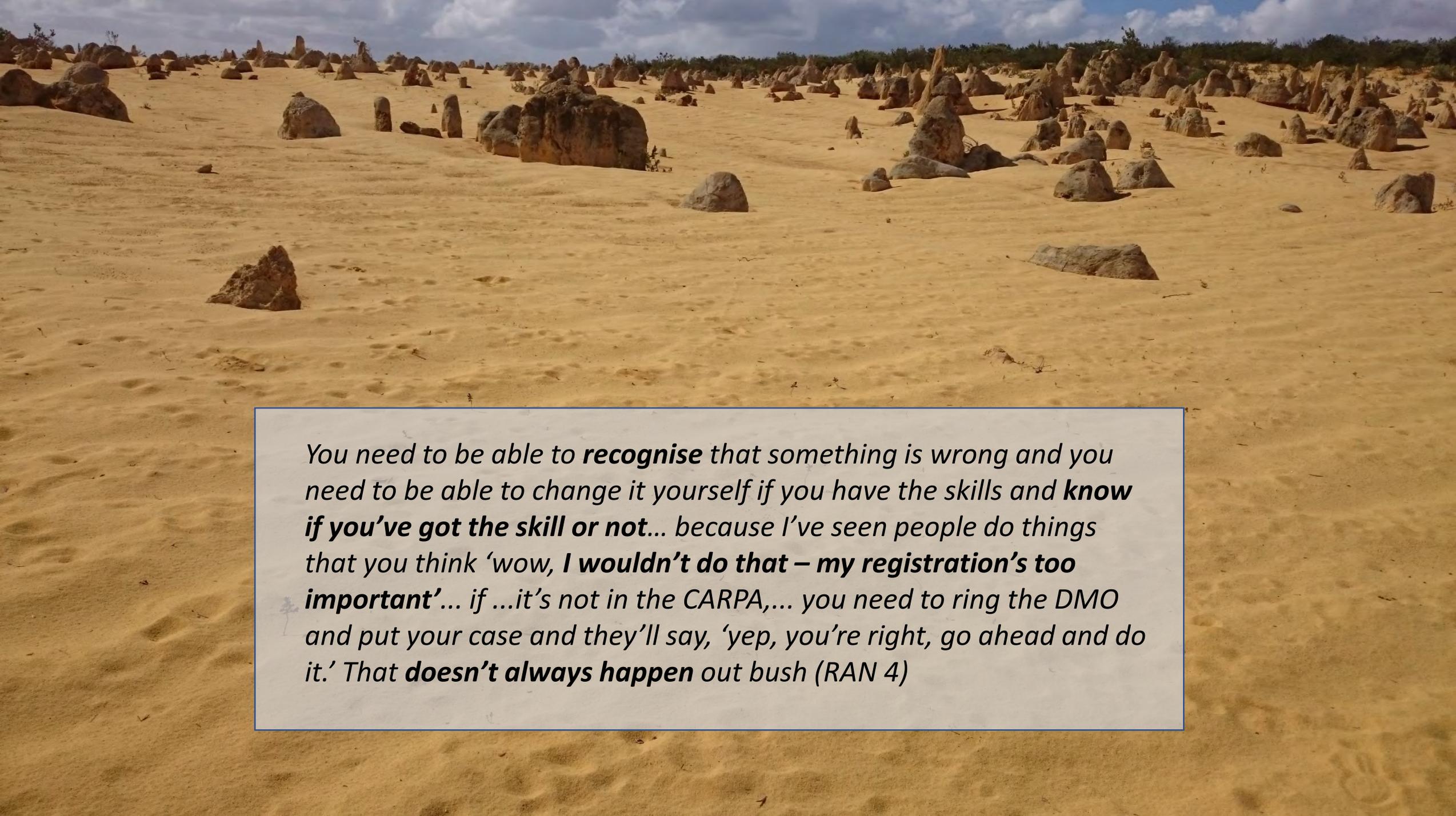
You need to be able to **recognise** that something is wrong and you need to be able to change it yourself if you have the skills and **know if you've got the skill or not**... because I've seen people do things that you think 'wow, **I wouldn't do that – my registration's too important'**... if ...it's not in the CARPA,... you need to ring the DMO and put your case and they'll say, 'yep, you're right, go ahead and do it.' That **doesn't always happen** out bush (RAN 4)

## Nurse Practitioners

- Are nurses who have undergone postgraduate education within a specialty area of practice, have undergone a process of endorsement and have the legal right to prescribe medications, order diagnostic tests and provide referrals to other health practitioners.

- Other attributes that characterise NPs: leadership, capability, evidence-based practice, clinical excellence, education, nursing model of care, non-linear reasoning, community partnership, collaboration, bridging knowledge boundaries….

- **NP scope of practice is defined by the <u>context</u> of practice**

## Second – class doctors?

- Nurse Practitioners are not substitute doctors

- Well defined scope of practice
- Care is as safe as GP care
- Care is acceptable to consumers
- Prescribing and referral practices used to provide a complete episode of care for consumers

- Members of multi-disciplinary team

**RANs are Advanced Practice Registered Nurses**

**NPs are Advanced and Extended  practice nurses**

- Masters' qualification
- Independent assessment of competence
- Clinical leaders – not managers
- Evidence-based practice
- Advocate change at systems level
- At least 5 years experience in remote areas
- Role developed as a response to community need

Discussion questions:

How does this framework relate to the rural context?

Are rural nurses advanced practice nurses?

Is it well defined?

# Decision-making framework summary: Nursing

**Nursing and Midwifery Board**
**Ahpra**

To be read in conjunction with the NMBA *Decision-making framework for nursing and midwifery (2020)*
*Note: the order in which these issues are considered may vary according to context*

## Identify need/benefit

→ Has there been a comprehensive assessment by a registered nurse to establish the person's health and cultural needs?

→ Has there been appropriate consultation with, and consent by, the person receiving care?

→ Is the activity in the best interests of the person receiving care?

## Reflect on scope of practice and nursing practice standards

→ Is this activity within the current, contemporary scope of nursing practice?

→ Have Commonwealth or state/territory legislative requirements (e.g. specific qualification needed) been met?

→ If authorisation by a regulatory authority is needed to perform the activity, does the registered nurse, enrolled nurse or health worker have it or can it be obtained before the activity is performed?

→ Will performance comply with nursing standards for practice, codes and guidelines, as well as best available evidence?

→ If other health professionals should assist, supervise or perform the activity, are they available?

## Consider context of practice, governance and identification of risk

→ Is this activity/practice/delegation supported by the organisation and/or by the educational institution (for students)?

→ Have strategies to avoid or minimise any risk been identified and implemented?

→ If organisational authorisation is needed, does the registered nurse, enrolled nurse or health worker have it or can it be obtained before performing the activity?

→ Is the skill mix, model of care and staffing levels in the organisation adequate for the level of support/supervision needed to safely perform the activity/delegation?

→ If this is a new practice:
  • Is there a system for ongoing education and maintenance of competence in place?
  • Have relevant parties and stakeholders been involved in planning for implementation?

## Select appropriate, competent person to perform activities
(Delegation of care is made by a registered nurse)

→ Have the roles and responsibilities of registered nurses, enrolled nurses and health workers been considered?

→ Does the registered nurse, enrolled nurse or health worker have the necessary educational preparation, experience, capacity, competence and confidence to safely perform the activity either autonomously or with education, support and supervision?

→ Are they competent and confident in performing the activity and accepting the delegation?

→ Do they understand their accountability and reporting responsibilities?

→ Is the required level of education, clinical supervision/support available?

## Yes to all

### Action

→ Perform the activity, **or** delegate to a competent person who then reconfirms consent from the person receiving care, **and**

→ document the decision and the actions, **and**

→ regular review of the delegation providing guidance, support and clinically focused supervision, **and**

→ evaluate outcome.

## No to any

### Action

→ Reconsider decision about whether to implement practice/activity/delegation, **and**

→ consult/seek advice/collaborate, **and/or**

→ refer if needed to complete the action, **and**

→ if appropriate, plan to enable integration/practice changes (including developing/implementing policies, gaining qualifications as needed), **and**

→ document the decisions and the actions, **and**

→ evaluate outcome.

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

# Is this activity in my scope of practice?

1. Have I undertaken a comprehensive assessment that is client focused?
2. Is this activity within the current nursing scope of practice and meets legislation and regulatory requirements?
3. Is this activity supported by my organisation? Are there policies and procedures to support this activity?
4. Am I competent and confident to undertake this activity?

**If 'yes' to all – go ahead**
**If no to any – refer to someone else**

Discussion questions:

# How do you justify your individual scope of practice?

What documentation do you keep?

## Documenting learning

- Maintain a professional portfolio
- Include case reports and reflections
- Document learning situations as they happen on the job
- Keep a record of all workshops/elearning/telehealth simulation activities etc

- Remind your employer of their obligations to support your knowledge and skill development

# Evidence record

Self directed continuing professional development for nurses and midwives

Name: _____

| Date | Source or provider details | Identified learning needs | Action plan | Type of activity | Description of topic (s) covered during activity and outcome | Reflection on activity and specification to practice | No./Title/ Description of evidence provided | CPD hours |
|------|---------------------------|---------------------------|-------------|------------------|------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------|-----------|
| 01/09/2015 | NMBA | RN competency standard

Practises in accordance with legislation affecting nursing practice and health care | 1.2 Clarify responsibility for aspects of care with other members of the health team.

Unsure of my delegation responsibilities in the workplace.

Plan: Access and review decision making framework | Self directed learning.

Review of decision making framework | Reviewed my scope of practice and the scope of practice for my profession.

Understood the principles I need to apply when making decisions about my nursing practice and when and how I decide to delegate activities to other registered nurses and enrolled nurses. | This activity has enabled me to achieve my learning need as per my learning plan.

As a team leader working in intensive care I will be able to apply the Nursing decision making framework when I allocate staff to patient care and delegate tasks as they arise during a shift. | This CPD evidence record | 4 hours |
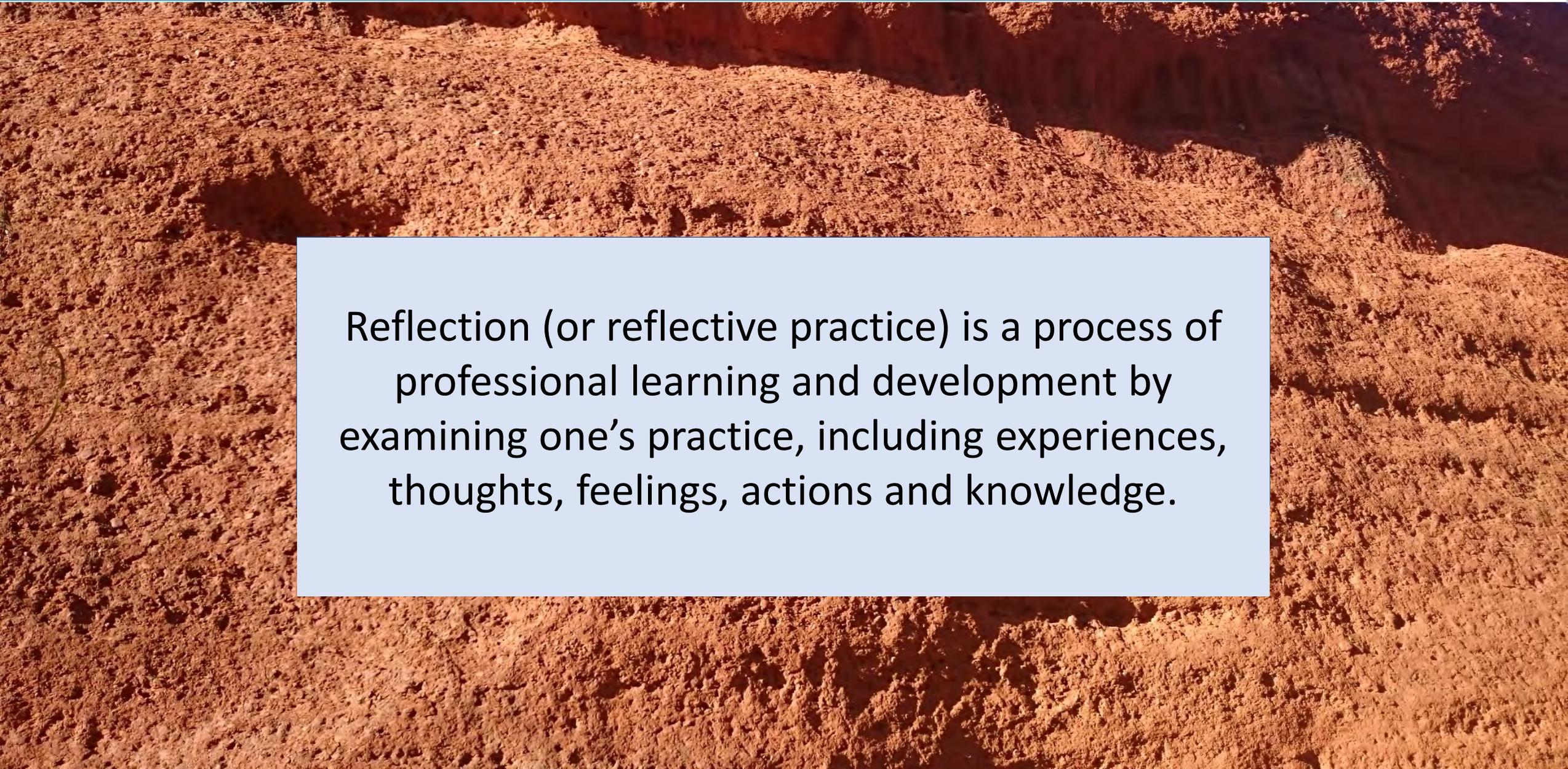
Reflection (or reflective practice) is a process of professional learning and development by examining one's practice, including experiences, thoughts, feelings, actions and knowledge.

Gibbs cycle of reflection (1988)
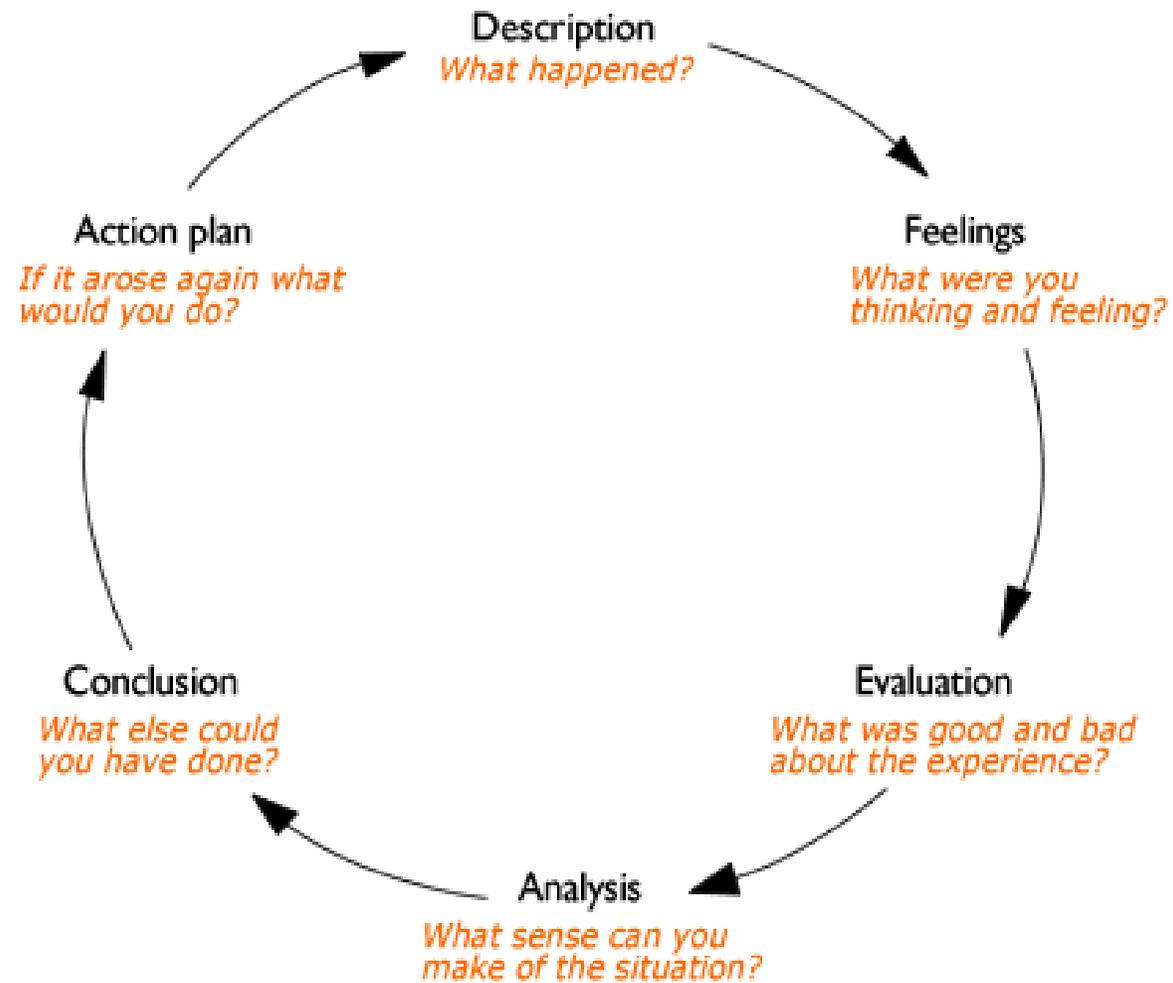
Discussion questions:

Do you have any form of clinical supervision?

What would be any barriers or facilitators to that supervision?

Are you familiar with the NMBA standards for practice?

https://www.nursingmidwiferyboard.gov.au/codes-guidelines-statements/frameworks/framework-for-assessing-national-competency-standards.aspx

*I was absolutely out of my depth, ...I was very lucky to work with very good people and I had a very good manager and a very senior nurse and that helped me and I just came in saying 'look, I don't know anything, teach me what you know' ...that was my main survival mechanism ... using your colleagues as a sounding board and having that experience around... (RAN2)*

Discussion questions:

Have you considered post-graduate study?

What knowledge do you think you need?

# Options for post-graduate study at ECU

Graduate certificates/diplomas in mental health, paediatrics and aged care

Master of Midwifery practice

Masters of clinical Nursing

Masters of Nurse Education

Masters of Nursing (Nurse Practitioner)

Masters of Nursing (Research)

Integrated or direct entry PhD

## Acknowledgements

## References

Gibbs, G. (1988). *Learning by doing: A guide to teaching and learning methods.* . Further Education Unit, Oxford Brooks University.

McCullough, K., Whitehead, L., Bayes, S., Williams, A., & Cope, V. (2020). The delivery of Primary Health Care in remote communities: A Grounded Theory study of the perspective of nurses. *International Journal of Nursing Studies*, *102*, 103474. https://doi.org/https://doi.org/10.1016/j.ijnurstu.2019.103474

Nursing and Midwifery Board of Australia. (2016). *Registered nurse standards for practice*. https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/registered-nurse-standards-for-practice.aspx

Nursing and Midwifery Board of Australia. (2020). *Decision-making framework summary - nursing*. https://www.nursingmidwiferyboard.gov.au/codes-guidelines-statements/frameworks.aspx