ACSA Submission

NMBA draft Enrolled Nurse Standards for Practice

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About the ACSA Federation

Aged and Community Services Australia (ACSA) is the leading national peak body for aged and community care providers and represents church, charitable and community-based organisations providing housing, residential and community care and home support services to older people, younger people with a disability and their carers.

About 700,000 older Australians depend on care and support provided by ACSA members in the metropolitan, regional, rural and remote regions across Australia.

ACSA operates within a federated structure of state associations which are independently incorporated and to whom mission-based providers belong as members. The state associations are members of the ACSA national body.

The ACSA Federation is made up of the following members:

- Aged and Community Services Association of NSW & ACT (ACS NSW&ACT)
- Aged and Community Services SA & NT (ACS SA&NT)
- Aged and Community Services Tasmania (ACS Tas)
- Aged and Community Services Western Australia (ACS WA)
- Aged and Community Services Australia Victoria (ACSA Vic)
- Aged and Community Services Australia Queensland (ACSA Qld)
SUMMARY

ACSA welcomes the opportunity to comment on the draft revised Enrolled Nurse Standards for Practice. Close to a third (16,915) of the 58,967 ENs practicing in Australia work in aged care settings.¹

We commend the move to incorporate roles and functions – including the role of ENs in supervising AINs (however titled), using health technology and promoting independence – that are more reflective of contemporary practice for Enrolled Nurses.

However, there are some issues in the proposed standards which we believe need to be addressed. Under the draft standards, we are concerned that:

- Enrolled Nurses may be restricted in their employment in aged and community services, particularly in services where there is no or limited access to Registered Nurses.
- Enrolled Nurse working in aged and community care services may be ineligible to register, as they may be deemed to be working outside their scope of practice.
- The new standards are “acute care” focussed and cannot be easily applied to other practice settings.

DESCRIPTION OF AN ENROLLED NURSE

The proposed description for the Enrolled Nurse does not match the knowledge, skills and attributes of graduates with a diploma, as defined by the Australian Qualifications Framework (AQF). Enrolled Nurses holding this level of qualification should be more capable of working in an autonomous role. It is disappointing to see this new description requiring more support and guidance from a Registered Nurse.

The description states “…the need for an EN to have a named and accessible RN at all times and in all contexts of care for support and guidance is critical to patient safety.” This is problematic in aged and community care services where some facilities and services do not have 24 hour RN coverage.

In addition, the use of the term “patients” is not appropriate in aged and community care services where “residents”, “consumers” or “clients” would be more appropriate.

GLOSSARY OF TERMS

The definition of supervision is not reflective of emerging service models in aged and community care services. In the community sector, the supervisor may not work in the same facility or organisation as services may be contracted or brokered to external agencies.

DOMAINS AND STANDARDS

Responses are aligned to the questions in the online survey for each Domain and Standard.

Domain 1

Professional and Collaborative Practice

- To what extent can it be applied to any EN practice setting?
  To a very great extent
- To what extent does it reflect contemporary EN practice
  To a very great extent
- To what extent is it useful for educators, regulators and employers?
  To a very great extent

Domain 2

Provision of Care

- To what extent can it be applied to any EN practice setting?
  To a great extent
- To what extent does it reflect contemporary EN practice
  To a great extent
- To what extent is it useful for educators, regulators and employers?
  To a great extent

Comments

The overall description of this domain is highly applicable to aged and community care services where an EN may work as a team leader, in charge of resident and community groups or employed as a hostel supervisor. These ENs are required to work autonomously at a level commensurate with their educational level. It is unfortunate however, that the standards within this domain (4-7) are intrinsically linked to the RN.

Domain 3

Reflective and Analytical Practice

- To what extent can it be applied to any EN practice setting?
  To a very great extent
- To what extent does it reflect contemporary EN practice
  To a very great extent
• To what extent is it useful for educators, regulators and employers?
  
  To a very great extent

Standard 1

Functions in accordance with the law, policies and procedures affecting enrolled nurse practice

• To what extent can it be applied to any EN practice setting?
  
  To a very great extent

• To what extent does it reflect contemporary EN practice
  
  To a very great extent

• To what extent is it useful for educators, regulators and employers?
  
  To a very great extent

Comments

This standard is highly applicable in aged and community care services where ENs work with a high level of autonomy.

Standard 2

Practises nursing in a way that ensures the rights of the people are upheld

• To what extent can it be applied to any EN practice setting?
  
  To a very great extent

• To what extent does it reflect contemporary EN practice
  
  To a very great extent

• To what extent is it useful for educators, regulators and employers?
  
  To a very great extent

Comments

The focus on person centred care is commended.

Standard 3

Accepts accountability and responsibility for own actions

• To what extent can it be applied to any EN practice setting?
  
  Not at all
• To what extent does it reflect contemporary EN practice  
  *To a small extent*

• To what extent is it useful for educators, regulators and employers?  
  *Not at all*

**Comments**

Indicator 3.8 is commended, as it is highly reflective of the role of an EN in Aged and Community Care Services.

Indicators 3.3, 3.4, 3.6 and 3.7 require constant access to an RN which is not practical in aged and community services. Some of the indicators do not reflect the knowledge, skills and attributes of a Diploma Graduate.

**Standard 4**

**Synthesises information from a range of sources in order to plan appropriate care**

• To what extent can it be applied to any EN practice setting?  
  *To a very great extent*

• To what extent does it reflect contemporary EN practice  
  *To a very great extent*

• To what extent is it useful for educators, regulators and employers?  
  *To a very great extent*

**Comments**

This standard is highly reflective of the EN role in Community Care, incorporating the use of technology is commended.

**Standard 5**

**Collaborates with the registered nurse and the healthcare team when developing plans of care**

• To what extent can it be applied to any EN practice setting?  
  *Not at all*

• To what extent does it reflect contemporary EN practice  
  *To a small extent*

• To what extent is it useful for educators, regulators and employers?  
  *Not at all*
Comments
The Standard is reliant on an EN-RN relationship.

Standard 6
Provides skilled and timely care to people whilst promoting their independence and involvement in care decision-making

- To what extent can it be applied to any EN practice setting?
  To a very great extent
- To what extent does it reflect contemporary EN practice
  To a very great extent
- To what extent is it useful for educators, regulators and employers?
  To a very great extent

Comments
The focus on person-centred care is commended as it reflects existing and emerging care models in aged and community care services.

Standard 7
Utilises documentation to inform and report care

- To what extent can it be applied to any EN practice setting?
  To a very great extent
- To what extent does it reflect contemporary EN practice
  To a very great extent
- To what extent is it useful for educators, regulators and employers?
  To a very great extent

Standard 8
Provides nursing care that is informed by evidence

- To what extent can it be applied to any EN practice setting?
  To a small extent
- To what extent does it reflect contemporary EN practice
To a small extent

- To what extent is it useful for educators, regulators and employers?
  Not at all

Comments
Indicator 1 is reliant on an EN-RN relationship.

Standard 9
Practises within safety and quality assurance guidelines

- To what extent can it be applied to any EN practice setting?
  To a very great extent
- To what extent does it reflect contemporary EN practice
  To a very great extent
- To what extent is it useful for educators, regulators and employers?
  To a very great extent

Standard 10
Engages in ongoing development of self as a professional

- To what extent can it be applied to any EN practice setting?
  To a very great extent
- To what extent does it reflect contemporary EN practice
  To a very great extent
- To what extent is it useful for educators, regulators and employers?
  To a very great extent

Comments
Indicator 10.4 is commended as ENs frequently take on a mentoring and leadership roles in aged and community care services.
Indicator 10.6 is extraordinarily prescriptive and open to subjective interpretation.