

October 2002

NATIONAL COMPETENCY STANDARDS FOR THE ENROLLED NURSE

Introduction

Description of Enrolled Nurse National Competency Standards Assessing Competence Glossary of Terms

Introduction

The Australian Nursing and Midwifery Council (ANMC) is a peak national nursing and midwifery organisation established in 1992 with the purpose of developing a national approach to nursing and midwifery regulation. The ANMC works in conjunction with the state and territory nursing and midwifery regulatory authorities (NMRAs) to produce national standards which are an integral component of the regulatory framework to assist nurses and midwives to deliver safe and competent care.

The standards include the national competency standards for enrolled nurses which were first adopted by the ANMC in the early 1990s. These have been reviewed and revised regularly since then. Other standards developed by the ANMC for implementation by the NMRAs include the competency standards for registered nurses, midwives and nurse practitioners, codes of professional conduct and ethics, and a range of position statements and guidelines. The full list of standards, position papers and guidelines produced by the ANMC can be viewed on the website.

The national competency standards for the enrolled nurse are scheduled for review in 2007. This review will be undertaken by a team of expert nursing consultants and will include extensive consultation with nurses around Australia. The purpose underpinning the review will be to contemporise the standards to reflect the changing role of the enrolled nurse within the health environment of today. Whilst ANMC anticipates the resulting standards will be different in some areas from the existing competency standards, they will remain broad and principle based so that they are sufficiently dynamic for practising nurses and the NMRAs to use as a benchmark to assess competence to practice in a range of settings.

What are the standards used for?

The national competency standards for the enrolled nurse are the core competency standards by which your performance may be assessed to retain your license to practice as an enrolled nurse in Australia.

As an enrolled nurse, these core competency standards provide you with the framework for assessing your competence. They may also be used by your state/territory NMRA to assess competence as part of the annual renewal of license process, to assess nurses educated overseas seeking to work in Australia, and to assess nurses returning to work after breaks in service. They are also used to assess nurses involved in professional conduct matters. In addition, they may also be used by the NMRAs to assess nurses involved in professional conduct matters and to communicate to consumers the standards that can be expected from nurses.

Universities and the Vocational Educational Training sector also use the standards when developing nursing curricula, and to assess student and new graduate registered and enrolled nurse performance.

These are YOUR standards — we believe you will find them easy to understand and user friendly. Included also are the principles of assessment which will assist you in understanding how these standards may be used to assess performance.

Description of the enrolled nurse on entry to practice

The enrolled nurse is an associate to the registered nurse who demonstrates competence in the provision of patient-centred care as specifi ed by the registering authority's licence to practise, educational preparation and context of care.

Core as opposed to minimum enrolled nursing practice requires the enrolled nurse to work under the direction and supervision of the registered nurse as stipulated by the relevant nurse registering authority. At all times, the enrolled nurse retains responsibility for his/her actions and remains accountable in providing delegated nursing care.

Core enrolled nurse responsibilities in the provision of patient-centred nursing care include recognition of normal and abnormal in assessment, intervention and evaluation of individual health and functional status. The enrolled nurse monitors the impact of nursing care and maintains ongoing communication with the registered nurse regarding the health and functional status of individuals. Core enrolled nurse responsibilities also include providing support and comfort, assisting with activities of daily living to achieve an optimal level of independence, and providing for emotional needs of individuals. Where state law and organisational policy allows, enrolled nurses may administer prescribed medicines or maintain intravenous fluids, in accordance with their educational preparation.

Enrolled nurses are required to be information technology literate with specific skills in the application of health care technology. Enrolled nurses demonstrate critical and refl ective thinking skills in contributing to decision making which includes reporting changes in health and functional status and individual responses to health care interventions. Enrolled nurses work as a part of the health care team to advocate for and facilitate the involvement of individuals, their families and significant others in planning and evaluating care and progress toward health outcomes.

These responsibilities are illustrative of the types of core activities that an enrolled nurse would be expected to undertake on entry to practice.

All enrolled nurses have a responsibility for ongoing selfdevelopment to maintain their knowledge base to carry out their role.

NURSING & COUNCIL

Domain: Professional and Ethical Practice

Competency Unit 1

Functions in accordance with legislation, policies and procedures affecting enrolled nursing practice

Competency Element 1.1

Demonstrates knowledge of legislation and common law pertinent to enrolled nursing practice.

- Identifies policies, acts and legislation in which the enrolled nurse is named either by inclusion or exclusion
- Describes the common law requirements of enrolled nurse practice
- Able to discuss the implications of acts and legislation governing the practice of other health professionals with whom enrolled nurses work
- Discusses the legal issues relevant to nursing practice
- Acts in accordance with enrolled nurse
 responsibilities under legislation
- Reports to the appropriate person when actions or decisions by others are believed to be not in the best interests of individuals or groups

Competency Element 1.2

Demonstrates knowledge of organisational policies and procedures pertinent to enrolled nursing practice.

- Identifies policies and procedural guidelines
 impacting on enrolled nursing practice
- Provides nursing care according to organisational policies and guidelines
- Identifies organisational policies and procedures pertinent to other health professionals with whom enrolled nurses work

Competency Element 1.3

Fulfils the duty of care in the course of enrolled nursingpractice.

- Acts in accordance with own competency level and recognised standards of enrolled nursing practice
- Identifies and clarifies enrolled nurse responsibility for aspects of care in consultation with the registered nurse and other members of the health care team
- Performs nursing interventions in accordance with organisational policy
- Performs nursing interventions according to the agreed plan of care

Competency Element 1.4

Acts to ensure safe outcomes for individuals and groups by recognising and reporting the potential for harm

- Identifies situations in the provision of nursing care where there is potential for harm and takes appropriate action to minimise or prevent harm to self and others
- Seeks consent of individuals and groups before providing nursing care
- When incidents of unsafe practice occur, the enrolled nurse reports immediately to the registered nurse or other relevant person and where appropriate explores ways to prevent reoccurrence

Competency Element 1.5

Reports practices that may breach legislation, policies and procedures relating to nursing practice to the appropriate person.

- Identifies and reports breaches of law, policies and procedures related to nursing practice to the individual concerned
- Identifies and reports breaches of law, policies and procedures related to nursing practice to responsible registered nurse, line manager, nursing authorities or other appropriate authority

Enrolled Nurse Competency Standards with Interpretive Cues (continued)

Competency Unit 2

Conducts nursing practice in a way that can be ethically justified

Competency Element 2.1

Acts in accordance with the nursing professions's codes

 Discusses the application of the nursing profession's codes to own practice

Competency Element 2.2

Demonstrates an understanding of the implications of these codes for enrolled nursing practice

- Demonstrates acceptance of individuals and groups to whom care is provided regardless of race, culture, religion, age, gender, sexual preference, physical or mental state
- Maintains an effective process of care when confronted with differing values and beliefs

Competency Unit 3

Conducts nursing practice in a way that respects the rights of individuals and groups

Competency Element 3.1

Practises in accordance with organisational policies relevant to individual/group rights in the health care context.

- Confidentiality of health records and interactions with others in the health care setting is maintained
- Discussions concerning individuals/groups are restricted to the health care setting, learning situations and/or relevant members of the health care team

Competency Element 3.2

Demonstrates an understanding of the rights of individuals/groups in the health care setting.

- Acknowledges and accommodates preferences of individuals/groups appropriately in the provision of nursing care
- Promotes independence of individuals/groups within the health care setting by involving individuals/groups as active participant(s) in care
- Provides nursing care in a way that is sensitive to the needs and rights of individuals/groups

Competency Element 3.3

Liaises with others to ensure that the rights of individuals/ groups are maintained.

- Liaises with the registered nurse when uncertain about therights of individuals/groups within the health care setting orwhen rights are overlooked or compromised
- Negotiates with the registered nurse changes to care when individuals seek to change or refuse prescribed care
- Includes individuals/groups in consultation with registered nurse to resolve conflict

Competency Element 3.4

Demonstrates respect for the values, customs, spiritual beliefs and practices of individuals and groups.

- Assists individuals/groups within the health care setting to maintain spiritual beliefs and practices
- Responds in a morally appropriate way by not imposing own values and attitudes when confronted with differing values, customs, spiritual beliefs and practices

Competency Element 3.5

Liaises with others to ensure that the spiritual, emotional and cultural needs of individuals/groups are met.

 Seeks assistance from other members of the health team to provide care and resources which are sensitive to the needs of individuals/ groups

Competency Element 3.6

Contributes to the provision of relevant health care information to individuals and groups.

> Consults with the registered nurse and other members of the health care team to facilitate the provision of accurate information to, protect rights of, and enable informed decisions by, individuals and groups

Competency Unit 4

Accepts accountability and responsibility for own actions within enrolled nursing practice

Competency Element 4.1

Recognises own level of competence

- Acts in accordance with enrolled nurse educational preparation
- Recognises responsibility for ensuring that nursing care provided to individuals/groups is within own level of competence
- Consults with the responsible registered nurse to ensure that tasks and responsibilities delegated by the registered nurse are commensurate with own level of competence

Competency Element 4.2

Recognises the differences in accountability and responsibility between registered nurses, enrolled nurses and unregulated care workers

- Recognises differences in accountability and responsibility of the registered nurse and enrolled nurse in the provision of nursing care
- Clarifies enrolled nurse role and responsibilities in the context of healthcare settings
- Demonstrates awareness that other members of the health team have different responsibilities and levels of accountability for practice

Competency Element 4.3

Differentiates the responsibility and accountability of the registered nurse and enrolled nurse in the delegation of nursing care

- Recognises the registered nurse's responsibility and accountability for delegation of nursing care
- Accepts responsibility and accountability for delegated care within own level of competence

Enrolled Nurse Competency Standards with Interpretive Cues (continued)

Domain: Critical Thinking and Analysis

Competency Unit 5

Demonstrates critical thinking in the conduct of enrolled nursing practice

Competency Element 5.1

Uses nursing standards to assess own performance.

- Undertakes regular self-evaluation of nursing practice
- Reflects on the consequences of own practice for others
- Recognises the importance of evidence based
 practice
- Practices in accordance with contemporary health care developments as guided by the registered nurse
- Recognises the registered nurse as a point of reference to assist enrolled nurse decision-making

Competency Element 5.2

Recognises the need for and participates in continuing self/professional development

- Seeks additional knowledge/information when presented with unfamiliar situations
- Identifies learning needs through consideration of practice in consultation with colleagues
- Participates in ongoing educational development

Competency Element 5.3

Recognises the need for care of self

- Identifies and uses networks and resources that facilitate personal wellbeing
- Promotes a positive self-image

Domain: Management of Care

Competency Unit 6

Contributes to the formulation of care plans in collaboration with the registered nurse, individuals and groups

Competency Element 6.1

Accurately collects and reports data regarding the health and functional status of individuals and groups

- Accurately collects information on the health and functional status of individuals and groups
- Uses health care technology appropriately
- Uses a range of data gathering techniques including, observation, interview, physical examination and measurement
- Documents information regarding the health and functional status of individuals accurately and clearly according to organisational guidelines
- Reviews information about the health and functional status of individuals and groups in the context of previous information
- Reports changes in health and functional status to the registered nurse or appropriate members of the health team

Competency Element 6.2

Participates with the registered nurse and individuals and groups in identifying expected health care outcomes.

 Contributes to the development of care plans in conjunction with the registered nurse and individuals/groups

Competency Element 6.3

Participates with the registered nurse in evaluation of progress of individuals and groups toward expected outcomes and reformulation of care plans.

- Collects relevant data to evaluate the progress of individuals/groups toward expected outcomes as guided by the registered nurse
- Contributes to the review of care plans in conjunction with the registered nurse and individuals/groups

Competency Unit 7

Manages nursing care of individuals and groups within the scope of enrolled nursing practice

Competency Element 7.1

Implements planned nursing care to achieve identified outcomes

- Implements planned nursing care as outlined in care plans
- Provides nursing care to address immediate health care needs and progress toward expected outcomes
- Promotes independence whilst assisting with activities of daily living
- Clarifies roles and responsibilities for planned care with other members of the health care team

Competency Element 7.2

Recognises and reports changes in the health and functional status of individuals/groups to the registered nurse.

- Observes for changes in the health and functional status of individuals/groups in the course of nursing practice
- Reports changes in the health and functional status of individuals/groups to the registered nurse in a timely manner
- Collects, documents and reports appropriate data to the registered nurse regarding the health and functional status of individuals/groups
- Provides information to support observations of change in health and functional status of individuals and groups
- Documents and reports accurate information regarding changes in health and functional status of individuals/groups
- Participates in team meetings and case conferences

Competency Element 7.3

Ensures communication, reporting and documentation are timely and accurate.

- Communicates information to individuals/ groups accurately and in accordance with organisational policies regarding disclosure of information
- Clarifies written orders for nursing care with the registered nurse when unclear
- Documents nursing care in accordance with organisational policy
- Documents nursing care in a comprehensive, logical, legible, accurate, clear and concise manner, using accepted abbreviations and terminologies when appropriate
- Demonstrates awareness of legal requirements governing written documentation and consults with the registered nurse to ensure these requirements are met

Competency Element 7.4

Organises workload to facilitate planned nursing care for individuals and groups.

- Prioritises nursing care of individuals and groups appropriately
- Manages own workload in accordance with the nursing care plan
- Works with other members of the health team to carry out planned nursing care for individuals and groups
- Prioritises the delivery of nursing care to individuals/groups as guided by the registered nurse

Domain: Enabling

Competency Unit 8

Contributes to the promotion of safety, security and personal integrity of individuals and groups within the scope of enrolled nursing practice

Competency Element 8.1

Acts appropriately to enhance the safety of individuals and groups at all times.

- Identifies potential risks/hazards to individuals/ groups associated with health care environments
- Functions within own level of competence to promote the safety of self and others in all aspects of nursing practice
- Adheres to no lift/manual handling policies and procedures to optimise the safety of self and others
- Anticipates the safety needs of individuals/groups and takes measures to promote safety and prevent harm
- Adheres to standards and procedures related to restraint, infection control and the administration of therapeutic substances
- Applies relevant principles to ensure the safe administration of therapeutic substances

Competency Element 8.2

Establishes maintains and concludes effective interpersonal communication.

- · Forms therapeutic relationships with clients
- Recognises when health and functional status affects the ability of individuals and groups to communicate and modifies actions accordingly
- Uses appropriate resources to communicate with individuals/groups
- Explains nursing care to individuals and groups
- Introduces self to individuals and groups and explains enrolled nurse role in the provision of health care
- Communicates appropriately with families and significant others within own level of competence

Competency Element 8.3

Applies appropriate strategies to promote the self-esteem of individuals and groups.

- Facilitates independence of individuals/groups in the provision of nursing care
- Encourages and supports participation by individuals/groups in self care
- Consults with the individual/group to ascertain the degree of assistance required

Competency Element 8.4

Acts appropriately to maintain the dignity and integrity of individuals and groups.

- Provides nursing care to individuals an dgroups in a manner respectful of privacy and integrity
 - Respect the cultural and social context of individuals / groups when providing nursing care
- I NURSING & Y COUNCIL

Competency Unit 9

Provides support and care to individuals and groups within the scope of enrolled nursing practice

Competency Element 9.1

Provides for the comfort needs of individuals and groups experiencing illness or dependence.

 Consults with individuals/groups to determine comfort needs and preferences for nursing interventions

Competency Element 9.2

Collaborates with the registered nurse and members of the health care team in the provision of nursing care to individuals and groups experiencing illness or dependence.

> Consults with the registered nurse and other members of the health care team to provide for the comfort of individuals/groups when the nursing care required is outside of own level of competence

Competency Element 9.3

Contributes to the health education of individuals or groups to maintain and promote health.

- Provides accurate and appropriate education to individuals/groups related to the maintenance and promotion of health in consultation with the registered nurse
- Provides education to individuals/groups as appropriate

Competency Element 9.4

Communicates with individuals and groups to enable therapeutic outcomes.

- Explains nursing care to individuals/groups to whom care is provided
- Determines understanding by seeking feedback on information given

Competency Unit 10

Collaborates with members of the health care team to achieve effective health care outcomes

Competency Element 10.1

Demonstrates an understanding of the role of the enrolled nurse as a member of the health care team.

 Provides care to individuals/groups as part of the health care team, under the supervision and direction of the registered nurse

Competency Element 10.2

Demonstrates an understanding of the role of members of the health care team in achieving health care outcomes.

- Supports the therapeutic activities of other
 health care team members in the provision of
 health care
- Promotes positive working relationships with members of the health care team

Competency Element 10.3

Establishes and maintains collaborative relationships with members of the health care team.

 Provides assistance to other members of the health care team in provision of care to individuals/groups

Competency Element 10.4

Contributes to decision-making by members of the health care team.

 Provides other members of the health care team with accurate and relevant information to assist in decisionmaking and provision of care to individuals/groups

Assessing Competence

Whilst it is important that all nurses are aware of the competencies to practice, and are able to assess their own performance using these, there are also occasions where individual nurses may be assessed by others to ensure that they are competent to practice. The competencies may also be used as the standards by which nurses are assessed when their conduct or professional practice is in question.

To assist assessors, the ANMC has developed a document entitled 'Principles for the Assessment of National Competency Standards for Nurses and Midwives'. The full document, which includes a detailed description of the assessment model used, is available from the ANMC. It is recommended that anyone undertaking the role of assessor should familiarise themselves with this document prior to undertaking the assessment. The actual principles for assessment are reproduced here to assist nurses undergoing assessment to understand the basis upon which the assessment of their performance will be made.

Principles for the Assessment of National Competency Standards for Nurses

Principle 1

Principle of Accountability

- Assessors are accountable to the public and to the profession to undertake a valid and reliable assessment of candidates.
- Assessors are accountable for assessing candidates as competent against the ANMC National Competency Standards and as suitable for licensure by a state or territory regulatory authority when required.
- Assessors will ensure that candidates are assessed in the practice setting.
- Candidates who have not demonstrated competence in the practice setting should not be recommended to a regulatory authority for enrolment.

Principle of Perform Clinical com therefore the

PROFESSIONAL PRAC

Principle 2

Principle of Performance Based Assessment

- Clinical competence is performance based and therefore the assessment must be carried out by assessors in the context of the candidate/person interaction.
 - Assessment of practice is considered a valid model of assessment of core competencies for the licensing of nurses and midwives. This mode is useful as a multi-purpose procedure as it provides a global assessment of the candidate's knowledge, skills, values, and attitudes.
- Regulatory authorities have a responsibility to ensure that the assessment model focuses on knowledge, and performance that is closely related to the demands of the practice situation.

Principle 3

Principle of Contextual Relevance

- The regulatory authorities recognise that the nature of professional nursing and midwifery practice is such that to attempt to evaluate competence in a single and narrowly prescribed procedural assessment model fails to recognise the multifaceted nature of nursing and midwifery practice and the comprehensive knowledge required.
- The context in which assessment of competence occurs is considered to be an essential component in the competency standards assessment framework.
- The practice setting involves many contextual factors including the environment, the relationship with the persons receiving care and the behaviour of others in the practice setting that cause the candidate to act in a particular way. These factors should be taken into account during the assessment process.

AUSTRALIAN N MIDWIFERY (

PROFESSIONAL PRAC

Principle 4

Principle of Evidence Based Assessment

- Evidence based assessment utilises a model of evidence based professional judgement.
- The process of assessing competence requires an accumulation of data, or evidence about performance over a period of time and in a range of situations.
- The judgement about whether a candidate has reached a satisfactory standard of performance is based on the interaction between the assessor's comprehensive knowledge of the expected standards of performance and the interpretation of the assessment data, including the context within which it is collected.
- Assessors can obtain data or provide evidence of performance through:
 - \circ self-assessment by the candidate
 - observation by the assessor of the candidate
 - interviews by the assessor with the others in the setting, for example peers, persons receiving nursing or midwifery care, supervisors
 - analysis by the assessor of all relevant documentation.
- Assessors work with and observe the candidate being assessed in the practice context. Pieces of evidence about the candidate's practice are gathered by the assessor and these pieces of evidence are put together and inferences are drawn about competence.
- Inferences should always be checked to validate the assessment judgement.
- Assessors use professional judgement, which involves the drawing of inferences and the use of tacit knowledge to form a conclusion about the competence of a particular candidate.
- For tacit knowledge to be used confi dently as a basis for assessment it is essential that assessors have a full understanding of the expected standard of performance.

Principle 5

Principle of Validity and Reliability in Assessment

- Validity in the assessment process is the extent to which assessment meets the intended outcomes. Reliability in the assessment process refers to the consistency or accuracy of the outcomes of the assessment process.
- The assessors' knowledge and skill are the most crucial elements involved in enhancing the validity and reliability of the assessment process.
- Evidence (pieces of information about the performance of the candidate being assessed) is gathered by the assessor. Assessors therefore can provide evidence to justify their assessment judgements.
- A variety of sources of evidence about the performance of a candidate enhances the rigour of the assessment process and gives validity and reliability to the judgement. Sources of evidence may include:
 - observation of performance
 - audit of documents such as care plans and clinical records
 - interviewing the candidate to reveal intentions and attitudes
 - interviewing colleagues and persons receiving care to collect data regarding outcomes of care
 - testing (for example drug calculation, written assignments, multi choice questions)
 - examining records of previous achievements
- Reflection and re-interpretation of evidence about the performance of the candidate is an important element in the assessment process and adds to the reliability of the assessment judgement.

Principle 6

Principle of Participation and Collaboration

- Assessment of performance should be based on a participative and collaborative relationship between the assessor and the candidate.
- The tenet of impartiality, confi dentiality and declaring any conflict of interest will underpin this participative and collaborative relationship. This will ensure that participants in the assessment process will feel confident in the assessment methods.
- Participation and collaboration in the assessment process involves high levels of communication, reflection on and re-interpretation of performance.
- Formalised review processes established by organisations undertaking assessment will address grievances held by candidates who are being assessed and assist in ensuring participation and collaboration between others in the assessment process. These processes will also provide a mechanism for rigorous scrutiny of the result of assessment judgements

NURSING & COUNCIL

Glosssary

ANMC: Australian Nursing and Midwifery Council

Appropriate: Matching the circumstances, meeting needs of the individual, groups or situation

Attributes: Characteristics which underpin competent performance

Core Competency Standards: Essential competency standards for Standards registration or licensure.

Competence: The combination of skills, knowledge, attitudes, values and abilities that underpin effective and/or superior performance in a profession/occupational area.

Competent: The person has competence across all the domains of competencies applicable to the nurse, at a standard that is judged to be appropriate for the level of nurse being assessed.

Competency Unit: Represents a major function/functional area in the total competencies of a Registered Nurse in a nursing context representing a stand-alone function which can be performed by the individual.

Competency Element: Represents a sub-function of the competency unit.

Competency Standards: Consists of competency units and competency elements.

Contexts: The setting/environment where competence can be demonstrated or applied.

Cues: Key generic examples of competent performance. They are neither comprehensive nor exhaustive. They assist the assessor when using their professional judgement in assessing nursing practice. They further assist curriculum development.

Domain: An organised cluster of competencies in nursing practice

Enrolled Nurse: A person licensed under an Australian State or Territory Nurses Act or Health Professionals Act to provide nursing care under the supervision of a Registered Nurse. Referred to as a Registered Nurse Division II in Victoria.

Exemplars: Concrete, key examples chosen to be typical of competence. They are not the standard but are indicative of the standard.

Registered Nurse: A person licensed to practice nursing under an Australian State or Territory Nurses Act or Health Professionals Act. Referred Nurse Division 1 in Victoria.

This work is copyright October 2002. Apart from any use as permitted under the Copyright Act 1968, no part of this work may be reproduced by any means electronic or otherwise without the written permission of the copyright holders. Requests and enquiries concerning reproduction rights should be addressed to the Chief Executive Officer, Australian Nursing and Midwifery Council.

The ANMC acknowledges that the methods and processes in assessment of competencies will be further developed, and that the content of this document will be reviewed in three years. Comments should be addressed to:

Australian Nursing & Midwifery Council

T +61 2 6257 7960 F +61 2 6257 7955 PO Box 873 Dickson ACT 2602 AUSTRALIA **www.anmc.org.au**