



Health Training Package Review - Enrolled Nursing

Draft One Consultation Paper

Wave 2 – May 2013

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Introduction

The Australian Nursing Federation (ANF) was established in 1924. The ANF is the largest industrial and professional organisation in Australia for nurses and midwives, with Branches in each state and territory of Australia where we represent the interests of all nurses, midwives employed in a range of health care enterprises.

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The ANF has a national membership in excess of 225,000 nurses, midwives and assistants in nursing. Our members are employed in a wide range of settings in urban, regional, rural and remote locations, in both the public and private health and aged care sectors.

The ANF participates in the development of policy relating to: nursing and midwifery practice, professionalism, regulation, education, training, workforce, and socio-economic welfare, health and aged care, including reform agendas, community services, veterans' affairs, occupational health and safety, industrial relations, social justice, human rights, immigration and migration, foreign affairs and law reform.

Members of the ANF are involved in care across the life spectrum, and are well acquainted with care of the person with a chronic and/or terminal illness.

The core business for the Australian Nursing Federation is the representation of the professional and industrial interests of our members and the professions of nursing and midwifery. Additionally, some Branches of the Australian Nursing Federation are registered training organisations and contribute to vocational education and training of enrolled nurses, and professional development for registered and enrolled nurses and registered midwives.

Registered and enrolled nurses and registered midwives form the largest health profession in Australia, providing care to people throughout their lifespan and across all geographical localities nationally.

The depth and breadth of nursing and midwifery practice reaches into: people's homes, schools, general practice, local councils and communities, industry, offshore territories, aged care, retrieval services, rural and remote communities, Aboriginal and Torres Strait Islander health services, hospitals, the armed forces, universities, mental health facilities, statutory authorities, general businesses, and professional organisations.

The Australian Nursing Federation also represents the industrial and professional interests of enrolled nurses in most Australian jurisdictions and therefore has an interest in any reform to the education, training, role and function of the enrolled nurse which may potentially affect their nursing practice in the future.

The Australian Nursing Federation provides comment on the Community Services and Health Industry Skills Council review of the Health Training Package and the Enrolled Nursing qualification HLT51612 [Diploma of Nursing] and HLT61107 [Advanced Diploma of Nursing] ***Enrolled Nursing Training Package Review – Draft One Consultation Paper – Wave 2, May 2013.***

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The Australian Nursing Federation would like to highlight the timeframe of the qualification review, taking into consideration the concurrent review process of the Nursing and Midwifery Board of Australia's (NMBA) Enrolled Nurse Competency Standards being conducted Monash University for the Australian Nursing and Midwifery Accreditation Council (ANMAC) and will lead to the eventual endorsement and ownership by the NMBA.

We request these qualifications be given an extension of time for the review process to enable relevant stakeholders to assess the *new* competency standards, once finalised and released, to allow for their incorporation into the development of any new or revised unit of competence (UoC) that will make up the revised enrolled nurse (EN) qualification. We must also make mention of the impact on registered training organisations (RTO's) delivering the EN qualifications should the qualifications be released prior to the reviewed competency standards and discover they do not correlate that will lead to yet another rewrite.

Scope of the review

The Australian Nursing Federation understands the units of competence are now divided into two documents;

1. The Performance Standard; and
2. The Assessment Requirements.

Further we acknowledge the assessment requirements are a new component and are intended to relate directly to the elements and performance criteria. We take into consideration both of these components in providing our feedback.

Additionally, we note that in most instances identifiers on unit codes have been removed to conform to streamlining requirements and that not all units are available for comment as they have not yet been rewritten or developed.

Diploma of Enrolled Nursing HTL51612

The Australian Nursing Federation is of the view that the HLT51612 – Diploma of Enrolled Nursing is reflective of the *essential range of skills and knowledge* an enrolled nurse requires to practice as a beginning level practitioner within the work role. However, we are mindful

there will always be some jurisdictional issues and elements of practice that may arise as skill/knowledge gaps in specific clinical situations.

The Australian Nursing Federation is of the view that the HLT61107 – Advanced Diploma of Enrolled Nursing is reflective of the some of the advanced range of skills and knowledge that an enrolled nurse may require, to be able to practice as an advanced level practitioner within the enrolled nurse work role. However, there will always be some jurisdictional issues and elements of practice that may arise as skill/knowledge gaps in specific clinical situations.

General Comments

Enrolled nurses work in a range of health care settings including, public acute and private acute hospitals, medical centres, community settings, residential and community aged care, and district nursing services. Their specific job roles are usually determined by the employing health services position description and the inherent requirements of their position description which are carried out in accordance with their registration to practice as an enrolled nurse, as issued the NMBA. Enrolled nurse Job roles always involve working within the NMBA and employer defined scope of practice.

Enrolled nursing roles are various, and include clinical care areas like:

- ✚ Acute Care
- ✚ Specialist Care
- ✚ Medical nursing – general or specialty
- ✚ Surgical nursing – general or specialty
- ✚ Residential and community aged care nursing - in both leadership (not supervisory) and clinical roles and in generalist and specialist areas of aged care like dementia and intense care areas
- ✚ Community Care such as district nursing and general practice.

The extended scope of nursing practice for the enrolled nurse includes the administration of medicine under the Health Practitioners Regulation Law Act 2009. This inclusion in enrolled nurse practice was a major change in the way enrolled nurses' work in some states and territories in Australia, since the last review of the Health Training Package in 2007.

The extension of work roles for enrolled nursing into areas of clinical practice that may not have been traditionally considered within the scope of practice for enrolled nurses have emerged over time. Consequently, the development of skills and competence required in relation to the development of the Advanced Diploma of Nursing Units of Competence has occurred.

Skills escalation for the enrolled nurse has enabled them to move in and out enrolled nursing jobs much like registered nurses. They make their transitions based on areas of

clinical practice that excites their work interest. However, being attracted to work opportunities is based on job availability. Enrolled nurses are selected for their work role in accordance with the employer's attraction, recruitment and selection criteria.

Specific Comments

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The Australian Nursing Federation request the inclusion of the **First Aid** unit of competence (HLTFA301B/311A) remain in the revised qualification as a core unit of competence and not as an elective unit. This unit contains the basic life support and cardiopulmonary resuscitation education components, which is an expected skill in nursing practice by the Australian community.

The Australian Nursing Federation request the current review of the enrolled nursing qualification guarantees there remains a mechanism for the existing workforce, to up-skill in relation to the medication Unit of Competence [UoC]. Currently there is a means of the existing enrolled nurse workforce to complete the UoC, ***HLTEN519C Administer and Monitor Intravenous Medication in the Nursing Environment*** as an add on UoC, to ***HLTEN507C Administer and Monitor Medications in the Work Environment***.

The Australian Nursing Federation understands there are some enrolled nurses in Australia who are likely to be required to up-skill their competency from HLTEN507C to incorporate HLTEN519C level of competency in the future. We do not want to see a situation arise whereby up-skilling and continuous lifelong learning could not occur for any enrolled nurse currently working in Australia. Whilst we are supportive of these two Units being merged together and delivered as one single Unit in the next iteration of the Enrolled Nurse Qualification, we believe there must remain a pathway for the existing enrolled nurse workforce to gain the IV medication qualification. To achieve this outcome, there is likely to be a requirement for the development of a bridging UoC designed specifically for up-skilling the existing workforce.

State and Territory Jurisdictions

Enrolled nurse practice may be variable across different Australian states and territories. Variations in roles and responsibilities at the organisational and/or health service interface generally vary in regards to state and territory drugs and poisons legislation and other state and territory specific legislation.

Industry requirements for current and proposed Enrolled Nursing

The Australian Nursing Federation submits the current diploma level Enrolled Nursing Qualification is meeting the needs of the nursing workforce at this time. This is evidenced by the Australian health care sector continuing to have high demand for the enrolled nurse level of qualification within the current national training frameworks. The enrolled nursing

course sits ranked at fourth place in the top qualifications list for government funded training in 2012, with 6,000 enrolments.

The enrolled nurse workforce is a valuable adjunct to the Australia's registered nurse workforce, in the role of Australia's second level nurse.

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The Australian Nursing Federation contend that the current enrolled nursing diploma qualification largely meets the needs of the sector and remains reflective of the sectors skills requirements for the VET level worker. The enrolled nurse has a range of skills and knowledge required to successfully undertake enrolled nursing work, however there are some changes that could be incorporated into the review to make the qualification more relevant and contemporary, for example:

Pre-requisites.

The Australian Nursing Federation is of the view that some of the Units of Competence (UoC) were clumsy and at times appeared to be misplaced. We are supportive of the amendments to *some* of those units of competence, in order to remove the required pre-requisites, but not all.

Some of the advanced diploma level UoC continue to require an underpinning basic foundation level of skill and competence, on which to build, a more advanced basis for practice. Specifically, the HLTRNxxx Units:

- ✚ *Provide care and Support to a Client in Renal Replacement Therapy in Community Settings;*
- ✚ *Provide Support and management of the Client Undergoing Haemodialysis Therapy;*
- ✚ *Provide Support and management of the Client Undergoing Peritoneal Dialysis Therapy; and*
- ✚ *Contribute to the Registration and Assessment of Donors;*

Need their pre-requisite education set out, in order to assist students in their decision making when choosing earlier electives to ensure they have the pre-requisite UoC, as these advanced skills and knowledge are the lynch-pin in students understanding the disease process and aetiology and is a vital component to understanding whether a nursing intervention is successful.

The Australian Nursing Federation propositions that the student enrolled nurse clinical assessment needs to be scheduled to take place in the practical work environment, however there may be circumstances where some elements of the clinical assessment may be suitable within a simulated learning environment. Furthermore, the quality of any enrolled nursing student assessment must be robust and in accordance with the expectations of the education provider regulator and the relevant standards.

Language within the Units

The Australian Nursing Federation is supportive of the language within the UoC being updated to reflect contemporary nursing terminology and the soon to be amended Australian Nursing and Midwifery Accreditation Council (ANMAC) Competency standards for the Enrolled Nurse – proposed to be known as *Practice Standards for the Enrolled Nurse*.

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The imminent changes to the NMBA's *ANMAC Competency Standards for the Enrolled Nurse* may be far reaching and broad, involving significant change from the current EN Competency Standards, or any amendment that removed the requirement for the enrolled nurse to be supervised by a registered nurse, nurse practitioner or registered midwife. Hence, the Australian Nursing Federation cautions that the proposed structure of this review may not comply with a changed professional competency or practice standard and would therefore require further consideration by the Industry Skills Council, before proceeding to the nationally recognised accredited training package.

Consideration of terminology uses in relation to client, patient, health consumer needs to be consistent through the qualification.

Assessment Conditions

The Australian Nursing Federation is supportive of and commends the proposed assessment conditions for enrolled nursing students to be in relation to the **current** ANMAC Standards and Criteria for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia.

Key Changes

The Australian Nursing Federation acknowledges the principle for changes to some of the units of competence.

We are however concerned about some of the proposed changes.

Specifically, we note the proposed change to;

- ✚ HLTEN519B *Administer and Monitor Intravenous Medication in the Nursing Environment* and the proposal to combine this UoC with HLTEN507C *Administer and Monitor Medications in the Work Environment* are generally supported by the Australian Nursing Federation and its state and territory branches. Nonetheless, we specifically draw your attention to **Element 1**, of the Performance Criteria (1.3) where the Performance Criteria states:

[the student] 'identify the purpose and function of intravenous medication for administration'.

We strongly recommend that this criterion be amended to read, [the student] ***identify the purpose and function of all medication for administration.***

Element 2 - 2.4 *Accurately calculate dosages for administration of drugs. We recommend the inclusion in this Element of the words.... 'in consultation with the Registered Nurse'.*

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Additionally there ought to be a statement included in Element 3 - *Administer medications within legal parameters* – to include delegation of the task by the supervising registered nurse/midwife and the accountability relationship for the enrolled nurse's individual practice to the supervising registered nurse/midwife.

Assessment Requirements

Update the reference to nurse regulations to reflect the requirements of the Australian Health Practitioner Regulation Agency national law 2009.

The use of ANMAC should be replaced with Nursing and Midwifery Board of Australia (NMBA) in relation to codes and standards as the NMBA endorses these documents and has the legal authority to enact them whereas the ANMAC has no legal authority.

HLTENXXX Practise in the Primary Health Care Environment.

The Australian Nursing Federation is concerned that the proposed UoC does not draw a distinction between Primary Care and Primary Health Care, which although very similar titles, are different concepts.

For example, Helen Keleher, in the Australian Journal of Primary Health in 2001, wrote that:

“Primary care more often than not involves a single service or intermittent management of a person’s specific illness or disease condition in a service that is typically contained to a time-limited appointment”.

On the other hand, Primary Health Care, according to the Alma Ata Declaration, includes at least:

- education concerning prevailing health problems; and
- the methods of preventing and controlling them;
- promotion of food supply and proper nutrition;
- an adequate supply of safe water and basic sanitation;

- maternal and child health care, including family planning;
- immunization against the major infectious diseases;
- prevention and control of locally endemic diseases;
- appropriate treatment of common diseases and injuries; and provision of essential drugs; and
- in addition to the health sector, all related sectors and aspects of national and community development, in particular agriculture, animal husbandry, food, industry, education, housing, public works, communications and other sectors; and demands the coordinated efforts of all those sectors.”

Henceforth, the draft UoC statement that,

Primary Health Care is the first level of contact that individuals, families and communities have with the health care system,

is inaccurate and may represent an illness model rather than a wellness model.

Additionally, the draft UoC does not mention the social determinants of health, which are an important consideration in the application of a primary health care framework (not defined in the draft unit should be included as, “for example, the Ottawa Charter”).

The draft UoC focuses in element 6, *upon health education/prevention and promotion* but does not link this back to multi-sectorial approaches, participatory approaches, behaviour change theory or the effects of social determinants of health.

As a general principle, Primary Health Care Professionals work to change the social, political, environmental and economic determinants of health in order to create better health in communities as a whole. The stronger illness model focus, rather than wellness model focus, of the draft is further supported by the Assessment requirements section which includes illness model requirements.

There needs to be a clearer distinction made as to whether the unit is Primary Care or Primary Health Care focused and reconsidered accordingly. One suggestion maybe to divide the Unit into two parts, or into two distinct Units to emphasise the difference in these concepts.

- ✚ New HLTENNXXX *Use Critical Thinking and Reflect on and Improve Own Professional Practice in Health.*

Name is too long. Suggest calling it ***Applying Critical Thinking to Professional Practice***. As the premise of critical thinking is to reflect on your knowledge and the practice of self and others, the reference to reflective practice in this Unit is evidenced in Element 3 anyway.

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In relation to the question as to whether the *Critical Thinking* UoC is better placed in its own UoC, or embedded within another UoC, we submit the following:

The Australian Nursing Federation notes the CS & HISC comment in Draft 1 of this UoC in respect to **Element 1** *Use Critical Thinking Effectively in Day to Day Nursing Activities*.

We are supportive of the development of a unit of competence for the enrolled nurse on the application of their decision making in relation to practice outcomes. It is the view of the Australian Nursing Federation, that high level *critical thinking* with nursing practice is not the usually the domain of the enrolled nurse, rather it is with the scope of practice, the domain, role and responsibility of the registered nurse.

The *Use Critical Thinking and Reflect on and Improve Own Professional Practice in Health*, UoC should focus on enrolled nurses *own* professional boundaries in their practice and explore and expand their understanding of when to seek input from the supervising registered nurse in applying their decision making, within the professional standards and the NMBA Decision Making Framework guidelines for nursing practice.

Nurses use a nursing process as the rationale for the provision of aspects of nursing care. The enrolled nurse does this in collaboration with the registered nurse.

This UoC must be developed to ensure incorporation of all facets of decision making education for nursing practice that the enrolled nurse is required to develop. For example, the fundamental process in this Unit must be for the student to demonstrate their performance in making decisions about how they:

- Assess the patient/client to plan nursing care, by using their ability to critically evaluate and prioritise the needs of the person in their care; and
- Apply the professional nursing practice standards to reflect their decision making;

- Work within the scope of the enrolled nurses practice to make clinical decisions in collaboration with the registered nurse;
- Consider the context of the enrolled nurses' practice in their decision making within the organisational context.

The Performance Criteria of Element 1, indicates a number of criteria not support by the Australian Nursing Federation in the current form. Specifically, in relation to Element 1: **Use critical thinking effectively in day to day nursing activities**. We recommend changing the element heading to 'Apply critical thinking.....', rather than 'use'.

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- 1.1 Supported**, if the word 'nursing' is inserted before the word 'care'.
- 1.2** Requires **additional** text to keep any such '*analysis of ideas and arguments*' by an enrolled nurse to the confines of the scope of practice of an enrolled nurse.
- 1.3 Not supported** in the current version. Requires rewording. Enrolled nurses do not '*query claims*'? The ANF does not understand what is meant by such a statement?
- 1.4 Not supported**. What or whose conclusion is this referring to? This criterion must be deleted, as it is outside the role of the enrolled nurse. Perhaps it could be replaced with performance criteria related to an understanding of the nursing process and reference to the multidisciplinary health care team to develop the agreed plan of nursing care in consultation with the registered nurse.
- 1.5 Not supported - delete**. Nurses use a nursing process and rationale for the provision of aspects of nursing care. The enrolled nurse does this in collaboration with the registered nurse. Where the word client is used, replace with health care consumer.
- 1.6 Not supported**. Delete, reword to reflect evidence used to develop a nursing care plan for the health consumer care.

Element 2: **Use critical thinking to achieve quality improvement**.

- 2.1 Not supported**. Suggest rewording to refer to consistently evaluating practice, rather than correcting oneself....

Element 3: **Reflect on practice and promote reflective practice to others**.

- 3.1 Supported**.
- 3.2 Supported**.

- 3.3 **Partly supported**, requires rewording, to say supervising registered nurse.
- 3.4 **Not Supported**. Requires rewording to incorporate in a culturally respectful manner.
- 3.5 This is a subjective statement. **Rewording** is required.
- 3.6 **The element wording is confusing**. Needs to reflect that enrolled nurse practices in accordance with the NMBA codes of conduct and ethics to ensure they do not bring the profession into disrepute.

Element 4. **Ensure continuing self-support and supervision**.

This is an interesting element, and requires clarification in line with the NMBA enrolled nurse competency standards.

Element 5: **Participate in Professional Development**. Suggest inserting the word 'Own' after 'in' and before 'professional'.

This element is **supported** as this is a registration standard and required by the Nursing and Midwifery Board of Australia.

✚ Revised HTLENXXX **Work in the Nursing Profession Within the Australian Health Care System**.

The Australian Nursing Federation understands this revised UoC incorporates the original three (3) Elements of the current *HLTEN516B 'Apply Understanding of the Australian Health Care System'*. We are supportive of those Elements be retained in the new iteration and update of this UoC. With respect to NEW Elements 4 – 6, we respond as follows:

Element 4: **Work in the context of professional nursing practice**.

- 4.1 **Supported**.
- 4.2 **Supported**.
- 4.3 **Supported**, with the inclusion of the word 'own' after 'into' and before 'nursing'.
- 4.4 **Supported**.
- 4.5 Suggest **rewording** as follows: *Work within the principles of the professional practice standards within the parameters of own nursing practice*.
- 4.6 **Not Supported**. Insert the words, '*participate in such activities from time to time as required*', as enrolled nurses are not generally required to assist in such activity in all workplaces or jurisdictions.

- 4.7 Suggest **rewording** to delete the word “Apply” and replace with ‘*Work within the jurisdictional requirements.....*’
- 4.8 **Not supported** in current draft. Needs to be reworded to indicate the student has to demonstrate an understanding of the various Australian jurisdictional anomalies for enrolled nurse practice.
- 4.9 **Not supported** in the current draft. This criterion requires rewording. Suggest ‘*Establish professional working relationships with other health practitioners within the health care environment*’.

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Element 5: **Contribute to professional teamwork.**

- 5.1 **Supported**, with the inclusion of the word ‘nursing’ after implementing and before care.
- 5.2 Principle of the criterion supported, suggest **rewording** to a more positive tone.
- 5.3 **Supported.**
- 5.4 Suggest **rewording** as follows: *Demonstrate an understanding of the scope of practice of the registered and enrolled nurse and the relationship between the scope of practice of self and other health practitioners relationship with nursing practice.*

Element 6: **Work within a contemporary health care environment.**

This Element may require some reference to the emerging telehealth models of care in contemporary nursing practice.

- 6.1 Suggest **rewording**. *Demonstrates well developed time management abilities within scope of enrolled nurse practice.*
- 6.2 **Supported.**
- 6.3 **Supported.**

 HLTENNXXX: **Apply the principles of Stoma Care**

Check under the Applications heading, page 1. Typing mistakes in first paragraph.

Element 3: **Plan holistic care of the client with a stoma.**

This element title should read as ‘*Contribute to the planning of.....*’, as nursing care is planning that must be done in collaboration with the registered nurse.

 HLTENNXXX: **Contribute to client assessment and developing nursing care plans.**

Comment on page 2 is **supported**.

- HLTENXXXX: **Apply legal and ethical parameters to nursing practice.**

Comments on page 5 – All still relevant and **must be retained**.

- HLTENXXXX: **Contribute to the registration and assessment of donors.**

The Australian Nursing Federation request the pre-requisite requirement **is retained** in the review of this unit.

- HLTENXXXX: **Implement and monitor nursing care for clients with acute health problems.**

CS & HISC comment in relation to the assessment requirements (page 5).

The Australian Nursing Federation is of the view that the attached list of activities are performed during clinical placements. Some of the activities on the list may not arise on a student's clinical placement and therefore may not always be able to be assessed. The beginning enrolled nurse may not perform some of the activities on the list for several years after completion, depending on the employment setting of the enrolled nurse. They are not necessary to be retained in the performance evidence.

- HLTENXXXX: **Manage clients and others experiencing loss and grief.**

Suggest delete the word others and keep focused on nursing interventions.

Element 4. **Develop and implement strategies to manage own stress.**

Acknowledge your comment and support their removal. They do not fit in this unit.

Element 5. **Provide support for peers and colleagues.**

Acknowledge your comment and support their removal.

- HLTENXXXX: **Practice in the contemporary aged care environment.**

Note your comment on page 4.

The application of clinical nursing skills occurs throughout the qualification and does not need to be repeated in this Unit. Support the removal of this assessment requirement.

✚ HLTENNXXX: **Practice in first line emergency nursing.**

Assessment requirement page 2. In relation to the ISC comment – the Australian Nursing Federation supports retaining the assessment criterion for this UoC as they are advance nursing practice requirements that must be assessed.

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✚ HLTENNXXX: **Provide care to clients with an orthopaedic condition.**

Assessment requirement page 3. In relation to the ISC comment – the Australian Nursing Federation recommend these items be included in the **Advance Diploma of Nursing CORE unit** – Assess clients and manage client care which will address requirements for all other elective units within the advanced diploma.

✚ HLTENNXXX: **Practise in the perioperative nursing environment.**

Assessment requirement page 4. In relation to the ISC comment – the Australian Nursing Federation recommend these items be included in the **Advance Diploma of Nursing CORE unit** – Assess clients and manage client care which will address requirements for all other elective units within the advanced diploma.

✚ HLTENNXXX: **Practise in the rehabilitation nursing environment.**

Assessment requirement page 3. In relation to the ISC comment – the Australian Nursing Federation recommend these items be included in the **Advance Diploma of Nursing CORE unit** – Assess clients and manage client care and then they are covered off for all other elective units within the advanced diploma.

✚ HLTENNXXX: **Contribute to the care of mothers and babies.**

Comment 1. The inclusion of fathers in the title of this UoC is not supported by the Australian Nursing Federation.

Comment 2. There cannot be a reference to the mothers' postpartum health as this is the domain of the registered midwife.

✚ HLTENNXXX: **Implement and monitor nursing care for the older client.**

Assessment requirement comment page 7.

The Australian Nursing Federation considers that this remain or a new reference made to the enrolled nursing student having a working knowledge of the various functional assessment tools as they change over time and by not specifying the various tools may keep the UoC contemporary.

- HLTENXXXX: Implement and monitor nursing care for clients with chronic health problems.

Assessment requirements Comment page 4.

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The Australian Nursing Federation considers the inclusion of the additional assessment criteria may be useful to an education provider to have a range of nursing skill on which to base their student assessment. The question ought to be “are any of the ‘*perform nursing interventions*’ list actually necessary to be included and would they fit better into a list that suggests, ‘*may include....*’, then list all of what is currently included and the new list for comment?”

- HLTENXXXX: Practise in primary health care.

Comment 1. “Should other functions be included?” The Australian Nursing Federation notes the list of functions listed in the ISC comment box (page 1) and is not supportive of primary health care nursing roles being included for the enrolled nurse student that are inclusive of any aspect of maternity or midwifery care, as these aspects of women and baby care are not the role of the enrolled nurse and sit within midwifery care.

The enrolled nurse’s role with other elements nursing interventions relating to:

- Health promotion;
- Illness prevention;
- Treatment and care of sick people;
- Public health and health population;

are supported.

Comment 2. Page 2. Element 1. Suggest changing the title of this Element as follows: ‘*Work as part of the nursing and health care team in a primary health care environment*’.

Comment 3. Page 3. Element 4. We are not sure whether the comment relating to *Client Safety* is in reference to legislative requirements as per Occupational Health and Safety Law, or within a therapeutic context? Therefore, we reserve comment at this time.

✚ HLTENNXXX: **Provide nursing care for clients requiring palliative care.**

Element 1. Suggest changing the title of this Element to the following:

Insert words '*Specialist Nursing Care*' after the word "the" and before the word, "special" and delete the word "special". Now reads as *Recognise the specialist nursing care of clients requiring a palliative approach to their care.*

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✚ HLTENNXXX: **Practice in the critical care environment.**

The Australian Nursing Federation supports the position of the Australian College of Critical Care Nurses¹ in outlining the role and the responsibility of the enrolled nurse working in the critical care environment. Consequently, we recommend changes to the current UoC Performance Criteria to safeguard all nurses working in critical care environments.

Element 1. *Apply theoretical concepts and principles in development of a nursing care plan.*

Performance Criteria:

- 1.3 **Delete** this criterion. The enrolled nurse in this care context would not be expected to initiate a holistic health assessment. Rather, the enrolled nurse should be able to perform a physical examination to determine the immediate nursing care requirements required by the enrolled nurse as/if required.
- 1.4 Add the words "in collaboration with the registered nurse" before the word, "Evaluate".
- 1.5 **Define** the assessment tools, or delete.
- 1.6 **Delete** the word "Identify" and add the word, "Apply a working knowledge of the".
- 1.8 **Delete** in this Element as not relevant to care planning in this context.

Element 2. Change the title of the Element as follows: *Contribute to nursing care in the critical care environment.*

Performance Criteria.

- 2.1 The statement would be difficult to assess from an education providers perspective as this is a criteria that is generally related to a position description for an employer based performance objective, rather than an educational assessment. Suggest revise this criterion.
- 2.3 Insert new words as follows, after the words "Collaborate with" add, "the registered nurse and the....." before the word "multidisciplinary".

¹ Australian College of Critical Care Nurses. 2006. Use of Healthcare Workers Other than Division 1 Registered Nurses in ICU. http://www.accn.com.au/images/stories/downloads/use_of_healthcare_workers.pdf Accessed June 11, 2013.

2.4 Some reference required to the enrolled nurse scope of practice in this criterion.

Element 3. **Suggest:** Reference to the Registered nurse is required in the Element title, rather than the health care team.

Performance Criteria.

Where ever the word “*Ensure*” is used [3.1, 3.2, 3.4] – delete and replace with “*Participate in*”.

Element 4. Change the title of this Element as follows: Delete the word ‘*Complex*’, after the word ‘*perform*’ and before the word, ‘*nursing*’ and insert the words, “*advanced enrolled nursing*”.

Conclusion

The Australian Nursing Federation welcomes the opportunity to provide the enclosed comments.

This submission has been compiled by the Vocational Education and Training Committee of the Australian Nursing Federation for the Community Services and Health Industry Skills Council (CS & HISC) review of the Health Training Package – Enrolled Nursing review – Draft 1, Consultation – Wave 2.

Should the CS & HISC require additional information, please contact Mark Staaf - Professional Officer ANF Victorian Branch on 03 9275 9333 or e-mail mstaaf@anfvic.asn.au or Jodie Davis – ANF Education Officer on 02 6232 6610 or e-mail jodie@anf.org.au