

Health (Nurse Practitioner Position and Scope of Practice) Approval 2011 (No 2)*

Notifiable instrument NI2011-593

made under the

Health Regulation 2004 - section 8 (approval of Nurse practitioner positions)

1 Name of instrument

This instrument is the Health (Nurse Practitioner Position and Scope of Practice) Approval 2011 (No 2).

2 Commencement

This instrument commences on the day after notification.

3 Scope of Practice for nurse practitioner positions

Under section 8, approval of nurse practitioner positions, I have approved the establishment of Lynne Day: Aged Health and Care Consultancy Pty Ltd Nurse Practitioner position within the aged care private sector of ACT.

The scope of practice statement for the nurse practitioner position is attached. As this position is 'new', the clinical practice guidelines and medication formularies are a work in progress. These will be finalised within the first three months of the position being established and after they are endorsement by the local Clinical Practice Guideline Advisory Committee. The endorsed Clinical Practice Guidelines will then be submitted for final approval and endorsement by the ACT Chief Nurse and Director-General ACT Government Health Directorate.

Ian Thompson
Acting Director-General

7 October 2011

*Name amended under Legislation Act, s 60



Scope of Practice Statement for
Lynne Day: Aged Health and Care Consultancy Pty Ltd Nurse Practitioner Service

The ACNP intends to provide in collaboration with General Practitioners (GPs): home visits to older patients unable to attend the Medical centre, clinics in local Retirement Villages and will use:

- Medicare item number consultations in collaboration with GPs
- Fee for service: care planning and Case Management directly related to enhancing information and access to existing services and perhaps to assist consumer Directed Care
- Contracting to Residential Aged Care Facilities (RACF) and community Aged Care organisations for the provision of staff training based on evidence based information, and
- As a vision, the employment of Allied Health professional who have a passion for positive ageing, to provide a holistic service to clients in their own homes, and the mentoring of student nurse practitioners.

In meeting the above criteria the Aged Care Nurse Practitioner (ACNP) will work collaboratively in a team approach by liaising with patients and their families, Allied Health Professionals, GPs, Specialists, Pathologists, Pharmacists, Aged Care Service providers and autonomously by being responsible for a complete and holistic episode of care. A complete episode of care encompasses: comprehensive and/or targeted assessment, requesting of diagnostics, treatment/management care plans, coordinated implementations/recommendations to meet health goals, risk management strategies, monitoring, education (patient, family, staff), evaluation and discharge.

The ACNP aims to prevent unnecessary hospital presentations due to exacerbation of health conditions; guidance for self management of chronic conditions; evidence-based education techniques for optimal adherence to health management interventions; comprehensive health assessment; and aged care advocacy and planning.

The ACNP is responsible and accountable for making professional judgements about the patient's condition and a timely referral to a medical officer and responsible for maintaining individual professional development at an expert level.

Generally, the role of a Nurse Practitioner (NP) is to provide; direct clinical care, focussed clinical service, monitoring and adoption of evidence for practice, autonomous practice (diagnosis, prescribing, referrals), and clinical leadership. Currently there is no definitive role for ACNP's in community aged care settings. There is much scope for an ACNP to provide a continuum of health care to older people and their carers who are prone to decreased health, quality of life and wellbeing due to isolation, lack of health literacy, socioeconomic factors, chronic disease and end of life care needs. Any emerging community Aged care NP will need

to understand the prevailing sentiment and governance for primary health care and apply a relevant, clear and collaborative role for improves client outcomes.

This role will address a demonstrated need and be acceptable to the targeted client population, rather than seeking to replicate existing effective services. In this context the clinical role and functions of a community ACNP could vary according to local client needs and their access to specific health services.

The role will provide services to homebound elderly with no access to a visiting GP and provide services such as dementia management, continence management, falls prevention, prevention of malnutrition and/or dehydration, medication management and provide support for community service linkages, end of life issues, carer stress issues, arthritis, prevention of functional decline and chronic disease management.