



# Drug & Alcohol Nurses of Australasia 2009 Conference & Workshops

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Holiday Inn Surfers Paradise, Gold Coast, Queensland

*"Beyond addiction: connections to the future"*

# What is Advanced Practice in Alcohol and Drug Nursing?

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# Welcome

## Housekeeping

- Times (10am – 5 pm)
- RCNA CNE Points
- Certificate of attendance
- Mobile phones
- Breaks
- Toilets
- Fire exits

# Program

<b>Times</b>	<b>Topic</b>
10:00 – 10:45	What is advanced practice?
10:45 – 11:15	Morning tea
11:15 – 13:00	Standards and competencies
13:00 – 13:45	Lunch
13:45 – 15:00	Small group work
15:00 – 15:20	Afternoon tea
15:20 – 17:00	Feedback to large group
17:00	Close

# Advanced Practice

Lynda Scott  
Nursing Director  
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# Nursing practice

- Beginning Practice
  - Specialist Practice
  - Advanced Practice
  - Nurse Practitioner
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- Encompassing education, theory, leadership, qualifications, experience, competencies, licence to practice.
  - QNC Scope of practice framework for Nurses/Midwives (2005)

# Advanced and extended practice

- New advanced and extended practice roles have emerged in nursing as part of the evolution of the nursing profession
- Specific roles have emerged in specialist and generalist practice
- These roles have expanded to include and integrate advanced clinical management, leadership, research, education, consultation, autonomous practice and access to equivalent qualifications
- Extended practice role of the Nurse Practitioner

# Advanced and extended practice

- The Nurse Practitioner is a relatively new role within all states
- Currently there is a vast amount of information available on the Nurse Practitioner role
- Each state has developed a set of guidelines for the implementation of the NP role

# Advanced practice roles

- There is still confusion around the understanding and clarification of advanced nursing roles
- The Nurse Practitioner role has been clearly defined but Advanced Practice roles still remain ambiguous

# Advanced practice

- Advanced practice nurse often used synonymously with nurse practitioner in describing roles
- Confusion amongst many health care professionals and service planners on the roles and scope of practice of advanced practice nurses
- Newly emerging diverse roles for advanced practice as new models of care and service delivery emerge
- Implementation of advanced practice positions within new service models has demanded increased levels of autonomy, skills and decision making

# QLD Advanced Practice

- Queensland has in legislation the authority to endorse nurses in Rural and Isolated Practice, Immunisation and Sexual Health and Reproductive Health to undertake an advanced practice role (supply of medication under a specific Health Management and Drug Therapy Protocols).
- Legislation and licensure in the Health (Drugs and Poisons) Regulation 1996 and the Scope of practice framework for nurses and midwives (2005)
- QNC - Guideline on standards of practice for registered nurses with drug therapy endorsement (2009)
- Education to support endorsement – Tertiary programs
- The NP role extends the advanced practice role of nurses, does this include the educational requirements of specialist nurses?

# What is an advanced practice role in nursing?

- Research conducted by Gardner et al. (2004) defined an advanced practice as:
- A nurse practitioner is a registered nurse educated and authorised to function autonomously and collaboratively in an advanced and expanded clinical role. The Nurse practitioner role includes assessment and management of clients using nursing/midwifery knowledge and skills and may include but is not limited to :
  - The direct referral of clients to other health care professionals
  - Prescribing medications
  - Ordering diagnostic investigations

# Definition

- Advanced practice nursing defines a level of nursing practice that utilises extended and expanded skills, experience and knowledge in assessment, planning, implementation, diagnosis and evaluation of the care required. Nurses practising at this level are educationally prepared at postgraduate level and may work in a specialist or generalist capacity. However, the basis of advanced practice is the high degree of knowledge, skill and experience that is applied within the nurse-patient/client relationship to achieve optimal outcomes through critical analysis, problem solving and accurate decision making (**ANMC, 2005**)

# Advanced practice

Gardner, Chang and Duffield (2007)

- Qualitative research project looking at advanced practice roles
- Three south-east Queensland tertiary hospitals
- Sample nine participants covering management, education, clinical and consultancy roles
- Data collection involved in depth interviews
- Tested four models of advanced practice
- Found the Strong Model of Advanced Practice (Ackerman et al, 1996, Mick and Ackerman 2000) reflected the parameters of advanced practice reported by the research participants

# Service Model

## **Advanced Practice Nurse (APN)**

Consultation/Clinician

Broad-based service profile

## **Nurse Practitioner (NP)**

Direct Clinical Care

Focused Clinical Care

# Role Parameters/standards

## **APN – based on the Strong Model**

Direct comprehensive care - highly developed skills and knowledge to inform service coordination, care delivery and direction of care

## **NP in Australia – based on ANMC NP Standards**

Dynamic practice – highly developed skills and knowledge for direct clinical practice in complex environments.  
Monitors and adopts evidence base for practice

# Role parameters/standards

## Advanced Practice Nurse (APN)

Support of systems – optimising patients utilisation of, and progression through, a health service

Education – patients, communities, clinicians and students

Research – creating and supporting a culture of inquiry

Professional leadership – professional activity and dissemination of expert knowledge to the public and the profession

No national consistency for practice standards

## NP in Australia – based on ANMC NP Standards

Professional efficacy – autonomous practice that includes diagnosis, prescribing medication, requests for diagnostic tests and referral to other health care professionals. Promotes and engages a nursing model of practice

Clinical leadership – critique and influence at systems level of health care. Promotes and engages in collaborative team-based practice.

Conforms to ANMC national standards for practice

# Legislative structure

**APN** Title not protected

**Expanded practice**

Highly developed autonomous practice profile as an RN within the requirement of the (relevant) Nurses Act

**NP** Title protected in Australia and New Zealand

**Extended practice**

Authorisation to practice as a Nurse Practitioner with legal provisions to diagnose, prescribe medication, order diagnostic tests and refer to other health professionals

Table 1.1 Operational framework – Advanced Practice Nurse (APN) and Nurse Practitioner (NP) roles (Gardner, Chang & Duffield 2007)

# What Service Model ?

- Advanced Practice Nurse
  - Consultant/clinician/ proceduralist
  - Broad service profile/procedure clinic
  - Autonomous in nursing practice
  - Activities/procedures determined by medical team member
- Nurse Practitioner
  - Direct clinical care
  - Clinical Service is focused on patient care
  - Autonomous as part of a health service team

# Nature of Clinical Practice

- **Advanced Practice Nurse**

- Specialist or generalist
- Consultant/clinician/proceduralist
- Nursing component of patients episode of care, case management or delegated procedures

- **Nurse Practitioner**

- Direct clinical care in a specific specialist field
- Responsible for patient's complete episode of care through to resolution or referral
- Practice included diagnosis, prescribing medication and initiating nursing and other specialist interventions

# Developing APN and NP positions

- Consultation with health service
- Develop service based working group to identify the relevant clinical nursing role
- Identify services needs – service gaps, demands, access
- Clarify the nursing model, the nature of clinical care and clinical practice
- Develop business case for relevant nursing position

# Developing APN and NP positions

- Identifying the specific roles of Clinical Nurse Consultant and Nurse Practitioner
- How existing services would be enhanced or new services introduced
- Function within the multidisciplinary team (collaboration/autonomy and impact on current roles)
- Demographic of the service area
- Priority areas, service gaps, service delivery needs and target patient populations

# Advanced practice

- A&D nurses have a long history of practice at an advanced level developed through limited access to medical supports
- Advanced role not clear or defined – diverse roles within the alcohol and drug nursing workforce
- How do we determine the framework for informing the Advanced Practice role?
- Is there a need for education and qualifications alcohol and drug advanced nursing practice?
- What level does an advanced practice nurse translate to in the nursing career structures?

# Morning Tea

10:45 – 11:15

# Standards and Competencies

Margo Hickman

Nurse Educator

Alcohol and Drug Service - QLD

# Questions

- Who has been involved in the development of competencies?
- Who has read a set of competencies?
- Who has used a set of competencies – for any purpose?

# Background

- Literature search for competency standards in Australia found many different sets for nursing and midwifery
- Probably more out there that were not found, and more in the process of development

# National standards for RNs, ENs, RMs & NPs

- Australian Nursing Federation
  - Competency standards for the advanced enrolled nurse (2005)
  - Competency standards for the advanced registered nurse (2005)
  - Competency standards for nurses in general practice (2005)
  
- Australian Nursing and Midwifery Council
  - The ANMC National Competency Standards for RNs, RMs, NPs & ENs (RNs, RMs & NPs 2006, ENs 2002)
  - The Code of Ethics for Nurses in Australia (2002)
  - The Code of Professional Conduct for Nurses in Australia (2003)
  - Range of position statements and guidelines

# Purpose of ANMC competency standards for RN, RM, EN & NP

- To provide the framework for assessing competence but also serve to communicate to consumers the standards they can expect ... Universities use the standards in developing nursing curriculum and to assess student performance

# Definitions (ANMC, 2006)

- **Standard:** A desired and achievable level of performance against which a nurse or midwife's actual performance can be compared
- **Competence:** The combination of skills, knowledge, attitudes, values and abilities that underpin effective and/or superior performance in a professional area
- **Competent:** The person has competence across all the domains of competencies applicable to the clinician, at a standard that is judged to be appropriate for the level of nurse being assessed
- **Core Competency Standards:** Essential competency standards for registration or licensure
- **Competency Unit:** Represents a major function/functional area in the total competencies of an RN/EN 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

# Types of competency standards

- Core / Beginning (minimum) standards (EN, RN, MW, NP) all supported and published by ANMC
- Procedural competency standards e.g. Pap smears
- Skills-related competency standards e.g. Chemotherapy administration
- Specialist competency standards – describe the attributes required to work in a particular specialty e.g. Sexual Health
- Advanced competency standards – sometimes used to credential nurses to belong to a specialty group
- The terms specialist and advanced are sometimes used interchangeably

# ANF competency standards for advanced registered nurses (2005)

- Advanced registered nurses are experienced, knowledgeable and competent nurses who use evidence for practice, take responsibility for complex situations, show leadership in clinical and professional settings, contribute to effective team work, and focus on improving the health of individuals and groups. This latest edition of the *Competency standards for the advanced registered nurse* builds on the important earlier work that saw these standards widely used to inform the development of specialty competency standards and postgraduate specialty education for these nurses...

# What is out there?

Short presentations from other states on what is available in the A&D area?

- Who is using competency standards in the A&D area?
- Which competency standards are you using?
- In what ways are you using them?

# Major categories of components of competencies

- The competency standard itself is a generic statement of what the nurse does
- Elements are also active statements, but are about how the nurse does what they do to demonstrate that particular competency
  - Attributes, performance and standards
- Performance criteria are statements of the outcome of the behaviour and actions

# Competency

- Combination of attributes underlying some aspect of successful professional performance
- Can involve single attributes or combinations of attributes
- Observed and tested via performance on tasks, or on wider domains or areas of professional practice
- Standards are the criteria against which performance is judged
- Competency based standards are levels of achievement required for some area of professional practice
- When such standards are specified for a selected range of areas, the result is a set of competency based standards for the profession

# A&D Nursing

- Define practice levels between beginning, advanced and nurse practitioner
- Define the advanced practice role in A&D nursing
- Define education, competency and qualification levels
- Develop health management protocols to support advanced practice
- Have education programs that support a clinical advancement career structure

# How do we go about developing national standards for A&D nurses?

- ANF Policy on competency standards (2005)
- ANMC Principles for the assessment of national competency standards for RN & EN (2002)

Lunch  
13:00 – 13:45

# Group work

- Standards of practice for A&D nurses
  - Beginning practitioner
  - Advanced practice nurse
  - Nurse practitioner

# Afternoon Tea

15:00 – 15:20

# Feedback

- Small group feedback to large group
- Lynda and Margo to collate results for presentation to DANA for their consideration

# DANA Competency Development Group

- Katy Try – DANA President
- Presentation of TOR for DANA Competency Development Group