

## Public consultation: Proposed change to *definitions* relation to *advanced practice*

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### Written response questions for consideration

**Please provide feedback in a word document (or equivalent)<sup>1</sup> to [nmbafeedback@ahpra.gov.au](mailto:nmbafeedback@ahpra.gov.au) by close of business on Friday 19 April 2019.**

The proposed definitions (to be included within the NP registration standard and other relevant NMBA documents) are:

- **Advanced practice** (replacing the current *advanced nursing practice* definition)

*Nurses practising at an advanced practice level incorporate professional leadership, education and research into their practice. Their practice includes relevant expertise, critical thinking, complex decision-making, autonomous practice and is effective and safe. They work within a generalist or specialist context and they are responsible and accountable in managing people who have complex healthcare requirements.*

*Advanced practice in nursing is a level of practice and is not related to a job title or remuneration.*

When the above definition is used for the NMBA's regulatory purpose a second component will be added which is:

*Advanced practice for the purpose of the nurse practitioner endorsement requires 5,000 hours clinically based practice*

- **Nurse practitioner** (replacing the current definition of *advanced practice nurse*)

*Nurse practitioner is a registered nurse endorsed as a nurse practitioner by the NMBA. The nurse practitioner meets and complies with the Nurse practitioner standards for practice, has direct clinical contact and practises within their scope under the legislatively protected title 'nurse practitioner' under the National Law.*

The NMBA is inviting feedback on the following questions:

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<sup>1</sup> You are welcome to supply a PDF file of your feedback in addition to the word (or equivalent) file, however we request that you do supply a text or word file. As part of an effort to meet international website accessibility guidelines, AHPRA and National Boards are striving to publish documents in accessible formats (such as word), in addition to PDFs. More information about this is available at [www.ahpra.gov.au/About-AHPRA/Accessibility.aspx](http://www.ahpra.gov.au/About-AHPRA/Accessibility.aspx).

1. Is the proposed definition of **advanced practice** helpful, clear and more workable compared to the current definition of *advanced nursing practice*?

The proposed definition for **advanced practice** is somewhat helpful, clear and workable compared to the current definition for *advanced nursing practice*.

Overall the definition is clear in intent and would be reasonably straightforward to interpret and demonstrate where the components of the definition are incorporated into nursing practice.

However, APNA believes that interpretation of the definition may be unclear for nurses working in primary health care settings for the term "*autonomous practice*".

This may be already under consideration by the NMBA, but APNA would like to see a glossary included with the definition which explains all terms used within the definition. We highlight that these definitions need to take consideration of the fact that nurses practice in a range of primary health care settings as well as in the tertiary setting, and that the definition needs to be set out in such a way as to allow for nurses in all settings to be able to meet the requirements.

Some specific comments regarding "*autonomous practice*":

Autonomy can be used to describe the ability to make decisions independently and carry out a plan of nursing care, within an individual nurse's scope of practice. However autonomous practice is not contrary to collaboration, and complements the shared work within a multidisciplinary team.

We provide some examples here to illustrate the challenges primary health care nurses may find with the term autonomy in the context of the proposed **advanced practice** definition:

- In certain primary health care settings such as correctional health, health care is predominantly nurse led, and nurses undertake autonomous decision making within their scope of practice, drawing on the multidisciplinary team as required.
- However in general practice, nurses have limited ability to practice autonomously and to full scope of practice due to regulatory and funding constraints. Patients are entitled to Medicare benefits for care delivered predominantly by a GP. There is very little funding available in general practice for nurse-led care in collaboration with other health care providers, or for nurse care delivered 'autonomously'. There are numerous examples of *nurses practising at an advanced practice level* in general practice to develop models of care that meet community need, however their efforts are often not sustainable due to current funding models. Thus, it could be difficult for general practice nurses to demonstrate 'autonomous practice', in the strictest definition of those words.

A clear definition of autonomy that accounts for collaborative work within multidisciplinary teams, would add to the helpfulness, clarity and workability of this definition.

2. Does the proposed definition of **advance practice** meet the needs of both the regulatory and the nursing profession requirements in the Australian context?

Providing the terms contained in the definition are explained, the proposed **advanced practice** definition would meet the regulatory requirements.

With regards to meeting the nursing profession's requirements, we refer to our response to question 1.

### 3. Do you have any other comments on the proposed definition of **advanced practice**?

As previously stated, the terms used in the definition could be more clearly defined for nurses in both tertiary and primary health care settings, to sit alongside the main definition.

It would also be helpful to include some case studies that describe the roles of nurses working at an advanced practice level. Again, these would need to take consideration of the fact that nurses practice in a range of settings.

APNA believes that the *Australian Advanced Practice Nursing Self-Appraisal Tool* (the ADVANCE Tool) is a useful tool to assist nurses and health service managers in operationalising the definition of advanced practice. We feel it would be useful to include a link to the tool with the definition of **advanced practice** nursing. As the NMBA would know, Gardner et al (2016) found that this tool can help to “delineate and define” what is advanced practice nursing.

### 4. Does the proposed definition of **nurse practitioner** (replacing the current definition of *advanced practice nurse*) appropriately reflect the ongoing regulatory requirements of a nurse practitioner?

Yes, this definition is clear.

#### References:

Gardner, G, Duffield C, Doubrovsky A, and Adams M (2016) Identifying advanced practice: A national survey of a nursing workforce. *International Journal of Nursing Studies*, **55**, 60-70.

Gardner, G, Duffield, C, Gardner, A, Batch, M (2017) The Australian Advanced Practice Nursing Self-Appraisal Tool. DOI: 10.6084/m9.figshare.4669432