

Expanding Your Practice

A learning module for nurses
in general practice

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INTRODUCTION

We hope you find this useful as you review your scope of practice, and explore how you may be able to further utilise your skills, develop new competencies and provide additional services to your clients or patients by expanding your practice.

Learning objectives

By completing this module, you will be able to:

- discuss the concept of expanding professional practice
- describe the regulatory, professional and personal considerations when expanding professional practice
- describe the steps to be considered when expanding your practice
- explain how a professional portfolio can be used to support expanded practice.

Purpose of the module

Practice nurses play a key part in the delivery of care in the primary health care sector. In recent times, the role of the practice nurse has developed exponentially with the increased focus by governments and health professionals on promoting healthy lifestyles and health literacy for the broader Australian population. As health professionals, this evolving specialty requires nurses to consider their own scope of practice, and how they may be able to expand their practice safely, lawfully and professionally in order to meet the needs of patients.

The purpose of this learning module is to provide guidance to practice nurses who are either considering expanding their practice, or have been asked to do so by their employer or others. The module refers throughout to the registration standards, codes, guidelines and statements endorsed by the Nursing and Midwifery Board of Australia (NMBA), and other professional standards such as the Competency Standards for Nurses in General Practice (ANF 2005). These documents are not reproduced here, so it is recommended that they be readily accessible via the respective websites when completing the module.

There are many elements to decision making about scope of practice issues. This module is not meant to be an exhaustive review of all the possible ways a nurse could expand his or her practice. Neither does the module address the issue of delegation of tasks or functions to others. A list of further reading is included at the end of the module for those interested in learning more about professional decision making.

NOTE: Relevance of the module to enrolled nurses and Aboriginal and Torres Strait Islander health practitioners

This learning module has been designed for registered nurses seeking to expand their practice. Much of the information here would also relate to an enrolled nurse or Aboriginal and Torres Strait Islander health practitioners seeking to expand his or her area of practice.

However, since there is a legal requirement for enrolled nurses to work under the supervision of a registered nurse, any planned expansion must be with the agreement and input of the registered nurse, and meet the relevant competency standards and other regulatory and professional standards and guidelines

for an enrolled nurse. Aboriginal and Torres Strait Islander health practitioners are not regulated under the Australian Health Practitioner Regulation Agency (AHPRA) at this time, and competency standards have not yet been publicised. This module should provide general guidance only until further information is available from AHPRA following the introduction of national registration in July 2012. Where relevant, note has been made throughout the document to standards which have generic application to Aboriginal and Torres Strait Islander health practitioners.

Instructions

This module is presented in the form of a pdf document. We suggest you read it through in the first instance to familiarise yourself with the content and structure. You may prefer to print it out so that you can easily access exercises and read case histories.

The whole module should take a minimum of **about 90 minutes** to read and complete the exercise in each section. To ensure maximum benefit is gained from undertaking the module, we strongly recommend that you also spend time studying the additional readings and exercises which are included at the end of the module. Alternatively, each part of the module should take **at least 30 minutes** to complete, and could be undertaken individually (but sequentially), if preferred.

Layout

The module consists of three parts:

Part 1: Provides an introduction to the concepts of scope of practice and expanded practice

Part 2: Explores the existing regulatory and professional standards, codes, guidelines and other issues which are pertinent to any consideration of expanding practice, and discusses the steps to be considered to ensure that the process of expanding practice is undertaken in a lawful and professional manner

Part 3: Explores the process for planning and recording relevant continuing professional development and learning experiences in a professional portfolio, with a specific focus on designing the portfolio to provide a plan for, and record of expanded practice. It also provides advice about the process of developing and modifying *Curricula Vitae* to meet specific requirements.

Each part includes either **a case history** and/or **exercise** to support your learning, and includes icons to highlight key concepts. The icons are:



A key point used to highlight information or an activity that is important to your learning in this resource



This icon indicates that you need to reflect about the information or ideas being presented. You may want to write your thoughts down



This icon means you need to seek other resources to gain maximum benefit from the module



At times when completing the learning module you will benefit from making notes and 'ticking things off' which you need to consider in your own practice



This indicates a writing exercise.

NOTE:

It is important that you have access to the NMBA website at www.nursingmidwiferyboard.gov.au,¹ where the framework for practicing as a registered nurse or midwife can be found.

We also suggest that you open the ANF Competency Standards for nurses in general practice (www.anf.org.au²) and have these readily available whilst completing each part of this module.

Acronyms

AHPRA	Australian Health Practitioner Regulation Agency
ANF	Australian Nursing Federation
ANMC	Australian Nursing and Midwifery Council
APNA	Australian Practice Nurses Association
ATSIHP	Aboriginal and Torres Strait Islander Health Practice Board of Australia
CV	Curriculum Vitae
DMF	Decision Making Framework (refers to the document produced by the Australian Nursing and Midwifery Council in 2007).
EN	Enrolled Nurse (as defined by the Nursing and Midwifery Board of Australia)
MBS	Medicare Benefits Schedule
NMBA	Nursing and Midwifery Board of Australia
PNIP	Practice Nurse Incentive Program
RN	Registered Nurse (as defined by the Nursing and Midwifery Board of Australia)
SOP	Scope of Practice

PART 1: SETTING THE SCENE

Working in the primary health care field provides an exciting and evolving role for nurses. General practices are mainly small businesses with general practitioners (GPs) being the business owners, although in recent times more and more general practices are owned by corporations. Employment of a registered or an enrolled nurse entails a significant financial outlay for the practice, and until recently this cost has largely been met through Medicare Benefits Schedule (MBS) payments for completion of specific tasks by the nurse such as immunisation or wound management.

From 1 January 2012, a new funding model called the Practice Nurse Incentive Payment has been introduced by the Australian Government which provides support to general practices to offset the cost of employing practice nurses. This model has opened up opportunities for nurses to re-examine their 'scopes of practice' (SOP), consider the specific needs of their patients, and consider expanding their roles or SOP into new areas. These are exciting times for practice nurses, but before taking these steps, there are several important considerations, which we need to explore in more detail.



'The Practice Nurse Incentive Program (PNIP) ...provides incentive payments to practices to support an expanded and enhanced role for nurses working in general practice'

Medicare Australia www.medicareaustralia.gov.au/provider/incentives/pnip.jsp.³



What is 'Scope of Practice?'

In 2007 the former Australian Nursing and Midwifery Council (ANMC) released an important document entitled *A National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice*.⁴ This publication, which has since been endorsed by the NMBA, and can be found on their website at: www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx, includes a discussion about the term 'scope of practice', and its meaning in relation to the scope of a profession and/or of an individual. In this module we will be focusing largely on the SOP of an individual, but it is important to understand the two definitions, and how they may affect us in our professional work with other health professionals.

Scope of practice of a profession

A profession's scope of practice is the full spectrum of roles, functions, responsibilities, activities and decision making capacity that individuals within that profession are educated, competent and authorised to perform.

Some functions within the scope of practice of any profession may be shared with other professions or other individuals or groups. The scope of practice of all health professions is influenced by the wider environment, the specific setting, legislation, policy, education, standards and the health needs of the population.

Scope of practice of an individual

The scope of practice of an individual is that which the individual is educated, authorised and competent to perform.

The scope of practice of an individual nurse or midwife may be more specifically defined than the scope of practice of their profession. To practice within the full scope of practice of the profession may require individuals to update or increase their knowledge, skills or competence.

ANMC 2007

From these definitions, we can see that, as we well know, nursing has long since moved on from being a list of 'tick box' tasks. This means that what we do in our day-to-day work must 'fit' within our own individual level of education, our competence, within the context of where we are practicing, and within the legal and professional framework. So in other words, your own scope of practice may vary considerably from that of another nurse colleague working in your practice, or in the practice down the road. This is where it is vitally important to understand how we ascertain what steps we need to take to establish our own capabilities and competence, and assess whether we are able to expand our practice to undertake a new role or perform a new task.

IMPORTANT

The focus of the term 'expanding practice' in this module relates to individual nurses undertaking work which is new to them personally, or new to the employing general practice. It is not used to describe nurses undertaking new procedure/s which have not previously been within the scope of the broader nursing profession.

The *National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice (2007)*⁵ includes a couple of very useful flow sheets to assist us in making sure that we consider every aspect of this. These are the *DMF Nursing Flowchart* and a shortened version called the *DMF Summary Guide*. As these tools can assist you with any sort of professional decision making, we strongly recommend that they be downloaded and hung up in a visible place in your practice. The *DMF Summary Guide* is also intended to be a 'pocket guide' to assist with making any unexpected professional decisions at work. Whilst these tools are designed for nurses, they are just as relevant for other health professionals who are also making professional decisions, including Aboriginal and Torres Strait Islander health practitioners.

The framework (2007 p7)⁶ also includes 'statements of principles' which should be considered when thinking about expanding your scope of practice. Table 1 highlights those principles which are relevant to our discussion, with the two left hand columns being taken direct from the framework (2007 p7)⁷ and being relevant for any area of practice, and the two right hand columns providing ideas and alerts for consideration in the general practice setting.

Table 1: Using the ANMC Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice (2007)⁸ statement of principles when considering expanding the role of the practice nurse

Statement of principle	Considerations	Relevance to practice nurse settings	ALERT!
From <i>National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice</i> (2007) ⁹			Some questions to ask yourself and others ...  
The primary motivation for any decision about a care activity is to meet clients' health needs or to enhance health outcomes	There is evidence to support the need for the proposed expansion of practice. Any potential risks or hazards associated with the activity have been considered, and strategies developed to avoid them. The service is patient-centred.	Is there evidence that the proposed expansion of professional practice will benefit patients at the general practice? Is the proposed new service/activity financially viable or funded appropriately? Has a risk assessment been undertaken in collaboration with other practice staff? Are strategies for avoiding risk, realistic and agreed to by all parties?	Is this expansion of practice or new service being proposed purely for the convenience/ financial gain of the practice—or is this genuinely a service or activity that is needed and will lead to better health outcomes? Have you considered all those potential pitfalls? You may need to do a 'SWOT' (strengths, weaknesses, opportunities, threats) analysis with your colleagues to ensure that to the best of your ability you have considered all aspects of this proposed expansion of your practice.
Nurses are accountable for making professional judgements about when an activity is beyond their own capacity or scope of practice and for initiating consultation with, or referral to, other members of the health care team	Proposed plans to expand practice are made in a collaborative way, and are based on: <ul style="list-style-type: none"> ■ lawfulness (legislation and the common law) ■ compliance with evidence, professional and regulatory standards, guidelines and policies <ul style="list-style-type: none"> ■ policies and guidelines of employer ■ context of practice 	The nurse and her practice employer have considered legislative requirements and local planning regulations. Has legal advice been sought to ensure that existing insurances, building codes etc cover the proposed new service/area of practice? Is the proposed new service/area of practice based on the best available evidence? Has the nurse(s) involved established that she/he will be working within the profession's guidelines, codes and competency standards? What steps has she/he taken to have her/his competency assessed?	How do you know that you have or will have the skills to undertake this new practice? Have you done your own research to find out if other practice nurses are doing similar work? How did they go about the process? What worked well, and what difficulties were encountered? You have the opportunity to plan well and avoid making similar mistakes. Have you considered finding a mentor to assist you through the process?
		The practice's policies and guidelines are not in conflict with the proposed new service. The service/area of practice is appropriate to be offered in a general practice setting.	Have you checked the NMBA standards, codes and guidelines to ensure that the expanded practice fits within the professional and individual scope of practice for a registered (or enrolled) nurse.

Statement of principle	Considerations	Relevance to practice nurse settings	ALERT!
	<ul style="list-style-type: none"> ■ capacity to ensure sufficient time and resources. 	<p>The GPs are willing to allocate space for the service to be provided, and time for the practice nurse to undertake the service.</p>	<p>Does your practice have the space and time to do the planned work associated with your expanded practice? Will you, for example, have access to a room of your own to see patients, if required, on a regular basis? What other services will be ceased or handed over to others to give you the time necessary for your new area of practice—or are your hours being extended to cater for it?</p> <p>Has consideration been given to resources required to cover annual leave, sick leave, succession planning?</p> <p>Have the practice's policies and procedures been reviewed/ revised to reflect/support your expanded role?</p>
<p>Nursing decisions are best made in a collaborative context of planning, risk management and evaluation.</p>	<p>Employers share responsibility with nurses to ensure appropriate governance, resources, education, and infrastructure are in place.</p>	<p>Does the practice have the necessary flexibility, resources, time and money to support the expanded role of the practice nurse?</p> <p>Are there other health professionals available who can offer clinical and professional support?</p> <p>What evaluation processes have been considered, and over what timeframe will the evaluation take place?</p>	<p>Make sure that your work colleagues genuinely support your efforts to expand your practice—or if you are being asked to undertake this expanded role, that they understand your professional responsibilities to do this properly. Expanding practice is not something that should happen in a rush—it requires planning, implementation and evaluation. It is an iterative process and requires ongoing monitoring and review.</p>

So as you can see, expanding safely into a new area of practice requires consideration to be given to much more than your own personal situation or career goals.

Consider the following case study, and using Table 1, and your own personal experiences, answer the questions in Exercise 1.



CASE STUDY 1

An established practice in an older suburb has traditionally had an older clientele. In the last few months a big new housing development has been built close to the practice, offering low cost housing, child care and a new pre-school. It is very noticeable that the patient demographics are changing and there are now lots of young mums, babies and toddlers coming to the practice.

RN Frankston has worked at the practice for many years as the only practice nurse, and over that time has developed skills in assessing the health needs of the elderly, providing education and wound care to diabetic patients, and has also recently established an exercise program for the over 75s in conjunction with a local physiotherapist. She has a post graduate qualification in the management of chronic and complex diseases, and recently completed a certificate in wound management, which her employer has fully supported, both financially and professionally.

Now that there are so many younger patients coming to the practice, RN Frankston feels that she needs to expand her scope of practice to include organising immunisation clinics, offering the Healthy Kids check, and supporting breastfeeding mums. She feels some urgency about getting this underway, and speaks to the three GPs in the practice, who support her ideas in theory, but ask her to prepare a report about the resources needed, potential costs and any other considerations.



EXERCISE 1

What do you consider are the most important resource issues?

What do you think are the key things RN Frankston should consider in terms of cost?

What other considerations should be included in the report

Summary of Part 1

In Part 1 we have:

- discussed changes in 2012 for practice nurse incentive payments to general practices, which may create additional incentives for practice nurses to expand their roles
- discussed the meanings and differences of the terms scope of practice of a profession and scope of practice of an individual nurse
- identified key documents which may assist practice nurses in exploring opportunities to expand their practice.

PART 2: UNDERSTANDING THE RELEVANCE OF STANDARDS, CODES AND GUIDELINES



It is essential that you open the following web pages to access the standards and guidelines we will be discussing in this section of the module.

- www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx
- www.anf.org.au—use the ANF search engine to locate the Competency Standards for nurses in general practice



The regulatory framework

In Part 1 we discussed the NMBA endorsed *National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice (2007)*. You will have noticed in that document that there is frequent reference to nursing practice standards and regulatory authorisation. In Part 2 we will explore these concepts in more detail, and from the practice nursing perspective.

In 2010, the regulatory process for Australian nurses and midwives, and nine other health professions, moved from a state-based system to a national system. The Nursing and Midwifery Board of Australia is now responsible for regulating Australian nurses to protect the public. The key functions of the NMBA are listed below, and include developing standards, codes and guidelines for the nursing and midwifery professions. You should have a good knowledge and understanding of these documents, as you are legally bound to practice according to the standards. Of particular relevance to the practice nurse considering expanding his or her practice, are the Competency Standards, and the Codes of Ethics and Professional Conduct as well as the *National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice (2007)* previously discussed.



Table 2: Functions of the board

Functions of NMBA	Some of the standards, codes and guidelines endorsed by NMBA
Registering nursing and midwifery practitioners and students	National Competency Standards for the Registered Nurse (2006) National Competency Standards for the Enrolled Nurse (2002)
Developing standards, codes and guidelines for the nursing and midwifery profession	National Competency Standards for the Midwife (2006) National Competency Standards for the Nurse Practitioner (2005)
Handling notifications, complaints, investigations and disciplinary hearings	Code of Ethics for Nurses in Australia (2008) Code of Ethics for Midwives in Australia (2008)
Assessing overseas trained practitioners who wish to practice in Australia	Code of Professional Conduct for Nurses in Australia (2008) Code of Professional Conduct for Midwives in Australia (2008)
Approving accreditation standards and accredited courses of study	A Nurse's Guide to Professional Boundaries in Australia (2010) A Midwife's Guide to Professional Boundaries in Australia (2010)

Competence

What do we mean by 'competence'? The ANMC Competency Standards (2006)¹⁰ describe competence as the 'combination of skills, knowledge, attitudes, values and abilities that underpin effective performance in a professional/occupational area'. Every RN or EN in Australia should be able to meet their relevant ANMC Competency Standards, and are required to sign an annual declaration acknowledging that they are able to do so.

In addition to the ANMC competency standards, there are also other standards which have been developed for nurses working in specialist or advanced areas of practice. Whilst these are determined by the profession, usually through specialist organisations, rather than by the NMBA, there is an expectation that nurses practicing in a specialist area or at an advanced level should be able to meet the applicable standards. In the practice setting, registered or enrolled practice nurses should be familiar with, and practice according to the Competency Standards for Nurses in General Practice, which were developed by the ANF in 2005.¹¹ For those RNs working in general practice who are very experienced and are practising at an advanced level, it may also be appropriate for them to be practising according to the ANF Advanced Competencies for the RN, which are included in the ANF Competency Standards for nurses in general practice (2005) document.¹² ENs with extensive experience may also be practising according to the ANF Competency Standards for the advanced enrolled nurse.¹³ These advanced competency standards, and the concept of advanced practice will not be discussed in this module, but if you believe these standards are relevant to you, then it is suggested that you undertake further reading. A list of useful resources can be found at the end of this module.

The Competency Standards for Nurses in General Practice (2005)¹⁴ published by the ANF, uses a table format to demonstrate how these three sets of competencies are inter-related. As a health professional thinking of expanding your practice, you need to be familiar with these standards and able to assess whether or not you are able to demonstrate your

competence to others. If you have doubts about your capacity to demonstrate competence then you have a professional responsibility to consider what further steps you need to take to develop your skills and knowledge in order to meet the standards before expanding your practice. This may involve undertaking additional formal study, attending short courses or gaining additional experience through reflection and supervised clinical practice. Indeed, the Competency Standards for Nurses in General Practice (2005 p15)¹⁵ notes that 'registered nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings'.

'Registered nurses in general practice have a responsibility to seek out and engage in ongoing education and professional development to maintain the competencies that are specific to nursing in general practice settings.'

ANF Competency Standards for Nurses in General Practice (2005)

In addition to meeting the relevant competency standards, nurses in general practice are also bound by the Code of Ethics and the Code of Professional Conduct (2008) and should also be familiar with the document entitled *A nurse's guide to professional boundaries* (ANMC 2010). These, together with the competency standards provide a framework for accountable and responsible nursing practice in all practice settings.

Continuing competence

Following the introduction of national regulation in 2010, there is now a regulated requirement that health professionals should be required to demonstrate continuing competence in their field of practice. Within nursing, this means that being able to demonstrate competence at the point of entry to the profession is only the first step—and that there is not only a professional responsibility to maintain competence, but also now a legislated requirement in Australia to demonstrate continuing competence.

There is still debate in the international literature about what 'continuing competence' relates to—i.e. does it mean that a nurse must be able to demonstrate that he or she is still able to meet the entry level requirements to the profession, or does it mean that the level of competence should reflect the experience of the nurse?

In Australia, there is an expectation that continuing competence should relate to the individual's particular scope of practice and area of practice—and will therefore reflect the level of experience of the nurse. This highlights the importance for a nurse considering expanding his or her practice to be able to demonstrate competence against specialist and/or advanced competency standards as well as the National Competency Standards for the Registered Nurse (2006).

Demonstrating continuing competence

Whilst acknowledging that nurses should be able to demonstrate continuing competence, the question arises of how this can be measured and achieved. Again, there is debate in the literature about the most reliable means of assessing continuing competence—with general consensus that competence assessment should not be based solely on theoretical and/or technical skills, but should also include evidence of the nurse's attitudes and individual professional practice within their context of practice. Refer back at this point to the definition of competence we discussed earlier. You will recall that the ANMC National

Competency Standards for the Registered Nurse description of competence was the 'combination of skills, knowledge, attitudes, values and abilities that underpin effective performance in a professional/occupational area'.

Following the introduction of national registration in Australia the NMBA has placed various requirements on nurses in order to maintain their registration. Together, these make up a framework of standards which ensure that the individual nurse maintains his or her competence to practice. The requirements include:

- an annual self-declaration that the nurse is competent to practice
- a recency of practice standard
- the NMBA 'Continuing Professional Development registration standard', which states that nurses (RNs and ENs) must participate in 20 hours of professional development each year, that the continuing professional development (CPD) should be relevant to the context of practice, and that evidence of the CPD must be kept in written form.

The table below explains these components of continuing competence from the perspective of the practice nurse seeking to expand his or her practice:

Table 3: Components of continuing competence

Component required to demonstrate continuing competence	Evidence for a nurse expanding his or her practice
  <p>Self-assessment and self-declaration</p>	<p>As self-assessment is considered subjective, the practice nurse should seek formal feedback relating to his or her competence from an experienced health professional working in the same or similar practice setting. A mechanism should be put in place for regular feedback and support, including a performance review at least annually, and the development of a learning plan relating to the expanded area of practice, which is approved by an experienced health professional.</p> <p>A useful (but older) resource to guide assessment of competence is the <i>ANMC Principles for the Assessment of National Competency Standards for Registered and Enrolled Nurses (2002)</i>.¹⁶</p>
<p>Recency of practice 'Nurses and midwives must have undertaken sufficient practice to demonstrate competence in their professions within the preceding five years. Nurses and midwives who are returning to practice after a break of more than five years must satisfactorily complete a program or assessment process that is approved by the Board.' (NMBA 2010)¹⁷</p>	<p>The practice nurse must ensure that he or she meets the requirements of the NMBA. (NMBA 2011)¹⁸</p>

Component required to demonstrate continuing competence	Evidence for a nurse expanding his or her practice
<p>Undertaking CPD 'Continuing professional development is the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives. The CPD cycle involves reviewing practice, identifying learning needs, planning and participating in relevant learning activities, and reflecting on the value of those activities.' (ANMC 2009)¹⁹</p>	<p>Meets the NMBA requirements. The learning plan should include identification of specific learning needs relevant to the context of practice, evidence that the nurse has reflected on the value of the learning activities or the benefits that participation in the learning activity will have on their practice. (NMBA 2010)²⁰</p> <p>Whilst the NMBA does not specify the format for maintaining records of CPD, a portfolio is considered the appropriate professional means of recording learning activities and career development. Part 3 will look at portfolio development in more detail.</p> <p>For practice nurses considering expanding their practice, the portfolio should include a record of the learning plan, activities undertaken and evidence of reflective learning.</p>

Recently continuing professional development standards have been endorsed by the Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHP) for Aboriginal and Torres Strait Islander health practitioners in preparation for the introduction of national registration in July 2012. These are similar to the requirements for registered and enrolled nurses, and can be found at: www.atsihealthpracticeboard.gov.au/Registration-Standards.aspx.²¹

So now that we have looked at scope of practice and regulatory requirements from the perspective of a practice nurse seeking to expand his or her practice, let's look at an example of how all of these components interrelate to provide a framework for establishing an expanded role for a registered nurse.



CASE STUDY 2

RN Jones has been asked to run a new diabetes clinic and education program at her practice. Whilst she is a fairly experienced practice nurse, she hasn't had much recent experience with patients with diabetes, as they have been cared for by another RN at the practice, who is going on maternity leave soon. There are lots of considerations which RN Jones needs to investigate—not least her professional responsibilities to ensure the safety of patients attending the service.



EXERCISE 2

The table below is deliberately not complete! The left hand column identifies some of the issues which RN Jones needs to consider. The right hand column looks at possible resources, actions and considerations which may assist her as she plans to expand her practice into running a diabetic clinic and education program. Spaces have been left deliberately. Can you think of what else should/might be included? Thinking about your own situation, are there any specific needs for the area in which you intend to expand your practice?

You could add a third column to the table to make this a useful 'checklist' when planning your own area of expanded practice.

Issue	Suggested resources/standards/considerations to be addressed
Is there a recognised client need for this service?	<input type="checkbox"/> Statistical analysis of population health needs of the practice has identified the need for this service <input type="checkbox"/> Stakeholders have been consulted and support the new service <input type="checkbox"/> Can the Medicare Local in my area (or division of general practice) assist by providing help with accessing statistical data? <input type="checkbox"/> Has a project plan been developed?
Has the concept of the service been communicated with all relevant staff, doctors and others?	<input type="checkbox"/> Have all relevant parties had an opportunity to discuss the proposed service? <input type="checkbox"/> Have communication strategies been established to keep all parties informed?
Scope of practice issues— have I sought the appropriate education, supervision and competence assessment by a qualified person to prepare myself for this activity?	<input type="checkbox"/> Check National Competency Standards for the RN—2.5. Understands and practices within own scope of practice <input type="checkbox"/> Check relevant Professional competency standards such as the ANF Competency Standards for Nursing in General Practice <input type="checkbox"/> Assess own competence by seeking advice/feedback from experienced diabetes nurse educators and practice nurses <input type="checkbox"/> <input type="checkbox"/>
Will I be practicing legally? How can I find out? Do I understand my level of accountability?	<input type="checkbox"/> Check state/territory legislation <input type="checkbox"/> Check Health Practitioner Regulation National Law <input type="checkbox"/> Check National Competency Standards for the RN 1.1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Are there policies and procedures in place in the practice to support this expanded role? If not, what is needed? How do I know they are current?	<input type="checkbox"/> Check existing policies and procedures. If found to be absent or limited, research the literature in order to develop evidence-based processes to ensure the safety of patients attending the clinic <input type="checkbox"/> Benchmark and consult with other practices/organisations offering similar services to ensure policies and procedures meet professional standards <input type="checkbox"/>
Are there sufficient resources to run this clinic successfully?	<input type="checkbox"/> Do I have the support of the GPs and practice manager? <input type="checkbox"/> Have I been allocated physical space and materials necessary to run this clinic? (e.g. computer, dedicated room, data projector for presentations) <input type="checkbox"/> A budget has been developed for the clinic, which includes input from me

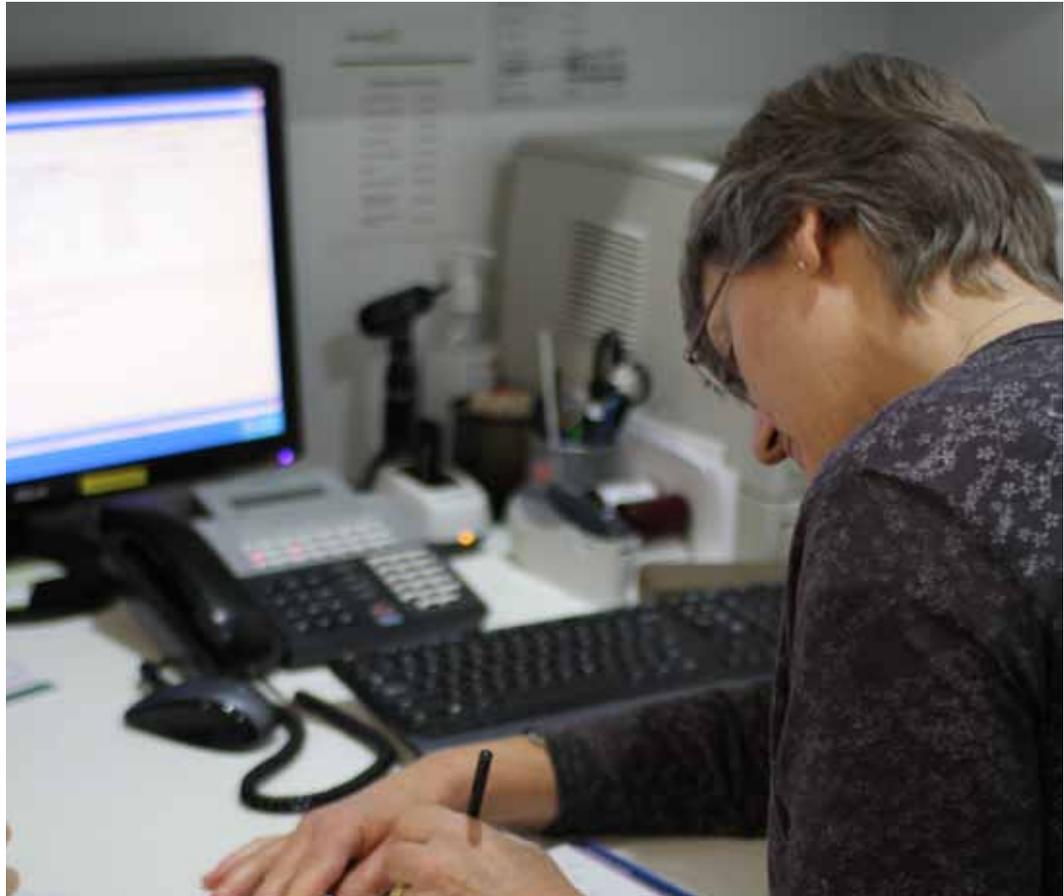
Issue	Suggested resources/standards/considerations to be addressed
Have risk management strategies been put in place?	<input type="checkbox"/> Check practice risk management plan—modify if necessary to accommodate expanded service <input type="checkbox"/> Who will look after the clinic when I am away? <input type="checkbox"/> Is the practice insurance appropriate to, for example, run an education program?
How can I update/increase my clinical skills to ensure I am competent to run this clinic? How will I maintain competence over time?	<input type="checkbox"/> Develop a learning plan based on identified competence/knowledge base issues—set objectives <input type="checkbox"/> Research appropriate courses and/or professional development activities which will assist me in meeting my learning objectives <input type="checkbox"/> Reflect on my learning and continually evaluate my progress and competence <input type="checkbox"/> Record my activities in my professional portfolio <input type="checkbox"/> Review my learning plan <input type="checkbox"/> Ensure performance review is completed at least annually
How will my performance and the service be evaluated?	<input type="checkbox"/> Consider professional mentoring/clinical supervision for ongoing performance monitoring and support <input type="checkbox"/> Identify an evaluation process such as a post program questionnaire, an online survey, utilisation of social networking to capture feedback, external patient satisfaction surveys. <input type="checkbox"/> Can the Medicare Local (or Division of General Practice) assist with helping us to evaluate the effectiveness of the program?

Summary of Part 2

In Part 2 we have:

- discussed the regulatory framework for nurses
- discussed the meaning of competence and continuing competence
- differentiated between regulatory standards, and standards set by specialist and professional organisations
- discussed how regulation and professional standards provide a framework for establishing an expanded role for a registered nurse.

PART 3: PORTFOLIOS



Most nurses have been keeping records of their continuing professional development and learning experiences in an informal way throughout their careers. Prior to national regulation, several jurisdictions had already implemented continuing competence standards, including processes for auditing a percentage of nurses and midwives each year to seek confirmation of their ability to demonstrate competence to practice. However, with the introduction of national regulation in 2010, and the endorsement of the NMBA Continuing Professional Development Registration Standard²² the necessity to keep appropriate records of continuing professional development and learning experiences became mandated for all RNs and ENs.

Keeping a professional portfolio is an accepted way to record your continuing professional development and learning activities. The process doesn't have to be too onerous—but it should be designed to assist you in meeting your learning needs, and be able to stand up to scrutiny, if required.

When considering expanding your practice into a new clinical field or new area, a portfolio becomes an excellent tool to assist you in ensuring that you are competent to do so.

Developing a professional portfolio

We have already noted that maintaining written records of professional development is now a requirement under the standards set by the NMBA. However, how those records are maintained and how the evidence required to meet the standard is presented is left to the individual nurse to decide. There are many examples of paper-based and electronic portfolios available to use as templates, and most professional nursing organisations now include portfolios as part of their membership packages.

Having chosen a specific format for your portfolio, deciding what to include in your portfolio becomes the next challenge. A useful starting point is to develop a statement which summarises the purpose of the portfolio. An example of this which may be helpful to you is as follows:

This portfolio has been designed to provide documentary evidence of my competence as a registered nurse as part of my regulatory requirements with the NMBA, and through my scope of practice as a registered nurse in the specialty of practice nursing. In order to achieve this, the relevant ANMC RN competency standards and competency standards for nurses in general practice have been used as a framework. Examples of evidence have been used to demonstrate both my current performance, and my developing skills in the area of practice nursing.

Based on Andre and Heartfield (2007 p39)²³

Table 4 lists some of the 'generic' information which would be expected to be found in any professional portfolio.

Table 4: What to include in any professional portfolio

- A statement summarising the purpose of the portfolio
- Demographic information—name and contact details
- Professional registrations
- Qualifications, academic transcripts and summary of educational achievements
- Summary of recent or relevant employment, including name of position, name of organisation, dates of employment, summary of responsibilities
- Committee memberships
- Current memberships of professional organisations
- Career goals
- Presentations and/or publications
- Record of continuing professional development
- Copies of previous or current performance appraisals/professional development plans
- Names, titles and contact details of referees
- Current position description (if relevant)
- Details of IHI number, passport, driver's license, and/or visa information for the required 100 point check

Whilst the inclusion of all this information in your portfolio will provide a 'snapshot' of who you are and your professional background, from the perspective of expanding your practice it is important to also consider what evidence to present to demonstrate that you have the knowledge, skills and attitudes to expand your practice. In order to help you with this part of the process, a really useful (and almost essential) thing to do is to spend time writing out **your learning plan** based on your identified learning needs. Depending on what your planned expanded practice will involve, together with your own skills and career history, the learning plan could become a template for your action plan to implement your expanded practice. Andre and Heartfield (2007) call a portfolio designed around such a plan, a 'product oriented portfolio' and describe a benefit of this approach as being its focus on outcomes. By using this approach, and including reference to how you meet the requisite competency standards, your portfolio will therefore have two purposes:

- to provide evidence to meet regulatory requirements for registration
- to provide evidence of meeting identified outcomes relating to expanding the scope of practice.



Developing the learning plan



A learning plan is a written document that reflects two elements of your professional practice:

- what you have identified that you need to learn
- how you are going to actually achieve this.



Developing a learning plan which meets these two elements is sometimes called a 'needs-based' learning plan. If you consider using this approach, you will find the process assists you in thinking through the steps to expand your practice, and will provide a useful point of reference throughout the process.

Have a look at RN Jones' hypothetical learning plan in Table 5. As an exercise it is suggested that you then consider your own planned expansion of practice, and what learning needs you can identify. How will you meet these needs, and how will you evaluate them?

Table 5: RN Jones' draft learning plan

Identified learning need	Method of achievement	Evaluating the outcome
1 Assessment of the patient with diabetes	1.1 Do a literature search to update knowledge about the process of undertaking a diabetic assessment.	1.1 Record personal learning activities in portfolio. Reflect on the assessments undertaken. Did I identify any difficulties in doing these assessments? What gaps did I identify in my knowledge?
	1.2 Arrange to spend time with a practice nurse who is highly experienced. Observe six assessments, undertake six supervised assessments.	1.2 Was my supervisor confident that I had the skills and knowledge to undertake assessments? If not, what were her concerns? If necessary, I will identify how I can undertake more learning to meet this deficit. I have set in place a mentor from another practice who is experienced in management of patients with diabetes to work with me when the other practice nurse leaves the practice. We will meet or phone each other at least weekly for the first month, and then re-evaluate after that.
	1.3 Undertake assessments with GPs in the practice from time to time as a means of benchmarking my skills.	1.3 I have discussed all the above with the GPs in my practice, who have agreed to offer clinical support on a regular or as needs basis.
	1.4 Contact professional organisations (College of Nursing, RCNA, APNA) to see if they hold any courses or workshops which will assist with meeting this need.	1.4 Attended a one-day workshop entitled 'An update on the management of the patient with diabetes'. Approximately three hours was devoted to assessment processes. I am now confident that this, together with (1) and (2) above, have provided me with the confidence, skills and knowledge to undertake assessments.
2 Up-skill myself on providing patient education (it has been some years since I conducted a patient education program, and I am unsure of how to use MS PowerPoint)	2.1 Undertake some reading about adult learning to refresh and update my knowledge.	2.1 Have found an excellent couple of readings developed by a leading professional organisation. I feel confident that I understand how to develop an appropriate program for diabetic patients.
	2.2 Undertake literature search and contact professional colleagues to see if I can locate a current evidence-based education program relating to patients with diabetes rather than 're-inventing the wheel'.	2.2 I have been provided with a patient education program for patients with diabetes from another general practice. After showing this to the other practice nurse and the GPs, I have received feedback that some of it isn't relevant to our program needs, so I have sought permission to modify it to better reflect our patient population.
	2.3 Seek a short course in PowerPoint, or ask for one-to-one assistance from staff member who is 'computer savvy'.	2.3 I have undertaken a half-day beginners PowerPoint workshop, and have spent two full days developing two presentations for the program. I have asked for feedback on the material from one GP and the other practice nurse, and have done a 'dummy run' using the presentations. I have modified the presentations based on feedback received. I am confident that I can use PowerPoint professionally when running the program.



EXERCISE 3

Using the same template, draft your own learning plan based on your planned expansion to your practice. Don't forget to record the time taken to develop your plan, and include this in your portfolio as part of your annual CPD to meet NMBA requirements

Identified learning need	Method of achievement	Evaluating the outcome	
			Total time

Once you start to gather evidence to include in your portfolio you can match your actual achievements against the planned achievements you identified in your learning plan. The evidence will then be able to stand up to scrutiny and support your claim. Evidence could, for example, be as straight forward as a certificate of attendance at a workshop or conference which has provided you with additional education in an area you have identified as needing development. In this scenario, you should also include a statement reflecting on how your attendance at the workshop or conference has assisted you to meet your pre-determined learning goal. Another form of evidence could be a case study you have written up which demonstrates your new skills in your expanded area of practice.

In summary, when formulating your professional portfolio, remember to decide exactly what its purpose is, and how it will be used. Spend time developing your learning plan to make the portfolio become more than a list of what you have achieved. As a professional record, it provides a tool for you to communicate to others about what you can offer professionally and personally to a workplace, and to the profession. It will also provide easily available information for addressing key selection criteria when writing applications. It is worth the time and effort to get it right!



EXERCISE 4

When did you last update your portfolio?

Is it designed in a format to enable you to demonstrate to others that your planned expansion of practice is safe, legal, and justifiable?

Have you provided evidence to support your claim?

Developing and modifying *Curricula Vitae*

A *Curriculum Vitae* (CV) or a *resume* will always be included in a professional portfolio. Its purpose is to include many of those components listed in Table 4, and is important as it is the part of your portfolio which you are likely to be asked to include when applying for new positions. Information about using a CV is included here, because designing a good CV which matches the position being applied for can be tricky, and is often overlooked.

To explain this more fully, let's take the scenario of RN Jones.

Over the last 18 months RN Jones has successfully expanded her practice into the area of diabetes education. She now runs a very successful diabetes clinic and education programs for diabetic patients and their families. Her partner is in the defence force, and is being re-located interstate in a few weeks, so RN Jones is looking for a similar position in her new location. She sees a position advertised to work as a community nurse running a range of health promotion education programs for schools and a local indigenous community. She is uncertain how to write her job application and revise her CV to reflect the relevance of her current role to the advertised position.

Whilst a CV must always provide an honest account of the individual's career history, its design can be modified to emphasise the relevant focus of the recipient. In this case, the position that RN Jones is considering is community-based (similar to the general practice setting—consider what competencies she has which are also relevant to the community setting), primary health care-focused, and includes running an education program for a specific community.



EXERCISE 5

Using the various tables and discussions above, and the relevant competency standards, can you complete the following table to demonstrate what RN Jones could offer to the potential new employer? The first row is provided as an example:

Relevant competency standard	Skills which meet the competency standard and which are relevant in community setting
ANF Competency Standards for nurses in general practice. Competency standard: 1. Professional Practice. 1.1. Practice is based on primary, preventative care or early intervention health care approaches.	Skills in designing education programs in a primary health care setting. Developing resources which are preventative health-focused for different population groups and ages.

By examining what RN Jones currently does, and what she is likely to be expected to do in the new role, and using the competency standards as a guide, it becomes clear that she will have many skills required in her new position. In order to record this in her application and in her CV, it is now a straightforward task to expand in the employment history section of her CV to include information about her current role and what relevant skills she may have. It is also important to highlight any other role in the past which may be of relevance. Generally, a CV doesn't need to contain details about positions held more than 10 years ago (a summary normally suffices), but it may be that a previous role held many years ago did relate to the current application—so is worth emphasising in the CV and job application. For example, let's assume that RN Jones spent time 10 years ago working as a relief school nurse. Whilst this was a long time ago, her familiarity with the school environment could be emphasised in the CV.

From the perspective of a registered nurse planning to expand your scope of practice, you may well be considering applying for a new position, or you may need to provide evidence to your current employer that your existing skills are relevant to your proposed area of interest. Take a fresh look at your portfolio, and particularly your CV. Is it relevant, is it current, and does your evidence support your application?

Summary of Part 3

In Part 3 we have:

- discussed the value of developing a professional portfolio
- discussed how a professional portfolio can reflect a nurse's expanded practice
- discussed how to develop a learning plan
- identified the importance of tailoring portfolios and CV to meet specific needs.

Conclusion

This learning module has described the steps which must be considered if planning to expand a nurse's scope of practice. Information about the regulatory and professional requirements to undertake this has been examined. A checklist is included which may be a useful tool when working through the planning, implementation and evaluation stages. At all times, however, it is emphasised that the safety of the patient(s) is paramount, and responsibility for expanding practice rests with the individual nurse. If in doubt—seek professional advice and support.

APPENDIX 1: EXPANDING PRACTICE CHECKLIST

Issue		Suggested resources/standards/considerations to be addressed	What needs to be done
Is there a recognised client need for this service?	Yes	<input type="checkbox"/>	Statistical analysis of population health needs of the practice has identified the need for this service
	No	<input type="checkbox"/>	
	N/A	<input type="checkbox"/>	
Will I be practicing legally? How can I find out?	Yes	<input type="checkbox"/>	Check state/territory legislation
	No	<input type="checkbox"/>	
	N/A	<input type="checkbox"/>	
Do I understand my level of accountability?	Yes	<input type="checkbox"/>	Check Health Practitioner Regulation National Law
	No	<input type="checkbox"/>	
	N/A	<input type="checkbox"/>	
Scope of practice issues—have I sought the appropriate education, supervision and competence assessment by a qualified person to prepare myself for this activity?	Yes	<input type="checkbox"/>	Check National Competency Standards for the RN – 2.5. Understands and practices within own scope of practice
	No	<input type="checkbox"/>	
	N/A	<input type="checkbox"/>	
Are there policies and procedures in place in the practice to support this expanded role? If not, what is needed? How do I know they are current?	Yes	<input type="checkbox"/>	Check existing policies and procedures. If found to be absent or limited, research the literature in order to develop evidence based processes to ensure the safety of patients attending the clinic
	No	<input type="checkbox"/>	
	N/A	<input type="checkbox"/>	
			Benchmark and consult with other practices/ organisations offering similar services to ensure policies and procedures meet professional standards

Issue	Suggested resources/standards/considerations to be addressed	What needs to be done
Are there sufficient resources to run this clinic successfully?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Do I have the support of the GPs, practice manager and other practice staff? Have I been allocated physical space and materials necessary (e.g. computer, dedicated room, data projector for presentations) to run this clinic? A budget has been developed for the clinic, which includes input from me OR I have developed a budget which has been approved by the practice owners/GPs
Have risk management strategies been put in place?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Check practice risk management plan—modify if necessary to accommodate expanded service Who will look after the clinic when I am away? Is the practice insurance appropriate to run an education program Does the existing public liability insurance for the practice cover the service I plan? Is my professional indemnity insurance current and does it cover the work I will be doing?
How can I update/increase my clinical skills to ensure I am competent to run this clinic?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Develop a learning plan based on identified competence/knowledge base issues. Set objectives. Research appropriate courses and/or professional development activities which will assist me in meeting my learning objectives Reflect on my learning and continually evaluate my progress and competence Record my activities in my professional portfolio Review my learning plan Ensure performance review is completed at least annually
How will I maintain competence over time?		
How will my performance and the service be evaluated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Consider professional mentoring/clinical supervision for ongoing performance monitoring and support Identify an evaluation process such as a post program questionnaire, an online survey, utilisation of social networking to capture feedback, external patient satisfaction surveys

SUGGESTED READING

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