

NURSING

IN GENERAL PRACTICE

A GUIDE FOR THE GENERAL PRACTICE TEAM

The aim

of this kit is to provide the general practice team with guidance on roles and responsibilities, legislative, regulatory, employment and human resource support information to assist general practices to effectively include a nurse within their general practice team.

The kit has been developed by Royal College of Nursing, Australia, with funding from the Australian Government Department of Health and Ageing. It replaces the previous version of the Nursing in General Practice Information Kit, published in 2001 by Royal College of Nursing, Australia, with funding from the Australian Government Department of Health and Ageing, in consultation with other key stakeholders. The kit has been updated in line with the findings of the joint Royal College of Nursing, Australia / Royal Australian College of General Practitioners report: General Practice Nursing in Australia (2003) and other relevant reports, which indicated that general practitioners and the general practice team are calling for more detailed, accurate and appropriate information about general practice nursing to be available.

In updating the kit, an Advisory Group was formed to consult and advise on the content in terms of accuracy and appropriateness. The Advisory Group consisted of members from the following organisations:

- Australian Association of Practice Managers
- Australian Divisions of General Practice
- Australian Medical Association
- Australian Nursing and Midwifery Council
- Australian Nursing Federation
- Australian Practice Nurses Association
- Royal Australian College of General Practitioners
- Western Australian Practice Nurses Association
- Australian Government Department of Health and Ageing

INTRODUCTION

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The Role of the Nurse in General Practice

General Overview

General practices today face many challenges in providing primary health care services to the community. Reasons for this may include the ageing population and the associated rise in chronic conditions, as well as other changing health care needs of consumers.¹ In order to assist general practitioners, the Australian Government has provided various funding initiatives to relieve workforce pressures and highlight national health priorities. For more information regarding the incentives specific to the employment of a nurse in general practice, see **Section 3: Initiatives for Funding a Nurse in General Practice**. Some of the recent changes in policy and funding have encouraged an enhancement of the nursing role.²

The nurse (often termed “practice nurse” or “general practice nurse”) working in general practice has a unique and complementary role in the primary health care system and within the general practice team. One of the primary concerns of the general practice team is to promote safety and quality in patient care. A nurse working within the general practice team can assist in achieving these outcomes.

Several reports³ have suggested different frameworks to describe the role of the nurse in general practice. These frameworks vary depending on a number of factors including: the practice; the individual nurse; patient population; and the resources available to the practice. Factors such as the geographical location, community profile (for example a predominance of either families with young children or people in older age groups), or specialisation of the practice – such as the inclusion of disease specific clinics, will all impact on the nurse’s role. In addition, other influencing factors include national health priorities and funding arrangements, competency standards, the qualifications and experience of the individual nurse, and the practice requirements.⁴

Considerations for General Practice

The role of the nurse in general practice is flexible and there are multiple factors that may impact on the individual role of the nurse in general practice. These include:

Role Description

There are a number of ways of describing the role of the nurse in general practice. One way is to use the competency standards relevant to all nurses, including those specifically for nurses working in general practice. Using the “Competency Standards for Registered and Enrolled nurses in general practice” the role can be divided into the categories of professional practice, provision of clinical care, management of clinical care systems, and collaborative practice.⁵

- **Professional Practice:** includes the requirement for nurses to participate in continuing professional development, adherence to nursing and general practice standards, participating in networking and information sharing amongst colleagues and appropriate supervision where required (**see Section 4** for more information).
- **Provision of Clinical Care:** includes clinical procedures and activities, for example, triage, health assessments, first aid, medication administration, health promotion activities and diagnostic testing.
- **Management of Clinical Care Systems:** includes maintaining best practice procedures through current research, use of recall registers and other workplace systems, maintaining clinical records and reports.
- **Collaborative Practice:** includes communicating with the general practice team (to share information, receive advice when necessary, and participate in shared care decision making), liaising with community groups, and keeping up to date with community health developments.

Further discussion of these and other competency standards can be found in **Section 5: Competency Standards**.

Nurses' Qualifications

The individual nurse's qualifications (for further information see **Section 11: Continuing Professional Development**) and experience will provide guidance to the expected role in the general practice. The professional scope of practice will also impact on expectations of performance. For further information regarding scope of practice see **Section 7: Scope of Practice**. This should be discussed with the nurse at employment and reassessed on a regular basis. Clear and effective communication is important to understand the particular skill set an individual may have.

Practice Demographics

Each practice's unique patient population demographics will influence and shape the role of the nurse in individual practices. For example, a practice may have many older patients, and the nurse's role may be focused on health assessments and falls prevention. In a practice with a large proportion of paediatric patients, the nurse's role would be quite different, perhaps focusing on immunisation and child health issues.

National Influences

National health priorities and funding of primary health care initiatives can also influence the activities nurses undertake in general practice. Some funding initiatives are detailed in **Section 3: Initiatives for Funding a Nurse in General Practice**. However, it is important to be aware of the way in which these arrangements influence the role of the nurse working in general practice.⁶

Further Information

There are many references to the role of the nurse working in general practice. Some are listed below.

- Watts I, Foley E, Hutchinson R, Pascoe T, Whitecross L, Snowdon T (2003) *General Practice Nursing in Australia* page 84, 87, and 106 - 110
- Condon J, Willis E, Litt J. (2000) The Role of the Practice Nurse –an exploratory Study AFP Journal of the RACGP 29(3) March 2000.
- Australian Nursing Federation (2005) Competency Standards for registered and enrolled nurses in general practice Australian Nursing Federation, Melbourne.
- Royal Australian College of General Practitioners <http://www.racgp.org.au>
- Local Divisions of General Practice may also be able to provide more information in regard to this issue <http://www.adgp.com.au/site/index.cfm?display=301>

For detailed information regarding Australian Government incentives see the following websites:

<http://www.health.gov.au/internet/wcms/Publishing.nsf/Content/health-pcd-programs-nursing-index.htm>; and <http://www.medicareaustralia.gov.au/providers>

See also **Section 3: Initiatives for Funding a Nurse in General Practice** for further information regarding Australian Government initiatives for general practice.

How can a nurse enhance your general practice

General Overview

Nurses working in general practice may play an integral part in the general practice team, enhancing the provision of primary care services, and provision of valuable support to the team. Each nurse's role is individual, practice specific and variable; therefore the opportunities for each individual practice in employing or retaining the services of the nurse are also varied. These opportunities should be considered in view of practice specifics such as, patient demographics, case-mix, workload and current staffing. The benefits of nurses working in general practice have also been recognised by the Australian Government through the introduction of several financial initiatives. The financial advantages of employing a nurse are discussed in **Section 3: Initiatives for Funding a Nurse in General Practice.**⁷

Considerations for General Practice

Quality Health Outcomes

The potential for the general practice to provide quality health outcomes can be enhanced where a nurse works in the practice, particularly where their role is targeted to health priority areas. A recent study has found that general practitioners and nurses establish efficient working relationships that enhance the quality of patient care, leading to better health outcomes through collaborative professional practice.

Multi-Disciplinary Approaches

The employment of a nurse in general practice allows for a multi-disciplinary approach to patient care, as the nurse has the ability to undertake and enhance primary care activities, such as undertaking health assessments, the set-up and maintenance of a recall system, and carrying out health promotion activities, patient education, screening and chronic disease management. Nurses can also assist the general practice by providing technical assistance and support in interdisciplinary areas such as immunisation and wound care, and may also enable a practice to increase the services provided to the community.⁸ The ability of appropriately trained nurses to undertake procedures

historically undertaken by the general practitioner such as immunisations, Pap smears and wound care, may enable the general practitioner to realign personal workloads.⁹

Nurses with Specific Skills

Other advantages of employing nurses with specific skills in general practice include the ability for a practice to consider offering targeted, or condition specific clinics. Examples may include asthma, diabetes, women's health, or antenatal care with the nurse providing assessment, patient education and recall procedures.

Other Benefits

General practitioners who already employ a nurse have highlighted the following benefits:

- Increased job satisfaction for the general practitioners.
- Additional support for the general practitioners.
- Reduction in patient waiting times.
- Better range of services offered at the practice.
- Increased capacity for practice to adapt to change.
- Improved management of patients with chronic disease.
- Improved quality of care provided to patients.
- Increased patient satisfaction.
- An additional incentive when recruiting a new general practitioner to the practice.¹⁰

Following are quotations from several Australian general practitioners who work with a nurse in general practice.

‘There is no doubt in my mind that my patients not only enjoy the added professional input contributing to their care but more importantly they benefit with better ongoing medical and preventative care. I would recommend any General Practitioner to avail the support provided by a suitably qualified registered nurse to themselves and their patients’.

GP, Invermay TAS

“We couldn’t cope with our workload without our practice nurses” “A GP working with a practice nurse is much more efficient than one working alone in my experience” “Practice Nurses add a whole other dimension to our practice and we rely on them all the time”

GP, Cranbrook QLD

“As a solo practitioner, I could not practice effectively without my practice nurse. This has been a positive collaboration with the nurse relieving me of many time consuming tasks, adding positively to the practice bottom line and, by bringing a whole set of complementary skills to mine, enhancing the services we are able to provide. A must in the 21st century.”

GP, Clarinda VIC¹¹

Further Information

For more information regarding the benefits of employing a nurse in general practice the following resources may be of assistance:

- Local Divisions of General Practice <http://www.adgp.com.au/site/index.cfm?display=301>
- Australian Divisions of General Practice – Business Case Models <http://www.adgp.com.au/site/index.cfm?display=4002>
- Australian Practice Nurses Association <http://www.apna.asn.au>
- Royal Australian College of General Practitioners <http://www.racgp.org.au>
- Royal College of Nursing, Australia <http://www.rcna.org.au>

In 2002, funded by the Australian Government Department of Health and Ageing, the Centre for Research into Nursing and Health Care, University of South Australia published a report entitled: Consumer Perceptions of Nursing and Nursing in General Practice. It can be found at the following website:

<http://www.health.gov.au/internet/wcms/Publishing.nsf/Content/health-pcd-programs-nursing-consrep.htm>

Initiatives for Funding a Nurse in General Practice

General Overview

The benefits of nurses working in general practice have been recognised by the Australian Government through the introduction of several initiatives. These initiatives assist general practice by providing funding and support to assist them to employ or retain the services of a nurse. Incentives provided under the Practice Incentives Program (PIP) and the Medicare Benefits Schedule (MBS) are outlined below. For information regarding salary and employment conditions for nurses working in general practice, see **Section 9: Salary and Employment Guide**.

Considerations for General Practice

Note that the information provided below was accurate at the time of writing. To obtain the most recent information refer to the sources listed in the 'Further Information' section of this Section.

Practice Incentives Program (PIP) – Practice Nurse Payment

The PIP Practice Nurse payment targets areas where patient access to medical services is limited, such as rural and remote communities and urban areas with workforce shortages.

The increased capacity provided to general practices by the employment of a nurse aims to improve the quality and accessibility of primary care to people living in these communities.

Rural Areas

Through the 2001-02 and 2005-06 Federal Budgets, the Australian Government has provided \$234 million over eight years to support the employment and professional development of practice nurses in rural areas. This program includes an incentive payment for general practices to employ a nurse and/or an Aboriginal Health Worker.

Urban Areas of Workforce Shortage

In 2003, as part of the Strengthening Medicare package, the Australian Government announced funding to assist practices to employ nurses and allied health workers in urban areas of workforce shortage. This program includes an incentive payment for general practices to employ a nurse and/ or an allied health worker such as a dietician, physiotherapist or speech therapist.

Eligibility criteria and further information may be obtained from the Practice Incentives Program (PIP) enquiry line on 1800 222 032. Guidelines may be found at www.medicareaustralia.gov.au/providers/

Medicare Benefits Schedule (MBS) Items for Practice Nurse Services

Immunisation (Item 10993) and Wound Management (Item 10996)

In February 2004, as part of the Strengthening Medicare package, the Australian Government introduced Medicare rebates for immunisation and wound management services provided by a nurse working in general practice on behalf of a general practitioner.

Pap smears in rural areas (Items 10998 and 10999)

On 1 January 2005, a Medicare rebate was introduced for nurses working in general practice to perform Pap smears on behalf of a general practitioner in rural areas. This initiative is part of the Government's Investing in Stronger Regions policy.

Items 10998 and 10999 are only available to practices located in regional, rural and remote areas (RRMA 3-7). Item 10998 is available for practice nurses to take a Pap smear on behalf of a GP from all women, regardless of age or when a Pap smear was last taken.

Item 10999 is available to doctors participating in the Practice Incentives Program (PIP) and commenced on 1 May 2005. Item 10999 applies to Pap smears taken by a practice nurse on behalf of a GP from women who have not had a Pap smear in the previous 4 years and are between the ages of 20 to 69 years inclusive. This item generates a Service Incentive Payment (SIP) to the GP.

Further information on SIP can be found at:

<http://www.medicareaustralia.gov.au/statistics/imd/forms/gpststatistics.shtml>

Enhanced Primary Care (EPC)

Health Assessments – The information collection component of a health assessment may be rendered by a nurse or other assistant in accordance with accepted medical practice, acting under the supervision of the doctor. All other components of the health assessment must include a personal attendance by the general practitioner.

Chronic Disease Management (CDM)

New Enhanced Primary Care (EPC) Medicare items available from 1 July 2005 provide rebates for general practitioners to manage chronic disease by preparing, coordinating, reviewing or contributing to CDM plans.

General practitioners can prepare and review Management Plans for patients with chronic (or terminal) medical conditions. General practitioners can also coordinate Team Care Arrangements and reviews for patients who also have complex needs requiring multidisciplinary care.

Nurses, Aboriginal Health Workers or other health professionals in the medical practice or health service can assist general practitioners with CDM services. This can include, for example, assistance with patient assessment, identification of patient needs and making arrangements for services. The general practitioner must review and confirm all assessments and elements of the CDM service and must see the patient.

Support for Professional Development of Nurses in General Practice

Scholarships may be available to assist nurses working in general practice in their continuing professional development. Professional organisations such as the Australian Practice Nurses Association, Royal College of Nursing, Australia or local Divisions of General Practice (see Section 13: Resources and Contact Information) may be able to provide advice on available scholarships and training opportunities (also see **Section 11: Continuing Professional Development** for more details regarding continuing professional development opportunities).

Further Information

Further information on the Australian Government's PIP practice nurse incentive can be obtained by calling the PIP enquiry line on 1800 222 032. Alternatively, the following website provides detailed information regarding the Practice Incentives Program incentives for employing nurses in general practice.

http://www.medicareaustralia.gov.au/providers/resources/incentives_allowances/pip/pip_guidelines.pdf

Information explaining the circumstances in which a Medicare rebate is payable for a practice nurse service can be found in the Medicare Benefits Schedule (MBS) Book. The MBS Book can be viewed at www7.health.gov.au/pubs/mbs/index.htm. Alternatively, the Health Insurance Commission can be contacted on 132 150.

More information about the MBS Chronic Disease Management Items and EPC health assessments can be found at:

<http://www.health.gov.au/internet/wcms/publishing.nsf/Content/Enhanced+Primary+Care+Program-1>

Divisions of General Practice may also assist general practices to locate the most up to date information on financial incentives <http://www.adgp.com.au/site/index.cfm?display=301>

Other Information

In 2003 the Australian Government funded a project undertaken by Australian Divisions of General Practice (ADGP) to prepare business case studies for various types of general practice. These are split into groups according to size and location of practice (for example: small, large, urban, rural) and give business case models for various uses of a nurse in general practice. Please note these business case models did not include the MBS or CDM items as they were introduced after the models were developed. ADGP have developed an addendum which includes some of these new incentives. The business case models are available to download from the Australian Divisions of General Practice's website at:

<http://www.adgp.com.au/site/index.cfm?display=4002&filter=i&leca=71&did=27843450>

Essential Qualifications and Supervisory Requirements for Nurses in General Practice

Please note: Throughout this section the title Registered Nurse will include reference to Division 1 nurse and the title Enrolled Nurse will include reference to Division 2 nurse.

General Overview

As with all nurses, a nurse working in general practice requires a current practicing certificate, issued by the nursing and midwifery regulatory authority in the state/territory in which the nurse will be practicing. The qualifications of a nurse employed in general practice must be matched to the requirements of the role and will take into account the focus, context and geographical setting of the individual general practice. The minimum essential qualifications are outlined below.

Considerations for General Practice

Essential Qualifications to Practice as a Nurse

The minimum essential qualifications to be held by a nurse employed in general practice are:

Registered Nurse

A person who has undertaken a bachelor level education program of not less than three years (prior to 1985, training was hospital based) and is licensed to practice nursing under an Australian state or territory Nurses Act.¹²

Enrolled Nurse

A person who has undertaken a shorter program of education (usually in a vocational education setting), and is licensed under an Australian State or Territory Nurses Act to provide nursing care under the supervision of a Registered Nurse.¹³

Both Registered Nurses and Enrolled Nurses must be competent to hold registration and must not suffer from an impairment/condition, which can detrimentally affect the quality of their work. More information regarding higher qualifications and further education is available in **Section 11: Continuing Professional Development.**

Registration/Enrolment

All nurses must be registered or enrolled to practice in the State/Territory they will be working in. This registration or enrolment must be updated annually, except in Western Australia, where registration or enrolment is updated every 3 years. All nurses must be able to provide a current practicing certificate. It is possible to check in most states/territories whether a nurse has a current practicing certificate online. The website addresses for State/Territory regulatory bodies are listed in the 'Further Information' section.

Title

Similar to general practitioners, it is illegal for the title of nurse to be used by an individual who is not registered or enrolled. **See Section 8: Other Legal Responsibilities, Ethics and Confidentiality** for more information about this matter. It is also important to note the difference between Registered Nurses and Enrolled Nurses as outlined above.

Supervision

Enrolled Nurses must work in association with a Registered Nurse, with their role being complementary to Registered Nurses. Therefore, Enrolled Nurses must be supervised by a Registered Nurse.

Supervision of Enrolled Nurses by a Registered Nurse is a requirement of nursing legislation. Supervision by a person other than a Registered Nurse is not consistent with the professional standards of the profession and also contravenes legislation. Professional supervision relates to the quality and safety of care and is provided by a member

of the same profession. The general practitioner may have management responsibilities, but a member of the nursing profession, namely a Registered Nurse, must undertake professional supervision of an Enrolled Nurse. It is the obligation of the employing general practice to ensure that appropriate supervisory arrangements are in place.

Supervision and delegation of work to an Enrolled Nurse can be direct or indirect, and will vary depending on the abilities, education, qualifications, scope of practice, experience of the Enrolled Nurse, and contextual factors such as the geographical setting and size of the practice. Following is an explanation of each model of supervision.

Direct Supervision

Direct Supervision is provided when the Registered Nurse is actually present, observes, works with and directs the person who is being supervised.¹⁴ This model applies if an Enrolled Nurse is employed in a general practice where a Registered Nurse is also employed. Under these circumstances one to one supervision will be possible. This is the preferred model of supervision.¹⁵

Indirect Supervision

Indirect supervision is provided when the Registered Nurse is easily contactable but does not directly observe the activities.¹⁶ A Registered Nurse who is employed elsewhere may be contracted to provide indirect supervision of an Enrolled Nurse working in general practice. Under these circumstances regular telephone and electronic communication must be employed. Another arrangement for indirect supervision of an Enrolled Nurse may occur in a general practice that has multiple sites. The Registered Nurse provides indirect supervision for Enrolled Nurses employed in that practice. In this type of situation the Registered Nurse may move between clinics giving supervision to an Enrolled Nurse/s. This model is particularly applicable to practices located in rural or remote settings, or multiple sites where geographical distances make direct supervision impractical. Registered Nurses should be aware of their legal responsibility in regard to supervision of Enrolled Nurses.

Further Information

For further information on specific state/territory nurses regulatory authorities or supervisory requirements telephone the nursing and midwifery regulatory authority in your state/territory (contact details provided in Section 13: Resources and Contact Details) or see the following websites:

ACT: <http://www.nursesboard.act.gov.au>

WA: <http://www.nbwa.org.au>

TAS: <http://www.nursingboardtas.org.au>

NSW: <http://www.nursesreg.nsw.gov.au>

QLD: <http://www.qnc.qld.gov.au>

VIC: <http://www.nbv.org.au>

NT: <http://www.nt.gov.au>

SA: <http://www.nursesboard.sa.gov.au>

The following states/territories have online services available to check whether a nurse is registered or enrolled:

QLD: <https://secure.qnc.qld.gov.au/t1tbmain.asp>

SA: <http://www.nursesboard.sa.gov.au/reg.html>

TAS: <http://www.nursingboardtas.org.au/nbtonline.nsf/AZ?OpenForm>

VIC: <http://www.nbv.org.au/nbv/nbvonline1.nsf/AZ?OpenForm>

WA: <http://www.nbwa.org.au/>

In the ACT, NSW and NT this information is available via telephone. **See Section 13: Resources and Contact Details** for telephone details.

The Australian Nursing and Midwifery Council's Competency Standards for Registered and Enrolled Nurses are available from their website: <http://www.anmc.org.au>

The Competency Standards for Registered and Enrolled Nurses in general practice and the Advanced Competency Standards for Registered Nurses are available from the Australian Nursing Federation: <http://www.anf.org.au/nurses%5Fgp/>

The Australian Nursing and Midwifery Council have also published Guidelines on Delegation and Supervision for Nurses. It is available from their website: <http://www.anmc.org.au>

See Section 13: Resources and Contact Details for alternative contact details for the above listed organisations.

Competency Standards

Please note: Throughout this section the title Registered Nurse will include reference to Division 1 nurse and the title Enrolled Nurse will include reference to Division 2 nurse.

General Overview

There are a number of competency standards available to assist in setting the scope for a nurse working in general practice.

- The Australian Nursing and Midwifery Council's National Competency Standards for Registered Nurses and Enrolled Nurses were developed in consultation with many nursing organisations and are used by the Australian nursing and midwifery regulatory authorities to determine eligibility to practice as a nurse. They are the core competencies required for registration.
- In 2005 Competency Standards for registered and enrolled nurses in general practice were released by Australian Nursing Federation. These competencies are an additional aid for nurses and employers in setting guidelines for practice within the area of general practice.
- There are also Advanced Competency Standards for Registered Nurses, and Enrolled Nurses which provide further frameworks for practice for experienced nurses practicing at an advanced level.¹⁷

Employers need to be aware of and understand these competencies. As part of the responsibility and accountability issues inherent in nursing, Registered Nurses and Enrolled Nurses are required to recognise the limitations of their knowledge base and scope of practice. They must meet the competency standards and be appropriately prepared for the roles they are expected to undertake.

See Section 7: Scope of Practice for further details.

Competency standards for registered and enrolled nurses in general practice have been developed to aid and assist nurses working in general practice and their employers in understanding the unique role of nursing in general practice.

Considerations for General Practice

The significance of the above competency standards is four-fold:

- For Nurses: Nurses use competency standards as their professional framework against which to measure performance and prepare a professional development plan so that competence is maintained and enhanced.¹⁸ To register or enrol all nurses must declare that they meet the relevant core competency standards.
- For Employers: Employers should use competency standards for position description and performance assessment purposes.
- For Nursing and Midwifery Regulatory Authorities: Nursing and midwifery regulatory authorities in each state and territory use competency standards to determine the eligibility of people applying for a licence to practice as a nurse and to assess nurses required to demonstrate continuing competence; and
- For Others: Education providers in both the higher education and vocational education settings can use competency standards as the framework for course development purposes. Competencies also encourage understanding amongst the community regarding the safe and effective care nurses are able to provide.¹⁹

In fulfilling their legal responsibilities and in demonstrating the Australian Nursing and Midwifery Council's National Competency Standards for Registered Nurses²⁰, and Enrolled Nurses²¹, nurses employed in general practices are required to:

- function in accordance with and demonstrate a knowledge of all relevant legislation and common law obligations affecting nursing,
- discharge their duty of care in the course of practice, for example, meet practice standards, and be accountable for nursing actions,
- demonstrate knowledge of policies and procedural guidelines that have legal implications, for example, ensure documentation conforms to legal requirements,
- practice only within the limits of their educational preparation and competence, and
- identify and respond to unsafe practice, for example, implement interventions to prevent unsafe practice and /or contravention of law.

Further Information

The Australian Nursing and Midwifery Council's National Competency Standards for Registered and Enrolled Nurses are available to order from the Australian Nursing and Midwifery Council's website: <http://www.anmc.org.au>.

The Competency Standards for Registered and Enrolled Nurses in general practice and the Advanced Competency Standards for Registered Nurses are available from the Australian Nursing Federation. A toolkit has also been developed to aid in appropriate usage of the standards. <http://www.anf.org.au/nurses%5Fgp/>

For other information specific to nurses working in general practice see the Australian Practice Nurses Association at: <http://www.apna.asn.au>

Legal Liability and Insurance

This section was written with the assistance of Bob Milstein, Principal, Milstein & Associates, Victoria

The information contained here is intended as a brief overview of information specific to legal liability and insurance issues. For further clarification, or specific details your professional indemnity insurance provider should be contacted.

General Overview

Accidents happen. However, sometimes, they happen (or it is believed that they have happened) because of the failure by staff to exercise reasonable care in the circumstances present at the time (this is the standard of care required at law), or due to some deficiency in the practice's systems which causes or contributes to the accident. In these circumstances, two legal issues arise for the general practice:

1. Who is legally responsible for what, and why? and
2. Whose insurance will, can or might provide the necessary coverage-and what should be done to make sure it does?

It is very important that both the nurse and the general practitioner hold or reach a shared understanding on these issues, particularly in relation to the existence and availability of relevant insurance coverage. To understand what sort of insurance might be relevant, it is important to understand several critical legal concepts.

Considerations for General Practice

If a patient is harmed, or is allegedly harmed, as a result of the negligent acts or omissions of a nurse working in general practice, the general practitioners legal responsibility in part depends on whether the practice nurse is:

- an employee of the practice; or
- an independent contractor.

The distinction between these two, while often clear, can sometimes be quite difficult to make.

The Nurse as an Employee

Employers are legally responsible for an employee's negligence, based on the principle of vicarious liability. Under this principle, an employer is legally liable for the negligent acts and omissions of its employees where those acts and omissions arise from or occur in the scope and course of the employment relationship.

It is important to understand that the principle of vicarious liability does not absolve the nurse working in general practice from responsibility or remove their legal exposure. On rare occasions the employer may seek to recover costs from a nurse employee or join them in legal action in relation to a medical negligence claim, or very rarely the patient and the patient's lawyers may decide to sue the nurse alone, or may sue the nurse as well as the employer. The nurse working in general practice may also face exposures additional and unrelated to the prosecution of a claim for compensation. For example, they may face disciplinary proceedings or may have their management investigated by the coroner.

The Nurse as an Independent Contractor

The principle of vicarious liability does not apply in this instance. If the nurse is an independent contractor from a Nursing Agency, Division of General Practice or similar and is not an employee of a general practice, liability for any negligent act by a nurse lies with that nurse. A nurse who is an independent contractor should therefore obtain his/her own professional indemnity cover and the practice who has engaged the nurse should ensure that the nurse

has appropriate and sufficient professional indemnity insurance. The nurse may also need to explore what indemnity arrangements (if any) are provided through the medical practice.

Despite the fact that an independent contractor is not an employee of the general practice, the general practitioner could still face a legal exposure on account of the negligent acts and omissions of the contractor, via a “direct” rather than a “vicarious” liability for employed nurses, as discussed below.

Direct Liability Responsibility

While vicarious liability is an important principle, it is not the only basis upon which the general practitioner can be held liable for the acts and omissions of a nurse working in general practice. Liability (both in connection with an employee, and also an independent contractor-nurse) might be imposed upon the general practitioner directly, on account of a general practitioner’s own acts or omissions. For example, a general practitioner may face direct responsibility for injuries resulting from the acts or omissions of a nurse in general practice where those acts or omissions were the result of the general practitioner’s own negligence, for example by way of:

- inadequate or inappropriate preliminary screening regarding experience, competencies etc (**See Section10 - Employer’s Checklist**);
- inadequate or inappropriate delegation or monitoring;
- the failure to respond, adequately or at all, to identified deficiencies in nursing practice or to complaints about nursing practice; and/or
- inadequate or inappropriate policies, protocols and systems. In this situation, the injury may arise not from the negligence of the nurse but from their adherence to an innately deficient system imposed upon them by others.

For these reasons it is critical that the nurse (whether employee or independent contractor) and the general practitioner identify and agree upon, and then monitor, a range of issues that will govern the rights, roles and responsibilities of the nurse working in general practice in the particular practice setting.

Insurance-who is covered, and for what?

Insurance can be a complicated area, due to the differing legal exposures for nurses and general practitioners, the various insurance policies available, and the various contingencies insurance policies cover. It is very important that the nurse and the general practitioner have a shared, accurate understanding of the scope and availability of insurance coverage, and in particular the extent to which the insurance taken out by the general practitioner provides appropriate protection for the nurse. The availability of insurance coverage is not only very important to the professionals involved, but also to the broader community. Regulatory authorities are increasingly interested to ensure that health professionals are covered by insurance, to make sure that compensation can and will be paid when it ought to be paid.

The general practitioner and the nurse both need to know what insurance coverage the other holds, and what coverage exists, or can be obtained, by, through or on behalf of the general practitioner, the practice or the corporate entity that employs the nurse. Under no circumstances should either a general practitioner or nurse working in general practice assume that everybody and everything will inevitably be covered under the “usual” insurance arrangements that predated the introduction of the nurse into the practice.

Further Information

There are many providers of Professional Indemnity insurance. Please contact your provider for detailed information regarding your specific policy/ situation.

Advice may also be sought from:

- Local Divisions of General Practice <http://www.adgp.com.au/site/index.cfm?display=301>
- Royal Australian College of General Practitioners www.racgp.org.au
- Australian Medical Association www.ama.com.au

Professional indemnity insurance may also be available for nurses through:

- Australian Nursing Federation at <http://www.anf.org.au>,
- Royal College of Nursing, Australia (Guild Insurance) at <http://www.rcna.org.au>,

Scope of Practice

General Overview

The scope of practice for each nurse is based on the individual's education, knowledge, competency and extent of experience and lawful authority.²² Therefore, the scope of practice of the nurse working in general practice will differ for each individual nurse. As part of the responsibility and accountability issues inherent in nursing, nurses in general practice are required to recognise the limitations of their knowledge base and scope of practice. As such, part of a nurse's legal responsibility (in regard to legal requirements) is that they do not practice outside their scope of practice.

The scope of practice for a nurse can be broadened by working together with the employer to establish a mutually agreeable role (dependent on appropriate training and education being available). Employers should be aware of the relevant nursing regulations and standards in their relevant state/territory. These are listed in the Further Information section of this Section, as well as being explained further in Section 5: Competency Standards.

Considerations for General Practice

As the scope of practice of the nurse working in general practice will differ for each individual nurse, it is critical that the general practitioner and the nurse, agree upon, through discussion, negotiation and articulation, both verbally and sometimes in writing, an acceptable scope of practice. This ensures that both the nurse and other members of the team have a shared understanding of this critically important issue and can foster the expansion of the individual's scope of practice through recognition of professional development needs and continuing professional development activities. This is discussed further in **Section 11: Continuing Professional Development**

Nurses in general practice, as with all nurses, are expected to consult with other members of the health care team when nursing care requires expertise that is outside of their individual experience and knowledge. As such, the

general practice team (including the nurse) needs to be aware of the limits of the scope of the nurse's individual practice. The nurse must be able to refuse a task which goes beyond this boundary.

To aid in expanding the individual nurse's scope of practice and understanding his/her boundaries it is important that the general practitioner and the practice team discuss the scope of practice with the nurse, have a detailed job description available and have clear communication channels in place.

Further Information

The Australian Nursing and Midwifery Council have published the following National Competency Standards and Codes:

- National Competency Standards for Registered Nurses
- National Competency Standards for Enrolled Nurses
- Code of Professional Conduct for Nurses in Australia
- Code of Ethics for Nurses in Australia

All of these publications are available on the Australian Nursing and Midwifery Council's website, either to order, or as pdf documents: <http://www.anmc.org.au>

The Competency Standards for registered and enrolled nurses in general practice and the Advanced Competency Standards for Registered Nurses are available from the Australian Nursing Federation: <http://www.anf.org.au/nurses%5Fgp/>. The toolkit accompanying the standards includes a more detailed discussion regarding scope of practice, including how to assess and expand the scope.

Further enquiries regarding scope of practice can also be made to the nursing and midwifery regulatory authority in your state / territory. Further details are in Section 13 – Resources and contact details or the Australian Nursing Federation: <http://www.anf.org.au>

Royal College of Nursing, Australia and Royal Australian College of General Practitioners undertook research into general practice and issued the “General Practice Nursing in Australia by Watts I, Foley E, Hutchinson R, Pascoe T, Whitecross L, Snowdon T” report in 2003. There is detailed discussion in this report of the scope of practice for nurses within general practice. The report is available at www.racgp.org.au or www.rcna.org.au

See Section 13: Resources and Contact Details for alternative contact details for the above listed organisations.

Other Legal Responsibilities, Ethics and Confidentiality

(This section was written with the assistance of Bob Milstein, Principal, Milstein & Associates, Victoria)

General Overview

Both employers and nurses working in general practice must be aware of the relevant regulations, codes and principals inherent in nursing practice, in addition to competency standards (**Section 5**), essential qualifications and supervisory requirements (**Section 4**) and scope of practice (**Section 7**). These include regulations and relevant codes.

Considerations for General Practice

Regulation

In much the same way as the medical profession is regulated by legislation, the nursing profession is also regulated in all Australian states/territories by nursing and midwifery regulatory authorities. The primary intent of the legislation is public protection. Nursing legislation provides powers to regulate nursing practice and nursing education, and to determine disciplinary procedures when necessary. Nursing legislation also stipulates that it is an offence to pass oneself off as a nurse, if one is not registered or enrolled as such.

Code of Ethics/Code of Professional Conduct for Nurses

Ethical practice underpins both the delivery of medicine and the delivery of nursing care. Nurses must adhere to the Australian Nursing and Midwifery Council's Code of Ethics for Nurses in Australia. This code outlines the nursing profession's intention to accept the rights of individuals and uphold these rights in practice.²³ Nurses must also adhere to privacy principles as part of their professional conduct. The professional conduct guidelines for nurses are set out in the Australian Nursing and Midwifery Council's Code of Professional Conduct.²⁴

Nurses are accountable to the community for the nursing care they provide. Nurses working in general practice, therefore, must accept accountability and responsibility for their own actions within nursing practice. For further information regarding vicarious liability, **see Section 6: Legal Liability and Insurance.**

A traditional ideal of nursing is the concern for the care and nurture of human beings regardless of ethnicity, culture, gender, spiritual values, sexuality, disability, age, economic, social or health status, or any other grounds. Nurses acknowledge the diversity and difference in contemporary Australian society and in particular nurses respect and uphold the rights of Australian indigenous people. Nurses are also responsible for complying with privacy principles that are contained in any privacy legislation that is relevant to their practice, and maintaining confidentiality as part of their role in the patient's health care team. The Code of Ethics for Nurses in Australia contains six broad value statements, which state that nurses must:

- respect individual needs, values, cultures and vulnerability in providing care;
- accept the individual's right to make informed choices regarding their care;
- promote and uphold the provision of quality care for all people;
- maintain confidentiality, and share information for the therapeutic benefit of the patient;
- be accountable and responsible; and
- value environmental ethics, as well as supporting an environment that promotes health and well-being.²⁵

Complaints

If a complaint is made against an individual nurse, initial efforts should be made to deal with this at the practice level. If the complaint is unable to be resolved at the practice level it can be forwarded to the appropriate state/territory health complaints body or to the appropriate nursing and midwifery regulatory authority. Complaints forwarded to nursing and midwifery regulatory authorities may relate to a nurse's inability to demonstrate ethical and professional standards of practice or about a mental or physical incapacity, which impairs a nurse's ability to provide nursing care. The nursing and midwifery regulatory authority has the power to inquire into the nurse's competence and/or behaviour and impose sanctions such as fines, specific conditions to practice, or to suspend or cancel the registration or enrolment of the nurse.

Further Information

For further information regarding legislation and legal issues contact the relevant nursing and midwifery regulatory authority. Further details are in **Section 13 – Resources and contact details**.

Information regarding legislation can also be sourced from the Australian Nursing Federation which has branches in each state / territory. Contact details are listed in **Section 13: Resources and Contact Details** or via the website: <http://www.anf.org.au>

The Australian Nursing and Midwifery Council's Code of Ethics for Nurses in Australia and the Code of Professional Conduct for Nurses in Australia are available for download as pdf documents from the website: <http://www.anmc.org.au>

The Australian Government website listed below also has details regarding privacy principles: <http://privacy.gov.au>

The Australian Medical Association "Code of Ethics" 2004 is available on their website: <http://www.ama.com.au>

Royal Australian College of General Practitioners also has policy statements on Ethics and Confidentiality. These are found on their website: <http://www.racgp.org.au>

State/Territory health complaints bodies' details can be found in Section 13 – Resources and contact details.

Salary and Employment Guide

Please note: Throughout this section the title Registered Nurse will include reference to Division 1 nurse and the title Enrolled Nurse will include reference to Division 2 nurse.

General Overview

As with any other employment, employing a nurse in general practice involves a recruitment and induction process and adherence to equal employment opportunities. Recruitment includes a number of tasks including: devising a role description; selection criteria; advertising; interviewing, appointment and negotiation of a contract of employment, award or agreement. Salary negotiations are also a part of the recruitment process, and should be considered prior to and/or during recruitment. The induction process may include a practice overview, induction program, practice policy and procedures, mentoring, and continuing professional development opportunities / expectations. (See **Section 11: Continuing Professional Development** and **Section 13: Mentoring for more detailed information**).

Both recruitment and induction are practice specific. When considering the employment of a nurse it is important to note that there is a difference between registered and enrolled nurses and some consideration as to which role will best suit the practice's needs should be undertaken. See **Section 4: Essential Qualifications and Supervisory Requirements for Nurses in General Practice**, and **Section 7: Scope of Practice** for further information regarding the differences between registered and enrolled nurses.

Considerations for General Practice

Salary

Nurses' salaries, classification structures and conditions of employment vary across states and territories, and most have different awards which set out minimum pay and conditions. Some states and territories also have awards that apply specifically to nurses working in medical rooms. These awards set out minimum pay, but employing a nurse with appropriate skills, knowledge and experience will require a competitive remuneration package. Health care providers around the country have entered into industrial agreements with their nursing staff, and this should be considered when negotiating remuneration.

Other factors involved in salary negotiation may include the nurse's individual skills and experience and any further qualifications the nurse may hold (see **Section 11: Continuing Professional Development**).

Recruitment and Induction

The process of employing a nurse in general practice can be broken down into the recruitment and induction processes.

Recruitment

- **Role Description:** a role description should be formulated, which clearly articulates the expectations, minimum requirements and selection criteria of the nurse in the practice.
- **Selection Criteria:** Selection criteria should include items such as qualification level, hours of work, and desirable experience, practical skills and personal attributes.
- **Advertising:** Consideration should be given to advertising, which may be internal, external, within the Division or local area, in local or state papers.
- **Selection and Appointment:** After reviewing the applications, a shortlist of candidates may be formulated against the selection criteria, contact with referees and the undertaking of interviews. Once a candidate has been selected the position should be offered and followed up in writing setting out the details that will form the contract of employment. Notification should be provided to unsuccessful applicants.
- **The Contract of Employment:** There are conditions which should be specified in any employment contract.

These may include items such as:

- position title;
- the name of the award or agreement that is to apply to the employment;
- term of employment period;
- remuneration;
- superannuation;
- classification;
- hours of work;
- leave entitlements;
- workers compensation;
- occupational health and safety;
- confidentiality; and
- termination of employment.

Contact “Wagenet” (details listed in Further Information of this section) for information pertaining to contracts of employment, awards and agreements specific to your state/territory. For details regarding funding initiatives, **see Section 3: Initiatives for Funding a Nurse in General Practice.**

Induction

The induction process helps ensure the nurse quickly becomes confident and competent in their role. It is important to establish communication mechanisms and systems quickly to ensure that nurses work effectively in the practice.²⁶ The induction process should:

- allow the nurse to understand their own role;
- provide clear guidance on where they fit into the organisation as a whole; and
- enable the nurse to work safely and effectively within the new work environment.²⁷

The employer should also consider whether the nurse requires upskilling to meet specific practice needs. **See also Section 11: Continuing Professional Development** for specifics regarding education and training opportunities.

Further Information

For details regarding identifying the correct award or agreement or with developing employment contracts please contact the Australian Nursing Federation. The website is at <http://www.anf.org.au>.

“Wagenet”

The following website sets out minimum pay rates and conditions: <http://www.wagenet.gov.au>

It also has a telephone service where advice is available regarding which awards apply to a specific business.

NSW, VIC, TAS, ACT, and NT	Ph: 1300 363 264
QLD	Ph: 1300 369 945
SA	Ph: 1300 365 255
WA	Ph: 1300 655 266

If no specific award applies, then a contract or a certified agreement will need to be prepared.

For further information on practice nurse recruitment and induction processes it is recommended that you contact your local Division of General Practice. <http://www.adgp.com.au/site/index.cfm?display=301>

The Australian Practice Nurses Association can also assist with recruitment and induction information. Further details are in **Section 13 – Resources and contact details**

The competency standards for nursing in general practice toolkit provides information on using the competency standards for job descriptions, induction and performance appraisal. <http://www.anf.org.au/nurses%5Fgp/>

Employers Checklist

The following checklist is a basic guide for the employer to complete during the recruitment process to ensure prospective nurses are appropriately qualified. It also gives an overview of the information contained in Sections 4 - 9 of this information kit.

- Sighted current Practicing Certificate issued by appropriate State / Territory
Section 4
- Is aware of and meets ANMC National Competency Standards for Registered or Enrolled Nurses (as appropriate)
Section 5
- Is aware of and meets Competency Standards for Registered and Enrolled nurses in General Practice
Section 5
- Is familiar with the key principles of the Code of Professional Conduct, and Code of Ethics for Nurse in Australia, as developed by Australian Nursing and Midwifery Council
Section 8
- Discussion of role responsibilities and scope of practice has been undertaken with prospective employee
Section 7
- Both employee and employer are aware of complaint and inquiries procedures
Section 8
- Formal or informal communication channels are in place in the workplace Is aware of responsibilities and is able to act in supervisory role (both direct and indirect) with respect to Enrolled Nurses (Division 2) where necessary in the practice.
Section 4

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Employers Checklist

Continuing Professional Development

General Overview

Continuing professional development (CPD) is a vital part of every nurse's career, keeping the nurse up to date in professional practice, thus ensuring safety and quality in patient care.

The concept of CPD is not new although the notion and the need for life long learning is just emerging amongst the nursing profession. Some professional nursing organisations have developed a nationally consistent approach to the provision and support of nurses undertaking CPD as part of their professional responsibilities. In the current dynamic health environment, there is widespread agreement that nurses are responsible for keeping themselves up to date in their practice to ensure that they remain competent.

Most nursing and midwifery regulatory authorities in Australia may now request evidence from nurses to demonstrate that they are competent to practice. One component of this is to provide evidence of undertaking CPD. It is recognised as being the joint responsibility of the individual nurse, the employer and the profession.

The general practice team should take into account the need to provide their nurses with the opportunity to attend CPD activities as part of their employment obligations. Provision for staff education is also a requirement as part of the accreditation process of general practices, and is also stipulated in the Royal Australian College of General Practitioners Standards for General Practice.²⁸

Considerations for General Practice

There are a number of organisations offering further education and CPD activities specifically for nurses working in general practice. As well as traditional nursing related activities, nurses working in general practice may also undertake activities in non-traditional areas, such as practice management, database management and computer skills. While these areas are not nursing specific they can further enhance the role of the nurse in the practice.

Divisions of General Practice

Many local Divisions of General Practice hold up-skilling and education activities regularly. This also gives nurses working in general practice the opportunity to network with other nurses working in general practices in the area. It is important to note that the nurse may require time off to attend continuing education activities, and this should be discussed at the time of employment. **See Section 9:** Salary and Employment Guide for further discussion.

Other Learning Opportunities

There are also many online education opportunities, workshops, conferences and scholarships available to nurses. Membership of professional nursing organisations and subscriptions to nursing publications also offer ways of keeping updated in the particular area of expertise required. Some professional organisations, such as Royal College of Nursing, Australia and the Australian Practice Nurses Association, offer career planning and continuing professional development opportunities as part of membership.

Tertiary Education

Some nurses may have, or wish to undertake, further tertiary education, such as a certificate /diploma /graduate diploma /masters course of study in an area of nursing that is relevant to a particular general practice. Examples may include studies in rural and remote health, gerontological or, paediatric nursing, midwifery, women's health, diabetes or asthma management, health education, primary health care, cultural awareness, aboriginal health, travel health or immunisation.

Many universities also offer post-graduate education for nurses, as well as some specific to general practice. Information regarding the courses available can be found on the Australian Practice Nurses Association website: <http://www.apna.asn.au> or on the Royal College of Nursing, Australia website: <http://www.rcna.org.au>

Further Information

Organisations offering information about CPD activities for nurses working in General Practice include:

Australian Practice Nurses Association:
<http://www.apna.asn.au/site/index.cfm>

Royal College of Nursing, Australia:
<http://www.rcna.org.au/pages/cpd.php>

Western Australian Practice Nurses Association:
<http://www.wapna.org.au/index.html>

Australia Association of Practice Managers:
<http://www.aapm.org.au/>

The College of Nursing:
<http://www.nursing.aust.edu.au/EDUCATION/>

Australian Divisions of General Practice:
<http://www.adgp.com.au/site/index.cfm?display=301>

Royal College of Nursing, Australia and Royal Australian College of General Practitioners undertook research into general practice and issued the "General Practice Nursing in Australia" by Watts I, Foley E, Hutchinson R, Pascoe T, Whitecross L, Snowdon T report in 2003. The report detailed discussion of the CPD opportunities available to nurses working in general practice. This report is available at www.racgp.org.au or www.rcna.org.au

Also contact your local Division of General Practice for further information regarding upcoming nurse education, information and networking opportunities. <http://www.adgp.com.au/site/index.cfm?display=301>

The competency standards for nurses in general practice toolkit includes a resource to assist nurses to plan their professional development using the standards. <http://www.anf.org.au/nurses%5Fgp/>

Mentoring

General Overview

Mentoring refers to a relationship in which a more experienced person acts as a role model or guide for a less experienced colleague. Mentoring is being integrated into the Australian healthcare setting across a wide range of initiatives including tertiary healthcare education, healthcare leadership programs, and as part of broader health workforce initiatives. The purpose of mentoring is also to foster the improvement of quality and safety in patient care.

Considerations for General Practice

Mentoring can be undertaken in four main ways, one to one, peer or co-mentoring, group mentoring and distance mentoring. Mentoring is a relationship that may last as long as a person's career. The most traditional²⁹ form of mentoring is one to one mentoring. This contact may be face to face, via the telephone, or email.

Mentoring is a key factor in effective support for nurses in general practice. To ensure effective and sustainable mentoring systems, information has been developed which addresses the specifics of mentoring in relation to general practice nursing. This is available from the Australian Government Department of Health and Ageing website, noted in the Further Information section of this Section.

Benefits of mentoring in general practice can be divided into two main groups. The benefits provided to the nurse, and the benefits provided to the general practice.

Nurse Benefits

Mentoring in the general practice environment is thought to enhance the nurse's contribution to general practice, minimise the effect of professional isolation of nurses working in general practice and assist nurses to identify career pathways.³⁰ It can also aid the nurse in developing confidence, and in planning professional development activities.

General Practice Benefits

Benefits include the attraction and retention of skilled nurses, and improved networking between individuals and practices to promote quality clinical practice.³¹ Other benefits to the practice may also include an improvement in employee commitment, as well as enhancing the practice's culture and image.³²

Further Information

Contact your local Division of General Practice for information regarding mentors or mentoring. The Division may also have information on specific mentors that are available in the local area, or contacts in other areas. <http://www.adgp.com.au/site/index.cfm?display=301>

The Australian Practice Nurses Association can also assist with organising mentors for staff. See the website for contact details: <http://www.apna.asn.au>

Mentoring Sections are available from the Australian Government Department of Health and Ageing website: <http://www.health.gov.au/internet/wcms/Publishing.nsf/Content/pcd-nursing-pubs>

The Australian Mentor Centre is an organisation focusing on bringing together the Australian mentoring community. For further details see the website: <http://www.australianmentorcentre.com.au>

An additional resource might be <http://www.aarn.asn.au/projects/mentor.htm>

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Resources and Contact Information

Association for Australian Rural Nurses

PO Box 327 DEAKIN WEST 2600

Phone: 02 6162 0340

Fax: 02 6162 0740

Website www.arn.asn.au

Australian Association of Practice Managers

PO Box 2477 FORTITUDE VALLEY BC 4006

Phone: 1800 196 000

Fax: 07 3257 7899

Email: national@aapm.org.au

Website: <http://www.aapm.org.au>

Australian Divisions of General Practice Pty Ltd

PO Box 4308 MANUKA ACT 2603

Phone: 02 6228 0800

Fax: 02 6228 0899

Email: adgpreception@adgp.com.au

Website: www.adgp.com.au

Australian General Practice Accreditation Ltd

PO Box 2058 MILTON QLD 4064

Phone: 1300 362 111

Fax: 1300 362 112

Email: info@qip.com.au

Website: www.agpal.com.au

Australian Government Department of Health and Ageing

GPO Box 9848 CANBERRA ACT 2601

Phone: 02 6289 1555

Freecall: 1800 020 103

Fax: 02 6281 6946

Email: nigp@health.gov.au

Website: <http://www.health.gov.au/internet/wcms/publishing.nsf/Content/Home>

Australian Medical Association

PO Box 6090 KINGSTON ACT 2604

Phone: 02 6270 5400

Fax: 02 6270 5499

Email: ama@ama.com.au

Website: www.ama.com.au

Australian Mentor Centre

PO Box 290 SOUTH MELBOURNE VIC 3205

Phone 03 9685 7594

Fax: 03 9685 7596

Email: info@australainmentorcentre.com.au

Website: www.australianmentorcentre.com.au

Australian Nursing Federation

PO Box 4239 KINGSTON ACT 2604

National Office:

Phone: 02 6232 6533

Fax: 02 6232 6610

Email: anfcanberra@anf.org.auWebsite: www.anf.org.au**State Branches:***Australian Capital Territory*

Phone: 02 6282 9455

Website: <http://www.actanf.org.au>*New South Wales*

Phone: 02 9550 3244

Website: <http://www.nswnurses.asn.au>*Northern Territory*

Phone: 08 8981 2711

Website: <http://www.anfnt.org.au>*Queensland*

Phone: 07 3840 1444

Website: <http://www.qnu.org.au>*South Australia*

Phone: 08 8363 1948

Website: <http://www.sa.anf.org.au>*Victoria*

Phone: 03 9275 9333

Website: <http://www.anfvic.asn.au/>*Western Australia*

Phone: 08 9218 9444

Website: <http://www.anfwa.asn.au/>*Tasmania*

Phone: 03 6223 6777

Website: <http://www.anftas.org>**Australian Nursing and Midwifery Council**

PO Box 873

DICKSON ACT 2602

Phone: 02 6257 7960

Fax: 02 6257 7955

Website: www.anmc.org.au**Australian Practice Nurses Association**

1 Palmerston Cres

SOUTH MELBOURNE VIC 3205

Phone: 03 9682 3820

Fax: 03 9682 1276

Email: service@apna.asn.auWebsite: www.apna.asn.au**The College of Nursing**

Locked Bag 3030

BURWOOD NSW 2134

Phone: 02 9745 7500

Fax: 02 9745 7502

Website: www.nursing.aust.edu.au**Council of Remote Area Nurses of Australia**

PMB 203

ALICE SPRINGS NT 0871

Phone: 08 8953 5244

Fax: 08 8953 5245

Email: crana@crana.org.auWebsite: www.crana.org.au**Royal Australian College of General Practitioners**

1 Palmerston Cr

SOUTH MELBOURNE VIC 3205

Phone 03 9214 1414

Fax 03 9214 1400

Email: racgp@racgp.com.auWebsite: www.racgp.org.au**Royal College of Nursing, Australia**

PO Box 219 DEAKIN WEST ACT 2600

Phone: 02 6283 3400

Fax: 02 6282 3565

Email: canberra@rcna.org.auWebsite: www.rcna.org.au**Rural Doctors Association of Australia**

PO Box 5361 KINGSTON ACT 2604

Phone: 02 6273 9303

Fax: 02 6273 9308

Email: office@rdaa.com.auWebsite: www.rdaa.com.au

Western Australian Practice Nurses Association

Phone: 08 9401 6891
 Fax: 08 9401 6891
 Website: <http://www.wapna.org.au/index.htm>

Medicare Australia

PO Box 1001 TUGGERANONG DC ACT 2901
 Phone: 02 6124 6333
 Fax: 02 6124 6222
 Email: medicare@medicareaustralia.gov.au
 Website: www.medicareaustralia.gov.au

Nursing and Midwifery Regulatory Authorities

Nurses and Midwives Registration Board of New South Wales

PO Box K599 HAYMARKET NSW 1240
 Phone: 02 9219 0222
 Alt Phone: 1800 241 220 (NSW rural access)
 Fax: 02 9281 2030
 Email: nursesreg@doh.health.nsw.gov.au
 Website: www.nmb.nsw.gov.au

Nurses Board of the Australian Capital Territory

PO Box 976 CIVIC SQUARE ACT 2608
 Phone: 02 6205 1599
 Fax: 02 6205 1602
 Email: nursesboard@act.gov.au
 Website: www.nursesboard.act.gov.au

Nursing Board of the Northern Territory

GPO Box 4221 DARWIN NT 0801
 Phone: 08 8999 4157
 Fax: 08 8999 4196
 Email: healthprofessions.ths@nt.gov.au
 Website: www.nt.gov.au

Nurses Board of South Australia

PO Box 7176 HUTT STREET SA 5000
 Phone: 08 8223 9700
 Fax: 08 8223 9707
 Email: registrations@nursesboard.sa.gov.au
 Website: www.nursesboard.sa.gov.au

Nursing Board of Tasmania

PO Box 847 SANDY BAY TAS 7005
 Phone: 03 6224 3991
 Fax: 03 6224 3995
 Email: nbt@nursingboardtas.org.au
 Website: www.nursingboardtas.org.au

Nurses Board of Victoria

GPO Box 4932 MELBOURNE VIC 3001
 Phone: 03 8635 1200
 Fax: 03 8635 1235
 Email: registration@nbv.org.au
 Website: www.nbv.org.au

Nurses Board of Western Australia

Locked Bag 6 EAST PERTH WA 6001
 Phone: 08 9421 1100
 Fax: 08 9421 1022
 Email: info@nbwa.org.au
 Website: www.nbwa.org.au

Queensland Nursing Council

GPO Box 2928 BRISBANE QLD 4001
 Phone: 07 3223 5111
 Fax: 07 3223 5115
 Email: registrations@qnc.qld.gov.au
 Website: www.qnc.qld.gov.au

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15. *Ibid.*
16. *Ibid.*
17. *Ibid.*
18. Australian Nursing and Midwifery Council (2000) *National Competency Standards for the Registered Nurses* ANMC Canberra p3.
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