



Assistants in nursing¹ providing aspects of nursing care

The purpose of this position statement is to clarify the registered nurse's role when working with assistants in nursing in the delivery of nursing care; and to guide registered nurses and employers in making decisions about the use of assistants in nursing; and in making decisions about delegation, responsibility and accountability in the delivery of nursing care.

This position statement should be read in conjunction with the ANMF guidelines on delegation by registered nurses and midwives and applicable industrial instruments and legislation. Where the assistant in nursing is an undergraduate student of nursing or midwifery, the ANMF position statement on employment of undergraduate students of nursing or midwifery should be used instead of this position statement.

The Australian Nursing and Midwifery Federation is committed to the provision of safe nursing and midwifery care and to ensuring safe practice for workers providing that care. To this end the ANMF considers that assistants in nursing should be regulated and governed under the Nursing and Midwifery Board of Australia Professional Practice Framework².

Nurses and midwives require a high level of complex knowledge, skills and behaviours, cognitive abilities and demonstrated competence in order to maximise client health outcomes across a variety of settings. Nursing and midwifery is equally relevant whether provided in health care and residential facilities, private homes, communities, schools, worksites, doctor's surgeries or other locations.

Assistants in nursing assist nurses in the provision of nursing care where clinically appropriate. All aspects of nursing care undertaken by assistants in nursing are determined, delegated and supervised by a registered nurse. Supervision may be direct or indirect³. There is limited employment of assistants in nursing/midwifery in midwifery services.

It is the position of the Australian Nursing and Midwifery Federation that:

1. Registered nurses are responsible for assessing and providing the nursing care needs of any person who is unable to assume responsibility for managing their own care needs.
2. Registered nurses plan nursing care and deliver or delegate aspects of that care, with input from other members of the health care team, including other registered nurses, enrolled nurses and assistants in nursing, clients and their families.
3. Registered nurses are responsible for the ongoing assessment of nursing care needs of patients and clients and the delegation of nursing activities.
4. Activities delegated by registered nurses to, and undertaken by, assistants in nursing are determined by registered nurses having regard to:
 - the degree of educational preparation of the assistant in nursing;
 - the demonstrated competence of the assistant in nursing;
 - the acuity of the person requiring care;
 - professional standards relevant to delegating care to assistants in nursing;
 - the context in which care is to be provided; and
 - the level of supervision and support required by the assistant in nursing.
5. Employers are responsible for ensuring that all employees are safe and competent to practice in the scope of practice or role for which they have been employed, and have appropriate local policies underpinning their scope of practice or role. For employees who are nurses, midwives or assistants in



- nursing, these policies are based on the employer having successfully completed accredited education and training.
6. Employers are responsible for ensuring that work is carried out within the parameters of appropriate legislation regarding the delegation of nursing activities.
 7. Employers have a responsibility to provide resources and infrastructure for the continuing professional development of all staff involved in the delivery of care.
 8. The assistant in nursing assists registered nurses and enrolled nurses in the provision of delegated aspects of nursing care within the limits specified by their education, training and experience. Assistants in nursing work within a plan of nursing care developed by the registered nurse, and work under the supervision and direction of a registered nurse at all times. This supervision may be direct or indirect.
 9. Assistants in nursing are accountable to the registered nurse for all delegated functions.
 10. The educational preparation of assistants in nursing should:
 - be nationally consistent,
 - be competency based,
 - recognise prior learning and experience,
 - be conducted in the vocational education sector at a level appropriate to facilitate articulation and credit transfer to other nursing or midwifery programs.
 11. The minimum education preparation for assistants in nursing should be a nationally agreed and recognised Certificate III qualification.
 12. Clinical placement of assistants in nursing during their Australian Qualification Framework (AQF) Certificate III qualification should be undertaken in the contexts in which they may be employed as assistants in nursing.
 13. During clinical placements, assistants in nursing must work within the nursing care plan and be under the direct supervision of a registered nurse.
 14. Continuing education should be available for assistants in nursing, with equitable access to study leave provisions.
 15. Registered nurses should be involved in formal and informal education and training of assistants in nursing in the workplace and should be provided with appropriate education to undertake clinical assessment.

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References

1. The term assistant in nursing, means a person who assists registered nurses and midwives and enrolled nurses in the delivery of nursing care.
2. Nursing and Midwifery Board of Australia. 2013. A national framework for the development of decision-making tools for nursing and midwifery practice. Melbourne: NMBA.
<http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx>
3. Ibid.
The definitions of direct and indirect supervision are as follows:
Direct supervision: the registered nurse or registered midwife is actually present, personally observes, works with, guides and directs the person who is being supervised.



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Indirect supervision: the registered nurse or registered midwife works in the same facility or organisation as the supervised person, but does not constantly observe their activities. The supervisor must be available for reasonable access. What is reasonable will depend on the context, the needs of the consumer and the needs of the person who is being supervised.