



Role boundaries in the provision of personal care

Personal care encompasses a range of activities of daily living that a person would normally undertake independently but because of illness, disability or frailty, now requires assistance to perform. The provision of personal care can take place in a range of settings including, but not limited to, hospitals, community settings, primary care and aged care.

The provision of personal care to individuals enables them to live independently and facilitates their integration and participation in the community. This may involve the performance of intimate activities and therefore requires respect for the individual's dignity, independence and choice.

It is important that the person receiving care, or their carer, has a role in directing the care provided and is aware of the different types of workers who will be providing their personal care.

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

1. Any person requiring assistance with personal care has, by definition, some degree of self care deficit. Meeting that self care deficit is primarily a nursing and/or midwifery function.
2. All persons requiring assistance with personal care should first be assessed by a registered nurse or midwife to identify whether there is a health deficit for which a nursing or midwifery assessment should be undertaken and nursing or midwifery care provided.
3. Decisions about whether the personal care should be provided by a nurse/midwife or another level of worker, can only be made by the registered nurse/midwife. Decisions are based on the characteristics of the person requiring care, the activities to be performed, and the competence, education and authority for practice of the person providing the care. Decision making by the registered nurse regarding who can provide personal care must be consistent with the Nursing and Midwifery Board of Australia (NMBA) Decision Making Frameworks (DMF).¹
4. Personal care activities may be performed by a range of people including: family members, home help or home care workers, nurses (registered or enrolled), midwives, or assistants in nursing.
5. A nursing or midwifery assessment must be undertaken when the health status of the person is unstable, where nursing or midwifery intervention is required, or where the person is unable to assume responsibility for monitoring their own ongoing health status. If a nursing or midwifery assessment is indicated, referral should be made to the most appropriate nursing or midwifery service.
6. Protocols for referral, assessment and case allocation must be developed and agreed to by nursing or midwifery organisations and other relevant organisations and must reflect local service arrangements and health and aged care facility agreements.
7. The registered nurse or midwife must be responsible for the nursing or midwifery assessment of people for personal care as the first point of referral and make the professional decision as to delegation of any element of nursing or midwifery care to another worker.
8. Where a nursing or midwifery assessment is undertaken, the registered nurse or midwife has a responsibility to identify:



- the health status of the person;
 - the extent of the self care deficit;
 - the complexity of the care required in relation to the health status of the individual; and
 - the most appropriate health care worker to meet the assessed need.
9. Following the nursing or midwifery assessment, the registered nurse or midwife should determine the most appropriate classification of worker to provide the personal care. The decision is based on the following criteria:
- a registered nurse or midwife should provide the personal care when the complexity of care is such that it requires the skill of a registered nurse or midwife or where an existing health deficit could be exacerbated by the provision of personal care;
 - an enrolled nurse may provide the personal care where following assessment, in the professional judgement of the registered nurse, the care can be safely delegated;
 - an assistant in nursing may provide elements of personal care where, in the professional judgement of the registered nurse, some personal care activities may be safely delegated. This care must be supervised (either directly or indirectly) by the registered nurse, who retains overall responsibility for the care provided²;
 - home care or home help workers, or other such workers may provide the personal care where the health status of the person is stable, the person has been assessed as not requiring nursing or midwifery care, the person retains responsibility for monitoring their own ongoing health status, the worker does not require nursing or midwifery supervision, and the service employing the worker retains overall responsibility for the care provided.

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Reviewed and re-endorsed February 2018

Reference

1. 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>
2. [Ibid](#)