Nurse practitioners are registered nurses with the education and extensive experience required to perform in an advanced clinical role. A nurse practitioner’s scope of practice extends beyond that of the registered nurse.

The nurse practitioner role is well established in other parts of the world. In the United Kingdom, Canada and the United States of America, nurse practitioners have been in place for over 50 years. The role developed more slowly in Australia. Planning for the introduction of the nurse practitioner role into the health care workforce began in the early 1990’s, but advancement was stymied due largely to legislative barriers and strong opposition from pockets within other professions. The first few nurse practitioner appointments were made in New South Wales. In 2001 the first nurse practitioner was appointed to work in a remote area which did not have a practicing doctor. Momentum built, with more advanced practice registered nurses gaining the qualifications and demonstrating the necessary experience for endorsement in the role. Now in 2011 there are 624 endorsed nurse practitioners providing care in Australia.

The title of ‘nurse practitioner’, like those of ‘registered nurse’, ‘enrolled nurse’ and ‘midwife’, is protected under national law. Only those endorsed by the Nursing and Midwifery Board of Australia (NMBA) are able to use the title of nurse practitioner. The NMBA endorses nurse practitioners in accordance with their scope of practice.

The Australian Nursing and Midwifery Council (ANMC), in consultation with nursing organisations, has developed a definition and competency standards for the nurse practitioner role. With the advent of national registration, the NMBA adopted the ANMC National Competency Standards for the Nurse Practitioner. The role of the nurse practitioner is defined in these standards as:

A nurse practitioner is a registered nurse educated and authorised to function autonomously and collaboratively in an advanced and extended clinical role. The nurse practitioner role includes assessment and management of clients using nursing knowledge and skills and may include but is not limited to the direct referral of patients to other health care professionals, prescribing medications and ordering diagnostic investigations. The nurse practitioner role is grounded in the nursing profession’s values, knowledge, theories and practice and provides innovative and flexible health care delivery that complements other health care providers. The scope of practice of the nurse practitioner is determined by the context in which the nurse practitioner is authorised to practice.


The introduction of the nurse practitioner role provides an incentive for advanced registered nurses to progress their nursing career without leaving the clinical setting. The role is designed to augment those of other providers of health, medical and aged services. Key to their role is the nursing model of practice with an emphasis on health promotion and preventative health care.
Their innovative role serves to: improve access to treatment; provide cost-effective care; target at-risk populations; provide outreach services in all settings but in particular outer metropolitan, rural and remote communities; and provide mentorship and clinical expertise to other health professionals.

Nurse practitioners work at an advanced level in many clinical practice settings, which include diabetes care, emergency care, intensive care, women’s health, aged care, palliative care, paediatrics, urology, wound management, mental health, rural and remote health, men’s health, community health, young people’s health, sexual health, pain management, ophthalmology, renal, respiratory, neonatal, orthopaedics, neurosurgery, chronic heart failure, cardiology, continence and oncology.

The majority of the current cohort of nurse practitioners is employed in the public sector in acute care. In addition to roles in the acute care environment, there are nurse practitioners providing a range of effective primary health care services either as a generalist, or by providing a specialist nursing service, e.g. in mental health, emergency, community health, drug and alcohol services, women’s health and aged care. Numbers in this area are still quite low but are expected to increase exponentially with access to MBS and PBS being opened up to nurse practitioners working in a private capacity.

The realisation of this funding reform gives greater choice of health professional and greater access to health services to the community. This is especially important for people who can’t or won’t access mainstream health care services and for those who live in widely dispersed geographical parts of the country.

In aged care settings, nurse practitioners have an important role in providing clinical support for the complex care needs and chronic disease management of residents with diabetes, respiratory conditions, urinary conditions and cardiac disease, to name a few. They provide timely intervention to prevent unnecessary admission to tertiary health care facilities. In addition to this, nurse practitioners in aged care are also undertaking an educative role in the health care of residents.

The title of nurse practitioner should not be confused with that of general practice nurse. A general practice nurse is a registered or enrolled nurse working in a general practice setting.

To become endorsed as a nurse practitioner, a registered nurse must apply to the NMBA. Their application is assessed against the NMBA Registration Standard for Endorsement of Nurse Practitioners. Candidates are required to demonstrate: general registration as a registered nurse with no restrictions on practice; advanced nursing practice in a clinical leadership role in the area of practice in which they intend to practice as a nurse practitioner within the past five years; competence in accordance with the National Competency Standards for the Nurse Practitioner and completion of a masters degree approved by the NMBA.

Sources