**SCOPE OF PRACTICE 2016**

**First year** students must work within the first year scope of practice. **Second year** students must work within the second year scope of practice and their practice can also include skills of the 1st year scope. **Third year** students must work within the third year scope of practice and can also include the skills of 1st and 2nd year scope of practice.

 NB* The third year students will have skills that are within the scope of other years as third year students learn new skills but also consolidate and build on existing skills learnt in previous years.

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<th>Year 1: Unit NUR125 – Novice: Frequent or continuous cues; no patient load; continuous supervision</th>
<th>Year 2: Unit NUR244 – Novice to Advanced beginner: Frequent or occasional cues; medium level supervision (50% patient load)</th>
<th>Year 3: Unit NUR343/344/346 Advanced-beginner: Minimal cues; minimal supervision (100% patient load)</th>
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| Communicate and collaborates appropriately with colleagues, patients & carers/ families.  
- Assist colleagues with patient care as appropriate  
Establish and maintain a therapeutic relationship with patients & families appropriate to the clinical setting & inclusive of psychogeriatric and cognitively impaired clients.  
Perform accurate, concise and appropriate recording and reporting of objective & subjective patient data using appropriate nursing and medical terminology. With continuous support:  
- Handover of 1 patient  
- Discuss evidence-informed rationales for implementing designated nursing care  
- Assess patients’ input/output (direct & indirect observation, fluid balance & food/diet charts)  
- Recognise & report significant fluid balance fluctuations  
With continuous support implement nursing interventions for low acuity patients requiring assistance with ADLs:  
- Positioning & mobility  
- Personal hygiene  
- Oral and eye care  
- Oral dietary intake- assistance and assessment of patient’s eating/swallowing abilities  
- Apply the nursing process (assessment, planning, intervention, rationales and evaluation) in the nursing care of patients with self-care deficits  
- Discuss evidence-based rationales for the above interventions | Demonstrate timely & accurate communication, documentation and evidence informed decision-making which addresses cultural safety & awareness.  
With supervision, implement nursing actions (procedures) for the low and medium acuity medical/surgical patient (50% patient load) including:  
- Perform & document a health assessment  
- Formulate nursing problem statements based on the above data and informed by evidence  
- Conduct pain assessment and associated nursing interventions  
- Monitoring patients and performing ECGs  
- Provide evidence-informed rationales for the above interventions  
Assess respiratory system & function:  
- Describe the determinants of adequate oxygenation and the nurse’s role in assessment and provision of oxygen supplementation  
- Discuss different evidence-informed rationales for providing supplementary oxygen  
Perform a physical and psychosocial assessment of the well child & family  
Apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the nursing care of patients with neurological deficits.  
Apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the nursing care of patients with musculoskeletal deficits, i.e. spinal precautions, neurovascular observations. | Demonstrate professional communication, conduct and evidence-informed decision-making in all aspects of nursing across a range of cultural settings & acuity levels.  
Confidently provide accurate, logical, concise and appropriate recording and reporting of patient data (oral & written) to the health care team.  
Application of the nursing process (assessment, planning, evidence-informed intervention, rationales and evaluation) in a variety of medical / surgical patient care environments for low, moderate and high acuity patients across the lifespan.  
Provide all phases of the nursing process for 100% patient load considering time management, health assessments, planning and prioritising of clinical interventions and care.  
Apply the nursing process (assessment, planning, evidence-informed intervention, rationales and evaluation) for patients requiring medication:  
- Further develop skills in the safe administration of medicines via the oral, topical and parental routes  
- Manage medication regimes for 100% patient load & across varying modalities  
- Intravenous therapy regimes including narcotic infusions, epidurals & PCAs  
- Demonstrate knowledge about the storage and use of Schedule 2, 4 and 8 medications according to facility, statutory, State and Commonwealth Law  
- Discuss the pharmacology & pharmacokinetics of medications administered by the student |

* (con’t)
With support, promote patient comfort & body alignment including:
- Bed making
- Positioning of patient.

With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the administration of S2 oral medications.
- Articulate knowledge of legislation, charting and e-scribe medication administration contexts
- Discuss the pharmacokinetics & pharmacology of all medications to be administered by the student and RN
- Discuss evidence-based rationales for safe administration and management of oral medication (S2 only).

Help with continence management (daily care of indwelling catheters; use of commodes; continence pads, bedpans or urinals).

Use safe and effective infection control measures & standard precautions including:
- Clean and clinical hand hygiene
- Use of personal protective equipment
- Appropriate disposal of waste materials

Assist with care of a low acuity patient requiring isolation or barrier nursing.

Assist with admission and primary health assessment of low acuity patients including:
- Nursing history and primary assessment Appearance/presentation
- Weight and height
- Ward urinalysis
- Vital signs; TPR, BP, RR & pulse oximetry

With support conduct an assessment of patient pain.

With support assist with wound healing by primary intention:
- Dry wound dressing
- Assessment of pressure ulcer risk
- Assessment of falls risk

With supervision, assess and support respiratory function through body positioning and primary care planning and implementation. Discuss student’s role in relation to Emergency Codes (Blue, Green, and Red etc.).

| With support, perform evidence-based nursing techniques in complex wound management, e.g. drain tubes & removal of sutures, staples & complex dressings. |
| With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the administration of S2 & S4 medications (excluding restricted S4 & S8).
| - Articulate knowledge of legislation, charting and e-scribe medication administration contexts
| - Discuss the pharmacokinetics & pharmacology of all medications to be administered by the student and RN
| - Discuss evidence-based rationales for safe administration and management of varying regimes including; oral, IM, nebulised, SC, ocular, aural, nasal, PR & PV PEG/gastrostomy, nasogastric tube
| - Intravenous therapy regimes including IV antibiotics
| With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) for patients with complex hydration and nutritional requirements which may include:
| - Management and care of naso-gastric tubes
| - Measures to maintain fluid balance, i.e. intravenous fluid replacement / supplementation therapy
| - Discuss the rationales for the above interventions
| With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) for patients with complex needs related to the renal system including care and insertion of urinary catheters.
| Work collaboratively with allied health workers & other team members.
| With constant supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) for patients:
| - Exhibiting difficult / challenging behaviours such as aggression
| - Experiencing mental illness and related problems
| - Experiencing withdrawal syndrome and/or dependency behaviours (including working with AOD team)
| - Who are cognitively impaired
| Apply knowledge of emergencies in the clinical setting and the maintenance & use of emergency & resuscitation equipment.
| With close supervision:
| - Perform primary and secondary survey of respiratory, neurological, cardiac, urinary & gastrointestinal system assessments required for high acuity patients & in emergency settings
| - Use the above data to provide evidence-informed nursing interventions which may include monitoring of patients & performing ECGs
| - Provide evidence-based care of patients with tracheostomies, chest drains and central venous access devices (CVAD).
| With supervision, assess patients’ responses to hydration treatments including:
| - Intravenous infusions
| - Venepuncture- to obtain blood sample for evaluation of hydration and haemodynamic status
| - Blood or blood products
| - Total parenteral nutrition
| Discuss evidence-based collaborative management of patients who require the above interventions.
| Recognise and assist with collaborative management of clients
| - Exhibiting difficult / challenging behaviours:
| - Patients with mental health illness and related problems
| - Aggressive patients
| - Withdrawal syndrome and / or dependency behaviours (including working with AOD team)
| - Cognitively impaired patients
| With supervision, apply the nursing process (assessment, planning, evidence-informed intervention, rationales and evaluation) for paediatric patients including assessment, pain management, medication management & family interventions.
| Discuss the rationales for these decisions.
| With support, adapt nursing skills and clinical decision-making in a broad range of nursing contexts including remote area health clinics, mental health and community health facilities and specialised acute care areas.