



Title: Scope of Practice for RIPERNs

Department: Clinical

Approved by: Clinical Risk

Document Name: Scope of Practice for RIPERNs

Purpose:

To clarify:

- The scope of practice for RIPERNs
- The legislative framework governing the RIPERN extended scope of practice
- The internal K&DHS governance processes impacting the extended scope of practice

Scope:

Scope of practice decision-making framework

In accordance with the Australia Nursing & Midwifery Council's Nursing Practice Decision Flowchart, RIPERNs' scope of practice is defined by:

1. The legal authority granted by the Health Practitioner Regulation National Law and the Victorian Drugs, Poisons and Controlled Substances Act.
2. The employer's authority as detailed in organisational policies, procedures and position descriptions
3. Their competence, confidence and preparedness to take account for their own practice
4. Current evidence-based standards and clinical guidelines relevant to their practice

Policy Statement:

To govern the way in which the RIPERN's function within the collaborative model of care at KDHS

The Scheduled Medicines (Rural and Isolated Practice) Endorsement authorises registered nurses to use or supply medicines for nursing practice in a rural or otherwise isolated practice area when a doctor or nurse practitioner is not available.

The aim of this nursing endorsement function is primarily to improve patient access to timely, safe and appropriate care. Advancing nursing practice is an important strategy for positioning health services to respond to the growing demands of an ageing population and diminishing health workforce. Advancing nursing practice ensures that nurses are enabled to achieve and extend their clinical potential, that doctors have a better work-life balance, and that rural communities receive a consistent level of safe and quality emergency care as close to where they live as possible.

Definitions:

RN Registered Nurse
RIPERN Rural and isolated practice endorsed Registered Nurse
UCC Urgent Care Centre
PCCM Primary Clinical Care Manual

Title: Scope of Practice for RIPERNs



Department: Clinical

Approved by: Clinical Risk

Procedure:

1. Legal authority

1.1 Endorsement

The Nursing and Midwifery Board of Australia (NMBA) can [under sections 38(2) and 94 of the Health Practitioner Regulation National Law (2009)] endorse the registration of a registered nurse as qualified to obtain, supply and administer Schedule 2, 3, 4 & 8 medicines for nursing practice in a rural and isolated practice area.

To be considered for endorsement, registered nurses need to meet the NMBA requirements including having undertaken appropriate education and they must work within the State's legislation related to medicines.

1.2 Authority to supply and administer medicines

In Victoria, the Drugs Poisons and Controlled Substances Act (1981) and Regulation enables nurses with this endorsement who are employed in designated rural health services to administer and/or supply a limited range of medicines in particular clinical circumstances and in specific settings. The approved medicines and health services are contained in the Gazettal Approval under Drugs, Poisons and Controlled Substances Act 1981¹

RIPERNs can only use or supply medicines without a doctor's/nurse practitioner's order for patient conditions approved by the Minister and included as a Health Management Protocol (HMP) in the current edition of the Primary Clinical Care Manual (PCCM). If the patient condition is not reflected in the HMP, then the endorsed nurse must arrange for the patient to be seen by a doctor.

2. Organisational authority

2.1 Policies and procedures

The RIPERN is required to comply with the following policies and procedures which can be found on PROMPT: (Refer "Key Aligned Documents")

Practice decisions	Policy and procedure
How and what drugs to supply	Medication Policy
When to supply without a doctor's order	Scope of practice for RIPERNs policy
Clinical decisions for treatment	Scope of practice for RIPERNs policy
Priority of treatment	Triage policy
When and how to transfer	Transfer policy and procedure
What is expected to maintain and prove credentials and clinical competence	Credentialing and scope of practice governance Performance management guidelines

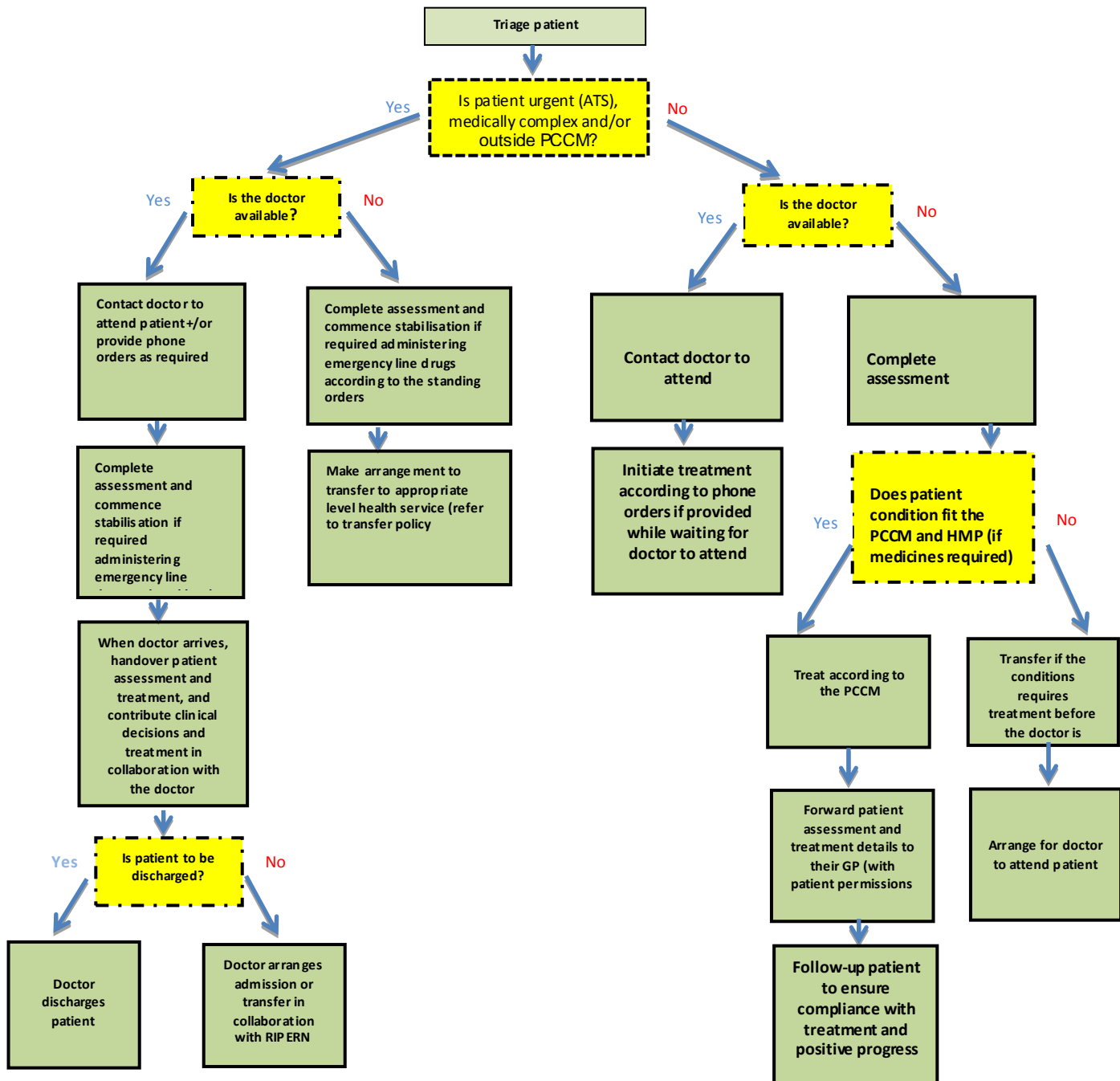
2.2 Context specific scope of practice

The full benefit of the RIPERN role is best achieved by enabling the RIPERN to perform at their fullest scope of practice as defined by the relevant legislation.



The following flow chart is provided to show RIPERNs when and under what circumstances they are authorised by their employer to make clinical decisions, including supplying and administering medicines in the absence of a doctor.

Figure: Template RIPERN scope of practice process map
RIPERN scope of practice flow chart



Title: Scope of Practice for RIPERNs



Department: Clinical

Approved by: Clinical Risk

KDHS collaborative model in relation to the RIPERN practice

KDHS aims to ensure there is always a Doctor on call. It is recognised there is an imperative to ensure that the Medical practice is sustainable from workforce wellbeing as well as a work volume perspective. KDHS takes a collaborative approach to managing clients and the needs of the community by working collaboratively with all health professionals enabling them to practice to the extent of their scope safely and effectively. The following elements guide the collaborative model:

- An urgent presentation that is classified as an ATS category 1 or 2 would be seen by a Doctor as soon as possible.
- A medically complex presentation would be seen by a doctor as soon as possible.
- A non-urgent presentation with an ATS category 3, 4 or 5 may be managed by an RN or RIPERN
- A non-urgent presentation where the condition is supported by a clinical guideline in the PCCM can be managed by a RIPERN.
- A non-urgent presentation during Medical practice opening hours can be directed to the practice for review and management.
- The After Hours Supervisor will collaborate with the GP on call to determine the most appropriate division of non-urgent patient assessment and treatment depending on the particular circumstances of the shift.
- The definition of 'available' is dependent on local situation and consideration should be given to workload, time of day, experience and capability of health professionals, patient presentation and community access to prompt and safe care. The After Hours Supervisor has the authority to assess the situation and determine if the doctor is 'available' and accessible. A discussion between health professionals at the commencement of the shift is the best way to plan for eventualities.

Competence, confidence and accountability

Generally, RIPERNs in Victoria have been prepared through formal education to safely manage many patients who have non-life threatening conditions without needing to contact a doctor.

Specific minor injuries or simple conditions that can be managed by the nursing team can now also be treated with a limited supply of medicines administered and/or supplied by a RIPERN (in accordance with approved health management protocols). The type of clinical conditions RIPERNs are able to now administer and/or supply medication for include basic infections [for example, upper respiratory tract infection (adult); bacterial sinusitis; tonsillitis, sore throat and common cold (children), urinary tract infection; bacterial conjunctivitis; skin infections; cellulitis; candidiasis]; ear ache; tooth ache and abscess; dry socket; flash burn; foreign body or insect in the ear; giardiasis (diarrhoea) and so on]. They must only do so in accordance with the Queensland Health Primary Clinical Care Manual (PCCM).

The RIPERN's level of confidence in their ability to practice at the full RIPERN scope will vary between individual RIPERN's depending on a range of factors, including their exposure to clinical practice at this level. Their confidence is likely to impact of their preparedness to make the autonomous decisions required to take action in the absence of a doctor. It is up to the individual RIPERN to assess their individual level of competence and confidence to make these clinical decisions.

Retaining, maintaining and demonstrating competence

The RIPERN will advise their employer of their scope of practice and actively seek opportunities to ensure they are competent to practice at the scope expected by their employer. The employer will



Title: Scope of Practice for RIPERNs

Department: Clinical

Approved by: Clinical Risk

enable the RIPERN to take part in continuous professional development (CPD) to ensure that they are competent and confident to practice at the scope required by the employer, and meet the legislated CPD requirements as set out by the Nursing and Midwifery Board of Australia ².

The RIPERN is expected to produce evidence that they have complied with the legislated CPD requirements when asked by either their employer or the Nursing and Midwifery Board of Australia (NMBA).

The RIPERN is expected to demonstrate clinical competence annually by:

- Participating in the audit of a random sample of their patient records
- Engage actively in peer review of their patient cases
- Provide evidence of how she/he has responded to any recommendations for improvement in practice or documentation.

Current evidence based standards and clinical guidelines

The RIPERN will follow the clinical guidelines and health management protocols contained in the current edition of the PCCM.

The RIPERN will provide feedback using the appropriate feedback regarding the PCCM clinical guidelines and health management protocols using the form provided by Queensland Health for consideration in the bi-annual review.

Key Aligned Documents:

PROMPT:

[Clinical/Clinical Practice/Medication Management](#)

[Clinical Practice/ Patient Transfer](#)

[Clinical/Urgent Care/Triage](#)

[Corporate/Appointment, Credentialling & Defining Scope of Clinical Practice](#)

[Human Resources/Performance Improvement](#)

References :

- <http://docs.health.vic.gov.au/docs/doc/Gazettal-approval-under-Drugs-PoisonsandControlled-Substances-Act-1981>
- Continuing professional development registration standard:
<http://www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx>
- Continuing professional development registration standard at:
<http://www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx>

Author / Contributors:

Name	Position	Service / Program
Christine Hangan	RIPERN	Nursing
Elise Sullivan	Project Coordinator RIPERN	Department of Health

Keywords:

Medication, Triage