

# Assistants in Nursing Position Statement

November 2014

## **Key Statement**

The Australian College of Nursing (ACN) recognises that assistants in nursing (AIN) can make a valuable contribution to the care registered and enrolled nurses provide, by assisting people with personal care and activities of daily living. The provision of care by an AIN is appropriate in circumstances where the person receiving care has few co-morbidities and whose health status is stable.

The provision of such care is delegated by a registered nurse. AlNs are accountable for accepting and carrying out the care delegated to them. However, the delegating registered nurse is required to supervise the care provided by an AlN and retains the overall responsibility for all delegated activities. The introduction of AlNs into nursing care teams should never be as a substitution for registered and enrolled nurses.

ACN believes that AINs' contribution to nursing care should be underpinned by a nationally endorsed practice framework. This framework should identify the minimum formal education requirements, scope of practice, practice standards, and codes of ethics and conduct for AINs. A nationally endorsed practice framework would facilitate a consistent understanding, utilisation and development of the AIN role across care settings nationally.

# **Background and Rationale**

Assistants working with registered and enrolled nurses are commonly known as assistants in nursing (AINs). AINs have been utilised in the Australian healthcare system for many years, providing a valuable contribution to the health workforce. Whilst the majority of AINs have traditionally been employed in the aged care sector,<sup>1</sup> more recently their roles have extended to support nurses in an increasingly broad range of settings and practices. The introduction of AINs into health care settings requires the consideration of a range of factors. International research evidence indicates that a direct correlation exists between the proportion of bachelor degree educated registered nurses in a nursing staff complement and patient mortality.<sup>2</sup> That is, nursing care teams with a higher proportion of registered nurses are linked to reduced patient mortality. A major Australian study shows a relationship between lower levels of registered nurses taffing and negative patient outcomes.<sup>3</sup> It is imperative that nursing care teams have the appropriate number of registered and enrolled nurses to meet patients' nursing care requirements. Therefore the introduction of AINs into nursing teams must be for the purpose of supporting registered and enrolled nurses in the provision of personal care and assisting people with activities of daily living. AINs should never be introduced into nursing care teams as a substitution for registered and enrolled nurses.

Strategies to support the introduction of AINs into nursing care teams include having policies, procedures and position descriptions in place to avoid role ambiguity;<sup>4 5 6 7</sup> ensure appropriate levels of supervision and assist integration into a care team<sup>8</sup> where everyone is respected for their individual contribution to care provision.<sup>9</sup>

Evidence indicates that where AINs are employed to support nursing teams, patients may receive more direct contact with care givers,<sup>10</sup> registered nurses are able to devote time to complex nursing interventions, and there may be cost savings.<sup>11</sup>

At a national level, there is strong support for the establishment of a nationally endorsed practice framework for AINs which articulates a minimum level of knowledge and education,<sup>12</sup> <sup>13</sup> a defined scope of practice, and national codes, standards and guidelines.<sup>14</sup> A practice framework for AINs will enable all members of the nursing team to have clear working relationships, assist in identifying effective communication channels and provide a base for decision making in relation to appropriate delegation by registered nurses according to the assessed competence of the individual AIN.

### References

- Chandler, M 2003, 'Assistants in nursing: their emergence, roles and utilisation in aged care', *Geriaction*, vol. 21, no. 4, pp. 17-21.
- 2 Aiken, LH, Sloane, DM, Bruyneel, L, Van den Heede, K, Griffiths, P, Busse, R, Diomidous, M, Kinnuen, J, Kózka, M, Lesaffre, E, McHugh, M, Moreno-Casbas, Rafferty, AM, Schwendimann, R, Scott, PA, Tishelman, C, van Achterberg, T & Sermeus, W 2014, 'Nurse staffing and education and hospital mortality in nine European countries: a retrospective observational study', *The Lancet*, vol. 383, no. 9931, pp. 1824-1830.
- 3 Duffield, C, Diers, D, O'Brien, L, Aisbett, C, Roche, M, King, M & Aisbett, K 2011, 'Nursing staffing, nursing workload, the work environment and patient outcomes', *Applied Nursing Research*, vol. 24, no. 4, pp. 244-255.
- 4 Government of Western Australia, Department of Health 2013, 'Operational directive. Assistants in nursing – duties and competencies', OD no. 0419/13, www.health. wa.gov.au/circularsNew/pdfs/12933.pdf , accessed 28 May 2014
- 5 Hasson, F, McKenna, H 2011 'Greater clarity in roles needed', British Journal of Healthcare Assistants, vol. 5, no. 8, p. 408.
- 6 Perry, M, Carpenter, I, Challis, D & Hope, K 2003 'Understanding the roles of registered general nurse and care assistants in UK nursing homes', *Journal of Advanced Nursing* vol. 42, no. 5, pp. 497-505.
- 7 Carrigan, C 2009 'Mixing it up: the future of assistants in nursing', Australian Nursing Journal vol. 17, no. 4, pp. 24-27.
- 8 Bishop, C, Weinberg, D, Leutz, W, Dossa, A, Pfefferle, S & Zincavage, R 2008 'Nursing assistants' job commitment: effect of nursing home organisational factors and impact on resident well-being', *Gerontologist* vol. 48, suppl. 1, pp. 36-45.
- 9 Government of Victoria, Department of Health 2014, 'Health assistants (nursing) implementation Guide', http://docs.health.vic.gov.au/docs/doc/Health-assistant-nursingimplementation-guide, accessed 2 July 2014
- 10 Shearer, T 2013 'Getting the mix right: assistants in nursing and skill mix', Australian Nursing and Midwifery Journal vol. 21, no. 5, pp. 24-27.
- 11 McKenna, H, Hasson, F & Keeney, S 2004 'Patient safety and quality of care: the role of the health care assistant', *Journal of Nursing Management* vol. 12, no. 6, pp. 425-459.
- 12 O'Shea, L 2009 'Accredited training for HCAs', Practice Nurse, vol. 37, no. 6, pp. 42-43.
- 13 Government of Victoria 2014.
- 14 Australian College of Nursing 2014, ACN Submission on the Consultation paper: A National Code of Conduct for health care workers, http://www.acn.edu.au/advocacy, accessed 29 October 2014

### **Review date November 2016**