

# **Australian College of Nursing**

## **Position Statement**

### **Assistants in Nursing**

**(or however titled)**

#### **Key Statement**

The Australian College of Nursing (ACN) recognises that Assistants in Nursing can make a valuable contribution to the care of people, by assisting registered and enrolled nurses to provide safe, high quality care in a range of settings. Any aspect of care delegated to an Assistant in Nursing by a registered nurse remains the overall responsibility of the registered nurse who is required to supervise all delegated activities.

ACN believes that Assistants in Nursing's 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 professional conduct for Assistants in Nursing. The nationally endorsed practice framework should describe a Nursing Assistant role that is uniform across Australia and will facilitate the utilisation and development of this role.

#### **Background and Rationale**

Non-regulated Healthcare Assistants work across a disparate range of settings and in assistant roles to a range of health professionals. They are identified by a range of titles including Personal Care Workers, Healthcare Assistants, Assistants in Nursing, Physiotherapy Assistants, Nutrition Assistants, and Physician Assistants to name a few.

Those non-regulated healthcare 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 an essential and valuable contribution to the health workforce.<sup>i</sup> Whilst the majority of AINs have traditionally been employed in the aged

care sector,<sup>ii</sup> more recently their roles have extended to support nurses in acute and specialist areas of practice, including emergency departments, perioperative settings, mental health<sup>iii</sup> and dialysis units.<sup>iv</sup> Successful strategies for introducing AINs into these settings have included a focus on putting policies, procedures and position descriptions in place in order to avoid role ambiguity;<sup>v vi vii</sup> the right mix of registered/non-registered workforce skills to meet patient care needs;<sup>viii</sup> appropriate levels of supervision; and integration into a care team<sup>ix</sup> where everyone is respected for their individual contribution to care provision.<sup>x</sup>

Evidence indicates that when AINs are employed to support nursing teams patients may receive more direct contact with care givers,<sup>xi</sup> registered nurses are able to devote time to complex nursing interventions, and there may be cost savings.<sup>xii</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>xiii xiv</sup> a defined scope of practice, and national codes, standards and guidelines.<sup>xv</sup> A professional 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 appropriate delegation by registered and enrolled nurses according to the capabilities of AINs.

## References

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