DEPARTMENT OF HEALTH

Statement of Duties

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| **Position Title:** | Assistant in Nursing/Midwifery |
| **Position Number:** | Generic |
| **Classification:** | Assistant in Nursing Grade 1 |
| **Award/Agreement:** | Nurses and Midwives (Tasmanian State Service) Award |
| **Group/Section:** | Hospitals South, Hospitals North and Hospitals North West |
| **Position Type:** | Fixed-Term/Casual, Full Time/Part Time/Casual |
| **Location:** | South, North, North-West |
| **Reports to:** | Relevant Nurse Manager/Nurse Unit Manager |
| **Effective Date:** | December 2022 |
| **Check Type:** | Annulled |
| **Check Frequency:** | Pre-employment |
| **Essential Requirements:** | Certificate in Health Services Assistance (Acute Care); or  Certificate in Individual Support (Ageing Specialisation); or  Is currently an undergraduate Bachelor of Nursing student who has completed their first year clinical practice placement; or  A current Diploma of Nursing student who has completed their first clinical practice placement  *\*Registration/licences that are essential requirements of this role must remain current and valid at all times whilst employed in this role and the status of these may be checked at any time during employment. It is the employee’s responsibility to ensure that registration/licences remain current and to advise the Employer if their circumstances change. This includes notifying the Employer if a registration/licence is revoked, cancelled or has its conditions altered.* |
| **Desirable Requirement** | Current First Aid Certificate |

NB. The above details in relation to Location, Position Type and Work Pattern may differ when this position is advertised – please refer to these details within the actual advert. The remainder of the content of this Statement of Duties applies to all advertised positions.

### Primary Purpose:

In accordance with Agency policy, legal requirements and the attached Assistant in Nursing/Assistant in Midwifery - Workplace Guidelines, the Assistant in Nursing/Midwifery (AIN/AIM) provides nursing care as delegated by the Registered Nurse (RN), and within the direction and supervision of the RN or Enrolled Nurse (EN), in accordance with the nursing care plan.

This role may vary slightly depending on the area in which the AIN/AIM works.

### Duties:

1. Deliver nursing care as delegated by the RN, under the supervision of an RN or EN, according to the nursing care plan and within the scope of the AIN/AIM - Workplace Guidelines.
2. Work with the RN and/or EN in establishing priorities for patient/client care delivery.
3. Assist the RN and/or EN in the collection of appropriate data from patients, clients and/or family.
4. Provide information in support and reinforcement of the nursing care plan to the nurse, patients, client and/or family.
5. Maintain healthcare knowledge and skills in accordance with the AIN/AIM - Workplace Guidelines and competencies required under a Certificate III qualification, through participation in relevant staff education activities.
6. Participate in quality improvement activities.
7. Identify and report unsafe practices or any concerns in relation to the patient/client’s condition to the RN and/or EN.
8. Actively participate in and contribute to the organisation’s Quality & Safety and Work Health & Safety processes, including in the development and implementation of safety systems, improvement initiatives, safeguarding practices for vulnerable people, and related training.
9. The incumbent can expect to be allocated duties, not specifically mentioned in this document, that are within the capacity, qualifications and experience normally expected from persons occupying positions at this classification level.

### Key Accountabilities and Responsibilities:

* Works within the direction and supervision of an RN and may be overseen and guided by an EN.
* Delivers specific aspects of nursing care as delegated by the RN.
* Works within the defined scope of practice and workplace of the AIN/AIM role.
* Accountable for the standard of delegated care provided.
* Works within organisational policies and legislation, including Work Health and Safety legislation.
* Champion a child safe culture that upholds the *National Principles for Child Safe Organisations*. The Department is committed to the safety, wellbeing, and empowerment of all children and young people, and expect all employees to actively participate in and contribute to our rights-based approach to care, including meeting all mandatory reporting obligations.
* Where applicable, exercise delegations in accordance with a range of Acts, Regulations, Awards, administrative authorities and functional arrangements as mandated by Statutory office holders including the Secretary and Head of State Service. The relevant Unit Manager can provide details to the occupant of delegations applicable to this position.
* Comply at all times with policy and protocol requirements, including those relating to mandatory education, training and assessment.

### Pre-employment Conditions:

*It is the Employee’s responsibility to notify an Employer of any new criminal convictions during the course of their employment with the Department.*

The Head of the State Service has determined that the person nominated for this job is to satisfy a pre‑employment check before taking up the appointment, on promotion or transfer. The following checks are to be conducted:

1. Conviction checks in the following areas:
   1. crimes of violence
   2. sex related offences
   3. serious drug offences
   4. crimes involving dishonesty
2. Identification check
3. Disciplinary action in previous employment check.

### Selection Criteria:

1. Demonstrated knowledge and skills in patient/client care, with an ability to assist patients/clients to meet their personal care needs and perform activities of daily living as required.
2. Ability to work as an effective team member in an acute care team environment.
3. Demonstrated effective interpersonal and communication skills, including written, verbal and numeracy skills.
4. Demonstrated knowledge of and ability to adhere to safe manual handling and infection control procedures.
5. Demonstrated ability to maintain privacy and confidentiality.

### Working Environment:

The Department of Health is committed to improving the health and wellbeing of patients, clients and the Tasmanian community through a sustainable, high quality and safe health system. We value leading with purpose, being creative and innovative, acting with integrity, being accountable and being collegial.

The Department of Health is committed to improving the way we work with vulnerable people, in particular implementing strategies and actions to promote child safety and wellbeing, empower, and prevent harm to children and young people.

The Department upholds the *Australian Charter of Healthcare Rights* in our practice and is committed to the safeguarding and protection of the welfare and rights of all people, particularly those that may be at risk of abuse, neglect, or exploitation. We place emphasis on the provision of culturally safe, respectful, and inclusive care that is responsive to diverse needs.

The Department seeks to provide an environment that supports safe work practices, diversity and respect, including with employment opportunities and ongoing learning and development. We value the diverse backgrounds, skills and contributions of all employees and treat each other and members of the community with respect. We do not tolerate discrimination, harassment or bullying in the workplace. All employees must uphold the *State Service Principles* and *Code of Conduct* which are found in the *State Service Act 2000.* The Department supports the [Consumer and Community Engagement Principles | Tasmanian Department of Health](https://www.health.tas.gov.au/consumer-and-community-engagement-principles)

**Attachment:**

**• AIN/AIM Workplace Guidelines**

**Attachment 1**

**Assistant in Nursing/Assistant in Midwifery**

**Workplace Guidelines for the trial in the acute health care environment.**

## *Background*

The Assistant in Nursing/Midwifery (AIN/AIM) is recorded as a component of the nursing and midwifery health workforce in the public and private sector in all states and territories in Australia. The AIN/AIM is a vocationally trained worker with a relevant Certificate III qualification or a nursing student, who has completed an applicable clinical practicum placement within a clinical care environment.

The employment of AIN/AIMs in nursing teams allows registered nurses (RN), registered midwives (RM) and enrolled nurses (EN) to practice at higher levels of knowledge, ability and decision making, while tasks or activities requiring less complex skill level and knowledge can be delegated to the AIN/AIM.

These workplace guidelines outline a uniform set of duties that AIN/AIMs have been trained to undertake in accordance with the **HLT32507 Certificate in Health Services Assistance (Acute Care) and Certificate III Individual Support CHC33015 (Ageing Specialisation)** vocational qualification.

The Health Service employing the AIN may not require them to undertake the full range of duties as listed below, or may require them to undertake additional duties, where clinically appropriate. Where this is the case, the health service shall articulate their choice of allowable duties via a statement of local policy after consultation and agreement with the Australian Nursing and Midwifery Federation (ANMF).

**All duties undertaken by AIN/AIMs will be delegated by a RN/RM who will have first made an assessment of the patient/client and appropriately assigned the task. Delegation and supervision are undertaken in accordance with the Australian Nursing and Midwifery Accreditation Council (ANMAC) 2007, *A National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice*.**

The AIN/AIM remains responsible for safe performance of the delegated task and must raise concerns with the RN/RM if they believe that the task falls outside their range of duties, knowledge and skills.

## *Set of Duties as delegated by RN/RM:*

Patient meals

* Preparation of table over bed
* Provide assistance and safe positioning of patients to receive meals and beverages and feed them at mealtimes and provide special cutlery and crockery as required under the direction of the RN/RM
* Assist with cutting of food and opening packages
* Assist the patient with menu selection under the direction of the RN/RM
* Assist patients to eat when they are unable to do so themselves under the direction of the RN/RM
* Observe patients’ food and fluid intake to help identify reduced food intake and other risk factors for malnutrition, and provide feedback to the RN/RM
* Recording of fluid and dietary intake on relevant charts and providing feedback to the RN/RM
* Refilling of water jugs or making drinks (outside of food service times and routine drink rounds)
* Help resolve problems arising at meal times such as missing and wrong meals and tray items
* Support ward based nutrition strategies such as protected meal times, red trays and communal dining.

Patient hygiene and activities of daily living

* Assist patients with showering, bathing and bed washes as delegated by the RN/RM
* Assist patients with oral hygiene, brushing teeth, and cleaning of dentures
* Washing patient’s face - including the corners of patient’s eyes, to remove accumulated exudate or discharge and application of makeup as requested
* Assist with dressing and grooming of patients
* Facial shaves of male patients (exclusion: all pre operative shaving)
* Hair care (exclusion: no prescribed treatments are to be used by AIN/AIMs)
* Routine nail care (exclusion: cutting or trimming of nails unless qualified to do so)
* Observation of basic skin integrity and reporting skin condition changes to RN/RM or EN
* Assist the nurse to settle patients for sleep and rest periods
* Last offices to be undertaken with a RN/RM or EN.

Patient Mobility

* Assist nurses with patient transfers and manual handling according to Manual Handling Policy
* After appropriate consultation with RN/RM or EN:
  + Assist patients to transfer from bed to chair (or vice versa).
  + Assist patients to change position.
  + Assist patients to mobilise.
* Re-application of anti-embolic stockings to patients (exclusion: initial measurement and fitting of stockings)
* Provide patient escorts if deemed appropriate by RN/RM
* Provide patient surveillance if deemed appropriate by RN/RM.

Patient Toileting

* Assist patients to toilet after appropriate consultation with RN/RM or EN
* Provide bed pan/urinal
* Empty, measure and record urine from urine collecting bags
* Perform routine urinalysis, document appropriately and report findings to RN/RM or EN
* Record urine output on fluid balance chart
* Record bowel motions on appropriate observation chart
* Report any obvious abnormalities to the RN/RM or EN.

Communication

* Maintain confidentiality, privacy and dignity of patients at all times
* Demonstrate empathy towards patients and relatives/carers
* Provide patient companionship if deemed appropriate by RN/RM
* Apply practical intervention procedures for dementia or behavioural problems as documented in care plan and direction of the RN/RM
* Act thoughtfully and respond diplomatically to sensitive issues
* Report any conflict to RN/RM immediately
* Report any patient concerns/complaints to RN/RM immediately
* Demonstrate safety awareness and report unsafe issues and potential workplace hazards to the RN/RM or EN
* Report the wandering patient to the RN/RM or EN
* Encourage patient independence in respect to Activities of Daily Living (ADL)
* Communicate effectively with the RN/RM and EN when reporting and acquiring clinical information and data
* Refer patient enquiries onto the RN/RM or EN
* Answer call bells in a timely manner
* Assist with telephone calls as required
* Immediately report any obvious changes in patient’s physical and mental and behavioural state to the RN/RM or EN.

Environmental Maintenance

* Observe standard precautions and apply infection prevention and control standards to all work undertaken
* In the absence of the Hospital Aide and in circumstances that would dictate that an RN/RM or EN would undertake the task:
  + Clean vacated patient bed, locker and bed trolley.
  + Make up “discharge beds” with clean linen.
  + Make beds and arrange bed linen as required including preparation of post-operative beds.
  + Maintain a clean and tidy environment for the patient.
  + Arrangement and management of flowers and balloons.
  + Monitor and clean equipment.
  + Check stocks including completion of paperwork for ordering supplies.
  + Assist in restocking of treatment rooms and linen room/trolleys.
  + Run simple courier errands (exclusion: money changing hands, or errands outside the hospital environment).
  + Clean washbowls, urinals and bedpans.
  + Attend to body fluid spills within infection control guidelines and notify the RN/RM or EN if further cleaning is required.

Documentation

* Ensure all information and data regarding patients is recorded accurately on appropriate charts and reported to the RN/RM or EN as required
* Complete relevant patient documentation
* Report all incidents immediately to the RN/RM; for example, verbal/physical aggression, hazards and complaints from patients/relatives/carers
* Document incident/accident reports on the Electronic Incident Monitoring System (EIMS) as necessary.

General

* Weigh patients
* Can be utilised as a Patient Sitter
* Work as part of the nursing team
* Adhere to the State Service Code of Conduct at all times
* Adhere to Organisation Policies and Procedures at all times.

## *Responsibilities / Delegations:*

The Nurse Unit Manager is responsible for ensuring that these Workplace Guidelines are enforced.

The RN/RM, EN and AIN/AIM are responsible for ensuring the management of patient/client care is in line with theses Workplace Guidelines.

An AIN/AIM does not have authority to delegate tasks. The patient/client care is delegated by a RN according to the ANMAC (2007) *A National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice*, and the assignment is accepted by the AIN/AIM in accordance with their education preparation, competency and the available relevant supervision.

The AIN/AIM is individually accountable for their own actions, professionally responsible to the RN/RM and their employer for assigned tasks. The AIN/AIM must practice within the parameters of their knowledge, skills and statement of duties. The AIN/AIM must comply with the State Service Code of Conduct.

## *Definitions:*

**Nurse Unit Manager (NUM)**

Is the nurse in-charge of the unit or health care facility or is responsible and accountable for health care within that unit or facility.

**Assistant in Nursing/Midwifery (AIN/AIM)**

Refers to the group of health care workers who are not regulated or under statutory legislation. AIN/AIMs are vocationally trained workers with a Certificate III HLT32507 Certificate in Health Services Assistance (Acute Care) or Certificate III Individual Support CHC33015 (Ageing Specialisation) qualification or equivalent in a health-related field.

**Registered Nurse/Midwife (RN/RM)**

Is a person who is registered as a Division 1 Nurse by the Nursing and Midwifery Board of Australia. The RN/RM must delegate the duties undertaken by the AIN/AIM and retains accountability for the decision to delegate and for monitoring outcomes.

**Enrolled Nurse (EN)**

Is a person registered as a Division 2 Nurse by the Nursing and Midwifery Board of Australia. ENs practice nursing under the professional direction of a RN/RM. The EN may supervise and guide the AIN/AIM but does not have delegation responsibilities.

**Supervision:**

Refers to the oversight, direction, guidance and/or support provided to an AIN/AIM by the RN/RM or an EN (supervisor).

While the AIN/AIM remains accountable for their work, the RN/RM/EN is responsible for ensuring the AIN/AIM is not placed in situations where he/she is required to function beyond his/her level of educational preparation or competence.

* **Direct** supervision is when the supervisor is present, observes, works with, guides and directs the person who is being supervised.
* **Indirect** supervision is when the supervisor works in the same facility or organisation as the supervised person but does not constantly observe his/her activities. The supervisor must be easily contactable and available for reasonable access. What is reasonable access will depend on the context, the needs of the patient/client and the needs of the person who is being supervised.

**A National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice:**

This is a clinical management tool that guides individual nurses in arriving at sound nursing practice decisions, that recognises their own scope of practice as well as that of other members of the nursing team. It ensures that practice decisions are based on the context as well as patient and clinical assessment, lawful authority, educational preparation and experience, risk management and consideration of beneficial outcomes for the patient/ client. It also highlights when and what type of supervision is required.

## *Related Documents/Legislation*

ANMAC (2007) - *A National Framework for the Development of Decision Making Tools for Nursing and Midwifery Practice*.

*State Service Act* *2000*, <http://www.dpac.tas.gov.au/divisions/ssmo>