

Fact sheet

14 April 2020

The role of nurse practitioners in response to COVID-19

Background

The Nursing and Midwifery Board of Australia (NMBA) undertakes functions as set by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The NMBA regulates the practice of nursing and midwifery in Australia, and one of its key roles is to protect the public. The NMBA does this by developing registration standards, professional codes, guidelines and standards for practice which together establish the requirements for the professional and safe practice of nurses and midwives in Australia.

The role of the NMBA is to protect the public by ensuring that anyone who is registered as a nurse and/or midwife is safe and competent to practice. A key requirement is that the nurse and/or midwife can demonstrate that they meet the relevant NMBA-approved standards for practice and registration standards.

This fact sheet addresses important considerations for nurse practitioners in response to COVID-19.

Who this fact sheet is for?

This fact sheet applies to nurse practitioners and employers.

This fact sheet should be used by health services in the process of recruiting, employing and supporting nurse practitioners in response to COVID-19.

Due to the evolving nature of COVID-19, the NMBA acknowledge that advice and management plans for the COVID-19 response may change quickly. Users of this fact sheet are advised to review the NMBA website regularly for updated information and current advice.

Response to COVID-19

As demand on healthcare resources escalate, nurse practitioners may be asked to change their scope of practice or to move from advanced practice roles into designated nurse practitioner roles to support the COVID-19 response.

I am working as a nurse practitioner in one area of practice and have been asked to change my nurse practitioner scope of practice in response to COVID-19. What do I need to do?

Before making a decision to change or expand your nurse practitioner scope of practice, you should reflect on, and make an assessment of your professional competence and capability to safely deliver clinical care within your new scope, including prescribing scheduled medicines. Competence is the combination of knowledge, skills, attitudes, values and abilities that underpin effective performance in a profession. It encompasses confidence and capability.

You should also consider if a period of clinical supervision or mentoring is required to support you changing your scope of practice.

When considering competence and capability for the clinical context, it is important nurse practitioners also reflect on their clinical experience, current clinical skills and clinical knowledge.

I haven't been employed in a nurse practitioner role but am working at an advanced practice nursing level. Can I work as a nurse practitioner?

Yes. Registered nurses endorsed as a nurse practitioner who are working at the advanced practice level are able to work as a nurse practitioner as long as they have maintained their recency of practice at an advanced practice nursing level. This practice must be direct clinical contact.

You should also consider if a period of clinical supervision or mentoring is required to support you changing your scope of practice

What should I consider if I am currently practising at the advanced practice level but transition into a nurse practitioner role in response to COVID-19?

Nurse practitioners transitioning into a nurse practitioner role in response to COVID-19 need to consider their professional competence and capability to safely deliver clinical care within your new scope, including prescribing scheduled medicines. Competence is the combination of knowledge, skills, attitudes, values and abilities that underpin effective performance in a profession. It encompasses confidence and capability.

You should also consider if a period of clinical supervision or mentoring is required to support you changing your scope of practice

I am no longer on the general register but have been added to the pandemic sub-register to support the COVID-19 response. Can I work as a nurse practitioner?

Yes. The [pandemic response sub-register](#) has been established for the next 12 months to assist with fast tracking the return to the workforce of experienced and qualified health practitioners such as nurses with a nurse practitioner endorsement. Only nurse practitioners who have left the general register of practitioners or moved to non-practising registration in the past three years have been added to the sub-register.

The sub-register operates on an opt-out basis. There is no obligation for nurses with a nurse practitioner endorsement to return to practice or remain on the sub-register. You can opt out at any time for any reason.

What do I need to do if I choose to stay on the sub-register?

Nurse practitioners who choose to stay on the sub-register and return to work as a nurse practitioner will need to comply with the NMBA [Code of conduct for nurses](#), the [Nurse practitioner standards for practice](#), professional indemnity insurance requirements and work within the scope of their practice.

I have a nurse practitioner endorsement but do not want to return to a nurse practitioner or advanced practice nursing role. Can I practice as a registered nurse while on the sub-register?

Yes. You may be employed and practice in a general nursing role. In this instance, nurses with a nurse practitioner endorsement are reminded that they must work within their position description and registered nurse scope of practice.

Common questions

Definition of practice

The definition of practice is broad. Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice in this context is not restricted to the provision of direct clinical care. This means that nurses and/or midwives can hold general registration and be practising in non-clinical roles and still meet the recency of practice registration standard.

What is advanced practice?

Nurses practising at an advanced practice level incorporate professional leadership, education, research and support of systems into their practice. Their practice includes relevant expertise, critical thinking, complex decision-making, autonomous practice and is effective and safe. They work within a generalist or specialist context and they are responsible and accountable in managing people who have complex healthcare requirements.

Advanced practice in nursing is demonstrated by a level of practice and is not by a job title or level of remuneration.

What is recency of practice?

Recency of practice means that a nurse or midwife has maintained an adequate connection with, and recent practice in the profession/s since qualifying for or obtaining registration.

What do you mean by clinical practice?

Clinical practice is when the nurse or midwife is directly involved in providing direct clinical care or providing oversight of direct clinical care of patients or is directly involved in clinical education of either pre-registration or post-registration students, including bridging programs.

Some examples of clinical practice roles are:

- a nurse working in a medical or surgical ward of a hospital
- a midwife working in a postnatal care unit

What do you mean by non-clinical practice?

Non-clinical practice is where a nurse or midwife is not directly involved in providing direct clinical care or providing oversight of direct care of patients or is not directly involved in clinical education of either preregistration or post-registration students, including bridging programs.

Some examples of non-clinical practice roles are:

- a nursing academic at a university undertaking nursing research
- a midwifery policy officer at a health department

What is supervised practice?

Supervised practice is a period of practice under supervision. It is a formal process of professional support and learning which allows a nurse and/or midwife (supervisee) to develop knowledge and competence, assume responsibility for their own practice and enhance public protection and safety. Supervision may be *direct* or *indirect* according to the nature of context under which the practice is being supervised.

For more information

The following pages on the NMBA website contain useful information for nurses and/or midwives and employers:

- [Registration standards](#)
- [Registration and endorsements](#)
- [Professional codes and guidelines](#)
- Visit www.nursingmidwiferyboard.gov.au under *Contact us* to lodge an online enquiry form
- For registration enquiries: 1300 419 495 (within Australia) +61 3 9275 9009 (overseas callers)

Document control

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This fact sheet will expire in 12 months from the commencement date unless otherwise specified.