

Guidance for nurses and midwives

22 January 2024

What nurses and midwives need to know about Aboriginal and Torres Strait Islander Health Practitioners

Introduction

The Nursing and Midwifery Board of Australia (NMBA) and the Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHPBA) have developed this information to guide nurses and midwives on the collaborative role they have with Aboriginal and Torres Strait Islander Health Practitioners¹ in practice.

This guidance provides information for nurses and midwives on working collaboratively with Aboriginal and Torres Strait Islander Health Practitioners to provide culturally safe healthcare and to improve the health outcomes for Aboriginal and Torres Strait Islander Peoples.

Cultural Safety builds an environment that is free of racism and is a proven way for nurses and midwives to contribute to better health outcomes and healthcare experiences for Aboriginal and Torres Strait Islander Peoples.

Nurses and midwives are expected to engage with all people as individuals in a culturally safe and respectful way, to foster open, honest and compassionate professional relationships.

The NMBA expects that individual nurses' and midwives' practice is free of racism and professionally respectful.

Aboriginal and Torres Strait Islander Health Practitioners may also find this document useful when working with nurses and midwives.



Nurses, midwives and Aboriginal and Torres Strait Islander Health Practitioners are registered and regulated by their own National Board and are accountable for their own practise.

All three professions work in their own context in a broad scope of practice using their current education, competence, knowledge and skills.

What do Aboriginal and Torres Strait Islander Health Practitioners do?

Aboriginal and Torres Strait Islander Health Practitioners are a regulated profession and are an integral part of the multi-disciplinary team. They provide culturally safe clinical and primary healthcare services to Aboriginal and Torres Strait Islander Peoples. Aboriginal and Torres Strait Islander Health Practitioners are a critical 'first-port of call' for their communities and therefore play a key healthcare role of Aboriginal and Torres Strait Islander Peoples.

The wellbeing of Aboriginal and Torres Strait Islander communities is underpinned by structured knowledge and social systems developed over many millennia. An Aboriginal and Torres Strait Islander Health Practitioner's practice encompasses Aboriginal and Torres Strait Islander knowledge systems that are complemented and underpinned by their accredited healthcare education, knowledge, skills and competence. They build trust and bring an understanding which strengthens health outcomes for Aboriginal and Torres Strait Islander Peoples² and which is central to providing culturally safe healthcare

¹ The ATSIHPBA regulates the practice of Aboriginal and Torres Strait Islander Health Practitioners. Other titles include Aboriginal Health Practitioner (AHP) and Torres Strait Islander Health Practitioner.

² <https://www.atsihealthpracticeboard.gov.au/News/2019-08-20-Brochures.aspx>

services. Aboriginal and Torres Strait Islander Health Practitioners are eligible to provide Medicare rebated services. This enables people with chronic diseases to receive a rebate for treatments.

Aboriginal and Torres Strait Islander Health Practitioners can work autonomously or as part of a multi-disciplinary team, providing a broad range of expertise. Each practitioner's scope of practice is different and is determined by the Aboriginal and Torres Strait Islander Health Practitioner's diverse individual knowledge, skills, professional attributes and level of independent practice. This is based on a range of elements such as qualifications, experience, practice setting and in response to the needs of local Aboriginal and Torres Strait Islander Peoples³. The scope of an Aboriginal and Torres Strait Islander Health Practitioner's scope of practice may also reflect the needs and demands of that health service.

An Aboriginal and Torres Strait Islander Health Practitioner's practice may include but is not limited to:

- primary health
- clinical care such as pre-examination, assessments, observational screening
- implementing clinical treatments and provide care according to care plans and/or treatment protocols
- vaccinations (in line with state and territory legislation)
- administering and supplying medications (in line with state and territory legislation)
- acute and chronic disease management
- trauma and emergency care management
- procedural care (wound management)
- assessment and screening of the physical, social and emotional wellbeing of Aboriginal and Torres Strait Islander Peoples
- planning and delivering health programs
- advocating for clients.

The following table reflects the similarities between the three professions.

Profession similarities	Aboriginal and Torres Strait Islander Health Practitioners	Registered nurses	Midwives
Registered by a National Board	✓	✓	✓
Regulated under the National Law	✓	✓	✓
Complete a Board-approved program of study ⁴	✓	✓	✓
Accountable for their own practise	✓	✓	✓
Have a broad scope of practice that can change based on education and training	✓	✓	✓
Work autonomously or as part of a multi-disciplinary team	✓	✓	✓
Have capability statements/standards for practice	✓	✓	✓

Importantly, Aboriginal and Torres Strait Islander Health Workers are not a regulated health profession and are different from Aboriginal and Torres Strait Islander Health Practitioners. Aboriginal Liaison Officers fulfill a different role altogether. Further information about these roles can be found at on the [National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners \(NAATSIHWP\)](https://naatsihwp.org.au) website.

³ https://naatsihwp.org.au/sites/default/files/naatsihwp-scope_of_practice_2022_v2-web_0.pdf - accessed May 2023.

⁴ The qualification entry level is determined by the individual regulatory board and varies across professions.

Where do Aboriginal and Torres Strait Islander Health Practitioners work?

Aboriginal and Torres Strait Islander Health Practitioners work in primary, secondary and tertiary health care settings and across both generalist and specialty fields.

Most Aboriginal and Torres Strait Islander Health Practitioners work in a wide variety of public, private, non-government and/or Aboriginal Community Controlled Health Organisations (ACCHOs). Many Aboriginal and Torres Strait Islander communities are dependent on primary healthcare services, particularly those provided by Aboriginal and Torres Strait Islander Health Practitioners.

Aboriginal and Torres Strait Islander Health Practitioners work closely with Aboriginal and Torres Strait Islander communities. In addition to providing clinical healthcare, they also contribute to their community in identifying and responding to health needs providing education, awareness, advice, support, training and education. They can also provide support and advice on culturally safe health practice to other members of the health care team, including nurses and midwives.



Employing and partnering with Aboriginal and Torres Strait Islander Health Practitioners and maximising their full scope of practice improves outcomes for Aboriginal and Torres Strait Islander Peoples. Aboriginal and Torres Strait Islander Health Practitioners make a health service culturally safe and responsive.

Cultural Safety and respectful relationships

All health practitioners in Australia need a working knowledge of factors that contribute to and influence the health and wellbeing of Aboriginal and Torres Strait Islander Peoples. These factors include cultural history, spirituality, relationship and connectedness to Country (land, deserts, rivers and seas) and other cultural and social determinants of health in Aboriginal and Torres Strait Islander communities⁵.

Aboriginal and Torres Strait Islander Health Practitioners help build trust and bring an understanding that is central to providing culturally safe care, which we know will strengthen health outcomes for Aboriginal and Torres Strait Islander Peoples. Aboriginal and Torres Strait Islander Health Practitioners, can support and advise nurses and midwives on the specific needs of Aboriginal and Torres Strait Islander Peoples and their health, which enhances both care and Cultural Safety. This includes that:

- Aboriginal and Torres Strait Islander Peoples have access to health services that are free from racism so that they can enjoy a healthy life, equal to that of other Australians, enriched by a strong living culture, dignity and justice and
- ensuring that Aboriginal and Torres Strait Islander Peoples are actively leading the design, delivery and control of health services.

The principles of culturally safe care are embedded in the respective registered nurse, enrolled nurse, nurse practitioner and midwife [standards for practice](#) and [codes of conduct](#).



Cultural Safety is part of the safe professional practice of nurses and midwives and Aboriginal and Torres Strait Islander Health Practitioners. Practice is only culturally safe when it is free of racism.

By working together, nurses, midwives and Aboriginal and Torres Strait Islander Health Practitioners can create a culturally safe and responsive workplace that is free of racism for Aboriginal and Torres Strait Islander employees and Peoples which includes culturally and linguistic diverse communities.

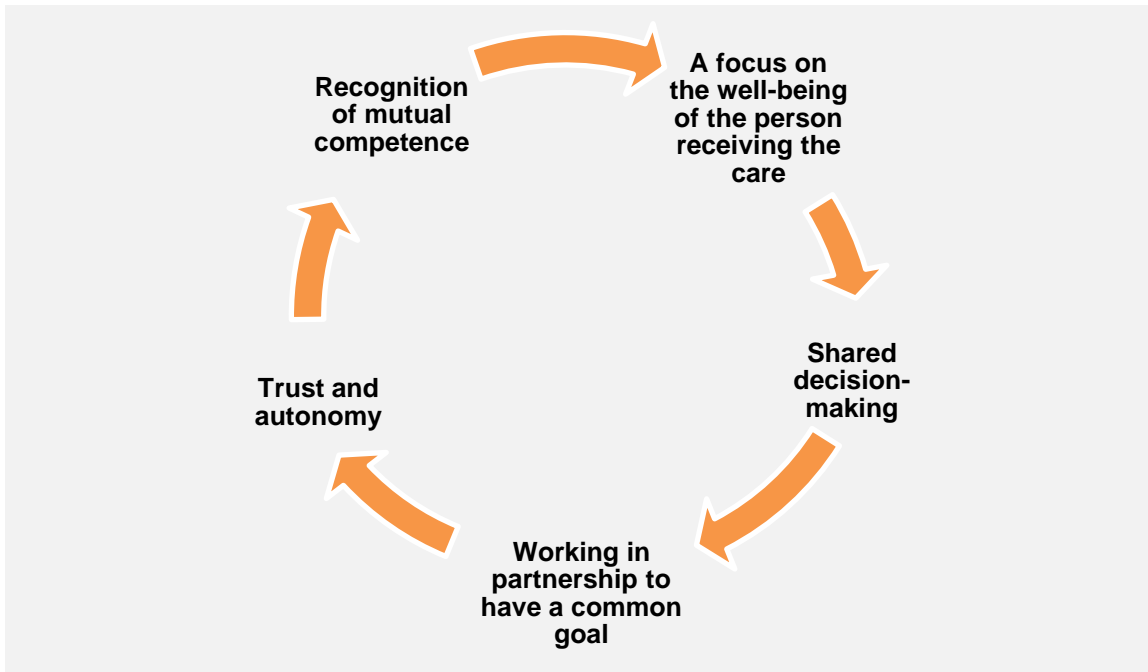
Professional collaboration

It is in the best interest of the people receiving care that Aboriginal and Torres Strait Islander Health Practitioners, nurses and midwives collaborate as equal partners, ensuring the most appropriate health

⁵ <https://www.atsihealthpracticeboard.gov.au/Codes-Guidelines/Professional-capabilities.aspx>

professional is providing the right care, at the right time and in the right health setting. The professions may need to refer to, or seek support from each other, to ensure the right care is provided by the right person, at the right time and in the right setting depending on the circumstances.

There are many instances where this collaboration exists. Qualities of successful models of collaborative relationships are represented in the diagram below.



Interprofessional respect results in true collaborative professional relationships and improved quality care for Aboriginal and Torres Strait Islander Peoples and an increased access to care; it is an enabling environment not a 'gate-keeper' relationship: The willingness of practitioners to collaborate can positively affect unintended systemic restrictions.

The NMBA's *Decision-making framework for nursing and midwifery* provides guidance on making practice decisions in a collaborative way, through professional consensus, consultation and negotiation with the care receiver, relevant family members and other members of the healthcare team.

For additional information, please refer to the resource list on the following page.

Resources

1. [Nursing and Midwifery Board of Australia \(NMBA\)](#)

The NMBA's [Decision-making framework for nursing and midwifery](#) (DMF) guides nurses and midwives in their decision-making relating to scope of practice and delegation of aspects of nursing and midwifery care. The DMF applies whether delegation is to another nurse or midwife or other members of the healthcare team, including Aboriginal and Torres Strait Islander Health Practitioners, and supports the provision of safe, person-centred/woman-centred and evidence-based care. The DMF promotes shared decision-making and care delivery in a culturally safe and respectful way.

2. [Aboriginal and Torres Strait Islander Health Practice Board of Australia \(ATSIHPBA\)](#)

The ATSIHPBA's [Professional capabilities for registered Aboriginal and Torres Strait Islander Health Practitioners](#)¹ identifies the knowledge, skills and professional attributes needed to safely and competently practise as an Aboriginal and Torres Strait Islander Health Practitioner in Australia. They describe the threshold level of professional capability required for both initial and continuing registration.

[Brochures](#) on the ATSIHPBA website provide information on becoming an Aboriginal and Torres Strait Islander Health Practitioner and the benefits of employing an Aboriginal and Torres Strait Islander Health Practitioner, listing the types of services that Aboriginal and Torres Strait Islander Health Practitioners provide.

3. [National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners \(NAATSIHWP\)](#)

NAATSIHWP is a national peak workforce association for Aboriginal Health Workers and Aboriginal and Torres Strait Islander Health Practitioners. Their role includes ensuring the healthcare system embeds the needs of Aboriginal and Torres Strait Islander Peoples, with the provision of culturally specific health professionals.

NAATSIHWP has developed a framework that provides an example of ways that individual registered Aboriginal and Torres Strait Islander Health Practitioners can identify the range of their competence and scope of practice². The framework does not define exactly what each Aboriginal and Torres Strait Islander Health Practitioner can do, rather it is a tool for developing and identifying individual scope of practice based on a range of elements such as qualifications, experience, practice setting and jurisdictional context.

4. [Congress of Aboriginal and Torres Strait Islander Nurses and Midwives \(CATSINaM\)](#)

CATSINaM is the peak advocacy body for Aboriginal and Torres Strait Islander nurses and midwives and a key stakeholder and collaborator of the NMBA.

CATSINaM promotes culturally safe health and wellbeing for Aboriginal and Torres Strait Islander Peoples and communities, by nurses and midwives. This includes a position statement on Cultural Safety⁶ and a recent launch of *Murra Mullangari: An introduction to Cultural Safety and Cultural Humility*.

The NMBA encourages nurses and midwives to engage in opportunities for Cultural Safety training.

⁶ <https://catsinam.org.au/2021/01/catsinam-cultural-safety-publications/>

Document history

Approved by: Aboriginal and Torres Strait Islander Health Practice Board of Australia and Nursing and Midwifery Board of Australia

Date commenced: January 2024

Next review due: January 2029

Policy history: Is this a new policy? **Y**

Approval date	Version	Reason for change
23 August 2023	v1.0	n/a