Extending Roles: Organising and utilising extended nursing roles

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Outline

• The role of nursing
• Extended roles- how have they developed?
• Using extended roles in recognising and preventing patient deterioration
• Governance
• The future!
What is nursing?

• "Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups, and communities, sick or well, and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management and education are also key nursing roles” – (ICN 2002)
Extended roles

• Concept first originated in the 1950’s with tasks being labeled as either basic or technical (Goddard 1953)
• Parameters published for extended roles for nurses (DHSS 1977) – tasks associated as performed by a doctor i.e. venepuncture, ECG, suturing
• Call for professional accountability by the RCN
• ‘Scope of Professional Practice’ & ‘Code of Professional Conduct’ (UKKC 1992)
• European Working Time Directive – led to an increase of roles to cover acute care out of hours
Extended roles

- Roles once considered extended are now expected as a skill base for all registered nurses.
- Key skill set for any nurse is the ability to measure, interpret, monitor and interpret physiological signs of the patient.
- Blurring of boundaries/responsibilities.
- Advance level practice - is a registered nurse working at a level beyond initial registration (DoH 2010).
What is the purpose?

• The outcome of such roles is that the fundamental nature of service provision and scope of nursing practice within that specific role may be changed.” (Daly and Carnwell 2003)
Recognition & Prevention

![National Early Warning Score (NEWS)](image)
Why are they needed?

• Despite track & trigger tools, EWS – staff are still failing to respond and escalate care
• NCEPOD – ‘Time to Intervene”, Patient Safety First campaign
• Related to clinical environment, operational pressures, higher acuity of patient, frailty etc.
• Common causes - Sepsis, respiratory failure, alcohol
What extended roles are needed?

• Advance cannulation
• ABG sampling
• NIV
• PGD’s
• Independent Non-Medical Prescribing
• Clinical examination & assessment
• IT skills
• Advance communication and leadership skills
Governance

- Education/training
- Policy/guidelines – local & national
- Positive work based culture
- Clinical supervision/active learning
- Procedural logs
- Revalidation – need for portfolios
- Robust audit processes
- Research
The future

- National Competencies – ‘Guide to advanced nursing practice, advanced nurse practitioners and programme accreditation’ (RCN 2012)
- Sam -An integrated career and competency framework for registered nurses in acute medicine
- National qualification in acute care?
- Designated HDU areas within AMU
- Multidisciplinary ambulatory care units - Oxford
- Current workforce challenges
- Underpinned by appropriate education and strategic strategy