

South African Nursing Council

**Charter of Nursing Practice
DRAFT 1**

28 September 2004

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CHAPTER 1

INTRODUCTION

1.1 Preamble

Nurses and midwives are responsible and accountable for the provision of a professional service to the public which facilitates health and provides for and responds to the needs of the health care users and the public, such that they foster trust, collaboration and innovation through the –

- practice of competent nursing and midwifery;
- identification with, and adherence to, ethical and professional standards and legislative requirements;
- maintenance and facilitation of professional competence (knowledge, skills and values); and
- active commitment to the improvement of quality of nursing, midwifery and health care.

Nursing takes place in a dynamic social, economic, political and technological environment and must at all times be sensitive, relevant and responsive to individual, community and societal health care needs and to changing circumstances.

1.2 Purpose

The purpose of this Charter is to:

- Provide parameters that guides the practice of members of the nursing profession to ensure that they:
 - Practice in accordance with national legislative and policy frameworks.
 - Are at all times responsive to the needs of the public; and
 - Provide nursing care that is at all times in the best interest of those they are providing care for.
- Inform the public of what they can expect from members of the nursing profession in terms of:
 - standard of nursing care

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- the knowledge, attitudes and skills required for providing nursing care; and
- the responsibilities of nurses

1.3 Legislative and Policy Framework

1.3.1 General Legislation/Policy

- 1.3.1.1 The **Constitution of the Republic of South Africa** lays the foundation for ensuring that all people are treated equally and that each person is afforded basic rights. Nurses must at all times protect and maintain the rights of people they provide care to. These rights are contained in the Bill of Rights in the Constitution of the Republic of South Africa and must be adhered to all times.

1.3.2 Health Sector Policy

Nursing Care must at all times be guided by the provisions of **all applicable legislation and policies** that direct health care delivery. Critical legislation and policy documents that must be considered at all times by the profession of nursing are:

- National Health Act, 2003 (Act 61 of 2003)
- White Paper on the Transformation of Health
- Batho Pele Principles
- Termination of Pregnancy Act, 1996 (Act 92 of 1996)
- Medicines and Related Substances Act, 1965 (Act 101 of 1965)
- Mental Health Care Act, 2002 (Act 17 of 2002)

In South Africa the **White Paper for the Transformation of Health** provides the framework for the transformation of health care and provides direction for a special emphasis on primary health care and the need for a comprehensive and integrated approach to health care delivery. The provisions made in this White Paper must direct nursing Practice and the following extract emphasises the responsibilities of health care workers:

“Health teams and workers at all levels should develop a caring ethos and commit themselves to the improvement of the health status of their communities. They should

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not only be responsible for the patients who attend their health facilities, but also have a sense of responsibility towards the majority of the population in their catchment areas.

Every effort should be made to ensure the improvement in the quality of services at all levels. An essential package of primary health care interventions will be made universally accessible. Emphasis should be placed on reaching the poor, the underserved, the aged, women and children, who are amongst the most vulnerable. “

1.3.3 Nursing Legislation

The current nursing legislative framework applicable to the profession of nursing is the Nursing Act No 50 of 1978 and the regulations that pertain to this Act. Recognising that the current nursing legislation is under review this legislative framework is effective until the revised legislation is promulgated.

1.3.3.1 The Nursing Act No 50 of 1978 makes provision for the establishment of the South African Nursing Council that regulates the education, training and practice of members of the nursing profession practising nursing in the Republic of South Africa. The Council is accorded the powers to regulate all nursing education and training; keep a register of all nurses practising in the Republic; institute an inquiry and take disciplinary steps for professional misconduct.

1.3.3.2 Nursing Regulations made in terms of the Nursing Act No. 50 of 1978 makes provision for Regulations that prescribe the conditions for the achievement of the purpose of the Act.

1.4 Regulation of the Profession of Nursing

The South African Nursing Council is established in terms of the Nursing Act No 50 of 1976 to ensure that the South African public receives knowledgeable, competent, safe, and compassionate and ethically based nursing care. The South African Nursing Council is required to

- Determine who may practise as nurses and midwives and maintain a register of persons that qualify and are authorised to practise nursing

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- Set, promote and control the standards of nursing and midwifery education and practice
- Monitor and enhance the maintenance of ethical standards and the practice of nursing

1.4.1 Mandate of the Profession of Nursing

By recognising the profession of nursing the people of South Africa mandate the profession to take responsibility for nursing care that is provided by a cadre of committed nurses that:

- Do not discriminate on the grounds of race, colour, creed, gender, religion, culture, politics, social status, personal attributes or the nature of the health problem
- Promote, maintain and restore health and alleviate suffering
- Recognise the health needs and vulnerability of the community and individual healthcare users
- Create and maintain an environment that fosters safety, compassion and caring for nursing practice
- Provide care which is accessible to the community, free of neglect and malpractice and free of harassment and intimidation
- Promote the continuity of health care
- Continuously develop their professional knowledge and skills
- Respect and maintain the nationally accepted Patients Rights Charter
- Respect and promote the principles of an accessible, acceptable, affordable, equitable and efficient health care service for the healthcare user or family or group or community, from conception to death.
- Take appropriate action to safeguard healthcare users when their care and safety are endangered by any person or circumstance.

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1.4.2 The Commitment of the Profession of Nursing

The Nursing profession as directed by the above mandate embraces the following values and beliefs that forms an integral part of all nursing practice:

- 1 Nursing and nurses only exist because people require nursing services
- 2 Nursing is a caring profession providing a service to humanity
- 3 Nurses must not permit considerations of religion, nationality, race or social standing to influence the quality of the care they render
- 4 Nurses must maintain the utmost respect for human life at all times
- 5 Nurses must be educated and remain competent through life-long learning
- 6 Nurses must respect, uphold and safeguard the right of healthcare users to privacy, confidentiality and dignity
- 7 Nurses must respect the right of health care users to receive nursing care in accordance with their needs
- 8 Nursing is based on a relationship of trust between the profession, society, the individual nurse and the healthcare user
- 9 The relationship of trust between society and the nurse must be based on the nurse's professional knowledge, competence and conduct characterised by a willingness to be accountable for his/her actions and a commitment to serve mankind
- 10 Nursing is an essential element in meeting the health needs of society
- 11 A nurse is able to contribute to the provision of comprehensive health care
- 12 Nursing practice must be based on the science of nursing, and must be directed by professional norms, values and philosophies of nursing and research
- 13 Nursing practice at all times requires:
 - Sound judgement, adequate knowledge, skills and competencies
 - Ethically and scientifically based comprehensive and holistic health care user care

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- That all care provided is done timeously, accurately and comprehensively
- Teamwork with members of the profession and the multi-disciplinary team
- An environment that is therapeutic
- Nurses to be accountable and responsible for maintaining their professional conduct

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CHAPTER 2

RIGHTS OF HEALTH CARE USERS AND RIGHTS OF A NURSE

2.1 The Rights of The Health Care User

There are two main principles when considering the rights of the healthcare user.

- **Firstly**, the principles inherent in the concept of the individual as a natural person, mainly the inalienable right of the person to the safety and integrity of his or her person, property, privacy and confidentiality.
- **Secondly**, the safety and the lawful rights of the members of society, under normal circumstances, may never be placed in jeopardy by the exercising of individual rights.

The rights of the healthcare user embrace inter alia the right to:

1. Consideration and respect
2. Privacy and confidentiality
3. Unconditional acceptance as a human being
4. Safe and adequate nursing care in accordance with his or her specific needs
5. Continuity of nursing in accordance with his or her specific needs
6. Informed, voluntary decision making regarding consent and refusal
7. Confirmation of his or her identity for purposes of diagnosis, care and treatment
8. Protection against exposure to potentially harmful conditions
9. Correct labelling of his or her -
 - a. Person
 - b. Possessions
 - c. Specimens for investigation purposes
 - d. Records, including visual, diagnostic and monitoring records and reports
 - e. His/her body, in the case of death
10. Reasonable expectations regarding his/her treatment and nursing
11. Protection against cross-infection and communicable diseases, including protection against a nurse who is a carrier or suffering from an infective condition
12. Receive prescribed treatment and nursing

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13. Die with dignity.

The rights of the Health Care User with special needs

2.1.1 The Rights of the Unborn Child

The unborn child has the right to:

- Nursing advocacy with regard to his/her health needs
- Promotion of health
- Protection from harm

2.1.2 The Rights of the High-risk Newborn Infant

The high-risk newborn infant includes inter alia the underdeveloped premature and the severely deformed newborn. These babies have the right to:

- Accurate recording of the moment of birth
- Basic nursing, i.e.
 - Protection and safety
 - Maintenance of body temperature
 - Maintenance of fluid intake and nutrition
 - Maintenance of physical cleanliness and comfort
 - Warmth and cuddling
 - Appropriate religious observances.

All newborn infants are regarded as being at risk.

2.1.3 The Rights of the Unusually Vulnerable Health care user

The unusually vulnerable health care user includes inter alia, the:

- Pregnant woman and the woman in labour
- Elderly
- Unconscious

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- Person with limb, sensory, learning or social disability/impairment
- Mentally disturbed person
- Health care user in pain
- Dying health care user

These persons must be nursed as high-risk health care users, and have the right to:

- Protection of their person, privacy, confidentiality and property
- Basic nursing, which includes the maintenance of physical cleanliness and comfort, physiological homeostasis, physical mobility and skin integrity
- Nursing in which monitoring, carefulness and promptness, according to the specific needs of the health care user, are accentuated
- Nursing advocacy according to individual needs
- Careful mediatory and co-ordinated nursing in the multidisciplinary team context
- Informed and voluntary decision-making regarding consent and refusal where possible
- Protection of self from their own limitations of reasoning and judgement.

The dying health care user has the following additional rights.

The right to:

The most appropriate available assistance to draw up his/her last will

A peaceful and dignified death

The presence of relatives and/or persons of his/her choice

Appropriate religious attention/observances

Accurate recording of the moment of death

Protection of his/her body, identity and immediate personal belongings.

The active terminating of life is unlawful, except when done in accordance with an Act of Parliament. Therefore, neither the existence of a "Living Will" nor a request by a health care user or any other person can impose on the nurse a duty to withdraw life support measures, to terminate a life or to hasten the moment of death.

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2.1.4 The Rights of a Person that is HIV Positive and a Person Afflicted with AIDS

The ethical problems associated with the nursing of such health care users arise mainly from faulty perceptions. These health care users have the right to:

- Confidentiality
- Non-judgemental, effective nursing according to personal needs
- Empathy for the social dilemma of the HIV-positive person and the health care user with AIDS
- Expert accompaniment for themselves, the family and community in order to continue a normal responsible life
- Protection and life, in the case of the unborn child.

2.1.5 The Right of a Health Care User to Independent Decision-making

This implies informed decision-making with regard to the acceptance or refusal of treatment/nursing by a person who is legally and otherwise competent to make independent decisions with regard to his/her own treatment/nursing.

2.2 The Rights of The Nurse

In carrying out his/her duty to health care users, the nurse operates within the ethical rules governing the profession and his/her scope of practice.

The confirmation of the rights of the nurse is therefore not an end in itself, but a means of ensuring improved service to health care users. To enable the nurse to provide safe, adequate nursing, he/she has the right to insist on:

- Practising in accordance with the scope which is legally permissible for his/her specific practice

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- A safe working environment which is compatible with efficient health care user care and which is equipped with at least the minimum physical, material and personnel requirements
- Proper orientation and goal-directed in-service education in respect of the modes and methods of treatment and procedures relevant to his/her situation
- Negotiation with the employer for such continuing professional education as may be directly or indirectly related to his/her responsibilities
- Equal and full participation in such policy determination, planning and decision making as may concern the treatment and care of the health care user, in the case of a registered person
- Advocacy for and protection of health care users and personnel for whom he/she has accepted responsibility
- Conscientious objection, provided that:
 - The employer has been timeously informed in writing
 - It does not interfere with the safety of the health care user and/or interrupt his/her treatment and nursing
- Refusing to carry out a task reasonably regarded as outside the scope of his/her practice and for which he/she has insufficient training or for which he/she has insufficient knowledge and/or skill
- Withholding participation in unethical or incompetent practice
- Written policy guidelines and prescriptions concerning the management or his/her working environment
- Refusing to implement a prescription or to participate in activities which, according to his/her professional knowledge and judgement, are not in the interest of the health care user
- Disclosure to him/her of the diagnosis of health care users for whom he/she accepts responsibility
- A working environment which is free of threats, intimidation and/or interference
- A medical support or referral system to handle emergency situations responsibly.

In addition to the above, the nurse is entitled to his/her rights in terms of the Constitution and relevant labour legislation, provided that the exercising of such rights does not put at risk the life or health of health care users.

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CHAPTER 3

CODE OF CONDUCT & ETHICS OF NURSING

3.1 Principles Guiding the Practice of Nursing

- 3.1.1 The practice of nursing is based on the national health priorities and is always provided in the best interest of the needs of society, communities and individuals.
- 3.1.2 Nursing practice is at all times based on:
 - Sound ethical judgement
 - The competency of the practitioner (knowledge, skill and judgement of the practitioner that is based on their education, training & experience)
 - Independent decision making of the nurse practitioner
- 3.1.3 Nursing practice must at all times be sensitive, relevant and responsive to changes in the health care environment and the health care needs.
- 3.1.4 Nursing practice is guided and directed by the needs of health care users, the demands of the situation and the respective roles of health professionals within the multi-disciplinary team.
- 3.1.5 Nursing practice must all times aim to provide equitable health care to all.
- 3.1.6 A nurse is at all times accountable to the public for the nursing practice he/she provides.

3.2 Code of Conduct of The Nurse and Midwife

A nurse and midwife must at all times act in such a manner that:

- 3.2.1 Protects the health status, and well-being of a client
- 3.2.2 Provides special consideration for clients that are vulnerable due to health status, age, disability and social standing
- 3.2.3 Ensures the safety of clients through:
 - Correct identification
 - Safe application of diagnostic & therapeutic interventions

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- Appropriate and accurate monitoring of the clients condition
- Accurate and complete recording of observations and care provided
- Timeous and appropriate referral of a client
- The provision of assistance in an emergency situation
- Creating a safe environment for health care

3.2.4 Recognition and respect for the uniqueness and dignity of each client

3.2.5 The privileged relationship with clients is not abused or compromised

3.2.6 The privileged access to a client and his/her property, residence or workplace is not violated or compromised

3.2.7 Respects the confidentiality of information obtained in the course of professional practice and refrains from disclosing such information without the consent of the client concerned is provided in accordance with the individual needs of the client and not influenced by financial or material rewards from the client or a third party

3.2.8 Maintains & improves his/her own professional competency and knowledge in accordance with current best practice standards.

3.2.9 Ensures that practice at all times complies with legislative and health policy framework of the country

3.2.10 Facilitates and fosters participation and involvement of all clients in all decisions regarding health care provided

3.2.11 Maintains collaboration, cooperation and mutual respect for all members of the health care team and their contributions to health care delivery

3.2.12 Recognises personal limitations in performing functions that are beyond own competence and scope and seek appropriate guidance and assistance

3.2.13 Accepts responsibility and is accountable for performing any function that is beyond the scope of practice of nursing

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- 3.2.14 Ensures that health care delivery is not compromised by timeously forwarding a written declaration of any conscientious objection to an employer or relevant authority
- 3.2.15 Reports to an appropriate authority/employer any circumstances that may adversely affect or jeopardise the standard of health care
- 3.2.16 Ensure that client safety is of paramount importance at all times
- 3.2.17 Acts as a client advocate at all times
- 3.2.18 Assist and supports colleagues and subordinates to develop their professional competence to provide competent and safe nursing care
- 3.2.19 Refrain from using registration status to promote commercial products or services to the public
- 3.2.20 Does not, when in private practice, take a client from another nurse without an explicit referral or on direct request of a client.

3.3 Values Fundamental To Nursing

The following values are fundamental to nursing:

Respect for the healthcare user as a total being i.e.

Respect for his or her:

- Body, psyche, spirit
- Individuality, beliefs and traditions
- Privacy and the right to confidentiality
- Right to decision making regarding his or her care
- Possessions
- Vulnerability, being conscious or unconscious, in the absence of the necessary strength, will or knowledge.

Respect for all aspects of human life including:

- The value of life
- The beginning and end of life

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- The vulnerability of life
- The quality of life

Commitment to:

- Accountability for safe practice
- Compassionate involvement
- Personal integrity.

3.3.1 Conflicting Values, Beliefs And Traditions

3.3.1.1 Inter- and intra-disciplinary conflict

The nurse has co-responsibility within the professional health team for the treatment of the health care user. Professionally, he/she is personally accountable for carrying out nursing care and the prescribed treatment.

Therefore, the nurse must ensure continuously that he/she has the competence to carry out treatment and prescriptions without endangering the safety and well being of the health care user.

He/she will be held professionally accountable for any participation in criminal acts or other actions or omissions conflicting with this principle. Involvement in a criminal act also exposes him/her to the process of normal criminal procedures.

The nurse must not carry out treatment prescribed for the health care user if he/she suspects that such prescription or treatment is unlawful or is likely to be detrimental to the health care user if it is carried out. In such a case, he/she is obliged to inform the person who prescribed the treatment immediately and in person of his/her refusal to carry out the prescription. The health care user's record must be endorsed – 'prescription not carried out and (name of prescriber) informed' - and the date and time added together with the nurse's full signature.

In a situation where the life or well-being of the health care user is endangered or harmed as a result of suspected unlawful or negligent acts or omissions the nurse is obliged to undertake the necessary preventive and/or live-saving measures and record his/her action on the file of health care user.

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In all cases the nurse must notify the authority regarding his/her acts or omissions and account for these immediately and in writing.

3.3.1.2 Social vs Professional Norms and Values

Where contemporary social norms are in conflict with professional norms relating to the dignity and value of human life, the professional norms apply for the nurse.

He/she has a duty to re-affirm the professional standpoint and to furnish correct information to ensure that wrong perceptions and ignorance are dispelled.

The same principle holds where social norms, contemporary social practices and social pressure disregard and/or undermine the health of the nation.

3.3.1.3 Conflict Of Norms, Values, Beliefs And Traditions Within The Nursing Profession

While such situations could arise in a multi-culturally constituted profession forming part of a pluralistic society, the only yardstick in judging or determining the professional conduct of a nurse is always the health and well-being of the health care user.

3.4 Ethical Nursing Practice

Ethics is concerned with the code of conduct for safe nursing practice and an ethical standard is a norm against which nursing practice is measured.

3.4.1 The Nature Of Nursing Ethics And Ethical Problems

An ethical dilemma arises when, in the course of the practice of his or her profession, the conduct of the nurse is in conflict with the:

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- Preservation of human life
- Regard for man as a total being
- Recognition of a person's uniqueness and his/her personal values, beliefs and traditions
- Preservation of human dignity
- Freedom of choice of a person who is competent to make an independent decision
- Preservation and enhancement of the health of the individual
- Right of an individual and community to receive a nursing care.

An ethical problem arises when the Conduct or practice of the nurse does not adhere to the ethical standards of the nursing profession.

3.5 Ethical Standards

3.5.1 Human Procreation

3.5.1.1 In Vitro Fertilisation And Surrogacy

It is the duty of the nurse to nurse the health care user and, in doing so, to carry out the relevant aspects of his/her scope of practice.

In a situation where the nurse suspects that an unlawful act is being performed, he/she has a duty to withhold his/her services, and to inform the appropriate authority regarding his/her suspicions. Participation in any unlawful acts is unethical.

3.5.1.2 Prevention of Pregnancy

From an ethical point of view, the nurse may be confronted most commonly by one of two situations:

The sexually active teenager requests contraceptive measures **or** an adult woman seeking contraceptive measures in a situation where there is a conflict of interest.

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3.5.1.3 The Sexually Active Teenager Or Adolescent Requesting Contraceptive Measures

The actions of the nurse are determined by two considerations, namely:

- The counselling for this young person should stress the dangers and prevention of sexually transmitted diseases including HIV-infection, and the personal and social consequences of promiscuity
- Maintain professional secrecy, despite the fact that the parents of such a minor may be unaware of the need for help.

3.5.1.4 The Adult Woman Seeking Contraceptive Measures Where Conflict Of Interests Exists With Regard To The Prevention of Pregnancy

Examples of such situations are:

- Where a woman seeks measures for prevention of pregnancy against the wishes of her husband, the following principles apply:
 - An adult interaction between nurse and health care user is maintained
 - The nurse supplies advice and provides contraception as his/her scope of practice permits, in accordance with the health care user's needs and with her informed consent
 - Professional secrecy is observed
- Where a woman accepts avoidance of pregnancy as a condition of service in an employment situation, the following principles apply:
 - The nurse may not interfere in the contract between employer and employee
 - The nurse may provide such advice and reversible method of contraception as his/her scope of practice permits, in accordance with the health care user's needs, provided such measures are provided at the request of the health care user
 - Professional secrecy is observed

Whilst it is ethical in such cases for the nurse to remind the health care user on a regular basis of the importance of maintaining contraception efficacy, it is unethical for him/her to enforce compliance. This remains the choice of the health care user. The nurse is not accountable for a health care user's informed decision to discontinue contraceptive.

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3.5.1.5 Research or Trade In Products of Conception

It is unethical for a nurse to participate in the termination of pregnancy for the purposes of research or trade in embryonic tissue, the foetus and/or placenta.

The same principle applies in respect of experimentation on a living foetus or any form of experimentation or trade with the child.

3.5.1.6 Termination of Pregnancy

Notwithstanding anything contrary in any law contained, the provisions of the Choice of Termination of Pregnancy Act 1996 (Act 92 of 1996), the following ethical principles apply:

- Termination may be carried out during the first 12 weeks of gestation by a registered nurse who has completed a prescribed course in the termination of pregnancy
- Any medication used to induce the separation and expulsion of the products of conception must be prescribed by an authorised practitioner, in terms of Act 101 of 1965
- A nurse may refuse to participate in the Act of termination of pregnancy i.e. the Medical or Surgical initiation of separation and expulsion of the products of conception
- A nurse may object to removal and disposal of the expelled products of conception
- A nurse must timeously lodge in writing to the employer his/her refusal to carry out the above-mentioned function.

A copy of the letter of refusal shall be placed on the nurse's personnel record and the nurse, as proof of such refusal, shall retain a certified copy of the original. A nurse must at all times protect the confidentiality of the health care user.

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Irrespective of any conscientious objection, a nurse must provide the following to healthcare users:

- Nursing care (assessment, planning, implementation, monitoring and evaluation)
- Basic assistance with activities of daily living
- Emotional, physical and psychological support
- Prescribed medication (except as implied above)
- Comfort and pain relief measures
- Appropriate reporting and referral as required by the condition of health care user

3.5.2 Nursing A Person Who Is A Prisoner

The following principles apply in respect of the nursing and care of the various categories of prisoners:

1. The principles of the Geneva Conventions concerning the rights and duties of health personnel apply with regard to prisoners of war.
2. In his/her professional capacity, the nurse maintains political neutrality. Any deviation from this is unethical because such impartiality provides the basis for mutual trust. Respect and protection of the rights of the health care user are indivisibly linked to the duties and responsibilities of the nurse towards such a health care user.
3. In considering the rights of the health care user the Bill of Rights and the Charter of Health care user Rights serve as guidelines to the nurse.
4. Wilful or negligent omission to carry out such acts in respect of the diagnosing, treatment, care, prescribing, collaborating, referral, co-ordinating and health care user advocacy as the scope of his profession permits.
5. Wilful or negligent omission to maintain the health status of a health care user under his care or charge, and to protect the name, person and possessions of such a health care user, through:
 - Correct health care user identification

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- Determining the health status of the health care user and the physiological responses of the body to disease conditions, trauma and stress
 - The correct administration of treatment, medication and care
 - The prevention of accidents, injury or other trauma
 - The prevention of the spread of infection
 - The checking of all forms of diagnostic and therapeutic interventions for the individual
 - Specific care and treatment of the very ill, the disturbed, the confused, the aged, infants and children, the unconscious health care user, the health care user with communication problems and the vulnerable and high-risk health care user
 - The monitoring of all the vital signs of the health care user concerned
- 6 Wilful or negligent omission to keep clear and accurate records of all actions which he performs in connection with a health care user.

The following principles thus apply:

1. It is the professional obligation of a nurse to provide life-saving care and alleviation of pain and suffering
2. The health care user has the right to the protection of his/her physical and mental health, his/her possessions and to whatever treatment and nursing are needed
3. The nurse may not be involved in any relationship with a prisoner or detainee other than that required to evaluate, protect or improve his/her physical or mental health
4. It is unethical for the nurse to participate in any procedure for restraining a prisoner or detainee unless medical grounds exist for such a procedure in order to protect the physical or mental health of the prisoner or detainee or of his/her fellow prisoners or detainees
5. It is unethical for the nurse to participate in any form of interrogation or torture of a prisoner or detainee. In the case of torture, it is unethical for the nurse to conceal knowledge thereof
6. No person may interfere in any way with the treatment to which a prisoner is entitled. This means that a health care user who is a prisoner has the right to receive exactly the same treatment as any other health care user.

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3.5.3 Research

With regard to research in which the nurse is personally involved or in which health care users for whom he/she is responsible are involved, it is the nurse's duty to protect and respect the rights of the health care user, with specific reference to:

- Maintaining professional secrecy
- Care and treatment
- Threat or risk
- Voluntary, informed decision making/consent
- Protection of and advocacy on behalf of the health care user who is not able to make independent decisions.

Careful observations and record keeping is the duty of the nurse, since the recording in respect of all observations, nursing activities and treatment may also be used as a database for research.

It is unethical for the nurse to wilfully participate in experimental research on health care users without the full knowledge and informed consent of the health care user. It is further unethical for the nurse who becomes aware of illegal/unauthorised experimentation on health care users to conceal such knowledge.

3.5.4 Conduct Which Adversely Affects The Image Of The Profession

The protection and enhancement of the image of the nursing profession and the professional person is the responsibility of every nurse. Deliberate conduct by a nurse, which threatens or adversely affects the image of the profession or of a professional person, is regarded as being unethical. In this context, 'professional person' refers to the nurse, midwife or other members of the health team.

Thoughtless or deliberate conduct in this context refers, inter alia, to:

- Criminal offences of an immoral nature
- Conduct or omissions, which compromise the professional integrity or reputation of another professional person
- Conduct, which causes harm to the person or character of another individual

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- Disregard for the South African Nursing Council rules of professional conduct
- Collective conduct by nurses which compromises the nursing of health care users

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CHAPTER 4

STANDARDS FOR NURSING PRACTICE

- 4.1 The practice of nursing is based on a scientific approach to the delivery of comprehensive health care in all health care settings to health care users of all ages.
- 4.2 Nursing practice is efficient, effective and relevant to health care users needs.
- 4.3 The primary health care approach is central to all nursing practice.
- 4.4 Nursing practice includes the promotion, creation and maintenance of a safe & caring environment that is conducive for optimum health.
- 4.5 The management of nursing care includes accurate recording, efficient management of information and teamwork.
- 4.6 Nursing practice at all times ensures that nursing and health care is managed to promote & improve health status of health care users.
- 4.7 Nursing Practice is provided by nurse practitioners that maintain excellence, credibility and competence through continuing education for professional growth and development.
- 4.8 Nursing practice is guided by the legislative framework and on the ethical standards, code of conduct and the scope of practice of the profession of nursing
- 4.9 Nurse practitioners must maintain the highest standard and quality of health and nursing services with the available resources.
- 4.10 Nursing practice and health is improved continuously through research and the utilisation of research findings.

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CHAPTER 5

COMPETENCY FRAMEWORK FOR NURSING PRACTICE

A Competencies for Professional Ethical Practice

- A.1 Legal Framework
- A.2 Ethical Practice
- A.3 Accountability

B Competencies for Clinical Practice

B.1 Competencies for Care Provision

- B.1.1 Assessment
- B.1.2 Planning
- B.1.3 Implementation
- B.1.4 Evaluation
- B.1.5 Promotion of Health Prevention
 Early Detection
 Caring/Curative
 Rehabilitation
- B.1.6 Therapeutic Environment
- B.1.7 Communication
- B.1.8 Advocacy

B.2 Competencies for Care Management

- B.2.1 Safe Environment
- B.2.2 Inter Professional and Multidisciplinary Teamwork
- B.2.3 Delegation, Supervision & Coordination
- B.2.4 Information Management
- B.2.5 Recording

C Competencies for Quality of Practice

- C.1 Quality Improvement
- C.2 Continuing Education
- C.3 Professional Enhancement
- C.4 Research

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A Competencies for Professional Ethical Practice

A.1 Legal Framework

- A.1.1 Practises in accordance with relevant Nursing and Health care legislation
- A.1.2 Practises in accordance with national and local procedural guidelines
- A.1.3 Recognises and acts upon breaches of law relating to nursing practice and professional code of conduct and practice standards.

A.2 Ethical Practice

- A.2.1 Practises in a manner that conforms to the SANC code of ethics.
- A.2.2 Demonstrate ethical behaviour in own practice.
- A.2.3 Engages effectively in ethical decision making
- A.2.4 Acts in an advocacy role to protect human rights as prescribed in legislation and policy frameworks.
- A.2.5 Respects the health care users right to access to information.
- A.2.6 Ensures confidentiality and security of written and verbal information acquired in a professional capacity.
- A.2.7 Respects the health care users right to informed choice and self determination in nursing and health care.
- A.2.8 Appropriately intervenes in health care that could compromise the safety, dignity and privacy of health care users.
- A.2.9 Identifies unsafe practice and takes appropriate action.

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A.2.10 Recognises one's own beliefs and values and how these may influence care giving.

A.2.11 Respects the values, spiritual beliefs and practices of health care users.

A.2.12 Provides culturally sensitive care.

A.2.13 Demonstrates understanding of the challenges to ethical decision-making and care prioritisation in war, violence, conflict and natural disaster situations.

A.2.14 Illustrate a balance between professional responsibilities and personal and employment rights.

A.3 Accountability

A.3.1 Accepts and demonstrates accountability and responsibility for own professional judgment and actions.

A.3.2 Understands parameters of own role and competence.

A.3.3 Consults with other nurse practitioners who have the required expertise, when nursing care requires expertise beyond own current competence or scope of practice.

A.3.4 Consults with other health care professionals and relevant organisations when the needs of health care users fall outside the scope of nursing practice.

A.3.5 Accepts responsibility and accountability for own competence in accordance with scope of nursing practice.

A.3.6 Limits practice to scope of competence.

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B Competencies for Clinical Practice

B.1 Competencies for Care Provision

B.1.1 Assessment

- B.1.1.1 Utilise communication, interpersonal and client-provider interaction skills in conducting nursing assessment.
- B.1.1.2 Collect and analyse active and objective data by taking a history, and conducting necessary physical and mental examinations and diagnostic investigations.
- B.1.1.3 Collect and analyse data through a community assessment
- B.1.1.4 Order necessary investigations within her/his scope of practice.
- B.1.1.5 Identify health indicators and risk factors.
- B.1.1.6 Interpret data and statistics against a body of scientific knowledge.
- B.1.1.7 Formulate accurate nursing and health care diagnosis to clarify client's needs including learning, information/and counselling.
- B.1.1.8 Prioritise client's health needs.
- B.1.1.9 Involve clients in assessing their health care needs.
- B.1.1.10 Screen for and diagnose minor ailments and common health problems & diseases in accordance with the countries norms and standard guidelines.

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B.1.2 Planning

- B.1.2.1 Determine client's nursing and health care goals in collaboration with them and other members of the health care team.
- B.1.2.2 Identify and outline objectives for the plan of care (taking into consideration the capacities of clients).
- B.1.2.3 Select and outline priorities and other nursing interventions to achieve expected outcomes.
- B.1.2.4 Collaborate with individuals/families and other stakeholders in developing a discharge plan.
- B.1.2.5 Develops a plan for (including prescribing treatment) common or minor primary health conditions presented at primary care facilities in accordance with the country's norms and standards and standard treatment guidelines.
- B.1.2.6 Set priority areas for teaching and learning taking into consideration cultural factors.
- B.1.2.7 Outline the plan including short and long-term goals and time frames.
- B.1.2.8 Identify, mobilise and organise resources to carry out the planned activities.
- B.1.2.9 Document the plan of care to facilitate communication with other health care team members for continuity of care.

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B.1.3 Implementation

- B.1.3.1 Initiate, direct and actively participate in providing nursing care to clients in varying situations.
- B.1.3.2 Create an enabling environment that is therapeutic and meets the clients need for privacy, confidentiality, well-being and dignity.
- B.1.3.3 Perform or carry out interventions ranging from personal care to use of technology with active involvement of clients and others members of the health team.
- B.1.3.4 Communicate the needs for continuity of care of clients to the caregivers and health care providers at the various levels of institutional and community care.
- B.1.3.5 Treat (including prescribing treatment) common or minor primary health conditions presented at primary care facilities in accordance with the country's norms and standards and standard treatment guidelines.
- B.1.3.6 Document interventions and progress of client status to facilitate continuity of care.
- B.1.3.7 Coordinate services and specific care activities within multidisciplinary teams, organizations and special interest groups involved in client care.

B.1.4 Evaluation

- B.1.4.1 Monitor progress and outcome of interventions on the physical,

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psychological and psychosocial well being of individuals, families and communities within health institutions and in other settings.

- B.1.4.2 Formulate and revise nursing interventions through comprehensive and ongoing assessment.
- B.1.4.3 Review the priorities, objectives and nursing interventions for their relevance, appropriateness and currency, based on the assessment and evaluation of the health status, capacity and potential of individuals, families and communities.
- B.1.4.4 Reviews the nursing care-plan and makes the necessary changes.

B.1.5 Promotion of Health

- B.1.5.1 Demonstrates an understanding of national and social policies.
- B.1.5.2 Views the health care user from a holistic perspective and takes into account the multiple determinants of health.
- B.1.5.3 Takes part in health promotion and illness prevention initiatives and contributes to their evaluation.
- B.1.5.4 Applies knowledge resources available for health promotion and education.
- B.1.5.5 Acts to empower the individual, groups and communities to adopt health lifestyles and self-care.
- B.1.5.6 Provides relevant health information to health care users to assist in achieving optimal health care and rehabilitation.
- B.1.5.7 Demonstrates an understanding of traditional healing practices within the health care user's belief system.

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- B.1.5.8 Provides education and support for the development and support for the maintenance of independent living skills.
- B.1.5.9 Recognises the potential health teaching as an integral part of nursing interventions.
- B.1.5.10 Applies knowledge and skills of a variety of teaching learning strategies with health care users.
- B.1.5.11 Evaluates learning and understanding about health practices.
- B.1.5.12 Review the effectiveness of the application the scientific approach of nursing and PHC principles for quality care.
- B.1.5.13 Apply the scientific process of nursing and PHC principles to the nursing care of individuals, families and communities.

B.1.6 Communication

- B.1.6.1 Consistently communicates relevant, accurate and comprehensive information about the health status of health care users, in verbal, written and electronic forms.
- B.1.6.2 Ensures that information given to health care users is presented in an appropriate and clear manner.
- B.1.6.3 Utilises communication and interpersonal skills to initiate, develop and maintain a supportive, caring and therapeutic relationship with health care users.
- B.1.6.4 Responds appropriately to health care users questions, requests and problems.

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- B.1.6.5 Communicates in a manner that facilitates the empowerment of health care users.
- B.1.6.6 Uses available information technology effectively and appropriately to communicate the health status of health care users.
- B.1.6.7 Demonstrates awareness of developments and local applications in the field of health technology.

B.1.7 Therapeutic Environment

- B.1.7.1 Ensures that health care user and his/her carers are equal partners in health care provision.
- B.1.7.2 Create an environment of open communication between health care users, carers, and providers.
- B.1.7.3 Demonstrate an attitude that promotes a positive emotional environment that is conducive for health care
- B.1.7.4 Create an environment that facilitates the health care user to re-integrate meaningfully back to a normal living situation.
- B.1.7.5 Facilitate the empowerment health care users to gain self-reliance.
- B.1.7.6 Identify, link and co-ordinate appropriate support mechanisms for health users and carers.
- B.1.7.7 Creates an environment and provides support that facilitates the process of a person maintaining integrity and dying with dignity.

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B.1.8 Advocacy

- B.1.8.1 Advocate for the rights of clients in the health care system.
- B.1.8.2 Use principles enshrined in the Constitution of South Africa to advocate for improvement of health care.
- B.1.8.3 Understand the advocacy process and the rights of health care users.
- B.1.8.4 Participate in policy development for nursing/midwifery and health care of health care users.
- B.1.8.5 Negotiate for stakeholder group involvement in policy formulation to ensure that health care user's needs receive attention.

B.2 Competencies for Care Management

B.2.1 Safe Environment

- B.2.1.1 Utilises quality assurance and risk management strategies to create and maintain a safe environment for health delivery.
- B.2.1.2 Uses appropriate assessment tools to identify potential and actual risks for a safe environment for health care delivery.
- B.2.1.3 Ensures the safe administration of therapeutic substances.
- B.2.1.4 Implements procedures that maintains effective infection control.
- B.2.1.5 Communicates and records safety concerns to relevant authorities.
- B.2.1.6 Implements and monitors occupational health and safety measures in accordance with the Occupational Health and Safety legislation.

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B.2.2 Inter-Professional and Multidisciplinary Teamwork

- B.2.2.1 Applies knowledge of effective inter-professional working practices.
- B.2.2.2 Establishes and maintains constructive working relationships with nursing and other colleagues.
- B.2.2.3 Values the roles and skills of all members of the health and social care teams.
- B.2.2.4 Consult and collaborate within the multi-disciplinary health teams, organisations and special interest groups.
- B.2.2.5 Demonstrate understanding of the role of other stakeholders in health care.
- B.2.2.6 Participates with members of the health and social care teams in decision making pertaining to health care delivery.
- B.2.2.7 Disseminate information on epidemics, nutritional disease, maternal and infant morbidity and mortality, and other common diseases.
- B.2.2.8 Develop and establish inter-professional and inter-sectoral relationships that promote health care.
- B.2.2.9 Demonstrate team leadership skills and function as an effective team member.
- B.2.2.10 Form alliances after networking with key players when dealing with community health issues and needs.

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B.2.3 Delegation, Supervision & Coordination

- B.2.3.1 Delegates activities commensurate with the abilities and scope of practice of other nurse practitioners.
- B.2.3.2 Uses a range of supportive strategies when supervising aspects of care delegated to others.
- B.2.3.3 Maintains accountability and responsibility for nursing care activities delegated.
- B.2.3.4 Coordinates the provision of health care ensuring that continuity of care provided to health care users.
- B.2.3.5 Ensures that the treatment of health care users is properly coordinated so that it serves the best interest of health care users.
- B.2.3.6 Application of management principles to nursing care in a variety of settings.

B.2.4 Information Management

- B.2.4.1 Maintain the quality of nursing data and information in a documentation system
- B.2.4.2 Evaluate the content of minimum data sets for nursing
- B.2.4.3 Utilise minimum data sets to compare nursing intervention and outcomes
- B.2.4.4 Utilise minimum data set analyses to influence decision-making
- B.2.4.5 Analyse nursing information to evaluate the quality and cost effectiveness of nursing care

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- B.2.4.6 Utilise health and population epidemiological data and indicators to inform nursing practice

B.2.5 Recording

- B.2.5.1 Analyse document, report and accurately utilise all relevant information on the situation, and nursing care of individuals, families and communities, to facilitate continuity of care
- B.2.5.2 Record data on assessment and intervention outcomes.
- B.2.5.3 Analyse the outcome data accordingly.
- B.2.5.4 Report on the consolidated information based on the analysis of outcome data verbally and/or in writing.
- B.2.5.5 Document information in a manner meaningful for improving quality care.

C Competencies for Quality of Practice

C.1 Quality Improvement

- C.1.1 Participate in conducting inventories to gain accurate information on the following:
- (i) The human resources available to individuals, families and communities (numbers, numbers by skills mix, specialisation).
 - (ii) Distribution, and accessibility of health services.

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- (iii) Acceptability and access of health services to health care users.
- C.1.2 Assess the competencies of non-professional community workers, traditional health care providers, family members and volunteers to provide specific, simple and agreed upon care.
- C.1.3 Familiarise self with cost of material resources.
- C.1.4 Promote/identify ways of containing health care costs without compromising standards.
- C.1.5 Participate in multi-disciplinary quality assurance task groups at various levels.
- C.1.6 Participate in peer review based on the agreed upon quality assurance monitoring indicators and tools.

C.2 Continuing Education

- C.2.1 Utilise the Nursing Act and the Regulations, the Code of Ethics and Professional Practice of the South African Nursing Council, and the body of scientific knowledge and apply the principles of PHC in service rendering, for maintaining professional excellence.
- C.2.2 Carries out regular and reviews and explores and utilises opportunities for professional development.
- C.2.3 Identify own learning needs for improving practice, and enhancing professional knowledge.
- C.2.4 Participate in self-directed learning activities aimed at broadening knowledge base for professional practice.
- C.2.5 Assume responsibility for lifelong learning and maintenance of competence.

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C.2.6 Contributes to the education and professional development of students and colleagues.

C.2.7 Acts as an effective mentor.

C.2.8 Takes opportunity to learn together with others contributing to health care.

C.3 Professional Enhancement

C.3.1 Contribute constructively to professional, work and community settings.

C.3.2 Pursue excellence and originality in own work and support these qualities in the work of others.

C.3.3 Respond creatively to the health care needs of societies.

C.3.4 Identify and explore new roles for nurses in a changing health environment.

C.3.5 Implement nursing care management activities according to the Standards of Practice and Scope of Practice.

C.4 Research

C.4.1 Collaborate with other members of the health care team to identify actual and potential areas for nursing and health research in order to improve or maintain quality care.

C.4.2 Utilise the process of scientific enquiry in nursing and health-related matters/problems.

C.4.3 Utilise findings to improve the quality of care.

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- C.4.4 Demonstrates an understanding of the scientific approach to nursing
- C.4.5 Interpret and applies research findings to nursing practice.

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CHAPTER 6

SCOPE OF THE PROFESSION OF NURSING AND MIDWIFERY

6.1 Scope of Nursing

Nursing is a regulated profession, which forms an integral part of a comprehensive health care system practised, by persons registered under the Nursing Act, that-

- promotes, maintains and restores the health status of individuals, groups and communities;
- assists a health care user to maintain the basic activities of daily living
- is a dynamic process based on scientific knowledge skills and judgement within a caring therapeutic relationship, informed by the context in which it is practised;
- maintains continuity and coordination of health care;
- provides continuous support and care to health care users irrespective of their state of health and through all stages of the life cycle; and
- provides and maintains a safe and conducive environment for health care.

6.2 Scope of Midwifery

Midwifery is a regulated profession, which forms an integral part of the health care system practised by persons registered under the Nursing Act, that-

- promotes, maintains and restores the health status of a woman and her child during pregnancy, labour and puerperium;
- is a dynamic process based on scientific knowledge skills and judgement within a caring therapeutic relationship, informed by the context in which it is practised; and,
- means the continuous support and care of a woman, her child and family through all stages of pregnancy, labour and puerperium.

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6.3 DEFINITIONS	6.3.1 Professional Nurse	6.3.2 Midwife	6.3.3 Staff Nurse	6.3.4 Nursing Auxiliary
	<p>A professional nurse is a person who:</p> <ul style="list-style-type: none"> <input type="checkbox"/> is educated and competent to practise comprehensive nursing, independently, <input type="checkbox"/> assumes responsibility and accountability for such practice; and <input type="checkbox"/> is registered and licensed as a professional nurse under the Nursing Act. 	<p>A midwife is a person who:</p> <ul style="list-style-type: none"> <input type="checkbox"/> is educated and competent to practise midwifery independently; <input type="checkbox"/> assumes accountability and responsibility for such practice; and <input type="checkbox"/> is registered in terms of the Nursing Act. 	<p>A staff nurse is a person who:</p> <ul style="list-style-type: none"> <input type="checkbox"/> is educated and competent to practise basic nursing independently; <input type="checkbox"/> assumes responsibility and accountability for such practice; and <input type="checkbox"/> is registered and licensed as a staff nurse under the Nursing Act. 	<p>An nursing auxiliary is a person who:</p> <ul style="list-style-type: none"> <input type="checkbox"/> is educated and competent to practise elementary nursing independently; <input type="checkbox"/> assumes responsibility and accountability for such practice; and <input type="checkbox"/> is registered and licensed as a nursing auxiliary under the Nursing Act.

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6.4 Scope of Practice			
6.4.1 Professional and Ethical Practice	6.4.1.1 Professional Nurse & Midwife	6.4.1.2 Staff Nurse	6.4.1.3 Nursing Auxiliary
	<ul style="list-style-type: none"> • Demonstrates knowledge and insight into laws and regulations relevant to nursing, midwifery and health care in South Africa; • Practises nursing and midwifery in accordance with the laws and regulations relevant to nursing and health care in South Africa; • Practises nursing, midwifery and health care in an ethically justifiable manner; • Creates and maintains an enabling environment for ethical practice; • Protects the rights of individuals and groups in relation to health care. • Practise nursing and midwifery in accordance with the standards set by the profession. • Accepts and assumes accountability and responsibility for nursing and midwifery actions and omissions within the legal and ethical parameters of a dynamic health care environment. 	<ul style="list-style-type: none"> • Demonstrates an understanding of laws and regulations relevant to the practice of the staff nurse; • Practises as a staff nurse in accordance with the laws and regulations relevant to nursing and health care in South Africa; • Protects the rights of individuals and groups in relation to health care. • Practises nursing in accordance with the standards and ethical code set by the profession. • Understands and accepts accountability and responsibility for his/her own nursing actions and omissions within the relevant legal and ethical parameters. 	<ul style="list-style-type: none"> • Demonstrates an understanding of laws and regulations relevant to the practice of the nursing auxiliary; • Practise as a nursing auxiliary in accordance with the laws and regulations relevant to nursing and health care in South Africa; • Protects the rights of individuals and groups in relation to health care. • Practises nursing in accordance with the standards and ethical code set by the profession. • Understands and accepts accountability and responsibility for his/her own nursing actions and omissions within the relevant legal and ethical parameters.

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6.4.2 Clinical Practice	6.4.2.1 Professional Nurse	6.4.2.2 Professional Midwife	6.4.2.3 Staff Nurse	6.4.2.4 Nursing Auxiliary
	<ul style="list-style-type: none"> • Develops and implements a comprehensive nursing plan for the promotion of activities of daily living, self-care, treatment and rehabilitation of health care users; • Provides direction for the implementation of the nursing plan; • Provides supervision for all nursing care • Initiates and maintains a therapeutic relationship; • Establishes and maintains an environment in which health care can be provided safely and optimally; • Continuous review of nursing practice against professional standards; • Facilitates continuity of care through reporting and communication to the care givers and members of the health care team; 	<ul style="list-style-type: none"> • Provides care and management of all aspects that influence the course of normal pregnancy, labour and puerperium as an independent practitioner that includes- • Assesses health and midwifery needs of individuals and groups through observation, interaction and measurement; • Screens the health status of women and babies • Early detection and appropriate referral of persons at risk • Analysis, interpretation of data and diagnosis and prioritisation of midwifery needs. 	<ul style="list-style-type: none"> • Develops and implements a basic nursing care plan for the promotion of activities of daily living, self care, treatment and rehabilitation of health care users; • Establishes and promotes a supportive and helping relationship with health care user; • Maintains a safe environment for nursing care; • Maintains continuity in health care user care; • Assesses, reports and records observations of the health status of the 	<ul style="list-style-type: none"> • Provides assistance and support to the health care user for the activities of daily living and self-care; • Establishes and promotes a supportive and helping relationship with health care users; • Maintains a safe environment for nursing care; • Provides nursing care according to professional standards; • Provides nursing care in accordance with the prescribed plan of care; • Assist with the maintenance of

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	<ul style="list-style-type: none"> • Assesses health and nursing needs of individuals and groups through observation, interaction and measurement; • Analyses, interprets data and diagnose and prioritise nursing needs. • Appropriately refers of a health care user; • Evaluates health care user's progress towards expected outcomes and revises nursing care plans in accordance with evaluation data; • Creates and maintains an environment that promotes safety, security and integrity of health care users; • Manages nursing care and co-ordinate health care to ensure continuity of care within the health care team; • Creates and maintain a complete and accurate nursing record for individual health care users; • Assesses the health care information needs of clients 	<ul style="list-style-type: none"> • Formulation and prescription of an individualized plan of midwifery care and referral, when appropriate, for the health care user; • Implements of the plan of midwifery care to achieve identified outcomes; • Evaluates health care user's progress towards expected outcomes and revision of plans in accordance with evaluation data; • Initiates and maintains of a therapeutic relationship; • Establishes and maintains an environment in which health care can be provided safely and optimally; • Continuously reviews midwifery practice against professional 	<ul style="list-style-type: none"> health a care user; • Maintains an environment that promotes safety, security and health care user rights; • Promotes health through the provision of health care information • Demonstrates and maintains a commitment to life-long learning to practice as a safe practitioner; 	<ul style="list-style-type: none"> continuity in health care user care; • Observes the health status of the health care user and reports and records thereof; • Maintains an environment that promotes safety, security and health care user rights; • Promotes health through the provision of health care information
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	<p>and plan for and respond accordingly;</p> <ul style="list-style-type: none">• Advocates for the rights of health care users;• Promotes health care user participation in health care and empowers them towards self reliance;• Demonstrates and maintains of adequate knowledge and skills for safe practice.	<p>standards;</p> <ul style="list-style-type: none">• Creates and maintains an environment that promotes safety, security, integrity and comfort of health care users;• Manages and co-ordinates continuity of care within the health care team;• Creates and maintain a complete and accurate midwifery record for individual health care users;• Assesses the health care information needs of clients and plan for and respond accordingly.• Demonstrates and maintains a commitment to life-long learning to practice as a safe practitioner;		
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6.4.3 Quality of Practice	6.4.3.1 Professional Nurse & Midwife	6.4.3.2 Staff Nurse	6.4.3.3 Nursing Auxiliary
	<ul style="list-style-type: none"> • Actively engages in the development of standards, criteria and indicators for quality nursing, midwifery and health care; • Participates in the development and maintenance of a plan to improve the quality of nursing, midwifery and health care; • Implements and manages of a quality improvement plan for his/her own area of practice; • Participates in the auditing of quality of nursing, midwifery and health care; • Assists with the development of nursing and midwifery and improvement of standards of care through research. • Incorporates appropriate research findings into practice. • Creates an environment and learning opportunities that foster professional growth and improvement in nursing and 	<ul style="list-style-type: none"> • Participates in the maintenance of set standards to improve the quality of nursing care; • Utilizes learning opportunities to improve own nursing practice; • Continuously reviews own performance against professional standards; 	<ul style="list-style-type: none"> • Participates in the maintenance of set standards to improve the quality of nursing care; • Utilizes learning opportunities to improve own nursing practice;

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6.4.3 Quality of Practice	6.4.3.1 Professional Nurse & Midwife	6.4.3.2 Staff Nurse	6.4.3.3 Nursing Auxiliary
	<p>midwifery practise;</p> <ul style="list-style-type: none">• Commits to the development, maintenance and facilitation of life long learning for self and others;• Actively engages in the education and training of learners in the health care system;• Identifies own learning needs and maintains knowledge and skills required for competent and independent nursing and midwifery practice.		

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CHAPTER 6

CONDITIONS FOR PRACTICE

To be finalised once the above chapters and the new Nursing Act is passed

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CHAPTER 7

EDUCATION & TRAINING FOR NURSING PRACTICE

This section will be informed by the final scope of practice and competencies for nursing practice.

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REFERENCES

Will be included in final document

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GLOSSARY of TERMS

Comprehensive Nursing	Nursing interventions that integrate and apply the scientific process of the full range of nursing i.e. general, community, midwifery and mental health that promote and maintain the health status of health care users in all contexts of health care delivery.
Basic Nursing	Nursing interventions that promote and maintain the healthcare user's health status through the application of the scientific process of general nursing
Elementary Nursing	Nursing interventions that assists the healthcare users to promote and maintain their health status through the application of the scientific process of fundamental nursing
Collaboration	Cooperating, forming an alliance, and/or working together in partnership with the health care user and one/or more members of the healthcare team who each make a unique contribution to achieving a common goal related to health care user care.
Competence	A level of performance demonstrating the effective application of knowledge, skills, judgement and personal attributes required to practise safely and ethically in a designated role and setting. * Personal attributes include but are not limited to attitudes, values and beliefs.
Competencies	Specific knowledge, skills, judgement, and personal attributes required for a healthcare professional to practise safely and ethically in a designated role and setting.
Continuing competence	Ongoing ability of a healthcare professional to integrate and apply knowledge, skills, judgement and personal attributes required to practise safely and ethically in a designated role and setting. The health care professional reflects on practice on an ongoing basis and takes action to continually improve that practice.
Continuing education	Formal professional learning experiences designed to enrich the nurse's contributions to quality healthcare and her/his pursuit of professional career goals.

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Consultation	Written or verbal communication from the primary provider to a healthcare colleague requesting information, advice or sharing in the decision-making of the diagnosis and/or management of health care user's health condition.
Health Promotion	The process of enabling people to increase control over, and to improve their health. Health promotion is not just the responsibility of the health sector, but goes beyond healthy lifestyles to well-being. Health promotion is an approach (rather than a specific set of services) that focuses on the broad determinants of health, the underlying causes of illness, and factors that affect the ability to cope. Health promotion includes education and support based on clinical evidence to help populations: reduce any health risks associated with lifestyle and environment; and take responsibility for and become actively involved in decisions that affect their health. Rather than dealing primarily with people at high risk, health promotion looks at the health of the entire population. Health promotion activities involve many players and include activities such as community development, mass communication, social marketing; advocacy to change public policy, and information to support healthy choices. In clinical practice, healthcare providers use a health promotion approach to encourage self-efficacy, are attentive to the broad determinants of health, and lifestyle factors as they impact individuals, families and communities.
Disease prevention	Any action that reduces the likelihood that a disease or injury will affect an individual, family or community. Actions may include administering therapeutic agents and procedures to prevent disease or moderate the progression of disease; screening and risk factor assessment of specific populations to detect early deviation from health; teaching and counselling about lifestyle changes related to risk factors; and monitoring disease and injury resulting from accidents or environmental hazards. Disease prevention occurs at three levels of prevention primary, secondary and tertiary.
Primary prevention	Aversion of disease or disability prior to onset of a pathology process.

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Secondary prevention	Screening for or early case finding of disease before it becomes symptomatic, in order to introduce effective intervention and reduce subsequent mortality and morbidity.
Tertiary prevention	Measures to reduce complications of disease and disability.
Curative care	Treatment of acute episodic, minor and acute complex, major disease and minor and major injury.
Rehabilitation	Services designed to optimally treat chronic disease and to attain optimal function for individuals with acquired or congenital disability. Optimal treatment of chronic disease and disability includes initial treatment with newly diagnosed chronic disease, treatment adjustment with unstable disease or disability, and monitoring of stable disease or disability. Rehabilitative services also include palliation.
Supportive care	Services which enhance the other elements of care, essential to individualized care. Supportive services may include the following:
Health Education	Presentation of information, formally and informally, to individuals and groups related to disease process and treatment, disease prevention and health promotion. Information is presented based on learning and teaching principles and using strategies relevant to the individual or target group. At the clinic level, focus is on the individual and family.
Advocacy	Process of providing support, referral, and liaison for individuals and families who may or may not be aware of the need and are unable to coordinate or organize for themselves; includes accompanying them if needed, writing letters, making telephone calls or speaking on their behalf.
Counselling	Providing assistance when exploring a health or psychosocial problem which may involve responding to stress or change in relationships or circumstances; the initial and ongoing process of adapting to illness and its

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	consequences; or supportive and / or therapeutic counselling for acute or ongoing mental health disorders.
Health outcomes	Measurable change in health care user (individual, family, group or community) health status or level of health attributed to an identifiable and goal directed intervention.
Practice Guidelines	Formalized interpretative statements that serve to extend and clarify meaning for practice decisions and actions but are not intended as an absolute or only acceptable method of practice.
Referral	Written or verbal communication from the primary provider to another healthcare colleague for the purpose of additional information, advice or decision-making that will assure the continuity of health care user care.
Research	The act of scientifically collecting and analysing information and reporting results that supports the validity and reliability of nursing practice.
Scope of practice	The range of activities that can be carried out by a nurse who has met the established qualifications and credentialing criteria. It defines the limits of practice of a licensed/registered nurse.
Standard	The desired and achievable level of performance against which actual practice is measured.