A Scope Of Practice
For Registered Nurses And
Registered Midwives

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INTRODUCTION
The FDON in collaboration with key nurses and
focused groups have prepared and published a
number of seminal documents to guide nursing
practice in the UAE. Apart from position papers
and statements, we actively supported the prepara-
tion and publication of the Code of Conduct for
Nurses (MOH, 2001).

The latest publication is the Scope of Practice for
Nurses and/or Midwives (FDON, 2004) to guide
registered nurse [Nurse(s) and nursing includes
midwife(midwives) and midwifery.] practice. We
recognize that such a document usually presents
itself within a broader regulatory framework such
as a Nursing Practice Act, but we believe that pro-
viding the document now to nurses may truly serve
the public on the one hand, and the development
of quality care and the nursing profession on the
other hand.

The Federal Department is proud to be associ-
ated with the Abu Dhabi Nurse in this way –
collaboratively bringing the Scope of Practice docu-
ment to the hands, eyes, minds and hearts of nurses
and midwives.

WHAT DOES A SCOPE OF PRACTICE DO
In the interest of public wellbeing, a “scope of prac-
tice” outlines the parameters of care provided by a
defined category of caregiver - here a registered
nurse and/or midwife. It outlines the expected
knowledge, skills and attitudes to meet the needs
of the health care recipient or community at hand
(SANC, 2001). This said, it will also automatically
limit the practice to whom it is applicable, for ex-
ample applicable to either Physiotherapists, Social
Workers or Registered Nurses – making provision
for a delineation of responsibilities and autonomy
within and across professions.

The Scope of Practice as defined by nurses for
nurses (ICN, 1998) usually informs the public and
all stakeholders about the profession and supports
the protection of the title as used (Nursing Council
of New Zealand, 2004) - here “Registered Nurse”. It
also becomes an important reference point for
basic nursing education, quality improvement, re-
search and ethics programs in a defined context.
Also, a Scope of Practice usually strengthens ef-
forts to regulate practice and provides a corner stone
to support the development of a profession.

Current trends internationally favor a broader and
more flexible approach to Scopes of Practice, al-
lowing for greater self-determination (Nevada State
Board of Nursing, 2004; State of Colorado, Board of
Nursing, 2003). For this reason, this Scope of Prac-
tice (FDON, MOH, 2004) consists of generic type
statements that allow for interpretation without
loosing its ability to be substantial enough to mean-
fully guide practice. This was considered im-
portant due to the fact that this is the first such type
document for nurses in the UAE and also that
nurses working here may have been trained in more
than a hundred countries – creating a reality of
very diverse educational backgrounds, professional
preparation and experience.

Of course, a number of concerns can be raised
against Scopes of Practice in general, for example
the danger of being too prescriptive and burden-
some. At times, it is also difficult to interpret Scope
of Practice statements – finding the balance between
being either too specific or too general is difficult. A
tongue-in-the-cheek question relates to who is pro-
tected – is it truly the interests of the public?

Here in the UAE: What was most important to us?

In developing this document, a number of principles
guided the process. These were to:

- Be in line with ICN, Arab and GCC directions
  but having a true focus on the UAE and the
  features of our particular context (ICN, 2003);
  and most importantly the needs of the clients
  we serve (SANC, 2001; UKCC, 1992).
- Provide space for evolving practice – a practice
  that is becoming more and more focused on
  nursing care outcomes and within collabora-
tive relationships. In this sense, some may con-
sider it a relatively idealistic document – fo-
cusing on more than the present!
- Allow for freedom-in-context for the reasonable and competent nurse – emphasizing the ability to participate in regular and systematic assessment of such competence.
- Underline and strengthen accountability for own practice.
- Be able to integrate this document with other national statements and documents, for example the Code of Conduct for Nurses (MOH, 2001), existing policies and procedures.
- Follow a unified approach in relating to the Scope of Practice for both the registered nurse and registered midwife - building on similarities rather than differences in this generic-type document.
- Support our intention for later follow-up documents, for example, a Scope of Practice for Practical Nurses and for the Advanced Practitioner.
- Be comfortable that such a document will take time to be integrated in the UAE nursing society, to have a meaning of its own and to be eventually reviewed and adapted again...

How did the document came about
We embarked on a “Scope of Practice development journey” and made our first stop at the available literature, similar initiatives and documents from both international and regional sources. This was followed by small group discussions to agree on the way forward. An in-house conceptual framework and statements were developed, carefully reviewed and then widely distributed as a discussion document in September, 2002. Nurse executives in the country shared the document with colleagues in their respective facilities.

We received well-prepared documented input from a number of health care facilities and followed suggestions up in two national open forum discussions with nurse executives. The content was refined and edited as agreed. Currently efforts are underway to attune competency standards with the Scope of Practice document. This may further establish and strengthen the applicability and appropriateness of the document.

The spirit and contents of the Scope of Practice
The document includes an introduction, a diagram and Scope statements followed by core definitions of a registered nurse/midwife, client and significant others. In the diagram, the five core themes are portrayed as a five-pointed star – an image often used in local designs and art. The “star” may also fuel positive images and connections.

The first three themes relate to comprehensive client focused care, the management of own and collective practice and professional development. The fourth theme is considered quite unique in that it relates to “being comfortable with diversity” – this was considered crucial-in-context due to the diversity of the population, cultural and health care settings, roles, positions and structures. The last theme emphasizes accountability due to an inherent awareness of the characteristics of care providers and care context. It includes, for example, the responsibility for own actions, reflection, reasoning and judgment.

Concluding
The development of the Scope of Practice was a slowly evolving but challenging process. The most important challenge however is now - making it “real and working” for quality health care in the UAE. The support of all nurses is crucial to success and we believe that nurses in the UAE have what it takes to make it work!

Please feel free to contact us for feedback and/or suggestions:
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