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GOVERNMENT NOTICE

DEPARTMENT OF HEALTH

No. R. 786

15 October 2013

NURSING ACT, 2005 (Act No. 33 of 2005)

Regulations Regarding the Scope of Practice of Nurses and Midwives

After consultation with the South African Nursing Council, the Minister of Health, under section 58(1)(q) of the Nursing Act, 2005 (Act No. 33 of 2005), intend making the regulations in the Schedule.

Interested persons are invited to submit any substantiated comments on or representations to the proposed regulations to the Director-General of Health, Private Bag X828, Pretoria, 0001 (for the attention of the Director: Public Entities Management), within three (3) months of the date of publication of this notice.

SCHEDULE

1 Definitions

In these regulations “**the Act**” means the Nursing Act, 2005 (Act No. 33 of 2005), and any word or expression to which a meaning has been assigned in the Act shall bear such meaning and, unless the context indicates otherwise—

“**advocacy**” means the process of providing support, referral, liaison, representing and protecting the interest of individuals and families who may or may not be aware of the need or are unable to coordinate or arrange healthcare for themselves;

“**competence**” means 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;

“competencies” means specific knowledge, skills, judgement and personal attributes required for a healthcare professional to practice safely and ethically in a designated role and setting;

“comprehensive nursing” means integrated nursing interventions that apply the scientific process of the full range of nursing (i.e. in the areas of general, obstetric and mental health) that promote and maintain the health status of healthcare users;

“continuing competence” means the **on-going** ability of a healthcare professional to integrate and apply knowledge, skills, judgement and personal attributes required to practice safely and ethically in a designated role and setting.;

“elementary nursing” means practical self-care and activities of daily living interventions that assist the healthcare users to promote and maintain their health status through the application of prescribed standards of care;

“health outcomes” means the measurable change in a healthcare user’s (individual, family, group or community) health status or level of health attributed to an identifiable and goal-orientated intervention;

“plan of care” means a prescribed plan of care developed for a healthcare user by a professional nurse, midwife or staff nurse;

“scope of practice” means the parameters within which a category of nurse who has met the prescribed qualifications and registration requirements may practice;

“standardised plan of care” means a generic care plan developed by professional nurse; midwife or staff nurse for specified conditions or interventions;

“supportive care” means all services which enhance the other elements of care essential to individualised care, including health education, advocacy and counselling; and

“the Republic” means the Republic of South Africa.

2 Scope of Nursing

- 2.1 **Nursing** is a regulated profession comprising a body of scientific knowledge and skills practiced by persons referred to in section 30 of the Act and registered in terms of section 31 of the Act.
- 2.2 The Act, the regulations, rules and codes made in terms of the Act provide the legal and ethical framework for the practice of nursing.
- 2.3. The practice of nursing is a dynamic process that provides and maintains the care of individuals, groups and communities that are faced with actual or potential health problems.
- 2.4. Nursing is a dynamic process which—
- (a) promotes, supports and restores health status;
 - (b) assists a healthcare user to maintain the basic activities of daily living;
 - (c) requires judgement within a caring therapeutic relationship, informed by the context in which it is practiced;
 - (d) maintains continuity and coordination of healthcare;
 - (e) provides continuous support and care to healthcare users, irrespective of their state of health and through all stages of life; and
 - (f) provides and maintains a safe and conducive environment for healthcare.

3 Title professional nurse and midwife

- 3.1. The title of professional nurse may only be used by a person who—
- (a) has met the prescribed education requirements for registration as a professional nurse and midwife;
 - (b) has acquired and maintains the competencies to practice as a professional nurse and midwife
 - (c) is registered as a professional nurse in terms of section 31(1)(a) of the Act.

4 Scope of practice of a professional nurse

4.1. It is within the competence of a professional nurse to assume full responsibility and accountability for—

- (a) the provision of comprehensive nursing treatment and care of persons in all healthcare settings;
- (b) the management of nursing care of individuals, groups and communities;
- (c) providing emergency care;
- (d) ensuring the safe implementation of nursing care;
- (e) the care of persons with health conditions in all settings; and
- (f) the delegation of nursing care, ensuring that nursing care is only delegated to competent practitioners or persons.

4.2. The professional and ethical practice of a professional nurse requires a practitioner to—

- (a) demonstrate knowledge of and insight into laws and regulations relevant to the practice of nursing, midwifery and healthcare in the Republic;
- (b) practice nursing in accordance with the laws and regulations relevant to nursing, midwifery and healthcare in the Republic;
- (c) protect the human rights of individuals and groups within the healthcare environment;
- (d) practice nursing, midwifery and healthcare in an ethically just manner;
- (e) create and maintain an enabling environment for ethical practice; and
- (f) accept and assume accountability and responsibility for his/her own actions and omissions within the legal and ethical parameters of a dynamic healthcare environment.

4.3. The clinical practice of a professional nurse is to provide comprehensive nursing care and management for the nursing treatment and rehabilitation for all health problems of individuals, groups and communities as an independent practitioner.

Such practice requires a practitioner to—

- (a) develop an integrated, comprehensive nursing and midwifery care plan for the promotion of activities of daily living, self-care, treatment and rehabilitation of healthcare users, also taking cognisance of natural, biological and psychosocial sciences;
- (b) provide direction for the implementation of the nursing and midwifery care plan;
- (c) provide supervision for nursing and midwifery care;
- (d) initiate and maintain a therapeutic relationship;
- (e) establish and maintain an environment in which healthcare can be provided safely and optimally;
- (f) review continuously nursing practice and midwifery against professional standards and relevant context;
- (g) facilitate the continuity of care in collaboration with relevant members of the healthcare team;
- (h) effectively manage a health facility or service;
- (i) assess the healthcare information needs, plans and responds accordingly;
- (j) initiate and maintain a therapeutic relationship;
- (k) assess healthcare, nursing and midwifery care needs of individuals and groups;
- (l) diagnose and prioritise individual nursing and midwifery care needs, based on comprehensive analysis and the interpretation of data;
- (m) manage and coordinate nursing and midwifery care within the healthcare setting;
- (n) appropriately refer a healthcare user to other members of multidisciplinary health team ;
- (o) evaluate a healthcare user's progress towards expected outcomes and revise nursing and midwifery care plans in accordance with evaluation data;

- (p) create and maintain an environment that promotes the safety, security and integrity of healthcare users;
- (q) create and maintain a complete and accurate nursing and midwifery record for individual healthcare users;
- (r) promote and empower healthcare users to participate in healthcare to achieve self-reliance; and
- (s) demonstrate and maintain adequate knowledge and skills of safe practice.

4.4. The quality of nursing practice of a professional nurse requires the practitioner to—

- (a) participate in the development and maintenance of a plan to improve the quality of nursing, midwifery and healthcare;
- (b) implement and manage a quality improvement plan for his/her own context of practice;
- (c) participate in the auditing of the quality of nursing, midwifery and healthcare;
- (d) incorporate appropriate and current research findings to ensure an evidence-based nursing and midwifery practice;
- (e) implement and manage a quality improvement plan for his/her own practice;
- (f) commit to development, maintenance and facilitation;
- (g) identify own learning needs and to maintain knowledge and skills required for competent and independent nursing and midwifery practice;
- (h) actively engage in the development of standards, criteria and indicators for quality nursing, midwifery, neonatal and healthcare;
- (i) create an environment and learning opportunities that foster professional growth and improvement in nursing, midwifery and neonatal care practice;
- (j) actively engage in the education and training of learners in the healthcare system; and
- (k) assist with the development of nursing and midwifery standards for the improvement of care through research.

5 Limitations of practice of a professional nurse

5.1. A professional nurse—

- (a) may not set up a private practice without obtaining a licence in terms of section 4(2)(i) of the Act; and
- (b) must comply with the provisions of section 56 of the Act as well as the regulations made thereunder in order to assess, diagnose, prescribe treatment, keep and supply medication for prescribed illnesses and health-related conditions.

6 Title staff nurse

6.1. The title of staff nurse may only be used by a person who—

- (a) has met the prescribed education requirements for registration as a staff nurse;
- (b) has acquired and maintains the competencies to practice as a staff nurse; and
- (c) is registered as a staff nurse in terms of section 31(1)(c) of the Act.

7 Scope of practice of a staff nurse

7.1. It is within the competence of a staff nurse to assume full responsibility and accountability for—

- (a) the provision of nursing treatment and care of persons in all healthcare settings;
- (b) the management of nursing care of individuals, groups and communities;
- (c) the provision of emergency care;
- (d) ensuring the safe implementation of nursing care;
- (e) the care of persons with health conditions in all settings;
- (f) the provision of nursing care delegated by a professional nurse; and

- (g) the delegation of nursing care, ensuring that nursing care is only delegated to competent practitioners or persons.

7.2. The professional and ethical practice of a staff nurse requires a practitioner to—

- (a) demonstrate knowledge of and insight into laws and regulations relevant to the practice of nursing in the Republic;
- (b) practice nursing in accordance with the laws and regulations relevant to nursing and healthcare in the Republic;
- (c) protect the human rights of individuals and groups within the healthcare environment;
- (d) practice nursing and healthcare in an ethically just manner;
- (e) create and maintain an enabling environment for ethical practice; and
- (f) accept and assume accountability and responsibility for his/her own actions and omissions within the relevant legal and ethical parameters.

7.3. The clinical practice of a staff nurse is to provide basic nursing care for the treatment and rehabilitation of common health problems for individuals and groups. Such practice requires a practitioner to—

- (a) develop an integrated, comprehensive nursing care plan for the promotion of activities of daily living, self-care, treatment and the rehabilitation of healthcare users, also taking cognisance of natural, biological and psychosocial sciences;
- (b) provide direction for the implementation of the nursing care plan;
- (c) provide supervision for nursing care;
- (d) establish and maintain an environment in which healthcare can be provided safely and optimally;
- (e) initiate and maintain a therapeutic relationship;
- (f) review continuously nursing practice against professional standards and relevant context;
- (g) maintain continuity of healthcare for healthcare users;

- (h) effectively manage a healthcare unit or service;
- (i) assess the nursing care information needs and plan for and respond accordingly;
- (j) advocate for the rights of healthcare users;
- (k) promote and empower healthcare users to participate in healthcare to achieve self-reliance;
- (l) assess healthcare and nursing needs of individuals and groups;
- (m) diagnose and prioritise individual nursing care needs based on the comprehensive analysis and interpretation of data;
- (n) manage and coordinate nursing care within the healthcare setting;
- (o) appropriately refer a healthcare user;
- (p) evaluate healthcare user's progress towards expected outcomes and revise nursing care plans in accordance with evaluation data;
- (q) create and maintain a complete and accurate nursing records for individual healthcare users; and
- (r) demonstrate and maintain adequate knowledge and skills for safe practice

7.4. The quality of nursing practice of a staff nurse requires the practitioner to—

- (a) ensure the maintenance of set standards to improve the quality of nursing care;
- (b) implement and manage a quality improvement plan for his/her own context of practice;
- (c) incorporate appropriate and current research findings to ensure an evidence-based nursing practice;
- (d) demonstrate and maintain a commitment to life-long learning to practice as a safe practitioner;
- (e) identify own learning needs and maintain knowledge and skills required for competent and independent nursing practice;

- (f) participate in the development of standards, criteria and indicators for quality nursing and healthcare;
- (g) participate in the auditing of the quality of nursing and healthcare;
- (h) create an environment and learning opportunities that foster professional growth and improvement in nursing practice;
- (i) actively engage in the education and training of learners in the healthcare system; and
- (j) assist with the development of nursing standards for the improvement of care through research.

8 Limitations of practice of a staff nurse

8.1 A staff nurse may—

- (a) not take responsibility and accountability for managing overall nursing care in a health facility or service;
- (b) only provide nursing care and treatment to persons with health problems under the supervision of a professional nurse; and
- (c) not conduct a private practice.

9 Title auxiliary nurse

9.1 The title of auxiliary nurse may only be used by a person who—

- (a) has met the prescribed education requirements for registration as an auxiliary nurse;
- (b) has acquired and maintains the competence to practice as an auxiliary nurse; and
- (c) is registered as an auxiliary nurse in terms of section 31(1)(d) of the Act.

10 Scope of practice of an auxiliary nurse

10.1 The scope of an auxiliary nurse is to provide elementary nursing care and the primary responsibilities entail—

- (a) providing elementary nursing care as prescribed and delegated by a professional nurse or staff nurse;
- (b) providing elementary nursing care in accordance with a standardised plan of care;
- (c) providing assistance and support to a person for the activities of daily living and self-care; and
- (d) rendering basic first aid.

10.2 The professional and ethical practice of an auxiliary nurse requires a practitioner to—

- (a) demonstrate an understanding of laws and regulations relevant to the practice of an auxiliary nurse in the Republic;
- (b) practice elementary nursing in accordance with the laws and regulations relevant to nursing and healthcare in the Republic;
- (c) protect the human rights of individuals and groups within the healthcare environment;
- (d) practice nursing and healthcare in an ethically just manner;
- (e) maintain an enabling environment for ethical practice; and
- (f) accept and assume accountability and responsibility for his/her own nursing actions and omissions within the relevant legal and ethical parameters.

10.3 The clinical practice of an auxiliary nurse is to provide elementary care to individuals and groups. Such practice requires a practitioner to—

- (a) implement a nursing care plan;
- (b) provide assistance and support to healthcare users for the activities of daily living;
- (c) utilise learning opportunities to improve own nursing practice;
- (d) assist with the maintenance of continuity in healthcare user care;
- (e) observe, record and report the health status of healthcare users;

- (f) establish and promote a supportive and helping relationship with sensitivity to diverse healthcare users;
- (g) provide assistance and support to the healthcare user for the activities of daily living and self-care;
- (h) provide nursing care in accordance with the prescribed plan of care;
- (i) maintain an environment that promotes safety, security and rights of healthcare users;
- (j) advocate for the rights of healthcare users;
- (k) promote health in a culturally sensitive manner by effectively communicating health information;
- (l) demonstrate and maintain adequate knowledge and skills for safe practice; and
- (m) participate in the maintenance of set standards to improve the quality of nursing care.

10.4 The quality of nursing practice of an auxiliary nurse requires the practitioner to—

- (a) participate in the maintenance of set standards to improve the quality of nursing care;
- (b) utilise learning opportunities to improve own nursing practice; and
- (c) demonstrate and maintain a commitment to life-long learning to practice as a safe practitioner.

11 Limitations of practice of an auxiliary nurse

11.1 An auxiliary nurse may only render nursing care that is based on a prescribed plan of care and set standards.

11.2 The practice of an auxiliary nurse must be supervised by a professional nurse or a staff nurse in situations where there is no prescribed plan of care or set standards.

11.3 An auxiliary nurse must be supervised by a professional nurse whilst providing elementary nursing care to a healthcare user.

11.4 An auxiliary nurse may not conduct a private practice.

12 Scope of midwifery

12.1 Midwifery is a regulated profession, practiced according to a legal and ethical framework by persons registered under section 31(1) (b) of the Act, that—

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

13 Title midwife

13.1 The title of midwife may only be used by a person who—

- (a) has met the prescribed education requirements for registration as a midwife;
- (b) has acquired and maintains the competence to practice as a midwife; and
- (c) is registered as a midwife in terms of section 31(1)(b) of the Act.

14 Scope of practice of a midwife

14.1 It is within the competence of a midwife to assume full responsibility and accountability for—

- (a) promoting, maintaining, restoring and supporting the health status of a woman and her child during pregnancy, labour and puerperium;
- (b) providing comprehensive care of a woman and her child during pregnancy, labour and puerperium in all healthcare settings;
- (c) providing emergency care;
- (d) ensuring the safe implementation of maternal and child care; and

- (e) delegating obstetric care, ensuring that such care is only delegated to competent practitioners or persons.

14.2 The professional and ethical practice of a midwife requires a practitioner to—

- (a) demonstrate knowledge and insight into laws and regulations relevant to the practice of midwifery and healthcare in the Republic;
- (b) practice midwifery in accordance with the laws and regulations relevant to midwifery and healthcare in the Republic;
- (c) protect the human rights of individuals and groups within the healthcare environment;
- (d) practice midwifery and healthcare in an ethically just manner;
- (e) create and maintain an enabling environment for ethical practice; and
- (f) accept and assume accountability and responsibility for his/her own actions and omissions within the legal and ethical parameters of a dynamic healthcare environment.

14.3 The clinical practice of a midwife is to provide care and management, as an independent practitioner, of all aspects that influence the course of pregnancy, labour and puerperium and the newborn baby. Such practice requires a practitioner to—

- (a) develop an integrated comprehensive midwifery care plan for the promotion of activities of daily living, self-care, treatment and rehabilitation of healthcare users, also taking cognisance of natural, biological and psychosocial sciences;
- (b) provide direction for the implementation of the midwifery care plan;
- (c) provide supervision for midwifery and neonatal care;
- (d) initiate and maintain a therapeutic relationship;
- (e) establish and maintain an environment in which healthcare can be provided safely and optimally;
- (f) continuously review midwifery practice against professional standards and relevant context;

- (g) facilitate continuity of care in collaboration with relevant members of the healthcare team;
- (h) effectively manage a health facility or service;
- (i) assess the healthcare information needs and plan for and respond accordingly;
- (j) advocate for the rights of healthcare users;
- (k) promote and empower healthcare users to participate in healthcare to achieve self-reliance;
- (l) assess healthcare and midwifery needs of individuals and groups;
- (m) diagnose and prioritise individual midwifery needs, based on comprehensive analysis and the interpretation of data;
- (n) manage and coordinate midwifery and neonatal care within the healthcare setting;
- (o) appropriately refer a healthcare user; to other members of multidisciplinary health team
- (p) evaluate a healthcare user's progress towards expected outcomes and revise midwifery care plans in accordance with evaluation data.

14.4 The quality of practice of a midwife requires the practitioner to—

- (a) participate in the development and maintenance of a plan to improve the quality of midwifery and healthcare;
- (b) implement and manage a quality improvement plan for his/her own context of practice;
- (c) participate in the auditing of the quality of midwifery, neonatal and healthcare;
- (d) incorporate appropriate and current research findings to ensure evidence-based midwifery practice;
- (e) commit to the development, maintenance and facilitation of lifelong learning for self and others;
- (f) identify own learning needs and maintain knowledge and skills required for competent and independent midwifery practice;

- (g) actively engage in the development of standards, criteria and indicators for quality midwifery, neonatal and healthcare;
- (h) create an environment and learning opportunities that foster professional growth and improvement in midwifery practice;
- (i) actively engage in the education and training of learners in healthcare;
- (j) assist with the development of midwifery standards for the improvement of care through research;
- (k) create and maintain an environment that promotes the safety, security and integrity of healthcare users;
- (l) create and maintain complete and accurate midwifery records for individual healthcare users;
- (m) advocate for the rights of healthcare users;
- (n) promote and empower healthcare users to participate in healthcare to achieve self-reliance; and
- (o) demonstrate and maintain adequate knowledge and skills for safe practice.

15. Limitations of practice of a midwife

15.1. A midwife may not set up a private practice without obtaining a licence in terms of section 4(2)(i) of the Act.

15.2 A midwife must comply with the provisions of section 56 of the Act to assess, diagnose, prescribe treatment, keep and supply medication for prescribed illnesses and health-related conditions.

16 Transitional arrangements

16.1 The scope of practice of the professional nurse as prescribed in regulation 7 applies to a person who, prior to the commencement of the Act, was registered or eligible to be registered as a nurse (general, psychiatric and community) and midwife, provided that such practitioner has acquired the prescribed competence to practice in accordance with regulation 4.

- 16.2.(a) The scope of practice prescribed for a registered nurse in Chapter 2 of Government Notice No. R.2598 of 30 November 1984 will continue to apply to the practice of a person who, prior to the commencement of the Act, was registered or eligible to be registered as a general nurse.
- (b) The name of a person eligible to be registered in the category general nurse will be recorded as a general nurse in the register.
- (c) Any person who completes the course and meets the requirements prescribed in the regulations published under Government Notice No. R.683 of 14 April 1989 leading to registration as a general nurse will be registered as a general nurse.
- (d) A person registered in the category general nurse will use the title **Registered Nurse**, abbreviated as R.N.
- 16.3 The scope of practice for enrolled nurses prescribed in Chapter 5 of Government Notice No. R.2598 of 30 November 1984 will continue to apply to a person who, prior to the commencement of the Act, was enrolled as a nurse and—
- (a) such a person's name will be transferred to the category enrolled nurse in the register for nursing practitioners;
- (b) any person who meets the requirements prescribed in the regulations published under Government Notice No. R.2175 of 19 November 1993 and is registered as an enrolled nurse is entitled to use the title **Enrolled Nurse**, abbreviated as E.N.
- 16.4 (a) The scope of practice for enrolled midwives prescribed in Chapter 4 of Government Notice No. R.2598 of 30 November 1984 will apply to—
- (i) a person who, prior to the commencement of the Act, was enrolled or eligible to be enrolled as a midwife; and
- (ii) any person who completes a course and meets the requirements prescribed in the regulations published under Government Notice No. R.2598 of 30 November 1984.

- (b) The name of the person referred to in sub regulation (1) will be transferred to the closed category enrolled midwife in the register for nursing practitioners and the person referred to in sub regulation (1) will use the title **Enrolled Midwife**, abbreviated as E.M.

17 Repeal

The following regulations published in the *Gazette* are hereby repealed:

Government Notice No.	Date of publication	Extent
R.2598	30 November 1984	Chapter 3: Regulation 3 and Chapter 6: Regulation 6
Amended by:		
R.1469	10 July 1987	
R.2676	16 November 1990	
R.260	15 February 1991	


DR A MOTSOLEDI, MP
MINISTER OF HEALTH

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