



Australasian College
for Emergency Medicine

Extended Role of Nursing and Allied Health Practitioners Working in Emergency Departments

Policy P67

Document review

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Revision history

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v1	Mar-14	First version
v2	Sep-19	New template adopted
v3	Nov-22	Last paragraph added to Policy Section

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1. Purpose and Scope

This document provides a clinical governance framework for Emergency Departments (EDs) in Australia and Aotearoa New Zealand relating to extended role nursing and allied health practitioners.

2. Definition

2.1 Extended role nursing and allied health practitioners

A health practitioner with an extended role is one who receives additional training to undertake clinical tasks traditionally associated with another profession. In an ED setting, this may include investigation ordering, investigation interpretation, diagnosis, procedures, prescribing and patient discharge.

Extended role nursing and allied health practitioners mainly include, but are not limited to, the following professions: nurse consultant¹, nurse practitioner, clinical nurse specialist, physiotherapist, and psychologist.

3. Policy

Extended role nursing and allied health practitioners work with appropriate clinical autonomy within their scope of practice and provide essential care within the ED collaborative model of care².

An ED collaborative model of care occurs within a framework of ongoing education, training, credentialing, audit, and quality improvement. In addition, qualification, experience, and scope of practice should define the role of team members in the ED collaborative model of care. Clear guidelines should also be in place which define the need to escalate the involvement of other members of the ED collaborative team.

Emergency department collaborative teams require a defined leader who has ultimate responsibility for decision making and accountability for patient care. The leader is chosen by virtue of their qualifications and experience and is not necessarily the case coordinator of each patient episode.

A key clinical leadership role within the ED collaborative team is to support and encourage extended role nurses and allied health members of the team in utilising their extended skills and training to provide quality care in the ED. This includes ensuring that the whole team understands and respects these scopes of practice and accountabilities.

4. Procedure and Actions

- The ED collaborative team is led at any point in time by the duty Fellow of ACEM (FACEM), (or delegate) and that person is responsible to the Director of Emergency Medicine.
- Extended role nursing and allied health practitioners must have a clearly defined scope of practice that is negotiated with and agreed to by the ED collaborative team and endorsed by the Director of Emergency Medicine.
- The position of extended role nursing and allied health practitioners must be clearly delineated and be known to all members of the ED collaborative team.
- The scope of practice, registration, credentialing and re-credentialing of extended role nursing and allied health practitioners must comply with local and jurisdictional regulations and requirements.
- Clinical education, training, audit, risk management and quality improvement activities must be inclusive of extended role nursing and allied health practitioners.
- Extended role nursing and allied health practitioners are expected to work within their agreed scope of practice and consult with senior medical staff when there is any clinical uncertainty or patient deterioration.

- As a member of the ED collaborative team, extended role nursing and allied health practitioners are expected to comply with all local and departmental policy, guidelines, and procedures.
- Within the ED collaborative model of care the extended role nursing and allied health practitioner is ultimately responsible to the Director of Emergency Medicine for clinical activity within their extended scope of practice.

5. References

1. Thompson C, Williams K, Morris D, et al. *HWA Expanded Scopes of Practice Program Evaluation: Nurses in the Emergency Department Sub-Project Final Report*. Sydney (AU), Australian Health Services Research Institute; 2014.
2. Lowe G. *Scope of emergency nurse practitioner practice: where to beyond clinical practice guidelines?* Australian Journal of Advanced Nursing. 2010 Sep;28(1):74-82.



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