



# Australian College of Neonatal Nurses

STANDARDS FOR PRACTICE  
Fourth Edition

# AUSTRALIAN COLLEGE OF NEONATAL NURSES

## STANDARDS FOR PRACTICE

### Fourth Edition

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<https://www.miraclebabies.org.au/>

The Nursing and Midwifery Board of Australia granted permission to reproduce Figure 1 from the Registered Nurses Standards for Practice (2016). The Nursing and Midwifery Board of Australia website provides up to date information, standards and guidelines for nurses and midwives.

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# Australian College of Neonatal Nurses Standards for Practice

The Australian College of Neonatal Nurses (ACNN) acknowledges that the Australian community is culturally rich and diverse. Neonatal nurses have a professional responsibility to provide care that is culturally safe and respectful of all peoples, especially our Aboriginal and Torres Strait Islander Peoples and communities.

ACNN acknowledges that there are Australian standards for practice for registered nurses, registered midwives, nurse practitioners and enrolled nurses. The standards applying to registered nurses (RNs) were selected as the foundation for this fourth edition of the ACNN Neonatal Nurses Standards for Practice due to their broader applicability. The current Nursing and Midwifery Board of Australia Registered Nurses Standards for Practice recognise that RNs work within professional relationships to provide health care that involves individuals, families, groups and communities.

The Registered Nurses Standards for Practice are:

1. Thinks critically and analyses nursing practice.
2. Engages in therapeutic and professional relationships.
3. Maintains the capability for practice.
4. Comprehensively conducts assessments.
5. Develops a plan for nursing practice.
6. Provides safe, appropriate and responsive quality nursing practice.
7. Evaluates outcomes to inform practice.

These Neonatal Nurses Standards for Practice apply specifically to registered nurses and/or registered midwives, hereafter referred to as neonatal nurses, who work in a clinical or non-clinical capacity to contribute to the care of neonates and their families within inpatient and post-discharge contexts. They inform professional practice, professional development and capability for all neonatal nurses in the provision of safe, high quality clinical care and are inclusive, but not limited to, direct clinical care, education, leadership, management and research.

Each standard has criteria that aid individual neonatal nurses to develop their scope of practice in the context of current roles and responsibilities. While each standard is unique, there is purposeful inter-relatedness between several standards, as demonstrated in Figure 1 from the NMBA Registered Nurses Standards for Practice.

For definitions and usage in this document please refer to the Glossary. For resources informing this document, please refer to the Bibliography.

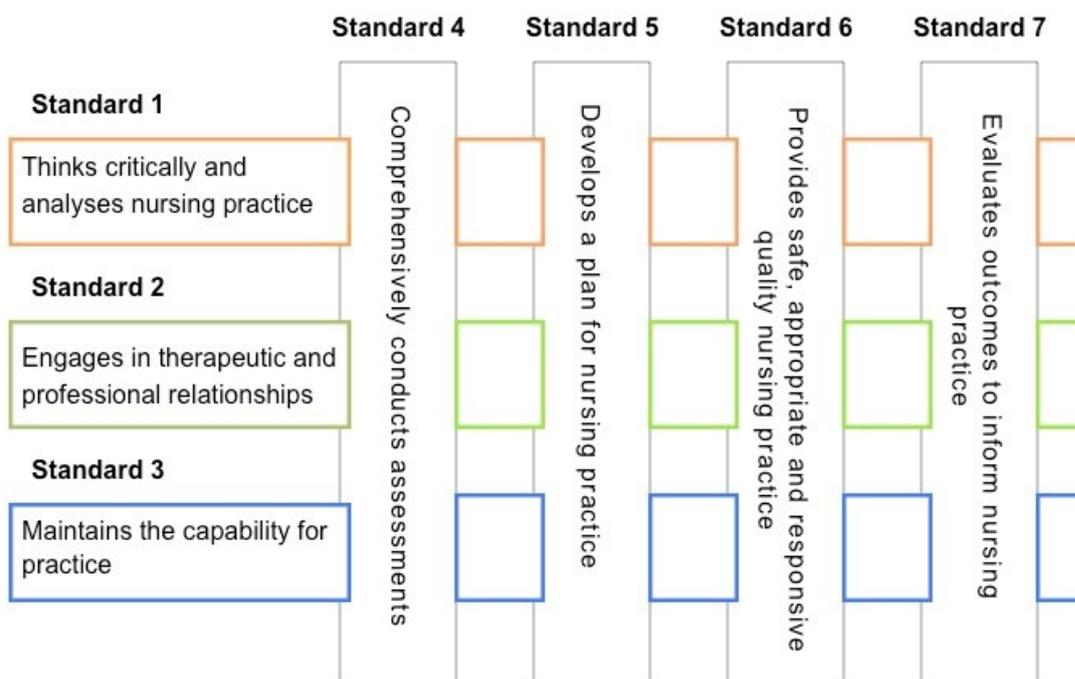


Figure 1: RN Standards © Nursing and Midwifery Board of Australia. Reproduced by permission.

## Standard 1: Thinks critically and analyses nursing practice

Neonatal nurses use diverse thinking strategies and best available evidence within a family-centred approach to guide decision making and the provision of safe, quality neonatal care. Practice is continuously developed through critical reflection.

- 1.1 Includes families and colleagues in the critical assessment of care across the continuum, acknowledging individual and complex needs.
- 1.2 Engages in the continuous process of self-assessment through critical reflection.
- 1.3 Ensures that nursing practice is ethical, culturally safe, and respectful of the family's values, beliefs and preferences.
- 1.4 Understands the importance of utilising best available evidence in making decisions to inform the provision of safe, quality nursing care.
- 1.5 Critically assesses and analyses the influence of the neonatal unit environment on neonates and families.
- 1.6 Understands the impact of different cultures on behaviours related to health and family, and practises in a culturally sensitive manner through impartiality and objectivity.
- 1.7 Utilises critical reflection on experience, knowledge, actions and beliefs to enhance, shape and improve practice.

## Standard 2: Engages in therapeutic and professional relationships

Neonatal nurses purposefully engage in effective therapeutic and professional relationships with families based on dignity and respect. Relationships with colleagues are collaborative and supportive in nature, based on mutual trust and respect.

- 2.1 Introduces self and staff members to families and explains the role of each in consumer-friendly language.
- 2.2 Ascertains how family members and colleagues would prefer to be addressed.
- 2.3 Communicates verbally and nonverbally with families and colleagues in a respectful and effective way that promotes collaboration.
- 2.4 Ensures all forms of communication are complete, unbiased, culturally appropriate and literacy sensitive.
- 2.5 Identifies social, emotional, spiritual and cultural needs through active listening and responds accordingly.
- 2.6 Provides information, education and support to families to enhance their capacity to make collaborative decisions about the health and wellbeing of their neonates.
- 2.7 Maintains privacy and confidentiality of all information and acts to preserve the dignity and safety of families in difficult situations.
- 2.8 Maintains professional boundaries during interactions with families, including the use of social media, ensuring compliance with health policies, professional codes of ethics and professional codes of conduct.
- 2.9 Consistently role models expected behaviours and practices.
- 2.10 Actively engages in mentoring colleagues and students to mutually foster leadership skills, professional growth and trusting relationships.
- 2.11 Promotes a culture of safety and learning that reduces variability in health care delivery and optimises outcomes for neonates and their families.
- 2.12 Understands that the work of providing emotionally supportive care to neonates and families is supported by effective self-care strategies. Seeks to support self and other health professionals in stressful work environments.
- 2.13 Encourages and/or facilitates opportunities for family peer support within the neonatal unit or via consumer groups.
- 2.14 Engages consumer groups such as family support organisations when planning the design, implementation and conduct of research studies, and quality improvement or quality assurance projects.
- 2.15 Employs appropriate delegation, supervision, coordination, consultation and referral strategies to achieve timely and optimal outcomes for neonates and families.

### **Standard 3: Maintains the capability for practice**

Neonatal nurses are responsible and accountable for ensuring safe and capable clinical practice, their own professional development, and contributing to that of others. Safety of practice and capability encompasses ongoing self-management and responding to concerns about other health professionals' capability for practice. This includes the responsibility to provide information and education that enables other health professionals to make care-related decisions and take action.

- 3.1 Actively engages with national and international neonatal nursing professional organisations.
- 3.2 Actively engages with other professional nursing, midwifery or academic bodies that are relevant to the on-going development of neonatal nurses' scope of practice.
- 3.3 Contributes to the development and/or review of governing documents that are relevant to neonatal care, including evidence-based clinical guidelines, policies and procedures.
- 3.4 Recognises and acts within own knowledge base and scope of practice.
- 3.5 Critically reviews own practice and seeks feedback from families of neonates and from colleagues.
- 3.6 Actively promotes formal and informal education and training for health professionals working in neonatal care areas.
- 3.7 Undertakes a diverse range of continuing professional development activities.
- 3.8 Actively engages in research, quality improvement and auditing to improve outcomes.
- 3.9 Intervenes when patient care is compromised by unsafe or illegal practice.
- 3.10 Protects the rights of neonates and their families involved in research and/or quality improvement activities.
- 3.11 Demonstrates a comprehensive knowledge of neonatal nursing supported by postgraduate education.
- 3.12 Works towards achieving proficiency/excellence in practice. Recognises and acknowledges the expertise of professional colleagues.

### **Standard 4: Comprehensively conducts assessments**

Neonatal nurses comprehensively and systematically assess the needs of neonates and families to inform care that aims to achieve optimal outcomes.

- 4.1 Uses a range of holistic assessment techniques to collect relevant and accurate information and/or data to inform practice and decision making.
- 4.2 Works in partnership with families to determine the need for action and/or referrals for clinical, cultural, emotional, financial, psychosocial and/or spiritual needs.
- 4.3 Works in collaboration with colleagues to assess whether local resources can meet the needs of neonates and families.
- 4.4 Assesses and manages the acoustic environment to reduce stress and discomfort for neonates, families, and staff.
- 4.5 When possible, makes contact with families to ascertain needs, and to provide key information in preparation for anticipated admission.
- 4.6 Assesses and maintains an age-appropriate and developmentally supportive environment that promotes safety, security and optimal health and wellbeing.
- 4.7 Involves families in the assessment of readiness for discharge to inform discharge planning, and provides further assessment of each family's needs beyond the neonatal care environment.

### **Standard 5: Develops a plan for nursing practice**

Neonatal nurses use information and/or data from comprehensive assessments to plan optimal care for neonates, which may include end of life care, in partnership with families.

- 5.1 Collaborates with families and colleagues to initiate a plan of care that includes priorities, actions and outcomes.
- 5.2 Effectively co-ordinates and manages strategies for promoting bonding and early attachment, and for neuroprotection.

5.3 Collaborates with families to plan and coordinate their learning needs regarding caregiving and preparation for discharge.

5.4 Promotes individualised care that is based on family centred and neurodevelopmentally supportive care principles.

5.5 Documents, evaluates and modifies existing agreed plans to facilitate optimal outcomes.

## **Standard 6: Provides safe, appropriate and responsive quality nursing practice**

Neonatal nurses deliver planned, quality and ethical goal-directed care based on the needs of neonates and families in their progress towards discharge. Care should be responsive, safe and appropriate for neonates and families to achieve agreed outcomes.

6.1 Supports the emotional wellbeing and confidence of families by encouraging participation in caregiving, supporting access to their neonates, and providing age appropriate education during the stages of transition that families undergo through neonatal care facilities.

6.2 Delivers planned evidence-based care, integrated with clinical expertise, using available resources and including the wishes of the family.

6.3 Provides opportunities for early bonding and early attachment between neonates and families, enabling family members to recognise behavioural cues from their neonates and respond appropriately.

6.4 Communicates effectively with families and colleagues to ensure safe, appropriate and responsive caregiving. Depending on scope of practice and/or neonates' condition, this may include either delegation or escalation of care.

6.5 Shares relevant information with other health professionals, such as families' preferences and choices for care, their values and social situation.

6.6 Responds to protection and safety issues for neonates and families according to local laws, policies and procedures.

6.7 Provides clear and consistent information to families, which may include pre and post discharge information, or about transfer to another hospital.

6.8 Practises to mitigate medication errors and participates in reporting, monitoring and evaluating medication errors to reduce risk for infants.

6.9 Promotes and co-ordinates safe staffing levels and manages resources for safe and optimal outcomes.

6.10 Ensures safe use of equipment through use of standard operating procedures, systematic monitoring and reporting of incidents.

## **Standard 7: Evaluates outcomes to inform practice**

Neonatal nurses regularly evaluate the progress of planned individualised care for neonates and their families. Evaluation of goals, priorities, plans and outcomes is ongoing and the plan of care is adapted according to responses from neonates and families.

7.1 Participates in a collaborative team that evaluates the neonate-family dyad and determines optimal time for discharge. This evaluation includes physiological stability of neonates, family preparedness, availability of social supports, and access to health care resources.

7.2 Uses information from evaluation processes to inform post-discharge requirements such as family preparedness for discharge, follow-up, access to social supports, and availability of appropriate healthcare resources for ongoing care and management.

7.3 Evaluates trends from incident reports and other audit data to inform education plans, areas of focus for quality improvement projects, and reviews of policies, procedures and guidelines.

## Glossary

**Holistic assessment** refers to the assessment of a range of needs. For neonates and families, these include: therapeutic care, neuroprotective care, pain assessment and management, preserving skin integrity, nutrition and feeding, bonding and early attachment with family, and preparation for discharge.

**Neonates** are infants in the first 28 days after birth, some of whom may continue to receive care in a neonatal facility for longer periods until discharge home or transfer to a paediatric facility.

**Neonatal nurses** are registered nurses or registered midwives who work primarily with neonates and their families in a neonatal care facility. Roles may include any combination of direct clinical care, management, education, or research specific to neonates, their families and/or the neonatal care environment.

**Family centred care** is an approach to care delivery that promotes a mutually beneficial partnership between health professionals and families, based on the principles of dignity and respect, communication, information-sharing, participation and collaboration. Interactions between health professionals, family members and neonates are emotionally supportive and responsive, to facilitate nurturing care.

**Families** are each neonate's parents, legal guardians, primary caregivers and other family members who are in a unique position to engage in interactions that are highly beneficial for early childhood development. Families are configured in different ways and each family will define itself and identify which members are primary caregivers for their neonates.

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