

Authorised Clinical Protocols and Procedures Manuals PHC Remote Guideline

Target Audience	All Clinical Employees
Jurisdiction	Primary Health Care Remote CAHS; Primary Health Care Remote TEHS
Jurisdiction Exclusions	N/A
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Purpose

To ensure Primary Health Care remote staff are aware of and utilise authorised clinical protocol and procedures manuals to guide clinical practice within their scope of practice.

Guideline

1. General Information

Primary Health Care (PHC) aspires to a best practice standard of consistent and evidence based clinical practice. Clinical practice must be undertaken in accordance with the following approved clinical protocol and procedures manuals and within the scope of practice according to individual Australian Health Practitioner Regulation Authority ([AHPRA](#)) registration:

- the CARPA Standard Treatment Manual ¹
- Minymaku Kutju Tjukurpa - The Women's Business Manual ¹
- the [NT Immunisation Schedules](#) ¹
- Additional Clinical Protocols ²
- Clinical Procedures Manual (CRANAP*lus*)

Nurses, Midwives and Aboriginal and Torres Strait Islander Health Practitioners (ATSIHPs) must adhere to their content, and are indemnified for their practice when providing treatment in accordance to the protocol for a given condition. The endorsed nature of these protocols has a direct relationship to [Section 250 NT Medicines, Poisons & Therapeutic Goods Act](#) (MPTGA) when used in conjunction with a specified list of medicines, which allows Nurses, Midwives and ATSIHPs to initiate treatment.

Medical Practitioners are similarly obliged to adhere to the protocols provided in these manuals in the first instance, unless having sound clinical justification for deviating to an alternate or additional treatment regime.

¹ These are gazetted Scheduled Substance Treatment Protocol (SSTP) for possessing, supplying or administering a scheduled substance as approved by the Chief Health Officer (CHO) under Section 254 of the NT MPTGA.

² Additional Clinical Protocols also include approved SSTPs

This document is to be read in conjunction with [Additional Clinical Protocols](#) and [Section 250 NT Medicines, Poisons and Therapeutic Goods Act](#) and [Pathology Management](#).

2. Definitions

Scope of practice: (ref: [A national framework for the development of decision-making tools for nursing and midwifery practice](#), Nursing & Midwifery Board of Australia, p19)

“A profession’s scope of practice is the full spectrum of roles, functions, responsibilities, activities and decision-making capacity which individuals within the profession are educated, competent and authorised to perform. The scope of professional practice is set by legislation - professional standards such as competency standards, codes of ethics, conduct and practice and public need, demand and expectation ... The actual scope of an individual’s practice is influenced by the:

- context in which they practise
- consumers’ health needs
- level of competence, education, qualifications and experience of the individual
- service provider’s policy, quality and risk management framework and organisational culture.”

3. Responsibilities

3.1 Primary Health Care Clinical Staff

- Adhere to the protocols and procedures included in the listed manuals
Note: Medical Practitioners may deviate from the protocols if deemed necessary in their professional judgement; however adherence is generally expected to ensure consistency of practice.
- Ensure attendance at relevant clinical skills training as appropriate
- Report deviations from authorised protocols and procedures via RiskMan unless prescribed by a Medical Practitioner

3.2 Managers (Primary Health Care Manager / District Manager / Other Managers)

- Ensure the current editions of the authorised clinical protocols and procedures manuals are available in the health centre according to the [Standard Reference List](#)
- Ensure staff have access to and utilise the authorised clinical protocol and procedure manuals in their clinical practice
- Support / approve the attendance of PHC staff to relevant clinical skills training as appropriate
- Investigate deviations from authorised protocols and procedures via RiskMan
- Ensure investigations in RiskMan are completed, recommendations attended and feedback provided to relevant staff

3.3 Professional Practice Nurse

- Supply replacement manuals / components as required, through the remote health stock mechanism.

4. Procedure

Provision of health care in PHC remote health centres must be in accordance with:

- protocols within the mandated clinical protocol and procedures manuals,
- an approved Scheduled Substance Treatment Protocol ([SSTP](#)) when initiating issue and administration of medicines,
- Primary Health Care (PHC) protocols and procedures, and
- the Health Practitioner’s [scope of practice](#)

Where uncertainty exists around the adequacy of a protocol to apply for a given presentation, nursing, midwifery and ATSIHP staff should proceed to a consultation with medical staff to determine an appropriate course of action.

It is to be clearly understood that a proliferation of extra protocols is not desired or anticipated, and the rare occasion where a supplementary protocol may be required will be managed by the development of a suitable protocol by the Best Practice Group or PHC Pharmacy Group (see Additional Clinical Protocols folder).

Any staff member noting a potential inadequacy in the collective authorised protocols may raise this for discussion through the Best Practice Group utilising the [Best Practice Referral Form](#).

Other references made available to staff are a minimum [Standard Reference List](#) available in each health centre. Additionally, [eLibrary](#) provides access to a comprehensive set of resources on line. However clinical staff **must not** use treatment protocols and procedures described in references other than the authorised clinical protocol manuals.

Compliance

Adverse incidents will be recorded in client's electronic health record, entered into RiskMan and will be followed up by the relevant manager	Relevant Manager PHC CAHS: Clinical Nurse Manager, Quality and Safety PHC TEHS: Safety and Quality Manager
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Document Quality Assurance

	Method	Responsibility
Implementation	Document will be accessible via the Policy Guidelines Centre and Remote Health Atlas	Health Policy Guidelines Program
Review	Document is to be reviewed within three years, or as changes in practice occur	Atlas Development Officer, Primary Health Care CAHS
Evaluation	Evaluation will be ongoing and informal, based on feedback.	Atlas Development Officer, Primary Health Care CAHS

Key Associated Documents

Forms	NT Best Practice Reference Working Group Referral PHC Remote Form
Key Legislation, By-Laws, Standards, Delegations, Aligned & Supporting Documents	Additional Clinical Protocols PHC Remote Guideline Duty RMP Telephone Consultations PHC Remote TEHS Guideline Pathology Management PHC Remote Guideline Remote Health Stock PHC Remote TEHS Guideline Section 250 NT Medicines, Poisons and Therapeutic Goods Act PHC Remote Guideline Standard Reference List PHC Remote Guideline Stores and Ordering Overview PHC Remote CAHS Guideline Information Sheet: Medical Officer Telephone Consultation PHC CAHS Information Sheet

	<p>Department of Health Library Services (intranet) eLibrary</p> <p>Remote Primary Health Care Manuals website</p> <ul style="list-style-type: none"> - Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual (STM) - Minymaku Kutju Tjukurpa Women's Business Manual - Clinical Procedures Manual for Remote and Rural Practice - Medicines Book for Aboriginal and Torres Strait Islander health Practitioners and Health Workers - Reference Book for the Remote Primary Health Care Manuals <p>The Australian Immunisation Handbook</p> <p>Australian Health Practitioner Regulation Agency</p> <p>A national framework for the development of decision-making tools for nursing and midwifery practice</p>
References	As above

Evidence Table

Reference	Method	Evidence level (I-V)	Summary of recommendation from this reference
N/A	N/A	N/A	N/A