# Authorised Clinical Protocols and Procedures PHC Remote Guideline

Target Audience	All Clinical Employees
Jurisdiction Jurisdiction Exclusions	Primary Health Care Remote CAHS; Primary Health Care Remote TEHS  N/A
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Approval Authority	Chairs Clinical Governance Committee PHC CAHS; Primary Health Care Safety and Quality Committee TEHS
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### **Purpose**

To ensure Primary Health Care remote staff are aware of and utilise authorised clinical protocols and procedures 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 protocols and procedures and within the scope of practice according to individual Australian Health Practitioner Regulation Authority (AHPRA) registration:

- the CARPA Standard Treatment Manual <sup>1</sup>
- Minymaku Kutju Tjukurpa The Women's Business Manual <sup>1</sup>
- the NT Immunisation Schedules <sup>1</sup>
- Additional Clinical Protocols <sup>2</sup>
- Clinical Procedures Manual (CRANAplus)



<sup>&</sup>lt;sup>1</sup> 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.

<sup>&</sup>lt;sup>2</sup> Additional Clinical Protocols also include approved SSTPs

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 <a href="Section 250 NT">Section 250 NT</a> 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 Officers are to refer to and generally use the approved clinical protocols and procedures manuals, and support Nurses, Midwives and ATSIHPs in their use of these. Using sound clinical judgement Medical Officers may vary treatment to an alternate / additional treatment regime.

This document is to be read in conjunction with <u>Section 250 NT Medicines</u>, <u>Poisons and Therapeutic Goods Act</u> and <u>Pathology Management</u>.

### 2. Procedure

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

- the mandated clinical protocols and procedures,
- an approved Scheduled Substance Treatment Protocol (<u>SSTP</u>) when initiating issue and administration of medicines (unless prescribed by a Medical Officer),
- Primary Health Care (PHC) protocols and procedures, and
- the Health Practitioner's scope of practice

Deviations from authorised protocols and procedures, unless prescribed by a Medical Officer, are to be reported via RiskMan. The relevant District Manager / Manager is to ensure that investigations in RiskMan are completed, recommendations attended and feedback provided to relevant staff.

Any deficits in available approved protocols or procedures will be addressed at NT PHC Remote Best Practice Reference Group (BPRG) and/or NT PHC Remote Medicines Group for medicine related protocols. Staff should raise this for discussion utilising the <a href="NT Best Practice Reference Working Group Referral PHC Remote Form.">NT Best Practice Reference Working Group Referral PHC Remote Form.</a>

BPRG and/or NT PHC Remote Medicines Group will endorse either:

- a new procedure which has been developed, or
- an existing procedure, which has been adapted to include PHC remote health centres in the jurisdiction.

Endorsed documents will be sent to PHC CAHS and TEHS approval authorities as per usual pathways.

Note: any protocol that directs clinical staff to supply or administer a medicine without a Medical Officer order must also be approved by the CHO by Gazette Notice under Section 254 of the NT MPTGA. For further information see <a href="Section 250 NT MPTGA">Section 250 NT MPTGA</a>.

When a protocol is released:

- both electronic notification and and hard copies of the protocol are distributed to all remote health centres, and others holding an Additional Clinical Protocol folder
- if applicable, stickers are distributed (with the hard copy protocols) to be placed in all copies of the CARPA STM or WBM.
- the protocol is published on the Policy Guideline Centre (PGC).

If subsequent editions of the CARPA STM or WBM include these protocols, the protocol will be removed from the Additional Clinical Protocols folder and PGC and a broadcast e-mail sent to alert staff to this change.

Supply of manuals is via the remote health stock mechanism and queries, including requests for replacement Additional Clinical Protocol folders or protocols, can be directed to the Professional Practice Nurse (PPN).

# 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

# **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	
	Remote Health Stock Order Form: <u>CAHS</u>   <u>TEHS</u>	
Key Legislation, By-Laws, Standards,	Duty RMP Telephone Consultations PHC Remote TEHS Guideline	
Delegations, Aligned & Supporting Documents	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	
	Approved Scheduled Substance Treatment Protocols (SSTP) and Medicines <u>List PHC Remote</u>	
	Medical Officer Telephone Consultation PHC CAHS Information Sheet	
	Department of Health Library Services	
	<u>eLibrary</u>	
	Remote Primary Health Care Manuals website	
	- 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	
	The Australian Immunisation Handbook	
	Australian Health Practitioner Regulation Agency	

# Authorised Clinical Protocols and Procedures PHC Remote Guideline

	A national framework for the development of decision-making tools for nursing and midwifery practice  NT Medicines, Poisons and Therapeutic Goods Act and Regulations
References	As above

# **Definitions**

Preferred Term	Description	
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."	

# **Evidence Table**

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