

POSITION STATEMENT

AUSTRALASIAN REHABILITATION NURSES' ASSOCIATION

The purpose of this statement is to describe the nature and scope of practice of rehabilitation nursing for members of the nursing profession, other health care professionals, policy makers, nursing education providers, consumers and the wider community.

Rehabilitation nursing differs in its focus from many other nursing specialties in that the identified body of knowledge, skills and attitudes informs both the roles and functions of nurses as well as the manner in which nursing care is delivered regardless of diagnosis, prognosis, age or setting.

Rehabilitative nursing care is planned, managed and evaluated by registered nurses, who may consider themselves to be generalist or specialist rehabilitation nurses. Enrolled nurses and assistants in nursing support the provision of nursing care as deemed appropriate by the registered nurse.

NATURE OF REHABILITATION NURSING

Rehabilitation is a process, the outcome of which is maximised when rehabilitative nursing care is provided throughout the entire episode of health care or illness trajectory regardless of the diagnosis, prognosis, age or setting. Therefore, all nurses should be adequately prepared to deliver nursing care that is rehabilitative.

Rehabilitation nursing is also practised as a nursing specialty in both designated rehabilitation settings and other settings. Specialist rehabilitation nurses may be at any point along a continuum of development of specialist practice from entry level specialist practice to advanced specialist practice.

The goals of rehabilitation nursing are:

- the maximization of self determination,
- the restoration of function, and
- the optimisation of lifestyle choices for their clients.

Rehabilitation nurses view the patient, his/her family and significant others as their clients and facilitate the attainment of these goals by working in partnership with their clients to set client-centred goals and priorities, plan care and evaluate progress. Albeit, rehabilitation nurses also support their clients to adjust to ongoing limitations.

To achieve these goals, rehabilitation nurses focus on:

- the maintenance of existing abilities and roles;
- the promotion of health
- the prevention of further impairment of body structures and function;
- the prevention and reduction of activity limitations;

- the restoration of body function and social roles; and
- the minimisation of participation restrictions.

(Informed by Stryker 1972, Hennig 1982, Pennington & Bury 1990 and World Health Organisation, 2001).

In addition, the management of concurrently existing conditions is an important aspect of the role of rehabilitation nurses. Furthermore, rehabilitation nursing focuses on care of the whole person, with concern for the life of each client as well as their bodies. Particular emphasis is placed on the consequences of the illness, impairment, activity limitations and/or participation restrictions for the person as well as their family, significant others and carers. This specifically includes taking into account environmental and personal contextual factors.

ROLES AND FUNCTIONS OF REHABILITATION NURSING

The roles and functions of rehabilitation nursing are informed by Pryor and Smith's study of the practice of registered rehabilitation nurses in Australia (Pryor & Smith, 2000; 2002). This work developed a framework for the specialty practice of rehabilitation nursing comprising of seven domains of practice.

Rehabilitation is a 24-hour activity and clients rehabilitate themselves with the assistance of rehabilitation nurses through the core activities of teaching and coaching. Rehabilitation nurses fulfill a wide variety of roles, including:

- caregiver,
- advocate,
- teacher,
- coach,
- care co-ordinator,
- case manager,
- counsellor,
- consultant,
- researcher, and
- service manager.

The nursing process is widely accepted as a useful tool in the provision of rehabilitation nursing. However, to maximise the process and outcome of care, rehabilitation nurses identify assessment as a pivotal function of their practice, and teaching and coaching as an integral component of every client-nurse interaction.

Assessment is an ongoing process that informs every client-nurse contact for the rehabilitation nurse. This assessment includes:

- the expected level of the client's functional ability,
- readiness to participate,
- knowledge level,
- ability to understand expectations and instructions,
- self-efficacy,
- self esteem,

- energy levels, and
- client's priorities at any point in time.

In addition, the nurse identifies the expected outcome of each intervention/interaction against which to measure its effectiveness. Interpretation of the assessment of the whole person at a given point in time informs not only the specific intervention required, but the manner in which the intervention/interaction is undertaken to facilitate self care and the preservation of dignity.

Teaching and coaching are also based upon sound assessment and rehabilitation nurses need to possess a wide repertoire of teaching and coaching skills to meet the wide variety of client needs and learning styles.

PROVISION OF REHABILITATIVE NURSING CARE ACROSS SETTINGS

Rehabilitative nursing care contributes to optimal client outcomes in inpatient, outpatient, community and transitional living settings, whether the focus of care is preventative, acute, chronic, rehabilitative, palliative or extended care.

In designated rehabilitation settings rehabilitative nursing care may be provided by:

- generalist nurses,
- specialist rehabilitation nurses, and
- advanced specialist rehabilitation nurses.

Specialist and advanced specialist rehabilitation nurses will function as case managers, assessing, planning and evaluating the nursing care in these settings.

In settings other than designated rehabilitation settings, specialist and advanced specialist rehabilitation nurses contribute to the assessment, planning and evaluation of care in the role of consultant or joint case manager. Generalist nurses and nurses from other specialties provide rehabilitative care as well as nursing care relevant to the clients other needs. In particular, clients who are identified as having health care needs beyond the acute episode of care will benefit from the early involvement of a specialist rehabilitation nurse in their care.

PREPARATION FOR REHABILITATION NURSING PRACTICE

All nurses should be prepared at the practice entry level, to provide nursing care that is rehabilitative regardless of the diagnosis, prognosis or age of the clients and regardless of the health care setting. This provides each nurse with a repertoire of approaches to client care and the ability to promote self care and independence as well as to actively participate in the prevention of unnecessary dependence of clients upon nursing care.

Specialist rehabilitation nursing practice is informed by clinical experience, reflection upon practice, critical thinking and further education. Specialist rehabilitation nurses have the opportunity to undertake postgraduate study in rehabilitation as well as several other relevant aspects of practice.

Advanced specialist rehabilitation nurses require postgraduate qualifications at master's level or higher in rehabilitation or related fields to prepare them for leadership in the further development of rehabilitation nursing practice and scholarship.

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