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DEPARTMENT OF HEALTH

NO. 2127

3 June 2022

NURSING ACT, 2005 (Act No. 33 of 2005)**REGULATIONS REGARDING THE SCOPE OF PRACTICE FOR NURSES AND MIDWIVES**

The Minister of Health herewith, after consultation with the South African Nursing Council, under section 58(1) (q) of the Nursing Act, 2005 (Act No. 33 of 2005), makes the Regulations in the Schedule.



DR MATHUME JOSEPH PHAAHLA, MP
MINISTER OF HEALTH

DATE: 17/03/2022

SCHEDULE

Definitions

1. In these Regulations, any word or expression to which a meaning has been assigned in the Act shall bear such meaning and, unless the context indicates otherwise:

“assistant surgeon” means a person who assist a surgeon, who is also medical practitioner, to perform tasks that fall within the scope of practice of a medical practitioner;

“basic nursing care” means nursing interventions that assist health care users with activities of daily living to promote and maintain their health status through the application of prescribed standards of care;

“neonate” means any new born with signs of life regardless of the gestational age;

“child” has the meaning assigned to it in section 1 of the Children's Act, 2005 (Act No. 38 of 2005);

“comprehensive nursing” means nursing interventions that integrate and apply the scientific process of the full range of nursing, that is general, community, midwifery and mental health, that promote and maintain the health status of healthcare users in all contexts of healthcare delivery;

“direct supervision” means provision of guidance and oversight to a supervisee by a physically present and experienced registered nursing practitioner; do we need this kind of definition

“general nursing care” means nursing interventions that involve the promotion of health, the prevention of illness, the treatment of all health problems and rehabilitation of individuals, groups and includes managing a health care unit as a subdivision of a health establishment;

“general nurse” means a person educated and competent to practice general nursing in the manner and to the level prescribed, who is capable of assuming responsibility and accountability for such practice and is registered as such in terms of the Act;

“indirect supervision” means provision of guidance and oversight to a supervisee by an experienced registered nursing practitioner who is within a health establishment and is available to provide assistance as and when required;

“health establishment” means the whole or part of a public or private institution, facility, building or place whether for profit or not, that is operated or designed to provide in patient or outpatient treatment, diagnostic or therapeutic interventions, whether nursing, rehabilitative, palliative, convalescent, preventive or other health services;

“healthcare unit” means a subdivision of a health establishment;

“integrated nursing care plan” means a plan of care that adopts a multidisciplinary approach to improve the physical, emotional and social wellbeing of health care users in all contexts of nursing care delivery;

“plan of care” means a plan of care developed for a healthcare user by a professional nurse, midwife and general nurse;

“prescribed” means giving the written directions by an authorized person to those who are providing the treatment, nursing care, coordinating, collaborating and patient advocacy functions essential to the effective execution and management of the nursing regimen; or it holds the meaning as defined in the Act;

“quality improvement plan” means an integrated plan of care which includes all activities or processes that are designed to improve the acceptability, efficiency and effectiveness of nursing care provision and contribute to better health outcomes on an ongoing basis;

“scope of practice” means the parameters within which a category of nurse or midwife may practice;

“standardised plan of care” means a generic care plan developed for specified conditions or interventions;

“supportive care” means all services which enhance the other elements of care essential to individualised care, including health education, advocacy and counselling;

“the Act” means the Nursing Act, 2005 (Act No. 33 of 2005);

“treatment” means selection and performance of those therapeutic measures essential to the effective execution and management of the nursing regimen; and

“registered person” shall mean a person who is registered as a nurse or as a midwife in terms of the Act.

Scope of practice of a professional nurse

2. (1) The Professional nurse takes responsibility and accountability for the following:
- (a) advocating for the profession and facilitating the establishment and maintenance of an environment in which health care can be provided safely and optimally;
 - (b) providing safe and quality comprehensive nursing care in a scientific, integrated and evidence-based approach in all health care settings;
 - (c) practising in terms of the Code of Ethics for Nursing Practitioners in South Africa;
 - (d) facilitating the attainment of optimum health for the individual, the family, groups and the community;
 - (e) promoting health and empowering healthcare users through health counselling and education to secure their active participation in achieving self-reliance;
 - (f) assessing and interpreting the health information needs of individuals and groups, so as to plan and respond accordingly;
 - (g) diagnosing and prioritising individual health and nursing care needs, based on a comprehensive analysis and the interpretation of data;
 - (h) developing an integrated nursing care plan for the promotion of activities of daily living, self-care, treatment and rehabilitation of health care users, taking cognisance of their physical and psychosocial, cultural and religious needs;
 - (i) delegating nursing care, ensuring that tasks are delegated to competent nurse practitioners or persons;
 - (j) preparing and providing supportive nursing care to a patient throughout the administration of diagnostic, surgical and therapeutic acts;
 - (k) implementing relevant evidence-based nursing protocols and guidelines;
 - (l) providing emergency care;
 - (m) providing appropriate palliative and end of life nursing care;
 - (n) managing nursing care of individuals, groups and communities; integrating psycho-social care in the management of individuals, groups and communities;

- (o) evaluating a healthcare user's progress towards expected outcomes and revising health and nursing care plans in accordance with the newly identified needs emanating from the evaluation;
 - (p) creating and maintaining a concise, complete and accurate nursing record for individual healthcare users;
 - (q) referring a healthcare user timeously and appropriately to other members of the multidisciplinary team;
 - (r) facilitating continuity of care in collaboration with relevant members of the healthcare team;
 - (s) initiating and maintaining a therapeutic relationship for all health care users;
 - (t) providing direction for the implementation of the nursing care plan;
 - (u) ensuring safe implementation of nursing care, the execution of treatment and the administration of medication prescribed by an authorized registered person;
 - (v) ensuring disaster preparedness and response;
 - (w) preventing and managing healthcare user's adverse events; and
 - (x) managing and coordinating nursing care effectively within a health establishment.
- (2) A professional nurse must:
- (a) implement and manage a quality improvement plan for own context of practice;
 - (b) review nursing practice continuously against professional standards within a relevant context; and take responsibility to monitor their actual application in practice; and
 - (c) supervise and mentor student nurses and other nursing categories.
- (3) The scope of practice of a Professional Nurse shall include the scope of practice of a midwife.
- (4) A professional nurse may not:
- (a) set up a private practice without registration as a nurse specialist; and
 - (b) act as an assistant surgeon to a medical practitioner.

Scope of practice of a general nurse

3. (1) A general nurse takes responsibility and accountability for the following:
- (a) advocating for the profession and facilitating the establishment and maintenance of an environment in which health care can be provided safely and optimally;
 - (b) providing safe and quality general nursing care in a scientific, integrated and evidence-based approach within in all health care settings;
 - (c) reviewing-nursing practice continuously against professional standards within a relevant context; taking responsibility for the application of newly identified needs to practice;
 - (d) practising in terms of the Code of Ethics for Nurse Practitioners;
 - (e) facilitating the attainment of optimum health for the individual, the family, groups and the community;
 - (f) promoting health and empowering healthcare users through health counselling and education to secure their active participation in achieving self-reliance;
 - (g) assessing and interpreting the health information needs of individuals and groups and then planning to respond accordingly;
 - (h) diagnosing and prioritising individual healthcare needs, based on a comprehensive analysis and interpretation of data;
 - (i) developing an integrated nursing care plan for the promotion of activities of daily living, self-care, treatment and rehabilitation of health care users, taking cognisance of their unique physical and psychosocial, cultural and religious needs;
 - (j) delegating nursing care, ensuring that nursing care is only delegated to competent practitioners or persons;
 - (k) initiating and maintaining a therapeutic relationship with health care users;
 - (l) preparing and providing supportive nursing care to a patient throughout the duration of diagnostic, surgical and therapeutic acts;
 - (m) providing emergency care;
 - (n) providing appropriate palliative and end of life nursing care;

- (o) managing nursing care of individuals, groups and communities; integrate psycho-social care in the management of individuals, groups and communities;
 - (p) evaluating healthcare users' progress towards expected outcomes and revising nursing care plans according to their newly identified needs;
 - (q) creating and maintaining concise, complete and accurate nursing records for individual healthcare users;
 - (r) referring a healthcare user timeously and appropriately to other members of the multidisciplinary team;
 - (s) facilitating continuity of care in collaboration with relevant members of the health care team;
 - (t) providing direction for the implementation of the nursing care plan;
 - (u) ensuring the safe implementation of nursing care, the execution of treatment and the administration of medication prescribed by an authorized registered person;
 - (v) ensuring disaster preparedness and response; planning, preparing for, and executing a unit evacuation plan;
 - (w) providing supervision for nursing care and execution of treatment;
 - (x) preventing and managing health care user's adverse events;
 - (y) implementing relevant evidence based protocols and guidelines; and
 - (z) managing and coordinating nursing care in a unit within the health establishment.
- (2) The general nurse must implement and manage a quality improvement plan for own context of practice.
- (3) The scope of practice of General Nurses shall include supervision and mentoring student nurses and other nursing categories.
- (4) A general nurse may not:
- (a) take responsibility and accountability for managing overall nursing care in a health establishment; and
 - (b) set up or conduct a private practice.

Scope of practice of a midwife

4. (1) A midwife takes responsibility and accountability of the following:
- (a) advocating for the mother, neonate and family and facilitating the establishment and maintenance of an environment in which midwifery care can be provided safely and optimally;
 - (b) providing safe and quality midwifery care in a scientific, integrated and evidence-based approach in all health care settings;
 - (c) reviewing midwifery practice continuously against professional standards within relevant context; and take responsibility to ensure implementation in practice;
 - (d) practicing in terms of the code of ethics for Nursing Practitioners in South Africa;
 - (e) promoting, maintaining, restoring and supporting the health status of a woman during pregnancy, labour and puerperium;
 - (f) promoting health and wellness of the woman, and her family for pregnancy, birth, and parenthood;
 - (g) promoting comprehensive reproductive health within the family context;
 - (h) providing evidence-based information to support the woman's decision making across the midwifery continuum of care;
 - (i) assessing and diagnosing the health needs and facilitating the attainment of optimum physical and psycho-social health for the mother and neonate;
 - (j) identifying, preventing and managing complications of pregnancy, labour and puerperium;
 - (k) diagnosing and prioritising individual midwifery care needs, based on a comprehensive analysis and interpretation of data;
 - (l) developing an integrated comprehensive care plan for a woman during pregnancy, labour and puerperium in all health care settings
 - (m) developing an integrated comprehensive care plan for a neonate in all health care settings;
 - (n) delegating midwifery care, ensuring that such care is only delegated to competent practitioners or persons;

- (o) executing of a programme of treatment or medication prescribed by a registered person;
 - (p) providing emergency midwifery care in accordance with relevant guidelines or protocols;
 - (q) integrating psycho-social care in the management of mothers, neonates, families and communities;
 - (r) providing appropriate palliative and end of life care within midwifery practice;
 - (s) monitoring and comprehensively documenting the health status of the woman during pregnancy, labour and puerperium to detect and manage complications;
 - (t) monitoring and comprehensively documenting the health status of the neonate to detect and manage complications;
 - (u) referring a mother and neonate with high risk conditions to an appropriate level of care within the continuum of care;
 - (v) creating and maintaining concise, complete, accurate and legible midwifery records;
 - (w) providing direction for the safe implementation of maternal and neonatal care in line with relevant protocols and guidelines;
 - (x) ensuring disaster preparedness and response;
 - (y) preventing and managing maternal and neonatal adverse events; and
 - (z) managing and coordinating a midwifery unit according to the relevant guidelines and protocols.
- (2) The midwife must implement and managing quality improvement plans for own context of practice.
- (3) The scope of practice of Midwives shall include supervision and mentoring student midwives and other nursing categories.
- (4) A midwife may not:
- (a) set up a private practice without registration as a midwife specialist; and
 - (b) act as an assistant surgeon to a medical practitioner.

Scope of practice of an auxiliary nurse

5. (1) An auxiliary nurse takes responsibility and accountability of the following:
- (a) providing basic nursing care as determined and delegated by a professional nurse, general nurse or midwife;
 - (b) providing basic nursing care in accordance with a standardised plan of care;
 - (c) providing physical and psychosocial support to a person for the activities of daily living and self-care;
 - (d) practising in terms of the Code of Ethics for Nursing Practitioners in South Africa;
 - (e) initiating and maintaining a therapeutic relationship with health care users;
 - (f) providing assistance, health education and support to individual patients, families and communities to promote health, prevent injuries and illness and maintain the health status of all health care users;
 - (g) rendering basic first aid;
 - (h) providing basic palliative and end of life nursing care;
 - (i) adhering to relevant protocols and guidelines; and
 - (j) maintaining concise, complete and accurate nursing records for individual healthcare users.
- (2) An auxiliary nurse:
- (a) may only render basic nursing care that is based on a prescribed plan of care and set standards;
 - (b) must be supervised by a Professional Nurse, Midwife and General Nurse in situations where there is no prescribed plan of care, or set standards; and
 - (c) may not set up or conduct a private practice.

6. The following Regulations published in the *Gazette* are hereby repealed:

Government Notice No.	Date of publication	Extent
R.2598 as amended	30 November 1984	The entire Regulation except for Chapter five (sub regulation 5)
R.1469	10 July 1987	In its entirety
R.2676	16 November 1990	In its entirety
R.260	15 February 1991	In its entirety

Short title

7. These Regulations are called Regulations Regarding the Scope of Practice for Nurses and Midwives, 2022.