NURSE PRACTITIONER/ ADVANCED PRACTICE NURSING ROLES IN WEST AFRICA

Nurse Practitioner/Advanced Nursing Practice Development in West Africa: A Proposal

Education/Practice Subgroup of the International Nurse Practitioner/Advanced Practice Nursing Network

by

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Aims

Aims of this proposal/position statement is to develop a sub-regional position paper that outlines the roles, scope of practice, education preparation and continuing professional education issues in the development of the Nurse Practitioner (NP) role in West Africa.

The aim of NP/Advanced Nursing Practice (ANP) is to produce a standardised curriculum that outlines the roles, scope of practice education and continuing professional education issues in the development of the Nurse Practitioner role in West Africa.

Goal

The goal is to produce advanced nurse practitioners with the expanded scope of practice who are able to meet the health needs of individuals, families, groups, populations or entire communities and contributing to nursing knowledge and advancing nursing profession in West Africa.

Scope of Practice of Nurse Practitioner

They scope of practice of a nurse practitioner who are registered nurses (RNs) and in addition possess a post basic nursing education and clinical training in midwifery (RM) i.e. RN and RM certificates (double qualification). In our register it is not called advanced education yet but with time, explanation, lobbying, pushing, we may in a near future regard this as advanced education and clinical practice. One hundred percent (100%) of all RNs have at least one additional advanced nursing education in speciality areas. Either RN plus Psychiatric, or RN plus Orthopaedic, or RN plus Peri-operative, or RN plus Nurse Education, or RN plus gynaecology, or RN plus Thoracic or RN plus Paediatric Nursing. There are at least 1000 RNs with a masters degree in a nursing speciality in West Africa. We do not specialise in women’s health per se with NP movement now, we may change because knowledge is not static.

The West African College of Nursing (WA) has accredited University of Benin Teaching Hospitals, School of Ophthalmic Nursing for an 18 months Masters degree programme on Community Ophthalmic Nursing for ON Practitioners only. This is in line with the NP movement. An RN plus RM etc. are certified by National certification examination set up by the Licensing Board for Nurses and Midwives, a regulatory body set up by our government. Policies are already in place. It is only a matter of nomenclature.

Our NPs provide direct primary health care. Included in their practice description is the ability to:
• Obtain nursing and medical history
• Perform physical examination, diagnose and treat acute/common health condition,
• Diagnose/treat/monitor chronic condition.

We provide screening and preventative care with stress on education and counselling. We collaborate with other health professionals like:
• Medical Laboratory Scientists;
• Medical Social workers;
• Medical rehabilitation;
• Radiographers;
• Dietitians and Pharmacists.

Action Plan

• Presentation of NP/ANP proposal to WACN August meeting 1st week.
• Presentation of NP/ANP proposal to N&MCN.
• Presentation of NP/ANP proposal to Nursing and Midwifery Board, Ghana using these 2 countries (Nigeria and Ghana) as pilot group.

WACN Council to gradually get other countries interested. This new approach might probably be a way forward to deal with the problem of non-recognition and under payment in West Africa.

To look at roles beyond basic nursing, subsequent education programmes to be at a masters degree level the following is proposed.
• Develop programme - get them affiliated to universities;
• Develop curricula for advanced nursing practice;
• Get the rules and regulatory bodies open up appropriate registers for ANP in clinical nursing specialities.
• Get nurses to be motivated by the new concept/paradigm.

Stimulate nurses through:
• Enthusiasm.
• Organising a first NP/ANP conference locally;
• Finding sponsorship;
• Hold informal discussion;
• Hold formal discussions;
• Develop a committee to advertise the new NP/ANP movement;
• Select a few nurses to be the foundation members of the ANP;
• Open a register for them;
• Invite ANP from UK, USA, Australia, Royal College of Nursing to attend a first international NP/ANP conference in West Africa;
• Develop a committee to improve international NP communication;
• Membership recruitment drive;
• Joint Consultation Committee with Ministry of Health, Ministry of
Education, the Senate, State Executive Council including audience with the Head of State.

**Education**

**Masters degree:**

**General objectives:** At the end of the programme, the learner will be able to:

1. Carry out physical assessment;
2. Be a competent nurse by making nursing diagnosis;
3. Proficient in pharmacology and drug interactions modules;
4. High degree of emotional support and counselling;
5. Excellent in referral and discharge protocol;
6. Case management;
7. Able to apply research; and Audit to practice.

**Course Content will include the following modules:**

1. Physical assessment;
2. Nursing diagnosis;
3. Pharmacology and drug interaction;
4. Emotional support and counselling;
5. Referral and discharge;
6. Case management;
7. Applied research;
8. Nursing audit.

**The Role of NP Includes:**

- Clinical diagnosis of nursing nature.
- Nursing intervention (treatment) with an inherent possibility of a need to prescribe only. Midwives have the permit to prescribe from a limited formula.

**Where we want to be:**

The health reforms going on globally over the last decade in West Africa have supported the concern for more relevant and flexible health care services. Clinical effectiveness and service quality are some of the government’s strategies to develop and modernise the National Health Service. As a result, the relationship between current health care policy and nursing practice has become complex and diverse with technological advancements, the nature of work undertaken by health care workers have changed and will continue to change in response to the needs of users and developments in research,
technology and practice.

Opportunities are now open for Nurse practitioners and other health professionals to be innovative and creative in constructing a nursing service that is assessable across a full range of care services in the primary and secondary health sectors.

The Nurses in West Africa believe that traditional biomedical practices alone are insufficient in terms of providing the care demanded by our clients and patients. The acute shortage of staff due to brain drain to developed countries, lack of facilities, unavailability of basic amenities for quality nursing care, poor terrain’s, bad roads, poverty, unequal distribution of amenities have impaired on service provision.

The N.H.S. white per 1999 set out radical new ways of organising the N.H.S. including the setting up of Directorate of Nursing Services in each Ministry of Health which emphasised that doctors and their General Practitioner colleagues should work in partnership and a lead role in both the strategic and operational levels of primary health care (PHC). In Nigeria, PHC agency is run by doctors and Community Health Officers and not nurses. This arrangement has already begun to impact on deprived areas. In fact, maternal mortality is still very high. The expected growth in PHC activities over the next decade means that much of the work traditionally carried out by doctors will need to be delegated to properly trained personnel like nurses. This includes illnesses that can be treated without recourse to medical advice, minor ailments which require no specific treatment. It is anticipated that nurses working in PHC sector will increasingly:

- Carry their own functions for specific procedures
- Screen and fitter patients
- Provide counselling service to patients and relatives
- Monitor and care for patients with chronic illness (hypertension, asthma, diabetes etc.)
- Prescribe and interpret diagnostic tests such as ECGs, Xray and laboratory reports
- Health promotion and education
- Nutrition advice
- Undertake breast and cervical screening
- Be involved in nursing audit and research

There is a clear indication that there is much that could be done to manage current GPs workloads better through initiatives such as Nurse Practitioners in PHC and Patient triage at the fist point of contact.