MODEL FOR NURSING AND MIDWIFERY SPECIALIZATION IN THE UNITED ARAB EMIRATES

April 8, 2018
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FORWORD

The UAE Nursing and Midwifery Council (UAE NMC) was established by Cabinet decree in 2009, under the direction of His Highness Sheikh Mohammed Bin Rashid Al Maktoum, Vice-President and Prime Minister of the UAE, Ruler of Dubai. The establishment of the Council reflects the government’s commitment to nursing and midwifery with the knowledge that high-quality nursing and midwifery care is essential for the health and well-being of the people of the UAE.

The Council’s mandate to “regulate nursing and midwifery, promote and advance nursing and midwifery services and protect and promote the health and safety of the public based on the highest standards,” establishes the Council as an important regulatory and strategy setting body for nursing and midwifery. The Council board is focused on addressing nursing and midwifery from the perspectives of practice, licensure, education, and research. Standing Scientific Committees composed of stakeholder members from across the UAE are actively engaged in developing and implementing standards in all of these areas.

It gives me great pleasure to introduce this report from the Council – “Specialization in Nursing Practice: A Foundation for Excellence and Regulatory Accountability.” This report presents a model for specialization that is framed around the essential priority needs of the UAE public for improved health status and overall happiness.

The framework identifies nursing roles for specialization that include the Nurse Specialist, Advanced Practice Nurse and Advanced Practice Midwifery. In alignment with contemporary, international best practices and standards, the UAE NMC embraces the importance of specialty practice and these new roles as a mechanism for providing the public with excellence in nursing and midwifery care. Through the Council’s work, recommendations are also made to align Nursing and Midwifery education programs to graduate specialists to meet national workforce needs and practice settings encouraged to establish specialty roles in acute and ambulatory settings.

Specialization in Nursing and Midwifery holds the potential to significantly raise the quality of care across the nation and to contribute to the Public’s health and wellbeing. Accordingly, the Council places its full support to the establishment of specialization as among its top priorities.

I am deeply grateful to the Council Board and the Scientific Committee for Practice and the Specialization Task Force for making this report a reality and count on them to ensure that the recommendations are implemented, and the goals achieved.

*Her Royal Highness Princess Haya Bint Al Hussein*  
President, UAE Nursing and Midwifery Council
PREFACE

The UAE Nursing and Midwifery Council (UAE NMC) was established in 2009 to regulate the nursing and midwifery professions, promote and advance nursing and midwifery services and protect and promote the health and safety of the public based on the highest standards” (UAE NMC establishment Cabinet Decree number 10, 2009).

This document has been prepared by the UAE Nursing and Midwifery Council’s Scientific Committee for Nursing and Midwifery Specialization. The Specialization Committee has been in place since 2011 and includes representatives from public and private healthcare institutions in the Emirates, from the Ministry of Health (MOH), Department of Health (DOH), Dubai Health Authority (DHA) and Dubai Healthcare City Authority (DHCA).

This document was developed with input from national experts. In developing this document, several resources - from ICN, MOH, DOH, DHA, DHCA - were utilized including, but not limited to, professional codes of conduct, scopes of practice, and practice standards.
ACKNOWLEDGEMENTS

The Council sincerely appreciates the concerted efforts of all involved in making this publication possible – expressing special gratitude to:

- HRH Princess Haya Bint Al Hussein, President of the UAE NMC, wife of His Highness Sheikh Mohammed Bin Rashid Al Maktoum, Vice-President and Prime Minister of the UAE and Ruler of Dubai; for her infinite guidance and support for the nursing and midwifery professions.
- H.E. UAE Minister of Health
- The UAE NMC board members
- All members of the Scientific Committee for Nursing and Midwifery Practice, for their excellent work in developing this document
- The International Council of Nurses and the International Confederation of Midwives for the ongoing support throughout the development of this document
- All nursing and midwifery colleagues and the UAE NMC staff who participated in the development, validation and revision of this document
- All individuals representing different healthcare institutions for the contribution in one way or another to the development of this document
# LIST OF ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>APM</td>
<td>Advanced Practice Midwife</td>
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<tr>
<td>APN</td>
<td>Advanced Practice Nurse</td>
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<tr>
<td>DHA</td>
<td>Dubai Health Authority</td>
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<td>DHCA</td>
<td>Dubai Healthcare City Authority</td>
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<td>DOH</td>
<td>Department of Health</td>
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<td>ICN</td>
<td>International Council of Nurses</td>
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<td>ICM</td>
<td>International Council of Midwives</td>
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<td>MOH</td>
<td>Ministry of Health</td>
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<tr>
<td>NS</td>
<td>Nurse Specialist</td>
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<tr>
<td>RM</td>
<td>Registered Midwife</td>
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<tr>
<td>RN</td>
<td>Registered Nurse</td>
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<td>UAE</td>
<td>United Arab Emirates</td>
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<tr>
<td>UAE NMC</td>
<td>United Arab Emirates Nursing and Midwifery Council</td>
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INTRODUCTION

Specialization refers to the acquisition of a level of knowledge and skill in a particular area which is greater than that acquired during the course of general nursing/midwifery education. Specialization requires the nurse/midwife to have additional education and expertise in that area of nursing/midwifery.

The Nursing and Midwifery Council (NMC) recognize and support specialized nursing and midwifery to address the growing demands and healthcare needs for UAE population health. Developing various specialization roles will improve the overall quality of the nursing and midwifery workforce by increasing knowledge and expertise of the nurse. In addition, developing specialization roles will provide a career advancement pathway for UAE nurses and midwives.

The NMC recommends the development of an education, licensure, and registration structure for specialized practice. Specialized nursing and midwifery education will focus on areas with the highest healthcare demands and population health challenges identified for the UAE. A survey and needs assessment conducted in 2011 outlined the priority focus areas for clinical specialty training to include:

- Critical Care
- Mental Health
- Community Health
- Pediatrics

The survey and needs assessment correlate with the key goals of the UAE Vision 2021 (National Agenda, 2017) related to healthcare. Vision 2021 focuses on improving population health, promoting wellness, increasing primary care, and managing chronic disease while maintaining high quality healthcare.

The development of a model for specialization provides a framework to guide nursing and midwifery practice through the various concepts of specialization. The basic components of the specialization model represent the cornerstones of nursing and midwifery, and will help address the challenges and needs for population health in the UAE. The model is instrumental to the UAE nursing and midwifery workforce, and assists the UAE in becoming self-sufficient and resilient while providing quality population health management.
BACKGROUND

This document is a model for specialized practice in the UAE, and is to be read in conjunction with the RN Scope of Practice and RM Scope of Practice and additional practice standards.

In 2010, the Department of Health (DOH), reported that the UAE would require significantly more nurses and midwives in the future to optimally meet unique and increasing demands. The annual statistics report also showed a number of gaps in the services available across the Emirate. The Northern Emirates healthcare system is also expanding, which “will entail recruiting many medical, administrative and general staff” (The Report, Ras Al Khaimah Government, 2010). With no structures for nursing and midwifery specialization in the UAE, the NMC Specialization committee was established.

The experience of the International Council of Nurses (ICN) and International Council of Midwives (ICM) is that while the growth of specialties has remained unabated over the past two decades, it is difficult to ascribe any uniformity in the evolution of nursing and midwifery specialties. This can be achieved in different ways; from studying and sitting a rigorous examination that certifies a nurse or midwife in that specialty, to completing a graduate level program in a clinical or non-clinical specialty” (ICN, 2009). While a Registered Nurse (RN) or Registered Midwife (RM) license signifies entry-level knowledge to provide care for patients and is the minimum requirement for professional registration, it does not indicate whether a nurse or midwife has obtained knowledge beyond the minimum; specialization however does (AACN, 2002). Models for specialization vary worldwide and were examined to provide an informed recommendation of specialization for the UAE.
MODEL FOR SPECIALIZATION

To address the need for a specialized nursing and midwifery role, a model to meet the unique needs of the UAE was developed. The below graphics (Figure 1 and Figure 2) define the educational, licensure, and registration requirements for specialization:

Figure 1: NMC CAREER PROGRESSION MODEL FOR NURSING

Figure 2: NMC CAREER PROGRESSION MODEL FOR MIDWIFERY

The recommended nomenclature is:

1. Registered Nurse (RN)
2. Nurse Specialist (NS)
3. Advanced Practice Nurse (APN)
4. Registered Midwife (RM)
5. Advanced Practice Midwife (APM)
The specialized nurse/midwife is prepared beyond the level of a registered nurse/midwife and practices with recognized expertise in a clinical or non-clinical role.

- Nurse Specialists have completed a post-graduate qualification, and practice within the RN Scope of Practice with additional Practice Standards.
- Advanced Practice Nurses/Midwives have completed a profession specific, clinically-focused Master’s or Doctoral Degree and practice at a higher level than that of the Specialist. The APN/APM have a separate Scope of Practice that regulates their practice.

Figure 3: NMC LICENSING AND REGULATORY MODEL
The Registered Nurse (RN) and Registered Midwife (RM)

Note: The education, practice, and registration requirements of the RN/RM can be found in the Scope of Practice for the Registered Nurse and Scope of Practice for the Registered Midwife respectively. A Nurse Specialist (NS) is a health care professional that practices within the Scope of Practice for the Registered Nurse with additional Practice Standards.

- **The Nurse Specialist**
  - A Nurse Specialist is a healthcare professional that practices within the Scope of Practice for the Registered Nurse and:
    - Successfully completes a post-graduate qualification of at least one year in duration related to their area of specialty
    - Continues to meet the re-licensure requirements of the regulatory body

**Education**

Specialist education will be conducted through formally organized programs in academic institutions recognized by the UAE NMC, with qualified faculty and specific admission requirements. Requirements for entry to a specialist program in the UAE will stipulate that the student will be licensed as a Registered Nurse/Midwife in the UAE.

**Practice**

Nurse Specialists will have expanded knowledge and clinical expertise in a specific field. To ensure and maintain competence in this field they must work in the area of specialized practice. The Nurse Specialist will act as a resource and leader for staff, patients, families and the community, and will act as an advocate for their specialty. They will develop and implement teaching and learning strategies that support and enhance their field, and will apply critical thinking skills using a health systems approach to problem-solve and make complex decisions in specialty contexts.

The Nurse Specialist will be expected to lead in the development of robust contemporary evidence from appropriate sources to assist in professional decision making in all aspects of safe specialized nursing practice. They will cultivate innovative change-management processes and adaptations to specialty practice, and will be expected to lead in the design, implementation, and evaluation of quality improvement processes. The Nurse Specialist will be able to influence care delivery through engagement in policy development at an institutional, national, or international level.

**Registration/Re-Registration**

The Nurse Specialist functions within the Scope of Practice for the Registered Nurse and will have the specialist qualification documented on their license in the form of a *recordable qualification*. The Registered Nurse who has recently completed a specialist program will apply to the regulatory body to have their qualification added to their license. To re-register at the end of the licensure period, the Nurse Specialist must be working in the field of their specialty and demonstrate continuing education hours related to that specialty.
The Advanced Practice Nurse (APN) and Advanced Practice Midwife (APM)

A specialized Advanced Practice Nurse and Midwife is a health care professional that practices within the Scope of Practice for the Advanced Practice Nurse or Scope of Practice for the Advanced Practice Midwife respectively.

- **The Advanced Practice Nurse and Midwife**
  - An Advanced Practice Nurse or Midwife Specialist is a healthcare professional that practices within the Scope of Practice for the Advanced Practice Nurse or Midwife and:
    - Successfully completes a clinical Master’s or Doctoral Degree in Nursing or Midwifery
    - Continues to meet the re-licensure requirements of the regulatory body

**Education**

Advanced practice education will be conducted through formally organized programs in academic institutions recognized by the UAE NMC with qualified faculty and specific admission requirements. Requirements for entry to an advanced practice program in the UAE stipulate that the student will be licensed as a Registered Nurse or Midwife in the UAE. The education level will be a clinical Master’s or Doctoral Degree.

Requirements for entry into advanced practice training in the UAE will stipulate that the student is licensed as a Registered Nurse or Registered Midwife in the UAE with at least 24-months of clinical experience in the specialty area of practice. Advanced Practice Nurses and Midwives educated outside the UAE will be licensed according to criteria set up by the UAE NMC.

**Practice**

The advanced practitioner will be expected to implicitly understand his/her own accountability, and work collaboratively with other clinicians to secure the best care for each patient. The Advanced Practice Nurse/Midwife will function in a variety of role dimensions including health care provider, coordinator, consultant, educator, advocate, coach, researcher, role model, and leader. The advanced practice role will include prescriptive authority and the ability to refer clients to other healthcare professionals. They will provide leadership in the coordination of multidisciplinary healthcare for integrated delivery of patient care services and participate in local, national, and international policy making, in collaboration with professional organizations, to influence equitable healthcare, and the maintenance of the advanced practice role.

In collaboration with the relevant authorities, employers, payers and professional colleagues, discussions about supervision, collaboration or independent practice, as well as prescribing rights are required to be developed as the model for advanced practice continues to be explored.
Registration/Re-Registration
The Advanced Practice Nurse/Midwife will have a separate license and scope of practice from the Registered Nurse/Registered Midwife. They will not be required to hold or maintain an additional Registered Nurse/Registered Midwife license. The Registered Nurse/Registered Midwife who has recently completed advanced practice education will apply to regulatory body to obtain the Advanced Practice license. To re-register at the end of the licensure period, the Advanced Practice Nurse/Midwife will be required to be working in the field of advanced practice and be able to provide evidence of continuing education hours for that specialty.

Figure 4: Summary of Specialization Model

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<tr>
<th>OVERVIEW OF SPECIALIZATION</th>
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<tr>
<td><strong>Title</strong></td>
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<td><strong>Definition</strong></td>
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<td><strong>Scope of Practice</strong></td>
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<td><strong>Licensure</strong></td>
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<td><strong>Recordable Qualification</strong></td>
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<td><strong>Level of Education</strong></td>
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<td><strong>Priority Areas for UAE</strong></td>
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NURSE SPECIALIST PRACTICE STANDARDS

PRACTICE STANDARDS FOR THE CRITICAL CARE NURSE SPECIALIST

Practice Standard 1

Critical care nurses use specialised skills and specialized knowledge to continuously assess, monitor, and manage patients for the promotion of optimal physiological balance.

Criteria:

The critical care nurse:

- Validates physiological, psychosocial, cultural, developmental, and spiritual data based on the patient’s condition using all available and appropriate resources
- Mitigates against risks associated with invasive hemodynamic monitoring devices
- Uses information gathered from various sources to manipulate therapies such as vasoactive, inotrope and anti-arrhythmic therapies to achieve desired outcomes whilst mitigating against associated risks
- Uses invasive technical equipment such as mechanical ventilation, dialysis and hemodynamic assistive devices safely whilst mitigating against associated risks
- Advocates for and evaluates the effectiveness of infection control practices
- Makes decisions about priorities of care in life-threatening situations.
- Integrates all assessment findings into a collaborative plan of care.
- Coordinates and implements the plan of care according to one’s scope of practice.
- Anticipates, prevents, prepares for, recognises, and intervenes in life-threatening situations
- Manages multiple therapies in the context of continuously evolving patient needs
- Demonstrates flexibility and the ability to remain patient-focused in a rapidly changing environment
**Practice Standard 2**

*Critical care nurses promote and facilitate optimal comfort and well-being in a highly technological environment that is often unfamiliar to patients and families.*

**Criteria:**

The critical care nurse:

- Manages the environment to mitigate the presence and effects of noxious stimuli
- Discerns sources of discomfort, such as, but not limited to, pain, agitation, delirium, thirst, etc., and implements individualized therapies (pharmacological and non-pharmacological) to prevent and/or alleviate suffering
- Preserves dignity by respecting personal privacy and diversity
- Communicates information in a respectful manner that is attentive to the patients’/families’ hopes and that is appropriate to their needs, stage of development and level of understanding.

**Practice Standard 3**

*Critical care nurses foster mutually beneficial partnerships with patients and families based on trust, dignity, respect, communication, and collaboration. The patient defines family.*

**Criteria:**

The critical care nurse:

- Gathers data concerning patients’/families’ needs and responses to the critical care experience and accesses appropriate resources to address identified concerns.
- Shares and validates information with patients/families in an open, accurate and consistent manner
- Seeks out, listens to and honours patients’/families’ perspectives when planning and delivering care.
- Advocates with patients/families to address their expectations and needs.
- Provides unrestricted access to family members based on the patient’s wishes, respecting the need for privacy as the environment and situation allows.
**Practice Standard 4**

Critical care nurses provide care that adheres to contemporary evidence-based guidelines and established safety standards and protocols with clinical expertise and consideration of patient’s preferences, experience and values when providing care in a high-risk environment.

**Criteria:**

The critical care nurse:

- Participates in the culture of inquiry by questioning current practice for critically ill patients and their families and seeking evidence to change or justify nursing practices.
- Integrates data to anticipate, prevent, and recognize injury or dysfunction that may contribute to a life-threatening health crisis or long-term alteration in health.
- Describes clinical problems using evidence generated within a clinical setting, such as patient assessment data, outcomes management, and quality-improvement data.
- Participates in evaluating evidence to determine applicability to practice.
- Assists with integrating evidence into policy, procedure, and practice.
- Implements practice changes based on evidence, clinical expertise, and patient preferences to improve care processes and patient outcomes.
- Evaluates outcomes of evidence-based decisions and practice changes for individuals, groups, and populations to determine best practices.
- Disseminates information regarding best practices supported by evidence to improve quality of care and patient outcomes.
- Participates in research activities and strategies to sustain an evidence-based practice culture.
**Practice Standard 5**

When the goal of care changes from life-sustaining therapies to end-of-life, critical care nurses support patients and families through this transition.

**Criteria:**

The critical care nurse:

- Promotes the discussion of advanced care planning/directives with patients/families.
- Recognizes that the palliative approach integrates the principles of palliative care (i.e., symptom management, patient-centred approach) throughout a patient’s experience and not just reserved for the final days of life.
- Collaborates with the patient, family and interdisciplinary team to determine end of life wishes, identify available resources, and implement strategies to promote dignity, comfort, and quality care at the end-of-life.
- Accesses appropriate resources to guide ethically complex situations and foster effective coping strategies and possible resolutions.
- Maintains ongoing communication with the family and interdisciplinary team about the palliative approach/care at end of life, while providing them with continuous emotional support.

**Practice Standard 6**

Critical care nurses promote collaborative practice in which the contribution of the patient, family and each interdisciplinary team member is solicited, acknowledged, and valued.

**Criteria:**

The critical care nurse:

- Explains and promotes their role and responsibilities to patients, families and other interdisciplinary team members.
- Demonstrates effective interpersonal communication, leadership, negotiation, and conflict resolution skills to promote positive relationships with colleagues, patients, and families.
- Accepts accountability for their autonomous professional contributions and collaborates to determine the best care provider based on respect for the unique roles, responsibilities, and shared competencies.
- Emphasizes the value of shared responsibility in decision making and supports the use of shared leadership and coordinating roles.
- Consults with appropriate individuals to establish/review the plan of care and promote continuity of care.
- Invites participation of patients/families in the discussion, planning and decision-making surrounding the plan of care.
Practice Standard 7

Critical care nurses provide leadership by fostering a culture conducive to collaboration, quality improvement, safety, professional growth, well-being, and responsible resource utilization.

Criteria:

The critical care nurse:

- Incorporates professional, legal, ethical, and critical care specific standards into practice.
- Maintains critical care and professional competency by supporting well-being with effective self-care practices, by engaging in reflective practice, by self-assessment of learning needs, and by participating in continuous professional development.
- Advocates for adequate numbers of knowledgeable and skilled critical care nursing staff to provide safe, compassionate, competent, and ethical care for all patients.
- Seeks out and incorporates patient and family feedback into quality improvement activities.
- Actively participates in adverse event or near-miss recognition, response to, disclosure, reporting, and prevention of recurrence.
- Promotes research, evidence-informed practice, and dissemination of nursing knowledge.
- Uses quality improvement findings, research, and knowledge translation to promote positive change for nursing practice and health care delivery.
- Actively mitigates against high risk medication errors
- Promotes advancement of the profession through participation in professional organizations, writing, publishing, and presentations for professional or lay audiences
- Acts as a resource person, educator, role model, preceptor, advocate and/or mentor for students, peers and interdisciplinary team members.
- Contributes to and supports healthy work environments that enhance the critical care environment and the quality of work life balance.
- Promotes development and implementation of innovative solutions
- Participates in strategies and activities to promote healthy communities
PRACTICE STANDARDS FOR THE COMMUNITY HEALTH NURSE SPECIALIST

Practice Standard 1

Community health nurses integrate health promotion into their practice. Health promotion is the process of enabling people to increase control over, and to improve, their health.

Criteria:

The community health nurse:

- Collaborates with individuals, families, groups, communities, populations or systems to do a comprehensive assessment of assets and needs, acknowledging that differences exist in assets and needs of different members of the population
- Uses a variety of information sources including community wisdom to access high quality data and research findings related to health at the international, national, emirate and regional levels to plan programs and services.
- Seeks to identify the root causes of illness, disease and inequities in health
- Considers socio-political issues that may underlie individual, family, group, community, population or system problems
- Recognizes the impact of specific issues such as political climate, will, values and culture, historical context, client readiness, and social and systemic structures on health
- Facilitates change with the individual, family, group, community, population or system
- Demonstrates knowledge of determinants of health and effectively implements multiple health promotion strategies
- Identifies strategies for change that will make it easier for people to make healthier choices
- Collaborates with the individual, family, group, community or population, to support them to overcome health inequities and take responsibility for maintaining or improving their health by increasing their knowledge, influence and control over the determinants of health
- Understands and uses social marketing, media and advocacy strategies, in collaboration with others, to raise awareness of health issues and place issues of social justice and health equity on the public agenda
- Applies relevant theories and concepts to shift social norms and change behaviors in partnership with others while working on enabling factors to overcome barriers in the social and physical environment
- Uses a client centered approach to help the individual, family, group, community and population to identify strengths and available resources to access health and act to address their needs
• Evaluates and modifies population health promotion programs as needed in partnership with the individual, family, group, community, population or system in partnership with individuals, employers and policy makers

**Practice Standard 2**

*Community health nurses integrate prevention and health protection activities into practice to minimize the occurrence of diseases or injuries and their consequences*

Criteria:

The community health nurse:

• Participates in surveillance activities; analyses and utilizes this data to identify and address health issues within a population or community

• Recognizes patterns and trends in epidemiological data and service delivery and initiates strategies to improve health

• Recognizes the differences between the levels of prevention (primary, secondary, tertiary) and selects the appropriate level of intervention

• Facilitates informed decision making for protective and preventive health measures

• Helps individuals, families, groups, communities, populations or systems identify potential risks to health including contributing to emergency and/or disaster planning, being knowledgeable about specific emergency / disaster plans and promoting awareness of the plan(s) amongst individuals, families, groups and communities

• Uses harm reduction principles grounded in the concepts of health equity and social justice, to identify and reduce or remove risk factors in a variety of environments and settings including homes, neighborhoods, workplaces, and schools

• Provides prevention and protection services for the individual, family, group or community to address issues such as communicable disease, injury, chronic disease, physical environment (e.g. clean air, water, land) and community emergencies or disasters

• Applies epidemiological principles for planning strategies such as screening, surveillance, immunization, communicable disease response and outbreak management and education

• Engages in collaborative, interdisciplinary and inter-sectorial partnerships to address health risks of the individual, family, group, community, population or system recognizing that some individuals and groups are disproportionately affected

• Practices in accordance with legislation and regulation relevant to community health practice (e.g. public health legislation, child protection legislation and /federal regulatory frameworks).
Practice Standard 3

Community health nurses integrate health maintenance, restoration and palliation into their practice. These are systematic and planned methods to maintain maximum function, improve health and support life transitions including acute, chronic or terminal illness and end of life care.

Criteria:

The community health nurse:

- Assesses the health status and functional competence of the individual, family, group, community, population or system within the context of their environmental and social supports
- Develops mutually agreed upon plans and priorities for care with the individual, family, group, community, population or system
- Identifies a range of strategies including health promotion, health teaching, disease prevention and direct clinical care strategies along with short and long-term goals and outcomes
- Maximizes the ability of an individual, family, group, community, population or system to take responsibility for and manage their health needs according to resources and personal skills available
- Supports informed decision making; acknowledges diversity, unique characteristics and abilities; and respects the individual, family, group, community or population’s specific requests
- Adapts community health nursing techniques, approaches and procedures to health challenges and the challenges related to equity in health in a particular community situation or setting
- Uses knowledge of the community to link with and refer to community resources or develop appropriate community resources as needed
- Facilitates maintenance of health and the healing process for the individual, family, group, community, population or system in response to significant health emergencies or other community situations that negatively impact health
- Evaluates outcomes systematically and continuously in collaboration with the individual, family, group, community, population or system including other health practitioners and inter-sectorial partners
Practice Standard 4

Community health nurses connect with others to establish, build and nurture professional relationships. These relationships promote maximum participation and self-determination of the individual, family, group, community or population.

Criteria:

The community health nurse:

- Builds a network of relationships and partnerships with a wide variety of individuals, families, groups, communities, organizations and systems (e.g. community and volunteer service organizations, businesses, faith communities, other health professionals, and other sectors) to address health-related issues and support health equity
- Uses a holistic and comprehensive mix of community and population based strategies such as coalition building, inter-sectorial collaboration, partnerships and networking to overcome health inequities
- Assesses individual, family, groups, community and system beliefs, attitudes, feelings and values about health and health inequities and their potential effect on the relationship and intervention
- Is aware of and uses culturally relevant communication strategies when building relationships.
- Respects, trusts and supports or facilitates the ability of the individual, family, group, community, population or system to identify, solve and improve their own health issues
- Involves the individual, family, group, community, population or system as an active partner, applying community development principles, to identify relevant needs, perspectives and expectations
- Recognizes and promotes the development of health enhancing social support networks as an important determinant of health
- Promotes and supports linkages with appropriate community resources (e.g. hospice or palliative care, parenting groups) when the individual, family, group, community, population or system is ready to receive them
- Maintains professional boundaries in long-term relationships in the home or other community settings where professional and social relationships may become blurred
- Negotiates an end to the relationship, in a professional manner, when appropriate
**Practice Standard 5**

Community health nurses build individual and community capacity by actively involving and collaborating with individuals, families, groups, organizations, populations, communities and systems.

**Criteria:**

The community health nurse:

- Works collaboratively with the individual, family, group, community, population or system (including other health care providers) to identify needs, strength, available resources and strategies for action
- Engages the individual, family, group, community, population or system in a consultative process from a foundation of equity and social justice
- Recognizes and builds on the readiness of the individual, family, group, community or system to participate and act
- Uses empowering strategies such as mutual goal setting, visioning and facilitation
- Understands group dynamics and effectively uses facilitation skills to support group development
- Helps the individual, family, group, community or system to participate in issue resolution to address their determinants of health
- Helps groups and communities to gather available resources that support taking action to address their health issues
- Actively shares knowledge with other professionals and community partners and appreciates the importance of collaborative team work
- Supports the individual, family, group, community, and population to advocate for themselves
- Encourages lifestyle choices that support health
- Applies principles of social justice and advocates for those who are not yet able to take action for themselves
- Uses a comprehensive mix of strategies to address unique needs and to build individual, family, group, community, population or system capacity
- Supports community action to influence policy change in support of health
- Actively works with community partners including health professionals to build capacity for health promotion
- Evaluates the impact of change on the health outcomes of the individual, family, group, community, population or system
Practice Standard 6

Community health nurses facilitate access and equity by working to make sure that resources and services are equitably distributed throughout the population and reach the people who most need them.

Criteria:

The community health nurse:

- Assesses and understands the capacity of the individual, family, group, community, population or system
- Assesses, in collaboration with partners, the norms, values, beliefs, knowledge, resources and power structures of the client (individual, family, group, community, population or system)
- Identifies and facilitates universal and equitable access to available services
- Collaborates with colleagues and other members of the health care team and community partners to promote effective working relationships that contribute to comprehensive client care and optimal client care outcomes
- Collaborates with individuals, families, groups, communities, populations or systems to identify and provide programs and methods of delivery that are acceptable to them and responsive to their needs across the life span
- Provides culturally sensitive care in diverse communities and settings
- Supports the individual, family, group, community and population’s right to choose alternate health care options
- Advocates for equitable access to health and other services and equitable resource allocation
- Mobilizes resources to support health by coordinating and planning care, services, programs and policies
- Refers, coordinates or facilitates access to services in the health sector and other sectors
- Adapts practice in response to the changing health needs of the individual, family, group, community, population or system
- Uses strategies such as home visits, outreach to overcome inequities and facilitate access to services and health-supporting conditions for potentially vulnerable populations (e.g. persons who are ill, elderly, young, poor, immigrants, isolated or have communication barriers)
- Analyses and addresses the impact of the determinants of health on the opportunities for health for individuals, families, groups, communities, populations and systems
- Advocates for healthy public policy and social justice by participating in legislative and policy-making activities that influence determinants of health and access to services
• Acts with and for individuals, families, groups, communities, populations and systems at the organizational, emirate and federal levels to address service gaps, inequities in health and accessibility issues

• Monitors and evaluates changes and progress in access to relevant community services that support the determinants of health

**Practice Standard 7**

*Community health nurses demonstrate responsibility and accountability as a fundamental component of their professional and autonomous practice.*

**Criteria:**

The community health nurse:

• Assesses and identifies risk management issues and takes preventive or corrective action individually or in partnership to protect individuals, families, groups, communities, populations, and organizations from unsafe, unethical, illegal or socially unacceptable circumstances

• Identifies ethical dilemmas about whether responsibility for issues lie with the individual, family, group, community, population, or system or with the nurse or the nurse’s employer

• Makes decisions using ethical standards and principles, taking into consideration one individual’s rights over the rights of another, individual or societal good, allocation of scarce resources, and quantity versus quality of life

• Seeks help with problem solving, as needed, to determine the best course of action when responding to ethical dilemmas, risks to human rights and freedoms, new situations and new knowledge

• Provides leadership by creating change within communities and systems

• Advocates for societal change to support health for all based on the concepts of health equity and social justice

• Uses current evidence and informatics (including information and communication technology) to identify, generate, manage and process relevant data to support nursing practice

• Identifies and acts on factors which affect practice autonomy and delivery of quality care

• Acts as a resource person, educator, role model, preceptor, advocate and/or mentor for students, peers and interdisciplinary team members.

• Promotes advancement of the profession through participation in professional organizations, writing, publishing, and presentations for professional or lay audiences
• Identifies and works proactively (individually or by participating in relevant professional organizations) to address nursing issues that will affect the individual, family, group, community, population or system.

• Appreciates and develops teamwork skills that contribute proactively to the quality of the work environment by identifying needs, issues and solutions, using conflict resolution skills and collaborative decision making

• Advocates for effective and efficient use of community health nursing resources

• Seeks professional development experiences that are consistent with current community health nursing practice, new and emerging issues, the changing needs of the population, the evolving knowledge of the impact of inequities or social injustices, determinants of health, and emerging research

• Acts on legal obligations to report to relevant authorities any situations involving unsafe or unethical care. This care may be provided by family, friends or other individuals and involve or be directed toward children or vulnerable adults

• Uses available resources to systematically evaluate the achievement of desired outcomes including the availability, acceptability, efficiency, and effectiveness for quality improvement in community health nursing practice and the work environment

• Promotes development and implementation of innovative solutions
PRACTICE STANDARDS FOR THE MENTAL HEALTH NURSE SPECIALIST

Practice Standard 1

*Mental health nurses* develop therapeutic relationships from which they can enter into partnerships with clients, and using human sciences and the art of caring, develop helping relationships

Criteria:

The mental health nurse:

- Assesses and clarifies the influences of personal beliefs, values, and life experience on the therapeutic relationships and distinguishes between social and therapeutic relationships
- Works in partnership with diverse and heterogeneous populations, families, and relevant others to determine goal-directed needs and to establish an environment that is conducive to goal achievement
- Uses a range of therapeutic verbal and non-verbal communication skills that include empathy, active listening, observing, genuineness, and curiosity
- Recognises the influence of age, culture, class, ethnicity, language, stigma, and social exclusion on the therapeutic process and negotiates care that is sensitive to these influences
- Mobilises and advocates for resources that improve community integration and increase the ability of diverse and heterogeneous populations and their families, including those isolated geographically, to access mental health services
- Understands and responds to human reactions to distress and loss of control that may be expressed as anger, anxiety, fear, grief, helplessness, hopelessness, and humour
- Recognises and respects the client’s expert and unique knowledge, and facilitates the client’s behavioural, developmental, emotional, or spiritual change while acknowledging and supporting the client’s participation, responsibility, and choices in his/her care
- Respects the client’s and family’s lived expertise and unique knowledge in promoting recovery
- Fosters mutuality of the relationship by reflectively critiquing therapeutic effectiveness through client and family responses and feedback, clinical supervision, and self-evaluation
- Understands the nature of chronic illness and applies the principles of health promotion and disease prevention when working with clients and families in the promotion of recovery
Practice Standard 2

Mental health nurses use advanced skills and specialized knowledge to continuously assess, monitor, and manage clients and families for the promotion of optimal mental health

Criteria:

The mental health nurse:

- Collaborates with clients and with other members of the health care team to gather holistic, client-cantered assessments through observation, engagement, examination, interview (using respectful, recovery focussed language), and consultation while attending to confidentiality and pertinent legal statutes

- Validates data to identify health status, potential for wellness, health care deficits, potential for risk to self and others; alterations in thought content and/or process, affect behaviour, communication and decision-making abilities; substance use and dependency; and history of trauma and/or abuse (emotional, physical, neglect, sexual, or verbal)

- Formulates and documents a plan of care in collaboration with the client, family, and mental health team that supports recovery and reintegration/social inclusion in the community through discharge planning and provision for ongoing support, all while recognising variability in the client’s ability to participate in the process

- Refines and expands client assessment information by assessing and documenting significant change(s) in the client’s status, and by comparing new data with the baseline assessment and client goals

- Assesses and anticipates potential needs and risks, collaborating with the client to examine his/her environment for risk factors such as self-care, housing, nutrition, economic support, psychological state, and social interactions

- Determines the most appropriate and available therapeutic modality that meets the client’s needs, and assists the client to access necessary resources
**Practice Standard 3**

*Mental health nurses implement therapeutic interventions whilst protecting the client at risk for harm to self or others whilst attempting to include the client in all aspects of decision-making.*

**Criteria:**

The mental health nurse:

- Utilises and evaluates evidence-based interventions to provide ethical, culturally competent, safe, effective, and efficient nursing care consistent with the mental, physical, spiritual, emotional, social, and cultural needs of the individual

- Assists, educates, and empowers clients to select choices which support informed decision-making and provides information about the possible consequence(s) of the choice

- Supports clients to draw on their own assets and resources for self-care, daily living activities, resource mobilisation, and mental health promotion

- Uses technology appropriately to perform safe, effective, and efficient nursing intervention

- Uses knowledge of age-specific implications of psychotropic medications and administers medications accurately and safely, monitoring therapeutic responses, reactions, untoward effects, toxicity, and potential incompatibilities with other medications or substances and provides medication education with appropriate content

- Utilises therapeutic elements of group process

- Incorporates knowledge of family dynamics, cultural values, and beliefs in the provision of care

- Collaborates with the client, health care providers, and community members to access and coordinate resources such as employment, education, and volunteering, and seeks feedback from the client and others regarding interventions

- Encourages and assists clients to seek out mutual support groups and to strengthen social support networks

- Seeks out the client’s response to, and perception of, nursing and other therapeutic interventions and incorporates it into practice

- Ensures care for individuals of different populations (e.g. incarcerated individuals, individuals with intellectual disabilities) from therapeutic and rehabilitative perspectives
Practice Standard 4

Mental health nurses effectively manage rapidly changing situations in critical circumstances that may be termed psychiatric emergencies. These situations include risk factors for self-harm, aggressive behaviours, and rapidly changing mental and physical health states.

Criteria:

The mental health nurse:

- Utilises the therapeutic relationship throughout the management of rapidly changing situations
- Assesses the client using a comprehensive holistic approach for actual or potential health issues, problems, risk factors, and/or crisis/emergency/catastrophic situations
- Knows about resources required to manage actual and potential crisis/emergency/catastrophic situations and plans access to these resources
- Monitors client safety and utilises continual assessment to detect early changes in client status, and intervenes accordingly
- Implements timely, age-appropriate, and client-specific crisis/emergency/catastrophic interventions as necessary
- Uses trauma-informed care when managing crisis situations with clients to minimise further trauma and interference with recovery objectives
- Commences critical procedures when necessary which, in an institutional setting, includes suicide precautions, emergency restraint, elopement precautions, and infectious disease management and, in a community setting, includes community support systems such as police, ambulance, and crisis response resources
- Utilises a least restraint approach to care
- Evaluates the effectiveness of the rapid responses with the client and modifies critical plans as necessary
- Involves, with client collaboration, the family and significant others to identify the precipitates of the event and to plan ways to minimise risk of recurrence
- Utilises safety measures to protect client, self, and colleagues from potentially abusive situations in the work environment
Practice Standard 5

The mental health nurse attempts to understand the life experience of the client and uses this understanding to support and promote learning related to health and personal development. The nurse provides health promotion information to individuals, families, communities, and different populations.

Criteria:

The mental health nurse:

- Collaborates with the client to determine learning needs, emphasising and supporting the client’s potential for recovery
- Plans and implements health promotion education with the client while considering the context of the client’s life experiences, readiness, culture, literacy, language, preferred learning style, and available resources
- Explores options and resources with the client to build knowledge for making informed choices related to health needs and for accessing the system as needed
- Incorporates knowledge of diverse learning models and principles, including the principles of recovery, when creating learning opportunities for clients
- Provides guidance, support, and relevant information (with appropriate critiques) to clients, families, and significant others
- Documents the teaching/learning process (assessment, implementation, client involvement, and evaluation)
- Determines with the client the effectiveness of the educational process and collaboratively develops or adapts it to meet learning needs
- Engages in teaching/learning opportunities as a partner with clients, families, and community agencies
Practice Standard 6

The mental health nurse advocate for clients’ rights to receive the lease restrictive form of care and to respect and affirm clients’ rights to self-determination in a safe and equitable manner.

Criteria:

The mental health nurse:

- Identifies philosophies, attitudes, values, and beliefs of the workplace culture that affect the nurse’s performance, safety, and compassion, and responds appropriately
- Understands how the determinates of health affect community well-being and mental health nursing practice
- Understands relevant legislation and its implications for nursing practice, and utilises it appropriately
- Expands and incorporates knowledge of innovations and changes in mental health psychiatric nursing practice to ensure safe, confidential, and effective care
- Ensures and documents ongoing review and evaluation of psychiatric-mental health nursing care activities
- Participates in dialogue and critical reflection about the interdependent functions of the team within the overall plan of care
- Advocates for the client within the context of the health care environment
- Advocates for continuous improvement to the organizational/systemic structures consistent with the principles of safe, ethical, and competent care
- Recognises the dynamic changes in health care locally and globally and, with stakeholders, supports strategies to manage these changes
Practice Standard 7

The mental health nurse can plan and implement collaborative care, apply recovery principles, promote mental health, consult with community members, and advocate for the mental health of their clients and others.

Criteria:
The mental health nurse:

- Collaborates with clients/families/significant others and other stakeholders to facilitate safe, supportive, and respectful environments for all persons
- Actively participates to sustain and promote a climate which supports ethical practice and a moral community
- Understands and utilises quality outcome indicators and strives for continuous quality improvement
- Seeks to utilise constructive and collaborative approaches to resolve differences among members of the health care team which may impact care
- Participates in developing, implementing, and critiquing mental health policy which fosters recovery and continuity of care
- Acts as a resource person, educator, role model, preceptor, advocate and/or mentor for students, peers and interdisciplinary team members.
- Utilises knowledge of collaborative strategies for social action in working with consumer and advocacy groups
- Pursues opportunities to reduce stigma and to promote social inclusion and community integration for clients
PRACTICE STANDARDS FOR THE PAEDIATRIC NURSE SPECIALIST

Practice Standard 1

Paediatric nurses use advanced skills and specialized knowledge to continuously assess, monitor, and manage patients and families for the promotion of optimal physiological balance.

Criteria:
The critical care nurse:

- Validates physiological, psychosocial, cultural, developmental, and spiritual data based on the patient’s condition using all available and appropriate resources
- Evaluates performance of educational activities and integrates into plan of care
- Advocates for and evaluates the effectiveness of infection control practices
- Integrates all assessment findings into a collaborative plan of care
- Implements care in collaboration with the family, appropriate to the patient’s developmental stage
- Implements safety measures for individual children, families and others on the unit and throughout the institution
- Provides a supportive environment for the child and family to facilitate participation in the care provided
- Anticipates, prevents, prepares for, recognises, and intervenes in life-threatening situations
- Manages multiple therapies in the context of continuously evolving patient and family needs
- Demonstrates flexibility and the ability to remain patient/family-focused in a rapidly changing environment

Practice Standard 2

Paediatric nurses advocate for patients, families and healthcare workers about patient and family rights including identifying vulnerable patients or family groups, informing others about a patient or a group of patients’ needs, or supporting patients to empower them to achieve their goals

Criteria:
The paediatric nurse:

- Advocates for organizational, environmental and practice changes to ensure that the unique health needs of children are met.
- Protects the human and legal rights of the paediatric patient and family working with social service agencies and courts particularly when child abuse, neglect or other forms of family violence are suspected.
- Actively supports leadership activities such as promoting a legislative agenda and professional organization activities designed to influence health care practice and policies for children,
families and communities.

- Assists children and families in informed decision making and participation in planning of care
- Advocates for children and parents to protect their rights according to emirate and federal law and to support their active participation in aspects of their care

**Practice Standard 3**

*Paediatric nurses foster mutually beneficial partnerships with patients and families based on trust, dignity, respect, communication, and collaboration.*

**Criteria:**

The paediatric nurse:

- Gathers data concerning patients’/families’ needs and responses to the health care experience and accesses appropriate resources to address identified concerns.
- Establishes relationships with the patient’s school and other educational facilities
- Shares and validates information with patients/families in an open, accurate and consistent manner
- Seeks out, listens to and honours patients’/families’ perspectives when planning and delivering care.
- Advocates with patients/families to address their expectations and needs.
- Provides unrestricted access to family members based on the patient’s wishes, respecting the need for privacy as the environment and situation allows.

**Practice Standard 4**

*Paediatric nurses provide care that adheres to contemporary evidence-based guidelines and established safety standards and protocols with clinical expertise and consideration of patient and family’s preferences, experience and values when providing care*

**Criteria:**

The paediatric nurse:

- Participates in the culture of inquiry by questioning current practice for children and their families and seeking evidence to change or justify nursing practices.
- Promotes nursing activities that contribute to the dissemination and sustainability of evidence-based practice
- Integrates data to anticipate, prevent, and recognize injury or dysfunction that may contribute to a life-threatening health crisis or long-term alteration in health.
- Describes clinical problems using evidence generated within a clinical setting, such as patient and family assessment data, outcomes management, and quality-improvement data
- Participates in evaluating evidence to determine applicability to practice
- Assists with integrating evidence into policy, procedure, and practice
- Implements practice changes based on evidence, clinical expertise, and patient and family preferences to improve care processes and patient outcomes
• Evaluates outcomes of evidence-based decisions and practice changes for individuals, groups, and populations to determine best practices
• Disseminates information regarding best practices supported by evidence to improve quality of care and patient outcomes
• Participates in research activities and strategies to sustain an evidence-based practice culture

**Practice Standard 5**

*Paediatric nurses promote collaborative practice in which the contribution of the patient, family and each interdisciplinary team member is solicited, acknowledged, and valued.*

**Criteria:**

The paediatric nurse:

• Explains and promotes their role and responsibilities to patients, families and other interdisciplinary team members.
• Demonstrates effective interpersonal communication, leadership, negotiation, and conflict resolution skills to promote positive relationships with colleagues, patients, and families.
• Accepts accountability for their autonomous professional contributions and collaborates to determine the best care provider based on respect for the unique roles, responsibilities, and shared competencies.
• Emphasizes the value of shared responsibility in decision making and supports the use of shared leadership and coordinating roles.
• Consults with appropriate individuals to establish/review the plan of care and promote continuity of care.
• Invites participation of patients/families in the discussion, planning and decision-making surrounding the plan of care.
Practice Standard 6

Paediatric nurses provide leadership by fostering a culture conducive to collaboration, quality improvement, safety, professional growth, well-being, and responsible resource utilization.

Criteria:
The paediatric nurse:

- Incorporates professional, legal, ethical, and paediatric specific standards into practice.
- Maintains paediatric and professional competency by supporting well-being with effective self-care practices, by engaging in reflective practice, by self-assessment of learning needs, and by participating in continuous professional development.
- Advocates for adequate numbers of knowledgeable and skilled paediatric nursing staff to provide safe, compassionate, competent, and ethical care for all patients.
- Seeks out and incorporates patient and family feedback into quality improvement activities.
- Actively participates in adverse event or near-miss recognition, response to, disclosure, reporting, and prevention of recurrence.
- Promotes research, evidence-informed practice, and dissemination of nursing knowledge.
- Uses quality improvement findings, research, and knowledge translation to promote positive change for nursing practice and health care delivery.
- Actively mitigates against high risk medication errors
- Promotes advancement of the profession through participation in professional organizations, writing, publishing, and presentations for professional or lay audiences
- Acts as a resource person, educator, role model, preceptor, advocate and/or mentor for students, peers and interdisciplinary team members.
- Contributes to and supports healthy work environments that enhance the paediatric environment and the quality of work life balance
- Promotes development and implementation of innovative solutions
- Participates in strategies and activities to promote healthy communities
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