Rural Nursing in Australia

Nursing, both registered and enrolled, is a generalist profession with scope of practice being driven by the context in which they work. Rural Nurses practice in the broadest sense and deliver care across the lifespan and health continuum, similarly to their remote area nursing colleagues, they often have minimal clinical support and infrastructure.

Nurses have responded to the increasingly complex health demands of society by becoming sub-specialised. Nurses therefore frequently identify themselves according to their area of specialty or practice, for example Intensive Care Nurse, Emergency Nurse, Breast Care Nurse or Practice Nurse.

A Rural Nurse:
• Has a broad scope of practice across the lifespan and often having to work across acute, emergency, aged, palliative, mental health, peri-operative, primary healthcare, to name a few.
• Requires a generalist approach with skills and knowledge to match, attributes of flexibility, adaptability, reflectivity, innovation and resilience are essential.
• Has expanded triage, physical assessment and emergency stabilisation skills to initiate clinical interventions, often as the initial responder in a clinical emergency.
• Works collaboratively in advanced and extended clinical roles for continuous comprehensive and co-ordinated care utilising their limited available resources.
• Is required to undertake multiple functions depending on the day, these include clinical care, health service management and clinical education.
• Is a high-profile part of the community where personal and professional issues are not easily separated.

Rural Nursing Context:
Geographical descriptors are a blunt instrument in describing the context in which Rural Nurses practice. The Rural Nursing context is determined by aspects such as:
• Small communities with variable access to amenities – i.e. housing, shopping, schools, leisure activities
• The social, cultural and economic characteristics of the community
• The availability and access to other health care capability - i.e. Medical, allied and relief staff, equipment, medical evacuation
• The communities’ expectations on their local rural nurses – i.e. first line emergency response

The people who live, work, travel and play in rural areas also influence the rural nursing role, these include groups such as retirees, young families, culturally and linguistically diverse people and the grey nomads or other seasonal surges.

Rural Nurses work in a variety of healthcare settings, including small country hospitals, multi-purpose centres, community health, primary care, aged care and Aboriginal and/or Torres Strait Islander medical services.
Rural Nursing Characteristics:
CRANAplus recognises that there is a strong professional pipeline in both directions between urban & rural and remote & rural nursing practice.

Whilst many larger regional health services are based in a rural location, their size and access to onsite medical, diagnostic, allied and specialist services results in the nursing professionals practicing in a very similar manner to urban based health services.

Maternity care is predominantly provided by the dual qualified Nurse / Midwife in small rural settings due to the workload demands. Rural Nurses often have dual qualifications and additional skills and knowledge to meet their community’s need, including extended clinical skills such as radiography, suturing, plastering and advanced life support. Nurse Practitioner roles have an increasingly important role in health service delivery.

Rural Nurses have a broad scope of practice, providing healthcare to and within their own small rural communities.

Rural Nurses are specialist generalists with reduced access to clinical supports and assistance compared to their urban colleagues.

Rural Nurses are high profile members of their community, who are expected to respond to health needs and emergencies as they occur.