

The role of nurses  
has grown  
considerably



**ASSIGN  
BUSTER**

Nurses who serve as ASP have several issues to contend with such as independence, professional accountability, and duty to care in addition to legal issues. Of late, nursing has developed into all the functional activities which arose as a result of the technological, socio-economical and political changes. The ASP is part of all these nursing activities since their roles always vary for several reasons in the operating theater. For instance, different regulations and rules always define the roles of the ASP nurses who operate within the theatre and are generated differently. In the ethical, legal and professional perspectives, the ASP preoperative environments have many new challenges which must be addressed on a daily basis. The ever changing boundaries of professional responsibilities and their influence on the practice have emerged. The clinical and practice influence has influenced the academic, professional and academic development of the Scrub Theatre practitioners.

The Advanced Theatre Scrub Practitioners are personally accountable for their practice and must always work in a cooperative and collaborative manner with the healthcare professionals and other people who are involved in provision of care, respect and recognize their contributions to the care team. For the Advanced Theatre Scrub Practitioners to be successful in their careers, they must be effective and always work towards achieving a certain goal.

The Advanced Theatre Scrub Practitioners provide the nursing care to the patients in a perioperative environment and they also deal with the technical and instrumentation equipment that will be used during the whole process. Emotional labor is always very crucial for both the nurses and the ASP and it

has been established to be very important in the nursing profession. In the Operating theatre, the ASP have to consider two major areas in their work which include one, to keep the surgeon dealing with the patient happy and the second, not to upset the surgeons. The second point is a big reminder that if the ASP can make the Surgeon jovial and happy, then they will be very sure that they will not upset the surgeons. It is highly recommended that the ASP maintains the emotional labor with the co-employees rather than the patients.

The roles of the healthcare professionals have changed considerably over the years and the nurses have been particularly affected. These changes have arose because of the code of professional conduct, the code of professional conduct and guidance. These changes have affected the whole area of the perioperative nursing such as the Advanced Scrub Practitioner who was formally known as the First Assistant.

The Advanced Theatre Practitioners always have many issues to contend with which includes the duty of care, autonomy and other legal and professional accountability. The development of the extended roles like the Advanced Scrub Practitioner has also created dangers that the nursing profession could end up in a very bad state of confusion. Nurses therefore have to be aware that accepting the roles of the ASP issues which include underpinning education of practice and development and the high standards of care that the patients require and deserve are considered in the requirements of the governing bodies and the healthcare management.

The roles of the ASP therefore must be undertaken by a very competent and qualified practitioner who should have received the renown training of this role and aware that the care of the patient is paramount before anything else. Therefore, the role of the ASP gives the nurse who acts in this capacity a chance to provide a very holistic care to each and every patient. The PCC Act of 2003 therefore clearly states that the duties of the ASP do not at any cost involve any surgical interventions.

The role of the ASP doesn't require extended practice but instead the role is already established into the theater nurse role and as such, it doesn't require any specific training. The roles of the ASP therefore require some specific training competencies and needs and that this role should be clearly stated in the contract of employment and job description of the people who undertake this practice.

The NMC (2004), in their code of professional conduct didn't have any objection for the practitioners to develop the scope of their practice but instead requested that the ASP concerned be competent for the jobs and always be mindful of the professional and personal accountabilities that they bear for their actions. As such, there are several points in the code of NMC which refer to autonomy when considering the professional practice of the ASP. The ASP should be able to support and protect the health of the individual patients and the clients. Another role was that the ASPs were professionally accountable for their actions and therefore they should be responsible and answerable for their omissions and actions regardless of any directions they get from the other professionals. Another point was that the

practitioners should be able to realize their strengths and weaknesses so that they can be able to protect the patients who are under their care.

According to Dowling et al (1996), practitioners are not required to undertake any task unless they have gone through the required training which must be within the established limits of professional practice and set laws. The needs of patients are considered of utmost importance and as such, a practitioner must be competent enough to meet such needs. A practitioner, who acts in the role of ASP and lacks competency skills, works against the set norms of professional requirements and accountability.

Therefore, it is imperative that one exercises high standards of nursing so to be able to justify any action committed or not committed while under line of duty.

The NMC (2004) defines the specific duties and specifications of the Advanced Scrub Practitioner to include the following:

Performing skin preparation prior to surgery of the patients.

Draping.

Performing tissue and skin retraction.

Handling of the tissues and manipulation of the organs so that they can be prepared for exposure or access.

Handling the instruments which will be used in the surgery.

Enhancing the communication channels between the ward, the theatre and the patient and even performs preoperative assessment and offer postoperative care evaluation for the patients.

They are responsible for the application of indirect electrocautery under the supervision of the superiors.

They are responsible for the use and maintaining of the specialized surgery equipment in their areas of working.

They are required to perform the male and female characterization and also cut off the ties and sutures.

The ASPs should assist with haemostasis so that to secure and maintain a very clear operating field.

They are responsible for holding the camera so that there is invasive access surgery to the patients.

The ASP should assist in positioning the patients and also conduct a tissue viability assessment.

They should handle the tissues and manipulate the organs for access or exposure.

**Morrison (2000) says that the common law of negligence requires a good and reasonable care be attained at all times. It is this expected that if a practitioner provides a service to a patient, such service must be the same as that would have been given by a qualified doctor. Barker (1996) observes that touching a patient without his or her permission constitutes battery. The NMC (2004) posits that it is crucial that health care givers give respect to the patients and their permission to undergo any healthcare intervention must be sought first before any treatment is given.**

The NMC (2004) proposes that all patients should be informed well in advance when an ASP is required to administer healthcare. Tingle (2002) believes that this requirement is important since the sick person has a right to know who will be involved in administration of healthcare. This means that a practitioner who wants to perform a task that was previously undertaken by a doctor must first introduce himself or herself to the patient (s) and tell them that he or she is qualified and has the necessary training to perform the task. Accordingly, the patient will be in a position to give his or her informed decision based on the information provided.

It is therefore important to note and be aware that the role of the ASP is extended which requires validated training and those they are obliged for the maintenance of the high standards while bearing in mind the protection and support of the patients in a professional and accountable manner. On the other side, it is also worthy noting that although the use of technology can help in the optimum care of the patients, there should be a very strong need for interaction between the surgical patients and the perioperative practitioners.

In conclusion, ASPs perform their tasks in a systematic way in the operating theatre. However, their duties and responsibilities face many challenges which are also influenced by several factors. Some of these difficulties can be dealt with conveniently while others are difficult to control. Therefore, the theatre practitioner must ensure that he or she overcomes the challenges that can be controlled. The development of the roles of the practitioners must be in line with the patients' needs. However, the nurses must be aware of their shortcomings in this profession and understand their responsibilities and maintain high standards of performance. In addition, since understanding of clinical procedures and practice needs a proper understanding of both personal and professional requirements, these stumbling blocks can be dealt with effectively.