Opportunistic STI screening should be a routine part of any medical consultation in general practice.2

The NSW Sexually Transmissible Infections Programs Unit (NSW STIPU), in partnership with the Australian Primary Health Care Nurses Association (APNA), the Australasian Society for HIV Medicine (ASHM), Family Planning NSW and the Australasian Sexual Health and HIV Nurses Association (ASHHNA) surveyed Primary Health Care Nurses on experiences with sexual health care in general practice. These survey responses indicated a high level of interest in sexual health and highlighted the value of developing sexual health competency standards for Primary Health Care Nurses.

1. Background

General practice is the main provider of sexual health care in NSW. Fifty-five percent of Australians diagnosed with a sexually transmissible infection (STI) or blood borne virus (BBV) access treatment through general practice while 8% access treatment through publicly funded sexual health services.1

The presence of symptoms is one of the main reasons people seek sexual health services. However, the asymptomatic nature of most STIs means that most people are not likely to be tested nor seek testing.

The presence of symptoms is one of the main reasons people seek sexual health services. However, the asymptomatic nature of most STIs means that most people are not likely to be tested nor seek testing.
2. Primary health care nursing scope of practice

Primary Health Care Nurses can provide screening for asymptomatic STI patients. Nurses are accountable for making professional judgments when activities are beyond their own capacity or scope of practice and for initiating consultations with, or referral to, other members of the health care team.³

Patients who present with:

- Clinical signs of disease or infection (symptoms);
- An issue that is outside the scope of the Primary Health Care Nurse OR
- Have an abnormality detected on a screening test

must be referred to an appropriate practitioner or service.

In the majority of instances the referral will be to a General Practitioner.

The Primary Health Care Nurse should explain the nature of the consultation, the questions that will be asked, and the tests that are likely to be taken to ensure voluntary and informed consent.

STI testing should form part of a routine health assessment. A nurse who adopts an open attitude and consults in a supportive environment can enhance patient comfort to discuss sexual health. Taking a sexual history is important for assessment and management of STIs, however it should not be a barrier to offering STI testing. Testing can be offered without a full sexual history, with the aim of increasing testing.⁴

Young people are a priority group for STI testing in primary health care. When working with children and young people it is the responsibility of the nurse to be aware of the laws relating to consent to health care, particularly for those aged less than 14 years. Australian state and territory laws also vary relating to age of sexual consent and laws relating to child protection.⁵ In some circumstances, ‘adolescent consensual peer sex’ or the acquisition/diagnosis of an STI or pregnancy does not necessarily indicate risk of significant harm and subsequently require reporting to child protection services.⁶ Prior to commencing STI testing of a young person or child, this should be discussed with the primary health care team to define the scope of practice and considerations when offering STI testing.⁷

3. Follow up for patients diagnosed with a sexually transmissible infection

A Medical Officer must be involved in the management and care planning of all patients diagnosed with an STI; this includes reviewing results, ordering of treatments and developing a follow up plan.

Contact tracing is a key aspect of follow up where the Primary Health Care Nurse can provide information and support for patients. Contact tracing is important for the management of most STIs as it interrupts ongoing...
transmission of infections, minimises complications of those infected and prevents re-infection from an untreated partner. It is the responsibility of the diagnosing clinician to facilitate the process of notifying current and past partners; however this may be delegated to the Primary Health Care Nurse by the Medical Officer. Contact tracing may be undertaken by the patient or their health professional. If a patient elects to do their own contact tracing, using an online partner notification service may improve the numbers of contacts who are notified.

Online services include:

- www.letthemknow.org.au
- www.thedramadownunder.info/notify (for males with male partners)
- www.bettertoknow.org.au (for Aboriginal youth)

If the patient needs provider contact tracing, refer to the Australasian Contact Tracing Manual or contact your local sexual health centre for information and support.

4. Sexual Health Competency Standards for Primary Health Care Nurses

The Sexual Health Competency Standards for Primary Health Care Nurses have been adapted from the ASHHNA Competency Standards for Sexual and Reproductive Health and HIV Nurses (2nd Edition). The competency standards support nursing practice in sexual and reproductive health care, including STI testing within the general practice setting and have been reviewed for appropriateness and acceptability by primary health care nurses who have formed a Sexual Health Special Interest Group.

The Sexual Health Competency Standards for Primary Health Care Nurses should be read in conjunction with:

- Expanding Your Practice: A learning module for nurses in general practice
- The Competency Standards for Nurses in General Practice

5. Assessing Competence

The principles for assessing competent practice is to adopt a multifaceted approach that includes:

- Direct observation of practice (peer assessment)
- Self assessment of performance in current role
- Reflecting on practice
- Setting professional goals
- Participation in continuing professional development activities.

6. Key Practice Skills

The key practice skills that the sexual health competencies will focus on include:

- Sexual history taking
- Specimen collection
- Information provision
- Contact tracing
- Advocating for sexual health nursing practice
# 7. Sexual Health Competency Standards for Primary Health Care Nurses

* denotes mandatory domain assessments (signature required)

<table>
<thead>
<tr>
<th>Domain 1 – Effective Communication</th>
<th>Self assessment</th>
<th>Peer assessment</th>
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<tbody>
<tr>
<td>Establishes rapport that enhances the patient’s ability to express concerns and feelings</td>
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<tr>
<td>Explains confidentiality and privacy policies relevant to patient care</td>
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<tr>
<td>Communicates effectively to the patient and significant others where appropriate, regarding care and the nurses role in the provision of that care</td>
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<tr>
<td>Demonstrates sensitivity, awareness and respect for cultural identity of patient</td>
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<tr>
<td>Ensures that written communication is comprehensive, logical, legible, clear and concise, spelling is accurate and only acceptable abbreviations used</td>
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<tr>
<td>Establishes and maintains effective and collaborative communication with the multidisciplinary team</td>
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<tr>
<th>Domain 2 – Assessment, Care Planning and Clinical Management</th>
<th>Self assessment</th>
<th>Peer assessment</th>
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<tr>
<td>Obtains a clear and concise patient history to enable identification of risks and priorities for health screening and education. This may include sexual and reproductive health, medical, psychosocial and lifestyle history</td>
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<tr>
<td>Demonstrates knowledge and understanding of priority population groups and the issues relating to their sexual and reproductive health and HIV needs</td>
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<tr>
<td>Provides education and support to patient to modify lifestyle and behavioural factors in order to minimise risk for sexually transmissible infections (STIs), blood-borne viruses (BBVs) and unintended pregnancy</td>
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<tr>
<td>Ensures informed consent for tests ordered by a Medical Officer has been obtained and prepares appropriate equipment for examination and/or specimen collection</td>
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<tr>
<td>Accurately obtains specimens (including self collected samples) with minimal discomfort for the patient</td>
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<td>Accurately documents all findings and outcomes of the patient consultation</td>
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<tr>
<td>Ensures patient is aware of follow-up care, treatment and health plans</td>
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<tr>
<td>Explains results of tests, once reviewed through standard organisational procedures, providing appropriate psychological support and refers where appropriate</td>
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<tr>
<td>Provides information and assistance for contact tracing and seeks advice when appropriate</td>
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<tr>
<th>Domain 3 – Health Promotion and Patient Education</th>
<th>Self assessment</th>
<th>Peer assessment</th>
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<tbody>
<tr>
<td>Demonstrates the ability to initiate discussion about sexually transmissible infection and blood borne virus transmission and prevention.</td>
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<tr>
<td>Demonstrates the ability to initiate discussion about implications of a positive test result and contact tracing requirements</td>
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<tr>
<td>Utilises appropriate patient resources to support preventative health decision making including contact tracing</td>
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<tr>
<td>Initiates discussion about preventive health checks and screening</td>
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<tr>
<td>Domain 4 – Research</td>
<td>Self assessment</td>
<td>Peer assessment</td>
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<tr>
<td>Demonstrates ability to access and evaluate health information and research evidence</td>
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<tr>
<td>Participates in quality improvement programs and incorporates outcomes of quality improvement programmes within the general practice</td>
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<th>Domain 5 – Legal and Ethical Nursing Practice</th>
<th>Self assessment</th>
<th>Peer assessment</th>
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<tbody>
<tr>
<td>Articulates and practises within own scope of practice</td>
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<tr>
<td>Advocates for privacy and confidentiality when providing care</td>
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<tr>
<td>Complies with nursing standards, codes, guidelines, legislation and regulations</td>
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<tr>
<td>Practises in a way that acknowledges the dignity, culture, values, beliefs and rights of individuals/groups</td>
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<tr>
<th>Domain 6 – Collaborative Care and Partnerships</th>
<th>Self assessment</th>
<th>Peer assessment</th>
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<tr>
<td>Seeks guidance and leadership from senior members of the multidisciplinary team to provide best practice nursing care</td>
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<td>Utilises referral pathways to external services where appropriate</td>
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<tr>
<td>Identifies and disseminates knowledge to colleagues and other health professionals eg. in-service and case presentations</td>
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<tr>
<th>Domain 7 – Leadership and Development of the Role</th>
<th>Self assessment</th>
<th>Peer assessment</th>
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<tr>
<td>Applies current evidence based practice to clinical care</td>
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<tr>
<td>Contributes to the development of nursing knowledge through reflection on practice</td>
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<tr>
<td>Participates in professional development activities eg. seminar attendance, conference attendance, professional readings and disseminates information to colleagues</td>
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<tr>
<td>Advocates for the role of the primary healthcare nurse in sexual health within the general practice setting</td>
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<tr>
<td>Acts as a mentor and/or preceptor for peers undertaking education in sexual healthcare</td>
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**Peer assessment completed**

**Self assessment completed**
8. Professional Development

Requires a commitment by the individual nurse and their employer to provide an environment that supports continuous learning and ongoing evaluation. Self assessment and peer assessment against these competency standards contributes to professional development in sexual health care for Primary Health Care Nurses.

The Standards may also be used to:

- Advocate for sexual health care to be included within the role of nurses in primary care
- Provide guidelines of best practice for RNs
- Assist in identifying areas of practice where further training and ongoing professional development are required
- Assist in the documentation of professional development achievements and plans
- Inform employers, such as General Practitioners, of the level of sexual health care expertise that Primary Health Care Nurses can provide to patients attending general practice

Professional development opportunities in sexual health care include but are not limited to:

- APNA Online Learning- STI & Blood Borne Viruses
- FPNSW Well Women’s Screening Course
- FPNSW Sexual & Reproductive Health Course
- The Australian College of Nursing Sexual Health Nursing: Principles & Practice
- The Australian College of Nursing Sexual Health Nursing: Clinical Practice
- ASHM Hepatitis C Nursing Education
- ASHM Hepatitis B Nursing: Advanced Nursing Management and Care
- ASHM Short Course in Sexual Health Nursing
- ASHM Fundamentals of HIV & Sexual Health: Expanding the Scope of Primary Health Care Nurses.
- Women’s Health NSW Training Course
- Edith Cowan University STI e-Learning Module

Further Information:

STI Testing Tool

STI Factsheets

STI Self Testing Tool

Contact Tracing Tool

NSW Sexual Health Services - Standard Operating Procedures 2011


NSW Health Privacy Manual (3rd Edition)

All website links throughout document correct as of 18th May 2015
References:


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NSW Sexual Health Infoline

Practice Nurse Special Interest Group

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