



NEW SOUTH WALES NURSES AND MIDWIVES' ASSOCIATION
AUSTRALIAN NURSING AND MIDWIFERY FEDERATION NEW SOUTH WALES BRANCH



POLICY ON COMPLEMENTARY AND ALTERNATIVE THERAPIES IN NURSING AND MIDWIFERY PRACTICE

Re-endorsed by Annual Conference 2018

NSW Nurses and Midwives' Association
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Policy on Complementary and Alternative Therapies in Nursing and Midwifery Practice

NOTE:

The following policy refers to those nurses and midwives who formally incorporate complementary therapies within their practice.

THE NSW NURSES AND MIDWIVES' ASSOCIATION RECOGNISES THAT:

- Various forms of healing, which may complement the care more traditionally provided by nurses and midwives such as therapeutic touch, massage, relaxation, meditation, visualisation, and environmental manipulation (e.g. the use of colour, music, quiet, aroma, etc) are, and always have been, a part of nursing and midwifery practice. This is, and should continue to be, recognised and valued.
- Other complementary¹ and alternative therapies (can include but is not limited to reflexology, iridology, yoga, and kinesiology) may be incorporated by nurses and midwives within their holistic provision of nursing care.
- The use of a range of therapeutic approaches, both orthodox and complementary, may enhance the health and wellbeing of individuals.
- Individuals have the right, wherever possible, to the health care of their choice.
- Nurses and midwives must maintain a current knowledge base and are responsible for ongoing education in their chosen areas of practice, including those who practise complementary and alternative therapies.

THE NSW NURSES AND MIDWIVES' ASSOCIATION ADOPTS THE POLICY THAT:

1. The practice of complementary and alternative therapies must be supported by written policies and protocols endorsed by the employing facility.
2. The informed consent of the individual receiving the complementary therapy is essential.



3. Any practice of complementary and alternative therapies should be incorporated into the total care of the individual.
4. Treating health practitioners must be informed of the use of the complementary therapy where relevant.
5. Any practice of complementary and alternative therapies should be appropriately documented.
6. The practice of complementary and alternative therapies should be supported by contemporary evidence and result in positive client outcomes. Nurses and midwives should not include in their practice therapies for which efficacy has not been demonstrated and/or significant toxicities or adverse effects have been observed, e.g. coffee enemas.
7. Nurses and midwives are responsible for determining whether their qualifications, education and/or experience in the use of a complementary therapy afford them a level of competence to use that skill in patient or client care.
8. Nurses and midwives practising complementary and alternative therapies should have a qualification, where one is available, in the therapy that they are practising.
9. Nurses and midwives practising complementary and alternative therapies must be cognisant of the limits to their practice and refer to other health professionals as necessary.
10. Nurses and midwives should be encouraged to initiate and participate in outcome based research in complementary and alternative therapies.

NOTE:

1. Complementary therapies are holistic therapies, which are used in conjunction with, or in place of, orthodox medicine.