Fact sheet

March 2018

Code of conduct for nurses and Code of conduct for midwives

Introduction

The Nursing and Midwifery Board of Australia (NMBA) undertakes functions as set by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The NMBA regulates the practice of nursing and midwifery in Australia, and one of its key roles is to protect the public. The NMBA does this by developing registration standards, professional codes, guidelines and standards for practice which together establish the requirements for the professional and safe practice of nurses and midwives in Australia.

Registration as a nurse and/or midwife requires you to meet the NMBA mandatory registration standards and to practise within the relevant NMBA approved standards, codes, guidelines and frameworks.

This fact sheet provides guidance about the Code of conduct for nurses (2017) and Code of conduct for midwives (2017) (the codes).

Why was the Code of professional conduct for nurses in Australia and the Code of professional conduct for midwives in Australia replaced with the Code of conduct for nurses and the Code of conduct for midwives?

Since the introduction of the National Scheme in 2010, the NMBA has established a systematic process to review, consult on and develop all standards, codes and guidelines in keeping with good regulatory practice.

The development of the codes incorporated the first review since 2008 of the current Code of professional conduct for nurses in Australia (2008) and Code of professional conduct for midwives in Australia (2008). The Nurse’s guide to professional boundaries and Midwife’s guide to professional boundaries (2010) were also reviewed for the first time since 2010.

The codes now reflect current nursing and midwifery practice in all contexts and are up to date, relevant and useful.

Why have the guidelines for professional boundaries been incorporated into the codes?

As part of the review of the codes, the NMBA commissioned research to inform its decision-making. This research suggested that the presence of multiple codes and guidelines makes them less memorable and may have a negative impact on nurses and midwives using the documents. The NMBA has been thorough in the integration of professional boundaries into the codes, ensuring that all aspects of expected conduct and behaviour can be accessed in one document.

What are the main features of the codes?

The Code of conduct for nurses and Code of conduct for midwives have the following features:

- conduct is framed around seven principles, each with a supporting values statement
  - the principles are categorised into four domains
− ‘person’ is used to refer to the those in a professional relationship with a nurse
− ‘woman’ is used to refer to those in a professional relationship with a midwife
• they apply to all nurses and midwives across all areas of practice
• they are founded on evidence-based practice, and
• they are designed to be read in conjunction with NMBA standards, codes and guidelines.

The glossary is also important to understanding the meaning of key terms used in the codes.

The new codes have been modelled on the multi-profession shared code of conduct used by most registered health professions.

**Why are there separate codes for nurses and midwives?**

As a part of public consultation, the NMBA specifically sought stakeholders’ views on having combined or separate codes of conduct for nurses and midwives. The NMBA’s original position was to maintain separate codes and this was supported by feedback in the public consultation. However, the NMBA has made a commitment in the future to consider the inclusion of nursing and midwifery in the multi-profession shared code of conduct.

**I am a nurse and a midwife, which code applies to me?**

If you hold dual registration as a nurse and a midwife, both codes apply to you.

**My employer has a code of conduct. Do I also have to comply with the NMBA code/s?**

Yes. The NMBA codes are used in the regulation of all nurses and midwives in Australia and therefore all nurses and/or midwives must comply with the code. Most organisations also have their own code of conduct to which employees must comply for employment and industrial purposes.

**My practice does not involve direct clinical care. Do the codes apply to me?**

Yes. The principles of the codes apply to all types of nursing and midwifery practice in all contexts. This includes any work where a nurse and/or midwife uses nursing and/or midwifery skills and knowledge, whether paid or unpaid, clinical or non-clinical. This includes work in the areas of clinical care, clinical leadership, clinical governance responsibilities, education, research, administration, management, advisory roles, regulation or policy development. The code also applies to all settings where a nurse and/or midwife may engage in these activities, including face-to-face, publications, or via online or electronic means.

**What is ‘cultural safety’ and why is it a requirement in the codes?**

Aboriginal and Torres Strait Islander peoples experience poorer health outcomes than non-Indigenous peoples.

Cultural safety is a proven way for nurses and midwives to contribute to better health outcomes and experiences for Aboriginal and/or Torres Strait Islander peoples.

Cultural safety is about acknowledging the social, historical and structural factors that can have an impact on the health of Aboriginal and/or Torres Strait Islander peoples. Rather than saying ‘I provide the same care to everyone regardless of difference,’ cultural safety means providing care that takes into account Aboriginal and/or Torres Strait Islander peoples’ needs.

Cultural safety is recognising the ways you can provide care that meets Aboriginal and/or Torres Strait Islander peoples’ needs and reflect on the ways that your own culture and assumptions might impact on the care you give.

When nurses and midwives challenge beliefs based on bias or assumption, and work in partnership with people and communities, they contribute to better healthcare experiences for Aboriginal and Torres Strait Islander peoples.

Many nurses and midwives will already be practising cultural safety, even if they have not heard of the term. The new codes of conduct guide all nurses and midwives on a cultural safety.
The NMBA worked in partnership with the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM), who provided expert advice and evidence on cultural safety.

What is ‘culturally safe and respectful practice’?

The codes of conduct provide guidance around the key principles of culturally safe and respectful practice. These principles are about respecting and acknowledging different cultures, beliefs, identities and experiences and practising in a way that takes these differences into account.

Culturally safe and respectful practice requires nurses and midwives to challenge bias and beliefs based on assumption, such as assumptions based on gender, disability, race, ethnicity, religion, sexuality, age or political beliefs.

Why do the codes have a specific section on bullying and harassment, when it is usually an employment or performance related issue?

All elements of the review process (including the research, notification analysis and consultation) recommended that the NMBA include a specific section on bullying and harassment. The NMBA acted on the evidence and has clearly stated in the codes that bullying and harassment is not acceptable and should not be tolerated.

However, in most circumstances issues relating to bullying and harassment should be managed by the employer as a performance issue. It is only in circumstances where cases of bullying and harassment directly affect public safety that a notification to the NMBA, Nursing and Midwifery Council in New South Wales, or the Health Ombudsman in Queensland is required.

For more information

- Visit www.nursingmidwiferyboard.gov.au under Contact us to lodge an online enquiry form
- For registration enquiries: 1300 419 495 (in Australia) +61 3 9275 9009 (overseas callers)