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## Message from the Chair

The Nursing and Midwifery Board of Australia (NMBA/National Board) continues its mission to work in partnership with the nursing and midwifery professions and associations, the education sector and the wider community.

Recently we released our [2013/14 annual report](#) and this gave me the opportunity to reflect on the NMBA's achievements, challenges and priorities during the last year. This year, for the first time, we have also published a profession-specific profile – [Nursing and midwifery regulation at work in Australia, 2013/14](#).

One of our great achievements this year has been a continuing increase in online registration renewals. During the last renewal period (by 31 May 2014), 97% of nurses and midwives renewed online. The change over the last four years is remarkable; when we started the renewal process in 2010, the online renewal rate for nursing and midwifery was closer to 54%. Each annual renewal is a process we look to learn from and our work continues in finding opportunities for refinement.

With your support and contributions, we also conducted a number of midwifery related consultations this year. Thank you for your feedback on all of our consultations to date. On behalf of the NMBA, I encourage all nurses, midwives and students to stay abreast of the upcoming changes in the new year and to continue engaging in our future consultations on new and revised registration standards, codes or guidelines.

Finally, I take this moment to reinforce my commitment to strengthening the relationships between the NMBA and our stakeholders. We look forward to working with you on nursing and midwifery regulation, education and workforce matters. We will involve you in our improvement initiatives for 2014/15 that focus on fostering stakeholder relationships, improving and strengthening the National Registration and Accreditation Scheme (the National Scheme), and driving operational excellence.

On behalf of the National Board, I wish you and your families the best of this festive season. Hope you all have a safe and happy New Year.

**Dr Lynette Cusack RN**  
Chair, Nursing and Midwifery  
Board of Australia



## Registration

### Reduced fee for 2014/15

We have reduced our national registration fee for nurses and midwives for 2014/15.

The lower fee at \$150 came into effect on 9 September 2014 and will apply to the next registration renewal for nurses and midwives due by 31 May 2015.

This fee reduction is consistent with our commitment to maintaining fees at a reasonable level. Registrants who hold both nursing and midwifery registration will only pay one registration fee.

To find out more, read the [media release](#) on the NMBA website.

### Graduate applications

The Australian Health Practitioner Regulation Agency (AHPRA) is calling for online applications from students who are in their final year of an [approved program of study](#). Students who completed their study in 2014 are urged to apply for registration, if they haven't already done so.

AHPRA sends out emails, on behalf of the National Board, to final-year students on the Student Register as a reminder to apply early and online. Applications can also be made by completing a [paper application form](#).

Nursing and midwifery students are encouraged to read the information on AHPRA's website under [Graduate applications](#). Graduates must meet the National Board's [registration standards](#) and need to be a registered nurse or midwife before they start practising.

### Internationally qualified nurses and midwives – update

You may have noticed that we have recently updated our website with [the new model for assessing applications for registration from internationally qualified nurses and midwives \(IQNMs\)](#).

This includes information about:

- [how we assess applications under the new model](#) – the equivalence of international qualifications to Australian qualifications.
- [making an appeal](#) – making an appeal if an application for registration with the NMBA is not successful.
- [how we use the Australian Qualifications Framework \(AQF\)](#) – our assessment of qualification levels. The new model does not distinguish between different countries but rather requires applicants to give proof that both their education institution and their program of study were accredited according to the standards set out on the website.

Our [new set of frequently asked questions \(FAQ\)](#) will assist with some of your common queries on accreditation, the AQF, bridging programs and migration.

The NMBA is working closely with the Australian Nursing and Midwifery Accreditation Council (ANMAC) to streamline approaches to migration and registration assessments.

In September this year, we announced that nurses and midwives who were approved by ANMAC *before* 10 February 2014 (when we implemented the new model) may be eligible for registration if they meet specified registration requirements. See the [media release](#) on our website.

### Strengthening international criminal history checks

From early 2015, National Boards and AHPRA will implement a new procedure for checking the criminal history of international applicants for registration. The new approach aims to balance protecting the public without unnecessarily delaying the registration process for applicants.

For more information, please read the [media release](#) on the AHPRA website.

### Criminal history – your requirement to tell us

We would like to remind all nurses and midwives that you have an obligation under the National Law<sup>1</sup> to not only disclose criminal history when applying for registration or to renew registration, but also, **within 7 days** at any time, you are required to provide notice:

- if you are charged with an offence punishable by 12 months' imprisonment or more, or
- if you are convicted of, or the subject of, a finding of guilt for an offence punishable by imprisonment.

Section 79 of the National Law requires a National Board to check for criminal history before deciding an application for registration.

The National Law defines criminal history as:

- every conviction of the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law;*
- every plea of guilty or finding of guilt by a court of the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law and whether or not a conviction is recorded for the offence;*
- every charge made against the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law*

While every case is decided on an individual basis, the National Board considers a number of factors when determining how the criminal history may affect your eligibility for registration.

The [Criminal history registration standard](#) is available under [Registration standards](#) on our website.

<sup>1</sup> Health Practitioner Regulation National Law, as in force in each state and territory.

## Certificate of registration status now available online

### New process makes it easy

Registered nurses and midwives can now request a certificate of registration status (CoRS) using the online AHPRA portal. In the past this was a manual process involving a form that was either posted or hand-delivered to an AHPRA office. Nurses and midwives can now:

- apply online by [logging onto online services](#), or find out more information on our [Practitioner services page](#) of the AHPRA website, or
- apply using the [PDF form](#) (245 KB), which is available for download from our [Common application forms page](#) or the [Practitioner services page](#) of the AHPRA website.

There is a fee of \$50 for each CoRS.

For more information on CoRS please visit the [AHPRA website](#).

## Notifications

### Notification information for employers

We recently published [Guidelines for mandatory notifications](#). A notification is a complaint to AHPRA or the NMBA about a registered nurse or midwife.

The NMBA would like to emphasise to employers of nurses and midwives that there are some workplace or disciplinary matters that can be resolved in a work context, without being notifiable conduct.

The general definition of notifiable conduct for a registered health professional is as below.

- Has practised while intoxicated by alcohol or drugs.
- Sexual misconduct in the practice of the profession.
- Has placed the public at risk of substantial harm because of an impairment (health issue).
- Has placed the public at risk of harm because of a significant departure from accepted professional standards.

Making a mandatory notification is a serious step to protect the public from risk, and must meet a high threshold. If in doubt about whether to make a [mandatory notification](#), you may wish to check with your insurer or professional association.

See also [notification publications](#) for the community and health professionals on the AHPRA website.

### Case studies

#### Performing duties under the influence of alcohol and/or drugs

The National Board received notification about a midwife who performed the duties of a visiting midwife under the influence of alcohol and/or prescription medication that impaired the midwife's ability to practise.

The midwife failed to properly address the patient's clinical concerns, made unprofessional remarks about work colleagues to the patient, and did not complete relevant entries in the midwifery service log book.

The National Board took immediate action to restrict the midwife's practice, and referred the midwife to a panel hearing. The panel gave the midwife a caution and resolved to seek a health assessment of the midwife if they chose to renew registration.

The midwife did not renew registration and became unregistered.

#### Impersonating a medical practitioner

The National Board received a notification of an enrolled nurse's behaviour that constituted professional misconduct. The enrolled nurse had impersonated a medical practitioner to procure medication and medical devices under false pretences.

The enrolled nurse also failed to undertake a scheduled health assessment.

The National Board determined that the enrolled nurse's conduct was substantially below the standard reasonably expected of a person of an equivalent level of training or experience, and referred the matter for a tribunal hearing.

The tribunal determined that the enrolled nurse had behaved in a way that constituted professional misconduct under the National Law and ordered that their registration is cancelled and disqualified the enrolled nurse from applying for registration as a registered health professional for four years.

#### From the Victorian Coroner

The Victorian Coroner has written to AHPRA and the NMBA asking that we highlight the dangers associated with the blurring of professional boundaries and the potential loss of objectivity inherent in treating friends and colleagues. The Coroner stated that 'health professionals treated in settings where they are well known should be treated the same as any other patient. They should be advised to submit to standard treatment guidelines for that institution and assumptions should not be made about their state of knowledge'.

The NMBA has issued guidance in the following documents for nurses and midwives to manage professional boundaries between themselves and the person to whom care is being provided:

- the [Code of professional conduct for midwives](#) and the [Code of professional conduct for nurses](#) (see Conduct Statement 8 in both documents), and
- [A midwife's guide to professional boundaries](#) and [A nurse's guide to professional boundaries](#).

The codes of conduct and the professional boundaries documents are available on the NMBA website under [Codes, guidelines and statements](#).

## Consultations update

The NMBA has had a busy year developing registration standards, codes and guidelines for nurses and midwives. The common registration standards for criminal history, continuing professional development, professional indemnity insurance, English language and recency of practice have now been finalised and are being submitted to health ministers for consideration.

We have two [open public consultations](#) which close on 19 December 2014:

- Endorsement as a nurse practitioner registration standard and associated guidelines
- Registration standard on endorsement for scheduled medicines for eligible midwives

We are also in the final stages of drafting the public consultation report for the enrolled nurse standards for practice, and this will be reviewed by the NMBA in the coming months. The registered nurse standards for practice are in development, with the observation phase nearly complete and the first drafts of these are expected in early 2015 for consultation.

## Have your say

### NMBA review brand identity

We are currently undertaking a comprehensive review of the understanding and recognition of the NMBA brand and identity. As part of this review, we will be conducting an online survey in January 2015 to get a better understanding of the NMBA's role as seen by its major stakeholders including nurses, midwives and consumers in general.

PricewaterhouseCoopers, in collaboration with independent market research company Colmar Brunton, will be conducting this survey on our behalf.

Please [register your interest](#) in the survey; you will receive an email with a link to the survey in the new year.

For more information please contact Mark Baker at [mark.baker@colmarbrunton.com](mailto:mark.baker@colmarbrunton.com) or (07) 3026 3014.

### NMBA focus groups on services for nurses and midwives with a health impairment

The NMBA, together with AHPRA, is currently exploring the role of the regulator in the referral, treatment and rehabilitation of nurses and midwives with a health impairment.

In February 2015, ACIL Allen Consulting (on behalf of the NMBA and AHPRA) will hold focus groups in Sydney and Adelaide to get your feedback on this important issue.

Please register your interest to participate in these focus groups by sending an email, (indicating your preferred location), to [focusgroup@acilallen.com.au](mailto:focusgroup@acilallen.com.au). There may be an opportunity to participate via teleconference. Please also indicate if this is a preference.

## National Scheme news

### 2013/14 National Scheme annual report

AHPRA and the National Boards have released their 2013/14 [annual report](#) on the National Scheme, providing a comprehensive record of the operations of the National Scheme for the 12 months ending 30 June 2014.

The annual report provides a national snapshot of the work and finances of the National Scheme and is tabled in the parliaments of each state and territory and the Commonwealth. The 2014 annual report is an important reporting milestone and covers the lead-up to the scheduled independent three-year review of the National Scheme, now underway.

This year, for the first time, AHPRA and the National Boards have also [published summaries](#) of our work regulating health practitioners in every state and territory.

The National Board has also published, for the first time, a report titled [Nursing and midwifery regulation at work in Australia 2013/14](#), which outlines its work in regulating nurses and midwives in the National Scheme. The report provides a profession-specific view of the NMBA's work to manage risk to the public and regulate nurses and midwives in the public interest. It is a profile of regulation at work in Australia for the 12 months ending 30 June 2014.

### Snapshot of the profession

The data below are drawn from data published in the report [Nursing and midwifery regulation at work in Australia 2013/14](#), as at 30 June 2014.

- 362,450 registered nurses and midwives in Australia
- 7% increase in the number of registered nurses and 1% increase in the number of enrolled nurses
- 32.7% increase in the number of registered midwives
- 42% increase in the number of nurse practitioners

For more information, please read the [media release](#) on the AHPRA website.

### Three-year review of the National Scheme

We told you about the three-year review of the National Scheme in our [July 2014 newsletter](#). The team undertaking the review released a consultation paper in September 2014, to seek feedback on a number of areas.

The terms of reference for the review are published at the [Australian Health Ministers' Advisory Council website](#) under 'media releases' on the right-hand tab. The review – led by independent reviewer, Mr Kim Snowball – was built into the intergovernmental agreement that set up the framework and governance arrangements for the National Scheme. The agreement stated that the Australian Health Workforce Ministerial Council (Ministerial Council) would initiate an independent review after three years of the National Scheme's operation.

It identified three main areas of the review:

- accountability – looking at options for how the National Scheme can improve its accountability, both at a national level and to each state and territory health minister
- future of regulation – looking at options for balancing questions of risk, the level of regulation and costs across the needs of a range of health professions, including any new professions entering the National Scheme, and
- complaints and notifications – looking at options for improving the management of notifications and complaints. This includes the option of continuing to improve the current arrangements under the National Law.

The paper also identified a number of related issues for comment including workforce reform, advertising provisions, assessment of overseas trained practitioners and legislative amendments.

The consultation period, which included stakeholder forums, has now been finalised and the report to governments is being progressed.

The review team expects to make its recommendations early in 2015, which will then be subject to final decisions by all health ministers.

The National Boards and AHPRA are actively participating in the review process.

### Regulatory principles for National Scheme

The National Boards and AHPRA have launched refreshed regulatory principles that will underpin the work of the National Boards and AHPRA in regulating Australia's health professionals in the public interest.

The principles are endorsed by all National Boards and the AHPRA Agency Management Committee and will guide Boards and AHPRA when they are making decisions. The principles encourage a responsive, risk-based approach to regulation across all professions within the National Scheme.

Regulatory decision-making is complex and contextual, requiring judgement, experience and common sense. The principles will further support consistent, balanced decision-making.

AHPRA and the National Boards will be seeking feedback on the principles in a formal consultation and will review them based on this feedback and 12 months' experience.

You can read the regulatory principles in a [media release](#) on the AHPRA website.

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## Keep in touch with the Board

- Visit the [Board website](#) for registration standards, codes, guidelines and FAQ.
- Lodge an [online enquiry form](#).
- For registration enquiries, call 1300 419 495 (from within Australia) or +61 3 8708 9001 (for overseas callers).
- Address mail correspondence to: Dr Lynette Cusack RN, Chair, Nursing and Midwifery Board of Australia, GPO Box 9958, Melbourne, VIC 3001.

