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Message from the Chair

On behalf of the Nursing and Midwifery Board of Australia (NMBA/National Board), I am delighted with the progress we have made towards establishing and improving the requirements of the National Scheme, as detailed in the 2013/14 annual report. The profession-specific profile Nursing and midwifery regulation at work in Australia, 2013/14 outlines NMBA’s achievements, challenges and priorities.

Last year I reinforced my commitment to strengthening the relationships between the NMBA and our stakeholders. I would like to encourage nurses, midwives and members of the community to participate in nursing and midwifery regulation, education and workforce matters through our consultations, forums and surveys.

On behalf of the NMBA, I am grateful for your contribution to our regulatory work in 2014. I hope this brand new year brings with it significant insights to help us all achieve the National Scheme objectives of protecting the public, high quality education and training, access to health services, assessment of overseas-trained health professionals, and a flexible, responsive and sustainable workforce.

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

Registration

Renew your registration

The NMBA is launching its 2015 renewal campaign this March. During the last renewal period (by 31 May 2014), 97% of nurses and midwives renewed online. The change over the last four years has been remarkable; when we started the renewal process in 2010, the online renewal rate for nursing and midwifery was closer to 54%.

If you are a registered nurse, an enrolled nurse, a midwife or a nurse practitioner, look out for renewal reminders from the Australian Health Practitioner Regulation Agency (AHPRA). A series of email reminders will be sent to your email address throughout the renewal campaign. Make sure that your email contact details as held by AHPRA are up to date so you don’t miss them.

If you do not renew your registration by 31 May, or within the following one-month late period, your registration will lapse. Your name will be removed from the national register of nurses and midwives and you will not be able to practise without making a new application for registration.

To update your contact details use AHPRA’s secure online services for health practitioners.
Note

We are making changes to our websites to make sure that your information is kept safe.

In the coming weeks, anyone using Internet Explorer version 6 (or an older version) to view our website is likely to experience difficulty accessing our web pages and our online services.

To avoid an interruption to service, we recommend you upgrade to the newest version of Internet Explorer immediately. It is available free from Microsoft.

If you are using a new version of Internet Explorer and are still having difficulty accessing our site please contact us to report your experience. You can:

• submit a general enquiry on our web enquiry form, OR
• call 1300 419 495 Monday to Friday, 9:00am–5:00pm (local time, within Australia only).

We have reduced your registration fees!

Starting this year, we have reduced your national registration fee to $150 for general registrants, including those whose principal place of practice is NSW.

The NMBA announced the $10 fee reduction in September last year, which will apply to this registration renewal period for nurses and midwives (due by 31 May 2015).

‘I am pleased that we are able to lower the registration fees while continuing to fulfil our role as regulator for the nursing and midwifery professions,’ said NMBA Chair Dr Lynette Cusack, RN.

‘After almost four years’ experience in the National Scheme, the NMBA was able to reduce the fee by $10, and remain confident that its future work in protecting the public would not be negatively impacted.

‘The fee reduction is consistent with our commitment to nurses and midwives to maintain fees at a reasonable level, while still fulfilling regulatory obligations’ said Dr Cusack

Registrants who hold both nursing and midwifery registration will continue to only pay one registration fee.

To find out more, read the media release on the NMBA website.

Meeting registration requirements

We remind you to carefully read the NMBA’s requirements for registration renewal. Make sure you understand the declarations you must make regarding mandatory registration standards.

Starting this year, there will be a new declaration for privately practising midwives (PPM). Under the National Law1, PPMs are exempt from professional indemnity insurance requirements; therefore it is important that the NMBA is aware of any PPMs claiming this exemption.

Giving false or misleading information is grounds for the National Board to refuse registration.

NMBA’s registration standards are published on our website.

Non-practising registration

Categories of registration available to nurses and midwives who apply to the NMBA to be registered are outlined in schedule of fees on our website. These registration categories include general registration, student registration and non-practising registration.

You can apply for non-practising registration if you have chosen to stop all nursing and/or midwifery practice activities but wish – for personal rather than professional reasons – to retain a protected nursing and/or midwifery title.

More information on non-practising registration is available on the NMBA website.

Enrolled nurse re-entry to practice

Enrolled nurses who have not completed an NMBA-approved medication administration program have a notation on their registration reflecting that they are not able to administer medications.

If you are an enrolled nurse with this notation on your registration who has taken a break from practice you may also be required to complete an NMBA-approved re-entry to practice program.

To have the notation removed from your registration you will need to successfully complete an NMBA-approved medication administration program as re-entry to practice programs do not include the medication administration program.

Information about NMBA-approved medication administration programs is available on the NMBA website.

Specialist recognition and the nursing profession

On transition to the National Scheme, the NMBA considered how best to approach the recognition of nursing specialties. The NMBA made a commitment to review this matter in 2013–14.

We have completed an exploratory study to inform the NMBA in relation to the possible need for and value of regulating all health professional specialties for the purpose of registration.

The following document is now available on the NMBA website:

• Position statement – Specialist recognition and the nursing profession

Context of practice for registered nurses and midwives, plus other new and revised documents published

The NMBA has conducted a review and analysis of its suite of documents to ensure consistency across the national policies, guidelines, standards, codes and position statements. The review identified a number of documents that required revision and made a number of recommendations to improve the information and how we display it on our web page.

Based on this review, a new suite of updated and streamlined NMBA documents including guidelines, policies, position statements, fact sheets and frameworks is being finalised.

We now have the following documents available:

1 Health Practitioner Regulation National Law, as in force in each state and territory.
Revised documents

- Fact sheet – The context of practice for registered nurses and midwives
- Fact sheet – The use of health practitioner protected titles

New document

- Position statement – The role of nurses and midwives in a national emergency

More documents will be added to the NMBA website in the coming weeks.

NMBA quarterly registration statistics

Registered workforce at a glance

The December 2014 NMBA registration statistics show that there are 361,711 enrolled nurses, registered nurses and midwives registered with the NMBA.

Table – Snapshot of registered workforce: December 2014

The following table shows totals for practising registration:

<table>
<thead>
<tr>
<th></th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP*</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled nurse (EN)</td>
<td>678</td>
<td>13,179</td>
<td>395</td>
<td>11,588</td>
<td>7,695</td>
<td>1,422</td>
<td>19,766</td>
<td>5,169</td>
<td>62</td>
<td>59,954</td>
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<tr>
<td>Registered nurse (RN)</td>
<td>4,255</td>
<td>74,245</td>
<td>3,178</td>
<td>49,519</td>
<td>21,644</td>
<td>6,325</td>
<td>64,562</td>
<td>27,746</td>
<td>8,020</td>
<td>259,494</td>
</tr>
<tr>
<td>EN &amp; RN</td>
<td>46</td>
<td>895</td>
<td>43</td>
<td>902</td>
<td>563</td>
<td>40</td>
<td>1,782</td>
<td>437</td>
<td>16</td>
<td>4,724</td>
</tr>
<tr>
<td>Midwife</td>
<td>91</td>
<td>739</td>
<td>56</td>
<td>584</td>
<td>456</td>
<td>15</td>
<td>985</td>
<td>325</td>
<td>85</td>
<td>3,336</td>
</tr>
<tr>
<td>Nurse (EN &amp; RN) &amp; midwife</td>
<td>566</td>
<td>8,796</td>
<td>516</td>
<td>6,011</td>
<td>2,167</td>
<td>635</td>
<td>7,747</td>
<td>2,957</td>
<td>229</td>
<td>29,620</td>
</tr>
<tr>
<td>Total</td>
<td>5,636</td>
<td>97,854</td>
<td>4,188</td>
<td>68,604</td>
<td>32,525</td>
<td>8,437</td>
<td>94,842</td>
<td>36,634</td>
<td>8,408</td>
<td>357,128</td>
</tr>
</tbody>
</table>

The following table shows totals for non-practising registration:

<table>
<thead>
<tr>
<th></th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>No PPP*</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled nurse (EN)</td>
<td>13</td>
<td>298</td>
<td>8</td>
<td>123</td>
<td>85</td>
<td>15</td>
<td>197</td>
<td>54</td>
<td>8</td>
<td>801</td>
</tr>
<tr>
<td>Registered nurse (RN)</td>
<td>57</td>
<td>1,339</td>
<td>25</td>
<td>429</td>
<td>226</td>
<td>74</td>
<td>541</td>
<td>233</td>
<td>218</td>
<td>3,142</td>
</tr>
<tr>
<td>EN &amp; RN</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Midwife</td>
<td>17</td>
<td>6</td>
<td>8</td>
<td>1</td>
<td>15</td>
<td>3</td>
<td>5</td>
<td></td>
<td>55</td>
<td>55</td>
</tr>
<tr>
<td>Nurse (EN &amp; RN) &amp; midwife</td>
<td>11</td>
<td>321</td>
<td>4</td>
<td>72</td>
<td>22</td>
<td>8</td>
<td>78</td>
<td>40</td>
<td>23</td>
<td>579</td>
</tr>
<tr>
<td>Total</td>
<td>82</td>
<td>1,977</td>
<td>37</td>
<td>631</td>
<td>342</td>
<td>98</td>
<td>832</td>
<td>330</td>
<td>254</td>
<td>4,583</td>
</tr>
</tbody>
</table>

2 The NMBA currently recognises four registration types:
- general registration
- limited registration
- non-practising registration, and
- student registration.

The nursing and midwifery registrants comprise:

- 262,636 registered nurses
- 60,755 enrolled nurses
- 4,730 registered as both a registered nurse and enrolled nurse
- 3,391 midwives, and
- 30,199 people registered as both a midwife and either a registered nurse and/or an enrolled nurse.

Of these registered health professionals, 4,583 hold non-practising registration. Registrants with this type of registration can continue to retain their nursing or midwifery title without practising their profession during the registration period.

Find more on registration data for nurses and midwives in the About section of the NMBA’s website.

Notifications case studies

Competition to practise

A senior staff member in a hospital reported to the NMBA about a midwife’s performance, stating concerns that the midwife was not competent. Concerns related to the midwife’s performance and clinical progress, where the midwife had failed a workplace competency assessment.
The midwife indicated to the NMBA that her performance may have been affected by anxiety as a result of work duties and the additional scrutiny of her performance as well as personal health issues.

The NMBA requested a health assessment to determine if there was an underlying health problem. The report showed that, with the right support, the midwife was able to work full time and that any health issues were not of such severity to prevent the midwife from practising safely.

The NMBA imposed a number of conditions, including supervised practice, support in the form of mentoring and a requirement for regular health checks to monitor the midwife’s health.

**Patient details on social media**

The NMBA received an anonymous complaint about a registered nurse working in a small community, who was posting pictures of treated patients on social media. While the patients were unnamed, the size of the community made them easily identifiable.

The nurse admitted posting pictures and comments on social media but with patient consent. The social media page was also not available to the public due to privacy settings. On investigation, the NMBA was able to access a patient’s photo and medical details.

The NMBA gave the nurse a caution for breaching the code of professional conduct for nurses.

The NMBA takes this opportunity to remind nurses and midwives to maintain online professionalism at all times. Our website contains useful resources for reference:

- NMBA social media policy
- Code of professional conduct for nurses
- Code of professional conduct for midwives.

**Consultations update**

**Review of the Endorsement as a nurse practitioner registration standard**

In addition to the above standards the NMBA also conducted a review of the Endorsement as a nurse practitioner registration standard in 2014. The public consultation concluded on 19 December 2014. The NMBA is collating feedback received and will publish it in coming weeks on our Past consultations page.

The NMBA will analyse the submissions received and recommend a final version of the standard to the Australian health ministers for approval.

More information on the Endorsement as a nurse practitioner registration standard is available on our website.

**Safety and quality guidelines for privately practising midwives**

The NMBA is continuing to its review its Safety and quality guidelines (SQG) for midwives, which was formerly known as the Safety and quality framework for privately practising midwives attending homebirths.

We consulted publicly on the SQG from April to June last year and the feedback will be published on our Past consultations page in the coming weeks.

Based on the analysis of the submissions received the NMBA is considering a number of changes to the SQG. We will communicate with you when the final version of the SQG for PPMs has been approved and is ready for implementation.

More information on the Safety and quality framework for privately practising midwives attending homebirths is available on our website.

**Have your say with NMBA**

**Thank you!**

We would like to say thank you to all those who participated in the two surveys we conducted in February. Your participation will assist us in making decisions on these important issues:

- issues affecting management and support for health impaired nurses and midwives, and
- NMBA brand and identity.

One of our main priorities for 2014–15 is to strengthen relationships between the NMBA and our stakeholders. The NMBA encourages all nurses, midwives and students to stay abreast of our upcoming initiatives and to continue engaging in our future surveys.

**NMBA stakeholder forums**

Last year, the NMBA held a number of stakeholder forums in Sydney, Darwin, Melbourne and Adelaide. Participants included nursing and midwifery professional associations, government representatives, health service providers and education providers.
These forums were an opportunity for the NMBA to talk to stakeholders about:

- the role of the NMBA as the regulator of nurses and midwives in Australia
- its strategic directions, and
- the work of national committees for policy, accreditation, finance and governance.

The forums also provided local stakeholders an opportunity to ask questions and discuss the NMBA’s role and work in regulating nurses, midwives and students.

As well as NMBA members presenting, local AHPRA representatives were in attendance to address operational matters that arose.

Participant feedback was positive overall, and confirmed that the forum provided networking opportunities, with good participation and interaction.

The NMBA will hold more stakeholder forums in the states and territories throughout 2015.

**National Scheme news**

**New approach to international criminal history checks**

As of 4 February 2015, a new procedure for checking international criminal history has taken effect that provides greater public protection.

This approach requires certain applicants and practitioners to apply for an international criminal history check from an AHPRA approved supplier and was first announced in November last year. The supplier will provide the international criminal history check report to the applicant and directly to AHPRA.

AHPRA CEO Martin Fletcher said, ‘Public protection is at the heart of everything we do. We are providing the Australian community with greater assurance by implementing additional safeguards in managing risks to the public from someone’s international criminal history. The new approach aligns our international criminal history checks with our domestic history checks and aims to be fair and reasonable for practitioners.’

Under the National Law, National Boards must consider the criminal history of an applicant who applies for registration.

The NMBA will hold more stakeholder forums in the states and territories throughout 2015.

**The National Boards and AHPRA strengthen national drug screening**

Mandatory hair testing will be routine for all registered health practitioners with substance-related impairment, under a screening protocol to be introduced AHPRA and all of the National Boards.

Under the protocol, all health practitioners who have restrictions on their registration linked to past substance abuse will have routine hair testing in addition to urine testing.

Routine hair testing helps provide comprehensive information about the use – over time – of a wide range of drugs (not just based on the practitioner’s drug-taking history).

The protocol provides a clear framework across all of the professions for AHPRA’s advice to National Boards, including the NMBA, about the management of registered practitioners with drug-related impairment. It will make sure drug screening in the National Scheme is evidence based, effective and up to date.

The NMBA will continue to make decisions about individual practitioners with impairment case by case, based on testing standards set out in the protocol. More information is available on the NMBA website.

**Security tip – keep your web browser updated**

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To avoid an interruption to service, we recommend you upgrade to the newest version of Internet Explorer immediately. It is available for free from Microsoft.

If you are using Internet Explorer 6 we recommend you read our latest security announcement.

If you are using a new version of Internet Explorer and are still having difficulty accessing our site please contact us to report your experience. You can:

- submit a general enquiry on our web enquiry form, OR
- call 1300 419 495 Monday to Friday, 9:00am–5:00pm (local time, within Australia only).

**Are you using Internet Explorer 6?**

**Upgrade now**

The National Law defines criminal history as:

1. every conviction of the person for an offence, in a participating jurisdiction or elsewhere, and whether before or after the commencement of this Law;
2. 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;
3. 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.
External surveys

National new graduate nursing and midwifery retention*

Hunter New England Nursing and Midwifery Research Centre is conducting a survey aimed at getting a comprehensive understanding of the new graduate experience during their first year of clinical practice. The results of this survey will be used to improve the first-year experience for newly graduated nurses and midwives. We welcome your input as registered nurses and midwives.

Nurses and midwives graduating in 2012–2014 are invited to complete the survey by using the link www.surveymonkey.com/s/NationalNewGradSurvey.

Overseas qualified nurses from non-English speaking backgrounds*

The University of South Australia is conducting a study focusing on challenges experienced by overseas qualified nurses from non-English speaking backgrounds over the adjustment period in the Australian healthcare system. It also takes a look at consequences resulting from transition and services provided for these nurses.

Overseas qualified nurses from non-English speaking background countries are invited to complete the survey by using the link www.surveymonkey.com/s/VJTHNYF.

The findings of this research will advocate for change to improve transition and integration of overseas qualified nurses into the Australian healthcare system.

* The links to the surveys set out above are to websites operated by a third party. Neither the NMBA nor AHPRA controls these websites or is responsible for their content.

Keep in touch with the NMBA

- Visit the [NMBA website](http://www.nmbaonline.com.au) for registration standards, codes, guidelines and FAQ. Please make sure you are using the most up-to-date browser version when viewing the NMBA website.
- 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.