Presiding Member’s message

This is our first newsletter for 2014 and we are delighted to announce a significant milestone: December statistics of the registered workforce shows we have reached just over 1,000 nurse practitioners registered with the National Board to practise in Australia. Nurse practitioners were established in Australia in the late 1990s after many years of very hard work by regulators and policy makers across the country. New South Wales was the first state to endorse nurse practitioners, and Professor Mary Chiarella – a current National Board member – was one of the people who set up the framework for regulation of nurse practitioners. Nurse practitioners play a critical role in healthcare in Australia today. They provide services to consumers in a wide range of areas from emergency departments to aged care settings. Find out more on statistics under Registered workforce at a glance in this issue.

Internationally qualified nurses and midwives

This February we introduced a new model for assessing qualifications of international nurses and midwives. One of our roles as a National Board is to make sure the public is safe. The new model will help us decide if an international applicant has a qualification that matches the standard of a current graduate of an Australian program of study. Details about this model are published in this newsletter.
(National Scheme) by making sure there is a common understanding about midwifery practice, and

- improve and foster understanding between the NMBA and midwives regarding midwifery, regulatory, professional and workforce issues.

The key themes from the workshop have been synthesised and will inform the National Board direction regarding the regulation of midwives.

**Professional indemnity insurance for privately practising midwives**

In December 2013 we released a report and statement on the Board-funded research that investigated professional indemnity insurance (PII) for privately practising midwives. We encourage everyone to read this report and the National Board’s commentary on the recommendations, and to consider opportunities that progress this important issue. Find out more on PII in this newsletter.

**Eligible midwife registration standards and guidelines: review**

We are funding a project to review the following existing standards and guidelines:

- Eligible midwife registration standard
- Registration standard for endorsement of scheduled medicines for eligible midwives, and
- associated guidelines and framework.

This project will include a series of focus groups nationwide in March 2014. Dates and locations of these focus groups are available on our website. We value and welcome your input.

On behalf of the National Board, I encourage all nurses, midwives and students to stay abreast of the changes that are happening, and to engage in our public consultations on new and revised registration standards, codes or guidelines by regularly visiting our website.

Dr Lynette Cusack RN
Presiding Member, Nursing and Midwifery Board of Australia

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**Registration**

**Renewal campaign launching in March**

The National Board is launching its 2014 renewal campaign this March.

More than 350,000 nurses and/or midwives with general or non-practising registration are due to renew their registration with the National Board by 31 May.

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) starting around mid-March.

When applying to renew your registration you are required to supply your residential address. This information is not shown on the national register.

AHPRA, on behalf of the National Board, needs your residential address to help in processing criminal history checks and so that AHPRA is able to contact you, particularly if you are randomly selected for an audit.

A series of email reminders will also 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 the reminders.

**To update your contact details**

Use AHPRA’s secure online services for health practitioners at [www.ahpra.gov.au](http://www.ahpra.gov.au):

- go to the bottom of the home page
- click on Update contact details under Services for Practitioners
- use your user ID and secure password, and
- follow the prompts.

If you’ve forgotten your password it can be updated using the password reset function. You must have previously had an email address registered with AHPRA to be able to use this function.

**Meeting registration requirements**

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

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

National Board registration standards are published on our website.

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.

Last year, 95 per cent of nurses and midwives renewed their registration online and on time. This was a six per cent increase in the online renewal rate for 2012.

**Professional indemnity insurance for privately practising midwives**

In December 2013 we released a report and statement on the Board-funded research that investigated professional indemnity insurance (PII) for privately practising midwives. Many of you already know that PII products are not
currently available in Australia for intrapartum care provided by midwives in private practice who attend homebirths.

We would like to see insurance cover accessible to all midwives practising in any setting. Addressing the gap in cover for privately practising midwives will address the needs of the woman and her infant(s), as well as those of the midwife.

Any strategy to address this, including issues highlighted in the report – such as scope of practice, safety and quality frameworks, collaboration and clinical privilege – will lead to greater choice, better continuity of midwifery care, larger understanding of the practice of a privately practising midwife and, in due course, improved collaboration among maternity services providers and maternity services.

We encourage everyone to read this report and the National Board’s commentary on the recommendations, and to consider opportunities that progress this important issue. The media release is available on our website under News>media releases.

Internationally qualified nurses and midwives

The National Board has published a new model for assessing the qualifications of international nurses and midwives, to make sure they are substantially equivalent to Board-approved Australian nursing and midwifery qualifications.

The new model is consistent with the requirements of the National Law. It applies a set of clear educational standards all international applicants for registration need to meet, regardless of where they undertook study. This model comes after:

- three years’ experience with the National Scheme and applying the National Law
- continuing evidence-based research on international best practice in assessing the qualifications of internationally qualified nurses and midwives, and
- reviewing decisions from Australian tribunals.

Recognising that assessment and comparison of international qualifications continues to evolve internationally, the National Board will continue to benchmark its assessment model with international trends.

Visit Internationally qualified nurses and midwives under Registration and endorsement on the National Board website for more information.

The National Board has also published a related media release.

Registered workforce at a glance

The National Board reached a milestone this year with the latest registration report showing 1,000 nurse practitioners registered to practise in Australia.

There are 354,399 enrolled nurses, registered nurses and midwives registered with the National Board, according to the December 2013 National Board statistics.

Table – Snapshot of registered workforce: December 2013

The following table shows totals for practising registration:

<table>
<thead>
<tr>
<th>Totals for practising nurse and midwife</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>691</td>
<td>13,146</td>
<td>415</td>
<td>11,121</td>
<td>7,749</td>
<td>1,356</td>
<td>19,661</td>
<td>5,105</td>
<td>47</td>
<td>59,291</td>
</tr>
<tr>
<td>Registered Nurse (RN)</td>
<td>4,206</td>
<td>71,879</td>
<td>3,072</td>
<td>48,590</td>
<td>21,202</td>
<td>6,249</td>
<td>63,581</td>
<td>27,608</td>
<td>6,481</td>
<td>252,868</td>
</tr>
<tr>
<td>EN &amp; RN</td>
<td>43</td>
<td>852</td>
<td>35</td>
<td>855</td>
<td>474</td>
<td>40</td>
<td>1,541</td>
<td>379</td>
<td>6</td>
<td>4,225</td>
</tr>
<tr>
<td>Midwife</td>
<td>74</td>
<td>614</td>
<td>53</td>
<td>505</td>
<td>400</td>
<td>13</td>
<td>890</td>
<td>306</td>
<td>63</td>
<td>2,918</td>
</tr>
<tr>
<td>Nurse (EN &amp; RN) &amp; Midwife</td>
<td>573</td>
<td>8,769</td>
<td>533</td>
<td>6,192</td>
<td>2,234</td>
<td>633</td>
<td>7,863</td>
<td>2,997</td>
<td>200</td>
<td>29,994</td>
</tr>
<tr>
<td>Total practising</td>
<td>349,296</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

The following table shows total for non-practising registration:

<table>
<thead>
<tr>
<th>Totals for non-practising nurse and midwife</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>293</td>
<td>4</td>
<td>107</td>
<td>57</td>
<td>16</td>
<td>164</td>
<td>50</td>
<td>3</td>
<td>707</td>
</tr>
<tr>
<td>Registered Nurse (RN)</td>
<td>52</td>
<td>1,305</td>
<td>19</td>
<td>365</td>
<td>182</td>
<td>73</td>
<td>509</td>
<td>233</td>
<td>86</td>
<td>2,824</td>
</tr>
<tr>
<td>EN &amp; RN</td>
<td>1</td>
<td>1</td>
<td>-</td>
<td>3</td>
<td>-</td>
<td>-</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>7</td>
</tr>
<tr>
<td>Midwife</td>
<td>-</td>
<td>14</td>
<td>-</td>
<td>3</td>
<td>5</td>
<td>-</td>
<td>18</td>
<td>5</td>
<td>2</td>
<td>47</td>
</tr>
<tr>
<td>Nurse (EN &amp; RN) &amp; Midwife</td>
<td>24</td>
<td>951</td>
<td>9</td>
<td>150</td>
<td>49</td>
<td>24</td>
<td>209</td>
<td>83</td>
<td>19</td>
<td>1,518</td>
</tr>
<tr>
<td>Total practising</td>
<td>5,103</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
The National Board currently recognises four registration types:

- general registration
- limited registration
- non-practising registration, and
- student registration.

Of these registered health professionals, 5,103 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.

The statistical breakdown within the quarterly registration data shows registrants by state and territory, their age and gender by registration type, and endorsement and notations by state and territory.

The nursing and midwifery registrants comprise:

- 252,868 registered nurses
- 59,291 enrolled nurses
- 4,225 registered as both a registered nurse and enrolled nurse
- 2,918 midwives, and
- 29,994 people registered as both a midwife and either a registered nurse and/or an enrolled nurse.

Providing data that accurately reflects the number of registered nurses and midwives is one of the important benefits of the National Scheme. It has enormous value for nursing and midwifery workforce planning and helps improve access to health services.

Before the advent of the National Scheme, this data could not easily be collated and reported.

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

**Supplementary news**

**Approved programs of study: update**

We are pleased to announce changes to the way we present information about approved programs of study leading to registration, endorsement and notation as a nurse or a midwife, as published on our website.

The online search is now refined so that lists are broken down to specifics by nursing and midwifery profession.

Visit the National Board Approved programs of study page for more information.

**Revised guidelines and policy for nurses and midwives**

This February 2014 the National Board released a suite of documents that will come into effect from mid-March 2014. The documents contain important information for the nursing and midwifery professions and are the:

- revised Guidelines for advertising regulated health services
- revised Guidelines for mandatory notifications, and
- new Social media policy

The National Board, along with other National Boards, consulted widely last year on draft versions, and continues to consult on other important documents. We value your feedback so please regularly check out the Current consultations page on our website.

Much work has gone into making sure the format and language used in these documents meet plain language requirements, to make the content easier to understand. For the right design choice, a series of focus groups in December 2013 also helped test the way the documents are presented.

The policy and guidelines are common across all National Boards and apply to all registered health practitioners.

An FAQ on the transition to the new guidance, as well as documents showing the difference between the current and new Mandatory notifications guidelines and shared Code of conduct, have also been published – see the media release.

The guidelines and Social media policy come into effect from mid-March 2014.

**The regulator, professional association, industrial organisation and accreditation authority**

Based on feedback about our previous newsletters, it appears that some readers are not always clear about our role as the regulator of nurses and midwives. The following table distinguishes the National Board as a regulator of nursing and midwifery from professional/industrial associations or organisations for nursing and midwifery professions, and accreditation authorities.

- Professional associations or organisations include the Australian College of Nursing, Australian College of Midwives, Midwives Australia, The College of Nurse Practitioners and College of Mental Health Nursing, to name a few. These organisations generally participate in a range of areas related to nursing and midwifery, including practice, professionalism, education and continuing professional development as well as membership benefits specific to the organisation.
**Industrial organisations include the Australian Nursing and Midwifery Federation (ANMF) and the Health and Community Services Union. These organisations generally focus on the industrial rights of nurses and midwives, including conditions of employment.**

**Accreditation authorities are responsible for accrediting education providers and programs of study. The Australian Nursing and Midwifery Accreditation Council (ANMAC) is the accreditation authority responsible for accrediting education providers and programs of study for the nursing and midwifery profession.**

<table>
<thead>
<tr>
<th>National Board</th>
<th>Professional association</th>
<th>Industrial organisation</th>
<th>Accreditation authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership</td>
<td>The National Board is a regulatory body established under legislation and funded by the registration fees that nurses and midwives annually pay. The National Board is not a membership organisation; rather, it is a national body responsible for keeping the public safe by regulating enrolled nurses, registered nurses, midwives and students of nursing and midwifery. In this context, we recognise you as a registrant, not a member.</td>
<td>The professional association is a membership organisation for members. Nurses and midwives would likely pay a membership fee to join as a member and have access to membership benefits.</td>
<td>ANMAC has accreditation committees that are vital to the accreditation process and governance structure. Visit the Accreditation committees page on the ANMAC website to find out more.</td>
</tr>
<tr>
<td>Delivery of Board-approved program of study</td>
<td>No, unless the professional association is accredited as an education provider for nursing and midwifery.</td>
<td>No, unless the industrial association is accredited as an education provider for nursing and midwifery.</td>
<td>No, the accreditation authority itself does not provide approved programs of study. However, it accredits individual education providers who decide each year whether to offer a Board-approved program of study. See Approved programs of study on the National Board website.</td>
</tr>
<tr>
<td>Consultation</td>
<td>Yes Consultation is an important part of the National Board’s engagement with nurses and midwives, members of the public and other stakeholders. We greatly value the feedback you provide and it helps inform our development of proposed regulatory matters. Preliminary consultation is to a small, targeted stakeholder group before public consultation, and it helps to road test the proposed content to identify any operational impacts, issues or concerns prior to the document’s release for public consultation. Public consultation is widely communicated in our communiqués, newsletters and website, and is open to anyone.</td>
<td>Yes, an industrial organisation may decide to consult with its members about related matters.</td>
<td>Yes ANMAC consults on the accreditation standards it has developed and goes into wide-ranging consultation on new or revised content. Visit the ANMAC standards review website for details on what is undergoing review.</td>
</tr>
</tbody>
</table>
Focus on policy, projects and initiatives

The National Board releases a Communiqué each month on its website to inform everyone of the decisions made at the monthly meeting of the National Board. You can also read media releases and past issues of this newsletter on our website.

Between December 2013 and February 2014, we released the following communications:

February 2014
- International qualified nurses and midwives, new assessment model. Includes the following web pages:
  - Criteria 1 - 8 for internationally qualified registered nurses
  - Criteria 1 - 8 for internationally qualified midwives
  - Criteria 1 - 8 for internationally qualified enrolled nurses (also known as second level, vocational or practical nurse), and
  - Professional experience requirements for a midwife.
  - FAQ: Internationally qualified nurses and midwives applications
- Quarterly registration data including information on types of registration held, principal place of practice, endorsements, registrant age and gender.

January 2014
- Registration and endorsement – supporting documentation – updated for currency
- Request for tender – National health impairment program: closed 14 February 2014

December 2013
- National Board and AHPRA 2013/14 health profession agreement
- Nurse practitioner requirements for portfolio – pathways 1 & 2 updated
- Research report on professional indemnity insurance for midwives, and National Board commentary on recommendations.

Approved programs of study: online search refined to professional specifics
- Focus groups on registration standard for eligible midwives
- Media release: Revised guidelines and new policy, effective March 2014:
  - revised Guidelines for advertising regulated health services
  - revised Guidelines for mandatory notifications, and
  - new Social media policy

Yes, a professional organisation may have policy or position statements that internally apply to its members.
Yes, an industrial organisation may have policy or position statements that internally apply to its members.
Yes ANMAC, for example, sets the national framework for accrediting nursing and midwifery courses that education providers must meet.

The National Board is committed to avoiding any increase in the registration fee that is more than the consumer price index (CPI) where possible.

The National Board regulates nurses and midwives in the interest of protecting the public.

Standards, codes and guidelines

Table

<table>
<thead>
<tr>
<th>National Board</th>
<th>Professional association</th>
<th>Industrial organisation</th>
<th>Accreditation authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fee</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>The registration fee for nurses and midwives is the only revenue received by the National Board to resource both the National Board’s and AHPRA’s functions as defined under the National Law. The National Board is committed to avoiding any increase in the registration fee that is more than the consumer price index (CPI) where possible.</td>
<td>Most professional organisations would have a periodic membership fee, with associated membership benefits.</td>
<td>ANMAC, for example, may charge education providers to assess programs of study. Fees vary depending on what you need to have accredited. Visit the Fee schedule page on the ANMAC page for more details.</td>
</tr>
<tr>
<td>Standards, codes and guidelines</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>One of the functions of the National Board is to develop standards, codes and guidelines that set the expectations of the professions and ensure that nurses and midwives are competent to practise. The National Board regulates nurses and midwives in the interest of protecting the public.</td>
<td>Yes, a professional organisation may have policy or position statements that internally apply to its members.</td>
<td>ANMAC, for example, sets the national framework for accrediting nursing and midwifery courses that education providers must meet.</td>
</tr>
</tbody>
</table>

The registration fee for nurses and midwives is the only revenue received by the National Board to resource both the National Board’s and AHPRA’s functions as defined under the National Law. The National Board is committed to avoiding any increase in the registration fee that is more than the consumer price index (CPI) where possible.