

A word from the Chair

In July, the Australian Health Workforce Ministerial Council announced changes to the membership of the 10 National Boards originally appointed in August 2009 for a three-year term.

Two new community members, Ms Allyson Warrington (Tasmania) and Mr Max Howard (Queensland), were appointed to the Nursing and Midwifery Board of Australia (the National Board) from 1 September 2012. These appointments replaced a community member, Ms Heather Sjoberg (Northern Territory), and an existing community member vacancy. The remaining community members and seven out of the eight health practitioner members were appointed for a further three-year term of office. Ms Anne Copeland, the National Board Chair and Queensland health practitioner member, was appointed to the National Board for a further 12 months.

Further details on these appointments have been published in the [July 2012 communiqué](#) of the Australian Health Workforce Ministerial Council.

In the interest of transparency and accountability, the National Board and the Australian Health Practitioner Regulation Agency (AHPRA) are increasing public access to financial information about the National Registration and Accreditation Scheme (the National Scheme). For the first time, the National Board has published on its website the [Health Profession Agreement](#) that outlines the services that AHPRA will provide to the National Board in 2012/13.

The National Board released new quarterly registration data in August 2012. Improvements have been made to the overall presentation of the statistical reporting, which details types of registration held by state and territory, endorsements by state and territory, registrant age and gender. Take a moment to visit the [National Board website](#) for further details on our quarterly registration data, a [snapshot](#) of which is included in this edition of the newsletter.

Over the past 12 months, the National Board has continued to work diligently to fulfil the objectives of the National Scheme and its Strategic Plan. During the year, the National Board participated in state, territory, national and international activities aimed at improving the regulation of nursing and midwifery professions, some of which are outlined in this edition of the e-newsletter. More information

is outlined in the upcoming 2011/2012 AHPRA Annual Report which will be formally released to the public in the near future.

The work of the National Board is ongoing and will continue to build on the efforts of the inaugural National Board members. I thank everyone who has contributed to the work and the achievements to date. On behalf of the National Board, I am grateful for the commitment shown and the willingness to protect the public by ensuring appropriate regulation is in place.

Anne Copeland
Chair, Nursing and Midwifery Board of Australia

Nursing and midwifery renewal: a record result

The 2012 nursing and midwifery renewal cycle has set a new record in health practitioner registration in Australia.

More than 333,000 nurses and midwives were due to renew their registration by 31 May – 100,000 more than were due to renew at the same time in 2011. The extra 100,000 over 12 months is explained by synchronised renewal dates and a small net increase in total registered nurse and midwife numbers.

This was the largest single renewal ever undertaken in Australia.

Ninety-three per cent of the nurses and midwives due to renew, did so on time – an impressive 94% of them online. This compared to 90% of nurses and midwives renewing on time in 2011, 85% online. This extra 9% in online renewals amounted to 30,000 fewer paper applications being assessed and processed by AHPRA.

The vast majority of nurses and midwives who applied to renew were granted registration and their details updated on the public register. In the small number of cases where practitioners lodged an application that required further assessment, they were able to keep practising while it was being assessed.

AHPRA's online services now give nurses and midwives the ability to 'opt out' of renewing their registration. This helps AHPRA and the National Board to better understand the number of nurses and midwives who have actively opted out of registration, compared to those who did not apply on time. Nurses or midwives who 'opt out' of renewing their registration or who allow it to lapse must submit a new application for registration with the National Board if they wish to practise again.

It is fantastic to see so many nurses and midwives heed the call to renew registration on time and online. We also benefitted from the support of key stakeholders including government departments, employers and professional



associations as part of our communications campaign. The results show the systematic benefits of national regulation in providing practitioners with a smooth and simple renewal experience.

We will carefully review the renewal campaign to identify areas for learning and future improvement. Any feedback or ideas are always welcome. **For further information, or to provide your feedback, please contact communications@ahpra.gov.au.**

National consistency in managing notifications

The National Board and AHPRA continue to put a big emphasis on implementing nationally consistent processes for managing notifications about practitioners' conduct, performance or health Australia-wide.

Under the National Registration and Accreditation Scheme (the National Scheme), AHPRA receives, assesses and investigates notifications on behalf of the National Board, which oversees this process. In NSW, which has a co-regulatory environment, this is done jointly through the Health Care Complaints Commission and the Nursing and Midwifery Council of NSW.

A recent program of work involving notifications staff across AHPRA has culminated in a comprehensive set of updated guidance and tools for managing notifications. The procedures bring greater clarity to our work in notifications and will support the continued application of nationally consistent processes in all our state and territory offices. These updated and expanded procedures were launched in February 2012. By the end of May, all staff working in notifications in every state and territory had received intensive training.

Implementing these national notifications procedures marks an important milestone in our ongoing journey to embed

national consistency. While every notification is unique, we want to ensure that the service we provide doesn't vary simply because of where practitioners live in Australia.

Building on this program of work, AHPRA is also improving its reporting capability, so we can better report data on the management and outcomes of notifications.

Snapshot of registered workforce

There are 343,703 nurses and midwives registered in Australia, according to new National Board statistics.

The National Board recently published the second of its quarterly updates on registration data, including a number of statistical breakdowns about registrants such as state/territory, age and gender by registration type. The published data report on the June 2012 quarter, which shows that the total workforce number comprises 302,245 registered and enrolled nurses, 2,187 midwives, and 39,271 people registered as both a nurses and midwife.

The figures also show the numbers of nurses, midwives, and people registered as a nurse and midwife who have had their additional qualifications and specific expertise identified with an endorsement of their registration. The National Board endorsements are: midwife practitioner; nurse practitioner; registered nurse - supply scheduled medicines (rural and isolated practice); and/or eligible midwife (prescribe scheduled medicines).

Providing data that accurately reflects the number of registered practitioners is one of the important benefits of the National Scheme. It has enormous value for workforce planning and helps improve access to health services. This data could not have been easily collated and reported before the advent of the National Scheme.

Find the statistics in the *About* section of the National Board's website www.nursingmidwiferyboard.gov.au

Snapshot of registered workforce: June 2012

		ACT	NSW	NT	QLD	SA	TAS	VIC	WA	NO PPP*	Grand Total
Nurse	Enrolled Nurse(EN)	646	13,784	387	10,820	6,092	1,281	20,057	5,059	2,357	60,483
	Registered Nurse(RN)	3,549	64,420	2,664	44,738	15,642	6,049	57,486	24,392	16,530	235,470
	RN&EN	29	941	49	687	343	36	1,434	354	78	3,942
	Non-practising RN	31	1,012	12	135	65	57	273	131	143	1,861
	Non-practising EN	10	245	1	28	25	19	98	34	24	484
	Non-practising EN&RN		2					3			5
Midwife	Registered Midwife (RM)	39	369	27	295	262	9	707	211	223	2,142
	Non-practising RM		28					12	2	3	45
Nurse & Midwife	Nurse & Midwife	638	12,646	545	7,182	1,908	692	10,106	3,237	1,354	38,308
	Midwife & Non-practising Nurse	3	134		13	3	2	13	6	6	180
	Nurse & Non-practising Midwife	9	543	4	40	19	12	105	24	27	783
GrandTotal		4,954	94,124	3,689	63,929	24,361	8,157	90,294	33,450	20,745	343,703

* Note: No principal place of practice (PPP) includes practitioners with an overseas address.

Research into English language skills testing

The National Boards have committed to reviewing their registration standards at least every three years, earlier if required. Registration standards define the requirements that applicants need to meet to be registered and that registrants need to comply with to maintain registration.

In response to stakeholder feedback on its *English language skills registration standard*, the National Board undertook an early review of the available evidence and feedback from extensive consultation with the professions and the community during late 2010 and 2011. The outcome was the development of a revised *English language skills registration standard* for nurses and midwives. This was implemented from 19 September 2011 after the Australian Health Workforce Ministerial Council (AHWMC) approved the revised standard recommended by the National Board.

By mid 2013, the National Scheme will be three years old, which has triggered a review of those standards that remain in place since the start of the scheme (1 July 2010). In preparation, National Boards and AHPRA have commissioned research on English language skills testing, including the scope of exemptions from testing requirements. This research will be considered by the National Board to determine whether there is a need for a further review of the *English language skills registration standard* in 2013. The National Boards will consult on any proposed changes to the English language skills registration standard in 2013.

Please note that the National Board's *English language skills registration standard* (effective from 19 September 2011) and the corresponding *Fact sheet and frequently asked questions* remain in place until further notice. Both documents are available on the National Board's website www.nursingmidwiferyboard.gov.au

Social media and the nurse and midwife

The National Boards have released a draft policy on social media for preliminary consultation. The draft policy, which has been agreed to by all National Boards, confirms that health practitioners must abide by the relevant laws, the relevant National Board's Code of conduct and Guidelines for the advertising of regulated health services when using social media.

In particular, registered health practitioners using social media should ensure that they only post or publish information that:

- does not breach professional obligations
- does not breach confidentiality and privacy obligations (such as discussing patients or posting

pictures of procedures, case studies, patients or sensitive material)

- is not biased and does not make unsubstantiated claims, and
- does not use testimonials or purported testimonials in any capacity on any medium.

Watch the website for the opening of the public consultation in October/November 2012. In the meantime, nurses and midwives can consult the National Board's Information sheet on social media, released in 2010 and published in the *Codes, Guidelines and Statements* section of the National Board's website. You can also read the National Board's statement on the preliminary consultation on social media in the *Latest news* on the website.

Consultations

International criminal history checks

The National Boards are working with AHPRA to consult on options for refining international criminal history checks used to assess applications for registration as a health practitioner in Australia.

Under the National Scheme, National Boards develop registration standards that every registered practitioner must meet, once they have been approved by the Australian Health Workforce Ministerial Council. One of these standards relates to criminal history, which is consistent across all national boards.

The current approach involves checking Australian criminal history through *CrimTrac* and requiring applicants to sign a declaration disclosing any criminal history outside Australia. When a criminal history is disclosed, further investigations are made and the criminal history is assessed according to the criminal history registration standard.

The National Boards must decide whether this approach is adequate or if they should increase the scrutiny of applicants' international criminal histories. In effect, the National Boards must balance their responsibility under the National Law to protect the public, with the need to ensure there is no unnecessary red tape in assessing and managing applications for registration as a health practitioner in Australia.

The options under consideration and background information in relation to international criminal history checks are detailed in a *consultation paper* published in the *News* section of the National Board's website www.nursingmidwiferyboard.gov.au. The consultation closed in August and the Board will keep the professions informed as a position develops.

Research study into midwife professional indemnity insurance arrangements

The National Board has sought suitably qualified and experienced parties to research professional indemnity insurance (PII) arrangements and claims in relation to midwifery and obstetric practices.

Under the National Registration and Accreditation Scheme, all health practitioners are required to have PII in accordance with their respective National Board's registration standard prior to being able to practise the profession.

The Nursing and Midwifery Board of Australia's *Professional indemnity insurance arrangements registration standard* came into effect on 10 January 2012 and sets out the requirements for PII for nurses and midwives in Australia. The National Board also developed *Guidelines for professional indemnity insurance arrangements for midwives*, which provide information to midwives on their responsibilities regarding indemnity insurance.

As part of the standard's development, the National Board considered the risks and benefits of setting a minimum amount of insurance cover for nurses and midwives. However, there was insufficient evidence available at the time for it to determine a quantum of cover.

This new research is another significant project for the National Board in this area. The research request for tender was advertised on 16 June 2012 and closed 30 July 2012. Related documents are available from the [News](#) section of the National Board's website.

Home births roundtable

The National Board is working with governments, insurers, professional and community groups to find a solution to the situation raised by the lack of commercial professional indemnity insurance (PII) for home births attended by privately practising midwives.

Under the Health Practitioner Regulation National Law (the National Law), registered nurses and midwives must not practise without appropriate PII arrangements. Due to the absence of a commercial PII product for home births, governments have agreed to an exemption from the National Law PII requirement for privately practising midwives until 1 July 2013.

The National Board recently participated in a stakeholder roundtable on PII for privately practicing midwives, hosted by the Australian Government Department of Health and Ageing. In its contributions to the roundtable discussions, the National Board detailed its initiatives in this area including the recent revision of its *Professional indemnity insurance arrangements registration standard* for Australian nurses and midwives, and the development of *Guidelines for professional indemnity insurance arrangements for midwives*. The National Board is also supporting research

into midwifery PII arrangements and claims (see previous article for more details), as well as developing a professional supervision model for midwives in private practice.

Australian health ministers discussed the current exemption and future PII requirements for homebirths when they met in April 2012 and agreed further discussion would be necessary when they meet again.

Regulation: International context

International nurse regulator collaborative meeting



**International Nurse Regulator Collaborative Meeting # 2
Geneva, Switzerland 15th May 2012**

Back row: Canada, NZ, Australia, Australia, Ireland, USA, Ireland
Front row: Ireland, Australia, USA

Members of the International Nurse Regulator Collaborative, including a representative from the National Board, met in Geneva in May to share knowledge and experience in regulating nursing internationally.

The group includes representatives from Australia, Canada, Ireland, New Zealand, USA, Singapore and United Kingdom.

The group discussed and compared the notifications data supplied by members for 2010/11. Australia did not contribute as that period coincides with the transition to the National Scheme.

Key points raised at the meeting included that:

- the notifications data shows that all member countries had a higher percentage of notifications relating to male nurses compared to the percentage of males in the profession
- all countries have an ageing workforce of nurses, except for Singapore
- nurses aged 40 and more have the greatest number of notifications
- all countries, except for Singapore, had around the same percentage of notifications
- most complaints received relating to social media involve younger nurses in the first year of practice who use mobile phone cameras and Facebook

inappropriately. A joint standard on social media may be developed, and

- a best regulatory model for illnesses of addiction was flagged as a potential future project.

The group agreed to investigate the data further and identify contributing factors and possible strategies for facilitating better outcomes.

Australia will chair the next meeting in May 2013 in Melbourne, to coincide with the International Council of Nurses Quadrennial Congress.

International nursing and midwifery meetings

Meetings hosted in Geneva in May by the International Council of Nurses (ICN) (a federation of 128 national associations) and the International Confederation of Midwives (ICM) (a confederation of 83 national associations) focused on the practice and regulation of nursing and midwifery.

The main purpose of the forum is to facilitate global networking and exchange information among regulators. Increasingly, issues affecting the regulation of professions tend to have implications beyond national borders and this is an opportunity for nursing and midwifery regulators to share information and ideas in order to shape and inform their professional regulation response.

A number of important points were raised at the meetings, including that:

- workforce shortage will be an issue at the same time across the world due to the concurrent aging across borders of nursing and midwifery workforces
- there are varying degrees of quality and length of secondary education prior to entry into a nursing program, which in turn affects the quality and educational standards of the different courses. Some standardisation of the educational level of secondary education would be an important but difficult to achieve goal. This was raised as an important issue for Europe and the Asian Pacific area
- a review of the Nursing and Midwifery Council (UK) has been undertaken and is available on the website of the Council Health Regulatory Excellence (<http://www.chre.org.uk/satellite/485>)
- serious concern was expressed by ICN that there is a diminishing presence of nursing representation and the voice of nurses at WHO policy forums which could result in no nursing representation in the foreseeable future at a time of significant change to health care delivery and health workforce reform
- non communicable diseases are a key global health issue. Nurses and midwives have a role at a range of levels to contribute to addressing these population health issues. There are no new issues identified in the discussion for regulation bodies such as the National Board, and
- questions were raised whether credentialing is still important in today's regulation environment.

Release of Board financial information

How the annual registration fees paid by nurses and midwives are used to benefit the community and the professions by supporting a robust regulatory system was made clearer with the recent release of additional National Board financial information.

The National Board responded recently to a Freedom of Information (FOI) request for detail about its financial operations by publishing extended information about its 2010-2011 financial statements.

The information published illustrates how registration fees provide for more than an individual nurse or midwife registration to practise Australia-wide, including:

- a dedicated National Board and committees in every state and territory to bring local expertise and knowledge to decision-making about individual nurses and midwives within a consistent national regulatory framework
- clear, up-to-date and nationally consistent policy framework and approaches to important nursing and midwifery policy issues
- robust processes for dealing with concerns about the conduct, performance and /or health of individual practitioners and students of nursing and midwifery, with legal risk appropriately managed
- clear national standards for making sure education programs are equipping future nurses and midwives for safe, competent practice.

There is no cross-subsidisation in the National Registration and Accreditation Scheme, therefore the registration fees for nurses and midwives – which are the lowest among the regulated health professions – must fund all costs of regulating 340,000 nurses and midwives as well as students.

National Board Chair Anne Copeland said the National Board was accountable to the community and the professions and was committed to transparency in financial reporting.

The detailed National Board information is published online on the AHPRA FOI [disclosure log](#), which can be found in the *About* section of its website www.ahpra.gov.au

Accreditation review

A review of accreditation arrangements for nursing and midwifery and each of the other professions to join the National Registration and Accreditation Scheme in 2010 has commenced.

Accreditation bodies assess education providers and programs of study to determine whether standards are being met, ensuring students are provided with the knowledge,

skills and professional attributes to practice the profession safely and competently.

The Australian Nursing and Midwifery Accreditation Council (ANMAC) is the current independent accrediting authority for nursing and midwifery under the National Scheme. It sets standards for accreditation and accredits nursing and midwifery courses and providers. For more information visit the *Accreditation* section of the National Board's website www.nursingmidwiferyboard.gov.au

The National Law requires each Board to have reviewed accreditation arrangements by 30 June 2013, including an assessment of how existing authorities have performed as well as consultation with stakeholders about accreditation functions.

Further information about the accreditation review including a public consultation process will be published on the National Board's website shortly.

Students urged to apply online for a smooth path from study to work

Students about to graduate as nurses and midwives are being urged to go online to apply early for registration and smooth the path from study to work.

AHPRA's online registration enables final year students to apply for registration four to six weeks before completing their course. Most students are able to complete their registration application online, while others use the dedicated web pages to be directed to the correct application form. All applications require students to return some supporting documents to AHPRA by mail.

AHPRA Chief Executive Officer Martin Fletcher said AHPRA's focus was to make the path from study to work a smooth one, as graduating students need to be registered in their health profession before they can start work.

Graduate applications – more information

For more information go to the *Graduate Applications* section of the AHPRA website www.ahpra.gov.au. For registration enquiries telephone 1300 419 495 (within Australia) +61 3 8708 9001 (overseas callers).

Enrolled to registered nurse applications

Enrolled nurses who are about to complete an approved program of study that will qualify them for registration as a registered nurse can also go online to apply for registration. For more information go to the *Registration and Endorsement* section of the National Board's website www.nursingmidwiferyboard.gov.au/

Updates to key publications

Key professional standards and conduct documents are currently being updated by the National Board to reflect the transition to the National Registration and Accreditation Scheme (the National Scheme).

The renewal of documents originally developed and published under the auspices of the Australian Nursing and Midwifery Council includes codes of ethics, codes of professional conduct, competency standards, professional boundaries guidelines, and the national decision-making framework.

When the National Scheme commenced in Australia in 2010, these publications became documents of the Nursing and Midwifery Board of Australia, as the body responsible for the regulation of nurses and midwives.

Except to update the design and names of relevant organisations and structures in the National Scheme, the content of the original document has not been changed unless indicated otherwise. The updated documents will be published in the National Board's website in due course.

