

## Public consultation paper

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October 2013

### Proposed:

- **Draft Re-entry to practice policy**
- **Draft Principles for assessing applicants for re-entry to practice**
- **Draft Re-entry to practice self assessment tool**
- **Draft Re-entry to practice fact sheet**
- **Draft Supervision guidelines for nursing and midwifery**

**Please provide feedback in Word (or equivalent) and PDF format by email to [nbmafeedback@ahpra.gov.au](mailto:nbmafeedback@ahpra.gov.au) by 4pm on Monday 9 December 2013.<sup>1</sup>**

### About this consultation

The Nursing and Midwifery Board of Australia (National Board or NMBA) is consulting publicly on the proposed *Re-entry to practice policy* and associated principles and guidelines, including an option of provisional registration.

The National Board would like to make provisional registration available to individuals who are seeking to re-enter the nursing and midwifery professions. A supporting framework will help protect the public and provide a vehicle for workforce flexibility by ensuring:

- consistent and transparent assessment of applications
- consistent registration of applicants, and
- monitoring of registrants.

### National Board role in relation to the National Scheme

The National Registration and Accreditation Scheme ([National Scheme](#)) for health professionals in Australia started on 1 July 2010 (18 October 2010 in WA) under the Health Practitioner Regulation National Law, as in force in each state and territory ([National Law](#)).

The National Board is responsible for regulating the nursing and midwifery professions and is supported in this role by the Australian Health Practitioner Regulation Agency (AHPRA).

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<sup>1</sup> You are welcome to supply a PDF file of your feedback in addition to the Word (or equivalent) file, however we request that you do supply a word file. As part of an effort to meet international website accessibility guidelines, AHPRA and the National Boards are striving to publish documents in accessible formats (such as Word), in addition to PDFs. More information about this is available at [www.ahpra.gov.au/About-AHPRA/Accessibility.aspx](http://www.ahpra.gov.au/About-AHPRA/Accessibility.aspx)

The National Board has approved registration standards, codes and guidelines and competency standards which, together, form a Professional Practice Framework (PPF) that guides the professional practice of nurses and midwives in Australia.

The role of the National Board is to protect the public. The National Board sets registration standards as well as professional codes, standards and guidelines that underpin safe and competent practice. These standards also help to clarify the National Board's expectations on a range of matters.

The National Board has powers under section 38 of the National Law to develop, consult on and recommend registration standards to the Australian Health Workforce Ministerial Council (Ministerial Council).

These registration standards establish the requirements for nurses and midwives':

- eligibility for registration in the nursing and midwifery professions, or
- suitability to competently and safely practise the profession.

Board-approved registration standards are available under [Registration standards](#) on the National Board website.

The National Law requires the National Board to undertake wide-ranging consultation on the content of proposed registration standards.

Once consultation on this proposal is complete, the National Board will consider the feedback received (in the context of its legal obligations of the National Law).

## Submissions

The National Board invites interested parties to provide their written comments in Word (or equivalent) and PDF format on the content of the draft *Re-entry to practice policy* and associated principles and guidelines by **4pm on Monday 9 December 2013**.

Address submissions by:

- email to [nmbafeedback@ahpra.gov.au](mailto:nmbafeedback@ahpra.gov.au).
- post to the Executive Officer, Nursing and Midwifery Board of Australia, AHPRA, GPO Box 9958, Melbourne, 3001.

Please note that all submissions received will be published on the National Board's website unless you indicate otherwise.

More information about making a submission is available under '[Making a submission](#)' on this document.

## Background

Of the 350,000 registered nurses and midwives, approximately 89% are women. The National Board recognises that there are registrants who, for a variety of reasons, take extended time away from the professions.

The National Board is committed to making sure that previously registered nurses and midwives are competent and safe to practice before they are registered again.

The Board-approved *Re-entry to practice policy* was first published on 19 March 2012. The objective of this policy was to set out the re-entry requirements for individuals who previously held registration as a nurse and/or midwife in Australia and had extended time away from practice. The policy included the requirements for individuals who previously held registration as a nurse in Australia and have a sole qualification in mental health, paediatric or disability nursing.

Since the *Re-entry to practice policy* was released, the National Board has developed a framework for assessing applications for re-entry to practice. This framework includes the following:

- *Principles for the assessment applicants for re-entry*
- supervised practice guidelines
- introduction of provisional registration.

## Relationship with other works

This proposal is separate to a body of work currently underway by the Australian Nursing and Midwifery Accreditation Council (ANMAC).

ANMAC is the independent accrediting authority for nursing and midwifery under the National Scheme. ANMAC accredits programs of study, including re-entry programs as listed on the *Approved programs of study* list posted on the AHPRA website.

ANMAC is currently reviewing the accreditation standards for re-entry to the register programs of study for the registered nurse. This separate body of work relates to course standards and not the application or registration of re-entry applicants.

Further information relating to course accreditation is available on the ANMAC website - [www.anmac.org.au](http://www.anmac.org.au).

## Summary of issue

The Ministerial Council approved the National Board's *Recency of practice registration standard* on 31 March 2010. The registration standard took effect on 1 July 2010.

Under the National Law, a nurse and/or a midwife in Australia must meet this mandatory registration standard when renewing their registration. This helps make sure that the individual returning to work can safely practise in their health profession after years of not practising, without posing a risk to the public.

Under the standard, nurses and/or midwives must have undertaken sufficient practice to demonstrate competence in their professions within the preceding five years.

The *Recency of practice registration standard* states that 'nurses and midwives who are returning to practice after a break of more than five years must satisfactorily complete a program or assessment process that is approved by the Board'.

On review, the National Board acknowledged in 2012 that the re-entry to practice options within nursing and midwifery required further consideration and exploration to provide a robust structure and guidance for re-entrants, supervisors and education providers. The National Board recognised that any future changes should be made in a way that would assist AHPRA to effectively put into operation a more nationally consistent approach in supporting applicants and registrants.

## What the proposed changes will address

### Re-entry to practice pathways

The National Board intends that the suite of documents included in this consultation will define and support a clear and transparent process to support, in a safe and effective manner, the re-entry to the nursing and/or midwifery professions of individuals who:

- previously held registration as a nurse and/or a midwife in Australia
- do not meet the NMBA recency of practice registration standard requirements to practice.

The National Board has developed the suite of re-entry to practice documents in line with the objectives of the National Law.

The National Board considers that the documents address the need for protecting the public and workforce flexibility, while providing support and transparency for applicants and registrants.

Three different re-entry pathways options have been identified:

- A Board-approved period of supervised practice (**Pathway 1**)
- A Board-approved re-entry to practice program (**Pathway 2**), or
- Requisite studies in a re-entry to practice pathway within a Board-approved entry to practice program of study leading to initial registration, as identified by a Board-approved education provider following recognition of the individual's prior learning (**Pathway 3**).

Following review, it has been identified that processes and assessments of applications for re-entry to practice across state and territory AHPRA offices vary due to a lack of clarity regarding the application process.

Each state and territory board of the NMBA uses its own discretion when assessing each application based on its merit. The information contained in the candidate's application informs the state and territory board of the NMBA of the suitable pathway for the individual as outlined above.

The current [Re-entry of to practice policy](#) states that applicants are required to be registered as students until they give evidence of having completed the appropriate re-entry pathway and are eligible for general registration. This means that the applicant is seeking student registration under section 87 of the National Law, prior to completing Board-specified re-entry requirements.

Applicants seeking to re-enter nursing and/or midwifery practice after a period away of five years or more do not satisfy the requirements under the National Law for general registration (section 52), limited registration (ss.65-72), or student registration (ss.86-90). It has been established that section 62 of the National Law is best placed for nurses and midwives applying for re-entry to practice. Section 62 covers eligibility for provisional registration. To date this registration type has not been available to nurses and midwives.

The National Board is, therefore, proposing to make available the registration type of provisional registration – per section 62 of the National Law – for nurses and/or midwives who wish to re-enter nursing and/or midwifery professions. Provisional registration applies to applicants requiring registration for the purpose of re-entering their profession and in this case nursing and/or midwifery.

The introduction of provisional registration and its associated assessment processes will also provide a clear and transparent nationally consistent approach to the application, registration and monitoring practices -across AHPRA offices and state and territory boards of the NMBA.

Establishing provisional registration will also allow greater uniformity between the practices of the Nursing and Midwifery Board of Australia and those of other National Boards under the National Scheme.

The National Board is not proposing to establish a new registration standard to accompany the introduction of provisional registration for the professions. The existing NMBA approved *Recency of*

*practice standard* provides direction to the re-entry requirements. However, the National Board proposes to introduce a comprehensive suite of policies, principles, guidelines and assessment tools to give clarity and guidance to the process when combined with the eligibility requirements of s62 of the National Law.

To support the proposed provisional registration type, the current re-entry to practice policy has been revised.

Introducing the proposed revised *Re-entry to practice policy* and guidelines and assessment tools will strengthen the application process. Suitably qualified AHPRA staff will assess these applications for registration decision making by the state and territory boards of the NMBA.

To facilitate national consistency, the *Principles for assessing applicants for re-entry to practice* will guide decision making.

Overall, the proposed suite as covered in this consultation will help ensure that individuals are safe, competent and adequately supervised to re-enter practice.

### About provisional registration

Provisional registration is a registration type currently in use by other National Boards. Provision is made for this registration type in the National Law as follows:

Section 62 of the National Law prescribes eligibility requirements for provisional registration as:

*(1) An individual is eligible for provisional registration in a health profession, to enable the individual to complete a period of supervised practice that the individual requires to be eligible for general registration in the health profession, if—*

- (a) the individual is qualified for general registration in the profession; and*
- (b) the individual is a suitable person to hold provisional registration in the profession; and*
- (c) the individual is not disqualified under this Law or a law of a co-regulatory jurisdiction from applying for, or being registered in, the profession; and*
- (d) the individual meets any other requirements for registration stated in an approved registration standard for the health profession*

Section 64 identifies the registration period for provisional registration:

*(1) The period of registration (the registration period) that is to apply to a health practitioner granted provisional registration in a health profession is—*

- (a) the period decided by the National Board established for the profession, but not more than 12 months, and published on the National Board's website; or*
- (b) the longer period prescribed by a regulation.*

*(2) If the National Board decides to register a health practitioner in the health profession during a registration period, the registration—*

- (a) starts when the National Board makes the decision; and*
- (b) expires at the end of the last day of the registration period.*

*(3) Provisional registration may not be renewed more than twice.*

The reduced registration period for this registration type reflects the short-term nature of such registration for the purpose of completing a period of supervised practice or other requirements. As stated in section 64 (1) (a) the National Board may specify the registration period. The registration

period for provisional registration can be for a period of less than 12 months. Provisional registration gives registrants an opportunity to meet the requirements of general registration, including the *Recency of practice registration standard*.

Section 225 gives guidance in relation to the information that can be recorded on the National register. This section describes all included information. For the purpose of listing a notation on a registrant's registration, the legislation states:

*A National Register or Specialists Register must include the following information for each registered health practitioner whose name is included on the register—*

(p) *any other information the National Board considers appropriate.*

If the preferred option of provisional registration is implemented, a range of notation options will be available for state and territory boards of the NMBA to apply.

A notation can be used for the purpose of providing adequate information to the public regarding a registrant's ability to practise. Information relevant to a provisional registrant's registration may include but not be limited to supervision levels.

### [Supporting documentation for this consultation](#)

To support the changes outlined in this consultation, the National Board has created the following documents to support nurses, midwives, supervisors, education providers, and state and territory boards of the NMBA and AHPRA staff in the application and implementation of the proposed changes.

#### **Draft revised *Re-entry to practice policy***

This revised *Re-entry to practice policy* sets out the requirements for individuals who previously held registration as a nurse and/or a midwife in Australia. Minimal content changes have been made to the original policy. Reference to student registration has been removed and replaced by provisional registration.

#### **Draft *Principles for the assessment of applicants for re-entry to practice***

This new document provides guidelines for applicants seeking to re-enter nursing and/or midwifery after a period of five or more years of not practising, and the assessors of those applications, to aid national consistency. The principles will assist decision making across all state and territory AHPRA offices and the state or territory boards of the NMBA.

#### **Draft *Re-entry to practice self assessment tool***

This new tool is a reflective guide that allows nurses and/or midwives to reflect on their readiness to return to practice, review their knowledge and skills, and consider their ability to meet a number of competencies relating to their practice, prior to making application for registration.

#### **Draft *Re-entry to practice application fact sheet***

This new fact sheet is a guide for applicants submitting an application for registration for the purpose of re-entering practice.

#### **Draft *Supervision guidelines***

These new guidelines set out the principles the National Board considers central to safe and effective supervision for a range of circumstances. Supervision guidelines are currently used by most National Boards under the National Scheme.

Provision for supervision level 1 and 2 is made:

**Direct supervision** (level 1) is when the supervisor takes direct and principal responsibility for the nursing or midwifery care provided (e.g. assessment and/or treatment of individual patients/clients).

The supervisor must be physically present at the workplace, and supervision must include observation of the supervisee when they are providing care. Direct supervision is the highest level of supervision.

**Indirect supervision** (level 2) is when the supervisor is easily contactable and available to observe and discuss the nursing or midwifery care the supervisee is delivering.

### Monitoring provisional registrants

Monitoring requirements for each pathway will vary as different levels of participant monitoring is inbuilt by re-entry providers. For this reason the following reporting requirements for each pathway are proposed and documented throughout the guidelines, policy, tools and fact sheet:

#### Supervised Practice (Pathway 1)

Supervised Practice (Pathway 1) will receive the greatest level of monitoring as reflected in the supervision guidelines and associated tools.

#### Re-entry to Practice Program (Pathway 2)

Pathway 2 registrants are enrolled in Board-approved programs and therefore the high level of monitoring demonstrated in pathway 1 is not required for this cohort.

#### Requisite Studies (Pathway 3)

Pathway 3 registrants are enrolled to complete requisite studies and required to submit successful course completion and academic transcripts as a part of their monitoring process. National Board formative and summative reporting is not recommended for this group.

### Options statements

To support the National Board *Recency of practice registration standard*, particularly for nurses and/or midwives returning to practice after a break of more than five years the following options have been considered:

**Option 1 – No changes to the current process as stated in the National Board’s existing re-entry to practice policy. However, maintaining the status quo is not a feasible option.**

Pros	Cons
<ul style="list-style-type: none"> <li>Registration type remains unchanged</li> <li>Communication of change not required</li> </ul>	<ul style="list-style-type: none"> <li>Not consistent with the registration types, as specified in the National Law</li> <li>Does not support consistent assessment of applications across states and territories</li> <li>Limits supervision level of re-entrant to level 1 (direct supervision), regardless of practice progression</li> </ul>

**Option 2 – Make available provisional registration type for re-entry to practice registrants, together with all associated documentation, fact sheets and tools**

Pros	Cons
<ul style="list-style-type: none"> <li>Consistent with registration types, as specified by National Law</li> <li>Provides a nationally consistent process and experience for all stakeholders</li> <li>Introduces a framework of supportive documents and tools to help registrants, re-entry pathway providers (i.e. supervised practice providers) and the National Board with decision making</li> <li>Registrants practice with professional indemnity insurance arrangements in the same manner as other practicing</li> </ul>	<ul style="list-style-type: none"> <li>As individuals are registered this registration type introduces a paid model of re-entry, which may have financial consequences for some health services employing registrants to complete programs</li> <li>Increases the level of monitoring to be undertaken by AHPRA and associated costs</li> </ul>

<p>registrants</p> <ul style="list-style-type: none"> <li>• Provisional registrants complete pathway 1 and 2 re-entry models as an employee at a program location – hospital, health care facility, which may benefit registrants by reducing the financial impact of undertaking unregistered 'student' programs</li> <li>• Reduces the risk to the public through increased monitoring and ongoing review of registrant to support competence development</li> <li>• Provides consistency and structured streamlined approaches to monitoring registrants</li> <li>• Application and registration fees recoup cost incurred by processing applications and monitoring registrants.</li> </ul>	
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Option 3 – Introduce supportive documentation and tools only, without provisional registration type. No change to *Re-entry to practice policy*. In comparison to option two this option would not be as effective for supporting re-entry to practice. It would only lead to minor administrative improvements and may unnecessarily limit types of supervision available. For these reasons it is not the preferred option.

Pros	Cons
<ul style="list-style-type: none"> <li>• National Board registration types remain unchanged</li> <li>• Communication of change not required</li> <li>• Registrants and the National Board benefit from the tools and supportive documents (i.e. – supervision guidelines)</li> </ul>	<ul style="list-style-type: none"> <li>• Not consistent with registration types as specified in the National Law</li> <li>• Does not facilitate consistency across states and territories</li> <li>• Limits supervision level of re-entrant to level 1 (direct supervision), regardless of practice progression.</li> <li>• Guidelines and tools act as a suite of documents which are interdependent. Removing portions of content or entire documents will weaken the effectiveness of their use.</li> </ul>

### Potential benefits and costs of proposal/s

**Consistency:** Inconsistencies currently exist in the registration application and monitoring processes between the Nursing and Midwifery Board of Australia and other National Boards. Aligning the processes of the National Boards is beneficial for national consistency and will result in greater efficiencies and reduced costs over time.

Introducing a consistent approach will help in assessing and monitoring registrants. It will also help make sure that fee structures are consistent across each state and territory.

**Clarity:** Introducing option two provides a clear and transparent path for applicants to follow during the application process. It also provides a clear understanding of the potential outcomes of an application. This positively impacts on individuals and the professions more broadly as it aids workforce flexibility.

**Costs:** Application fees for provisional registration range from \$105 - \$300 within other National Boards. Provisional registration fees range from \$157 - \$409. It is expected nursing and midwifery fees would be within the range of other fees currently seen in the NMBA professions.



A formal cost analysis will be conducted to establish the costs associated with the selected re-entry to practice registration option for both AHPRA and the applicant/registrant.

### **Nursing and Midwifery Board of Australia preferred option**

The National Board's preferred option for those seeking to re-enter the nursing and/or midwifery professions is option 2 - to make available the registration type of provisional registration, and the supporting guidelines and tools.

This option will support the National Board and AHPRA to implement a nationally consistent approach that better supports nurses and/or midwives re-entering the professions. It provides clear direction to education providers, whilst being consistent with the requirements of the *Recency of practice registration standard*

National consistency and the introduction of guidelines will help reduce risk to the public by adequately monitoring registrants.

### **Summary of implementation and/or operational considerations**

The National Board proposes to introduce provisional registration and the suite of guidelines and tools following consultation.

The National Board anticipates that streamlining the application and assessment process will reduce application and approval times for applicants in most cases.

The National Board will communicate the revised Board-approved policy and processes on its website and publications, including the National Board newsletter and communiqué from Board meetings.

Applicants will also be able to self source this information at [www.nursingmidwiferyboard.gov.au](http://www.nursingmidwiferyboard.gov.au) by reviewing the *Re-entry to practice application fact sheet*, as well as the full suite of documents and tools.

The National Board will inform other stakeholders, such as Chief Nurse/Midwives Officers, education providers and unions in each jurisdiction, directly by email, with links to the National Board website at [www.nursingmidwiferyboard.gov.au](http://www.nursingmidwiferyboard.gov.au) for detailed information.

All approved policies; guidelines and tools will be reviewed again within a three-year period.

### **Attachments**

Attachment A *Consultation submission template*

Attachment B Draft revised *Re-entry to practice policy*

Attachment C Draft *Principles for the assessment of applicants for re-entry to practice*

Attachment D Draft *Re-entry to practice self assessment tool*

Attachment E Draft *Re-entry to practice application fact sheet*

Attachment F Draft *Supervision guidelines for nursing and midwifery*

## Making a submission

The National Board seeks your feedback on the proposal in this consultation. Please send your written submissions by **4pm on Monday 9 December 2013**.<sup>2</sup>

Address submissions by:

- email to [nmbafeedback@ahpra.gov.au](mailto:nmbafeedback@ahpra.gov.au).
- post to the **Executive Officer, Nursing and Midwifery Board of Australia, AHPRA, GPO Box 9958, Melbourne, 3001**.

## How your submission will be treated

Submissions will generally be published unless you request otherwise. The National Board publishes submissions on its website to encourage discussion and inform the community and stakeholders.

However, the National Board will not publish on its website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of reference.

Before publication, the National Board may remove personally-identifying information from submissions, including contact details. The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the National Board.

The National Board also accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982 (Cth)*, which has provisions designed to protect personal information and information given in confidence.

Please let the National Board know if you do not want your submission published, or want all or part of it treated as confidential.

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