

A word from the Chair

The year 2013 brings with it a new Nursing and Midwifery Board of Australia (National Board or NMBA) strategic plan, covering the period 1 January 2013 to 30 June 2015. This strategic plan is aligned with the National Registration and Accreditation Scheme (the National Scheme) objectives and guiding principles 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. Read more in this newsletter on the NMBA strategic priorities we have committed to.

The National Board has taken the next step towards auditing nurses and midwives' compliance with Board-approved mandatory registration standards.

On behalf of the National Board, the Australian Health Practitioner Regulation Agency (AHPRA) will develop a pilot audit on nursing and midwifery registrants for implementation during this year's renewal cycle. Outcomes of this audit will inform the next steps for further developing and refining an audit framework and its subsequent rollout across all National Boards. The National Board will

publish more information on its website as the project progresses.

Remember that the International Council of Nurses (ICN) 25th Quadrennial Congress is happening in Melbourne from 18–23 May 2013. The congress anticipates bringing together up to 5000 international nursing delegates. A web link to congress registrations is available in this issue of the newsletter.

In September 2012, the National Board welcomed my appointment as the National Board Chair and Queensland health practitioner member for a further 12 months. This term is drawing to a close this year and there will be an open process for seeking applications for a new appointment.

I am delighted with the progress we have made towards establishing and improving the requirements of the National Scheme, as detailed in the 2011/12 annual report. The 2012/13 annual report will cover the remaining half of 2012, summarising the National Board's achievements towards the previous strategic plan.

I would like to encourage nurses, midwives and members of the community to participate in regulation through our panels. Participating as panel members for hearings into specific health, performance or conduct matters is a way to engage more fully on matters that affect the professions and the community. More on panels is covered in this issue.

On behalf of the National Board, I am grateful for your contribution to our regulatory work in 2012, and look forward to working together to achieve the objectives of the National Scheme. I hope this brand new year brings with it significant insights to help us all better concentrate our efforts.

Anne Copeland

Chair, Nursing and Midwifery Board of Australia



National Board strategic plan sets direction

In December 2012, the National Board approved a new NMBA strategic plan 2013-15, aligned with the National Scheme's objectives and guiding principles that help keep the public safe. The National Scheme facilitates workforce mobility for health practitioners and helps ensure that only suitably trained nurses and midwives who are qualified to practise in a competent and ethical manner are registered.

The National Board identified 10 key strategic priorities to focus its efforts on, and is reflecting on related initiatives in its work plan for the 2013 calendar year. The key strategic priorities are:

1. *Stakeholders* – Be a recognised leader in nursing and midwifery.
2. *Professional Practice Framework* – Ensure contemporary, relevant, well-understood and well-used professional practice frameworks for nursing and midwifery.
3. *Registration* – Drive consistency in the application of National Board registration standards and decision-making.
4. *Notifications* – Advance quality and consistency around standards, process and decision-making on notifications.
5. *Accreditation* – Facilitate effective accreditation of nursing and midwifery programs of study.
6. *Workforce Agenda* – Engage effectively with bodies relevant to the nursing and midwifery workforce.
7. *National Board* – Provide excellent and recognised leadership in the regulation of nursing and midwifery.
8. *Finances* – Use financial resources efficiently and effectively.
9. *Health Profession Agreement* – Ensure a Health Profession Agreement (HPA) that meets the strategic requirements of the National Board.
10. *Resources and Governance* – Practise effective and contemporary governance.

The NMBA strategic plan will be annually reviewed to assess and reflect changing needs and priorities, in

alignment with the National Board's vision, mission and values as follows:

- *Vision*: A flexible nursing and midwifery workforce that meets the current and future needs of the Australian community through competent and safe practice.
- *Mission*: Provide leadership to nurses, midwives and students through regulation in the public interest in accordance with the National Scheme and in partnership with stakeholders.
- *Values* underlying our actions are vision, accountability, consistency and collaboration.

Registration

Update your email address for renewal of registration reminders

Have you switched jobs or internet service providers? Has your email address changed? AHPRA uses the email address you provided to send you direct communication on important topics, such as early registration renewal reminders and confirmation that online renewal is open.

In addition, issues of the National Board [e-newsletter](#) containing useful information on consultations and new or revised codes and guidelines come by email.

More than 99.5 per cent of nurses and midwives have provided an email address but emails to over six per cent bounce back undelivered. Make sure that your contact details, including your email address, are current and that the name you use to register with is your legal name. You should also check to make sure that emails from AHPRA.gov.au do not go to your SPAM mailbox.

You can check your registration details and expiry date on the [national register](#).

Meeting registration standards for renewal

Recency of practice

The National Board's *Recency of practice registration standard* is in place to ensure nurses and midwives have sufficient practice to demonstrate competence in their respective professions.

Certain conditions must be met for a person returning to practice after a break of more than five years.

As part of the National Board's regulatory role as set by the [National Law](#) on public safety, the *Recency of practice registration standard* helps make sure that a nurse and/or a midwife can safely practise their profession without posing a risk to the public. The standard is available under [Registration standards](#) on the National Board website.

Continuing professional development

The *Continuing professional development (CPD) registration standard* is another Board-approved requirement that nurses and midwives must meet in order to be registered. The *CPD registration standard* sets out minimum requirements for CPD, and its direct relevance to a nurse's or midwife's context of practice. The standard is available under [Registration standards](#) on the National Board website.

CPD is the means by which nurses and midwives maintain, improve and broaden their knowledge, expertise and competence. The CPD cycle involves reviewing practice, identifying learning needs, planning and participating in relevant learning activities, and reflecting on the value of those activities.

The National Board recognises CPD measurement in *hours* not *points*; one hour of active learning equals one hour of CPD.

Some professional organisations may offer their CPD activities in terms of points. Affected nurses and midwives need to speak to the relevant professional organisation to ascertain the hours-equivalent of CPD from those points they have completed.

A person who is both a registered nurse and a registered midwife is required to complete both the 20 hours of nursing CPD and 20 hours of midwifery CPD per year. Where CPD activities are relevant to both the nursing and the midwifery professions, these activities may serve as evidence for both nursing and midwifery CPD hours.

In developing the CPD requirements, the National Board identifies a comprehensive list of examples of varied learning activities, as listed in the *Continuing professional development FAQ for nurses and midwives*. View these under [Codes, guidelines and statements](#) on the National Board website.

The CPD and recency of practice registration standards are undergoing review in 2013, as part of the three-year review of all National Boards' registration standards introduced with the National Scheme on 1 July 2010 (18 October 2010 in Western Australia). There will be wide-ranging public stakeholder consultation to elicit feedback on the existing registration standards.

Enrolled nurses and medicines administration

The National Board acknowledges that a growing number of enrolled nurses, including all new graduates, have

completed or are completing Board-approved programs that include the relevant administration of medicines units. Only these enrolled nurses are permitted to administer medicines.

However, the National Board would like to reassure all enrolled nurses that they are eligible to register with the National Board, whether or not they have completed the relevant units of study for administration of medicines.

If you have not yet completed the Board-approved units of study for administration of medicines you can still apply for initial registration or for renewal of your registration with the National Board. Your registration will have a notation that states: '*Does not hold Board-approved qualification in administration of medicines*'.

This notation will remain in place until you provide evidence to AHPRA that you have completed the Board-approved units of study for administration of medicines which include:

- Analyse health information, HLTAP501C (previously identified as HLTAP501A or HLTAP501B), and
- Administer and monitor medications in the work environment, HLTEN507C (previously identified as HLTEN507A and HLTEN507B).

Should you identify that:

- you have not yet completed the required Board-approved units of study for administration of medicines, and
- your registration does not have a notation that states: '*Does not hold Board-approved qualification in administration of medicines*',

you should apply to AHPRA for the notation to be applied to your registration using the form *Application for addition of notation as an enrolled nurse or nurse practitioner – ANMV-04* on the [National Board website](#).

Alternatively, if you have completed the Board-approved units of study for administration of medicines, apply to AHPRA for the notation to be removed from your registration using the form *Application for removal of notation by enrolled nurse, nurse practitioner or midwife – APRN-04* on the [National Board website](#).

More information is available in the *Enrolled nurses and medicine administration fact sheet* under [FAQs relating to other registration standards](#) on the National Board website.

Dual registration for nurses and midwives

A person seeking dual registration as a registered nurse and registered midwife must be able to demonstrate that they meet the competency standards required for a nurse and a midwife, as well as meet the mandatory registration standards as both a nurse and a midwife.

Mandatory registration standards include continuing professional development, recency of practice, professional indemnity arrangements, criminal history and English language skills against which the National Board will soon begin auditing nurses and midwives for compliance.

A person applying for dual registration should carefully consider what evidence they are able to provide to meet the relevant competency and registration standards for each profession.

Requirements for re-entry to practice must equally be met for a person applying for dual registration as a nurse and a midwife. Visit the National Board website to view the *Re-entry to practice policy* for nursing and midwifery under [Codes and guidelines](#).

There may be common elements of work and education applicable to nursing and midwifery that you can submit as evidence when applying for dual registration.

Non-practising registration

Non-practising registration is available to those nurses and midwives who have previously held general registration but who do not wish to practise during all or part of the registration period.

If you were registered as a nurse or midwife before July 2010 under a corresponding state or territory Act, and your registration was equivalent to general registration under the National Law, you are also eligible for non-practising registration.

During the application process, you will need to specify which non-practising registration type you are applying for, i.e. as a registered nurse, an enrolled nurse or a midwife.

The National Law requires a health professional who holds non-practising registration in a profession to not practise the profession. To practise nursing or midwifery, you must hold registration with the National Board.

The three most common reasons for non-practising registration are:

- retirement from practice
- temporary retirement (extended leave for a period – maternity or paternity leave, for example), or
- not practising in Australia but practising overseas.

The National Board defines to ‘practise the profession’ as:

Any role, whether remunerated or not, in which the individual uses their skills and knowledge as a nurse or midwife in their profession. For the purposes of this registration standard, practice is not restricted to the provision of direct

clinical care. It also includes using professional knowledge in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on safe, effective delivery of services in the profession.

Non-practising registration is a means to keep you connected with the profession during a time of absence from practice, and you continue to receive National Board communications and publications.

Non-practising registration incurs a reduced [fee](#). A position statement on non-practising registration for nurses and midwives will soon be available on the National Board website.

Consultations

National Board update on accreditation review

The National Board has approved in principle the Australian Nursing and Midwifery Accreditation Council’s (ANMAC) accreditation function for nursing and midwifery for a period of five years.

ANMAC is the independent accrediting authority for nursing and midwifery under the [National Scheme](#). As part of a joint National Boards consultation, the National Board consulted on the review of accreditation arrangements for nursing and midwifery and each of the other professions that joined the National Scheme on 1 July 2010 (18 October 2010 in Western Australia).

The National Board is consulting with ANMAC to address themes identified as a result of stakeholder feedback.

The National Board has published [submissions](#) received in response to the consultation on its website.

Review of National competency standards for the nurse practitioner – public consultation closed

The National Board’s public consultation on *National competency standards for the nurse practitioner*, which opened for 10 weeks on 19 December 2012, is now closed.

Southern Cross University and the University of Sydney are the two collaborating parties on this Board-funded research project to review the current competency standards. The review took into account relevant national and international literature, as well as the current scope of practice and role of nurse practitioners across Australia.

The intention of this review is to make sure that the competency standards provide an accurate guide for nurse practitioner contemporary practice as well as the educational preparation that nurse practitioners require to deliver professional health care.

Nurse practitioner competencies build on and expand upon both the competencies required of a registered nurse and the advanced practice role within the registered nurse scope.

Following wide-ranging public consultation, the National Board is collating feedback and will publish submissions on its website under [past consultations](#).

The research project closes at the end of June 2013, and will inform newly revised national competency standards for publication on the National Board website.

Supplementary news

Participate in regulation through panels

The National Board encourages nurses, midwives and members of the community to consider applying for appointments to the *NMBA approved persons list for panel members*.

Advertisements on openings are published as they occur on the [AHPRA website](#).

In its role to protect the public, the National Board establishes health, performance and professional standards panels from time to time, under the Health Practitioner Regulation National Law, as in force in each state or territory (the National Law).

The National Law provides for the establishment of the panels for hearings into specific health, performance or conduct matters, in the instigation of investigation and further actions related to a notification against a nurse or midwife.

During the notifications process, the respective state and territory board of the NMBA works closely with the relevant state or territory health complaints entity and may decide to refer the matter to a panel. Under the National Law, panels must have a certain number of members from the relevant health profession and community members, drawn from the Board's approved persons list.

Under the National Law, the panel has authority to make decisions on matters, including dismissing the investigation, imposing conditions on the nurse or midwife, suspending a person's registration, or applying cautions or reprimands on matters of performance and professional standards.

Benefits of panels

Use of panels allows for:

- a consistent approach to disciplinary outcomes, with nurses, midwives and members of the community called upon as key decision-makers
- independent decision-making, which may include reports and assessments about the nurse or midwife under investigation
- objective assessment as a result of cross-range representation from the profession and members of the community
- nurses and midwives participating as panel members to give back to the profession by contributing as key decision-makers
- better participant understanding of regulation, and
- potential entry channels for nurses, midwives and members of the community into the state and territory boards of the NMBA.

Successful applicants are required to complete declarations about insolvency and private interest, and will undergo a national criminal history check. Remuneration for panel sitting applies.

International Council of Nurses 25th Quadrennial Congress 2013 update

The National Board invites all nurses attending the International Council of Nurses (ICN) 25th Quadrennial Congress to visit its exhibition booth running throughout the event.

The quadrennial congress is taking place at the Melbourne Convention and Exhibition Centre from 18–23 May 2013, and is an ICN-hosted event. The Australian College of Nursing, formerly the Royal College of Nursing Australia and College of Nursing, is a member organisation of ICN and is assisting in hosting the congress in Melbourne this year.

ICN is a federation of more than 130 national nurses associations representing millions of nurses worldwide, and works to ensure quality nursing care for all and sound health policies globally.

Two conference presentations, one on nursing and midwifery policy, process and national consistency, and the other on defining the scope of practice for nurse practitioners in Australia, will feature.

Registrations are still open for the congress – visit the [ICN website](#) to learn more. You can go direct to the online [registrations page](#) to register.

Focus on policy, professional practice requirements, projects and initiatives

Between November 2012 and the end of January 2013, the National Board released the following communications on its website.

January 2013

- Quarterly registration data including information on types of registration held, principal place of practice, endorsements, registrant age and gender.
- AHPRA Report released: AHPRA and the National Boards' regular report to stakeholders, including publication of panel hearing decisions dating back to July 2010. Also online are summaries of some tribunal decisions handed down since the start of the National Registration and Accreditation Scheme (National Scheme).

November–December 2012

- Focus groups: review of national competency standards for enrolled nurses. The National Board invited enrolled nurses to participate in focus groups on national competency standards for enrolled nurses, closed 1 March 2013.
- New online service for approved programs of study: The National Board, in partnership with the Australian Health Practitioner Regulation Agency (AHPRA), has launched a new online service for approved programs of study leading to registration and endorsement.

- Public consultation on guidelines for professional indemnity insurance arrangements for nurses: Public consultation opened on guidelines for professional indemnity insurance arrangements for registered nurses and nurse practitioners, closed 10 January 2013.
- Position statement on mothercraft nursing: The National Board released a position statement on mothercraft nurses and their ineligibility for Board-approved medicine administration units of study.
- Exemptions from continuous professional development: The National Board published a policy on exemptions from continuing professional development for nurses and midwives.

National Board accountability and transparency

AHPRA, on behalf of the Nursing and Midwifery Board of Australia and other National Boards, has now published a table of panel hearing decisions dating back to July 2010. About thirty of these are within the nursing and midwifery professions.

Where there is educational and clinical value, the table also includes summaries accessible as hyperlinks. Consistent with requirements of the National Law, the names of health professionals are not published.

To help share information and guide nurses and midwives, some summaries of tribunal decisions are also provided.



Nursing and Midwifery
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