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Message from the Chair

I am delighted to write to you as the newly re-appointed Chair of the Nursing and Midwifery Board of Australia (NMBA).

I have enjoyed my year as the Chair of the NMBA and it is an honour to continue with this responsibility. I would like to reinforce my commitment to strengthening the relationships between the NMBA and our stakeholders

Farewell to our retiring board members

This August we farewelled four board members, who were on the NMBA's inaugural Board first appointed in 2009:

- Professor Mary Chiarella - practitioner member from NSW
- Ms Louise Horgan- practitioner member from WA
- Ms Mary Kirk –practitioner member from ACT, and
- Dr Christine Murphy – community member from Victoria.

I would like to extend my sincere thanks, personally and on behalf of the NMBA members for their remarkable commitment, dedication and contribution to the NMBA's work since the commencement of the National Registration and Accreditation Scheme.

We asked them for their thoughts on what they were most proud of in their time serving on the NMBA. Read their insights and views further down in the newsletter.

Welcome to our new board members

Let me also take this opportunity to congratulate and welcome our four new board members. Find out who they are in our '[Other NMBA News](#)' section below.

NMBA's new national health support service

I am excited to announce that the NMBA will fund a new health support service for all registered nurses and midwives, and students enrolled in approved nursing and midwifery courses.

The service will be designed to ensure that nurses and midwives can access support if they are impaired or at risk of impairment. We care about the wellbeing of nurses, midwives and students and we are committed to a nationally consistent service that supports them in line with the NMBA's regulatory role. [Read more](#)

I would like to thank all nurses and midwives for their invaluable contribution to the Australian



community. The NMBA looks forward to continuing its work with you on nursing and midwifery regulation to improve and strengthen the National Scheme.

Dr Lynette Cusack RN

Chair, Nursing and Midwifery Board of Australia

Registration

Re-entry to practice policy effective from 1 September

The NMBA's revised policy for re-entry to practice came into effect from 1 September 2015. This policy provides information for nurses and midwives who do not meet the [Recency of practice registration standard](#) and wish to re-enter practice.

The NMBA has also introduced **provisional registration** for nurses and midwives who are no longer registered and are applying to re-enter practice as a nurse or midwife. Nurses and midwives who fall into this category can now apply for provisional registration.

Under the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), there is a mandatory requirement for applicants for registration and renewal of registration to meet the NMBA's requirements in relation to the nature, extent, period and recency of any previous practice.

More information and the revised policy are available on the [NMBA website](#).

Enrolled nurse standards for practice update

The NMBA has approved the revised *Enrolled nurse standards for practice*. These standards provide the framework for assessing enrolled nurse (EN) competence and communicate to the general public the standards that can be expected from ENs. They can be used in a number of ways:

- development of nursing curricula by education providers; and in the assessment of students and new graduates,
- assessment of ENs (educated overseas seeking to work in Australia, and to assess ENs returning to work after breaks in service), and
- by the NMBA and relevant tribunals or courts to assess professional conduct matters.

The NMBA's revised Enrolled Nurse standards for practice will come into effect on 1 January 2016. The standards will be published on the NMBA website in October, earlier than the effective date to help ENs, employers and education providers become familiar with the new requirements.

Three registration standards revised and approved by Health ministers

The Ministerial Council has approved the NMBA's recent review of the three standards below:

- [Registration standard: Recency of practice](#)
- [Registration standard: Continuing professional development, and](#)

- [Registration standard: Professional indemnity insurance arrangements](#).

The NMBA will release the final standards on its website in the coming months; well before the effective date, to help nurses and midwives become familiar with the new requirements.

More information on registration standards is available on the [NMBA website](#).

English language skills registration standard policy

The new version of NMBA's [English language skills \(ELS\) registration standard](#) took effect from 1 July this year.

To provide additional guidance on Pathway 5 of the revised ELS registration standard the NMBA has approved [an English Language Skills \(ELS\) policy](#) that also commenced on 1 July 2015.

The ELS registration standard states that all applicants, including internationally qualified applicants, who seek initial registration in Australia, must demonstrate that they have the necessary English language skills.

More information including additional supporting documents is available on the [NMBA website](#).

Nurse practitioner accreditation standards approved

The NMBA has approved the Nurse practitioner accreditation standards, developed by the [Australian Nursing and Midwifery Accreditation Council](#) (ANMAC). These accreditation standards detail the requirements that higher education providers must meet to have a nurse practitioner masters program accredited by ANMAC and approved by the NMBA.

The revised standards are available on the [ANMAC website](#)

Public indemnity insurance exemption extended for midwives in private practice

The Australian Health Workforce Ministerial Council (Ministerial Council) has extended its public indemnity insurance (PII) exemption arrangements for privately practising midwives (PPMs), to 31 December 2016.

PII exemption is a transitional provision under section 284 of the National Law, and exempts those midwives in private practice who provide services for women in a homebirth setting from requiring PII cover for the intrapartum period. It is still a requirement that these midwives in private practice have insurance for both the antenatal and postpartum periods of care.

The previous end date of the transitional provision was 30 June 2015.

More information including the following documents are available on the [NMBA website](#):

- [PII arrangements registration standard](#), and
- [Guideline for professional indemnity insurance arrangements for midwives](#).

Safety and quality guideline for privately practising midwives

The NMBA has approved a safety and quality guideline (SQG) for privately practising midwives (PPM). This SQG is intended to provide for the protection of the public, to facilitate workforce flexibility and access to maternity services.

PPMs practise in a range of settings that can include providing midwifery services in the woman's home. This practice is outside the routine clinical governance arrangements of a health service provider. The primary purpose of the SQG is to ensure that PPMs have clarity and support to practise in their roles with safety and quality.

This SQG also describes the regulatory requirements with which a PPM is expected to comply in order to be eligible for an exemption from requiring professional indemnity insurance (PII) when providing intrapartum care for homebirths

The SQG will be released in the coming months, along with the registration standard *Endorsement for scheduled medicines for eligible midwives*, when the standard has been approved by Health Ministers

NMBA quarterly registration data

Registered workforce at a glance

The June 2015 NMBA registration statistics¹ show that there are 370,303 enrolled nurses, registered nurses and midwives registered with the NMBA.

Table – Snapshot of registered workforce: June 2015

The following table shows totals for practising registration:

	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP*	Total
Enrolled nurse (EN)	679	13,344	402	11,896	7,767	1,441	19,973	5,296	94	60,892
Registered nurse (RN)	4,388	75,832	3,180	50,844	21,503	6,450	65,624	27,822	9,146	264,789
EN & RN	56	1,088	60	1,128	618	48	2,065	481	27	5,571
Midwife	101	792	59	647	483	21	1,053	344	116	3,616
Nurse (EN & RN) & Midwife	568	8,811	534	6,019	2,156	647	7,847	2,981	311	29,874
Total	5,792	99,867	4,235	70,534	32,527	8,607	96,562	36,924	9,694	364,742

The following table shows totals for non-practising registration:

	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP*	Total
Enrolled nurse (EN)	15	339	7	165	120	20	236	77	9	988
Registered nurse (RN)	55	1,553	30	528	294	94	650	311	330	3,845
EN & RN		4		3	3		2	1	1	14
Midwife		17		9	9	1	18	5	7	66
Nurse (EN & RN) & Midwife	15	337	3	83	37	9	93	42	29	648
Total	85	2,250	40	788	463	124	999	436	376	5,561

The nursing and midwifery registrants comprise:

- 268,634 registered nurses
- 61,880 enrolled nurses
- 5,585 registered as both a registered nurse and enrolled nurses
- 3,682 midwives, and
- 30,522 people registered as both a midwife and either a registered nurse and/or an enrolled nurse.

Of these registered health professionals, 5,561 hold non-practising registration. Registrants with this type of registration can continue

to retain their nursing or midwifery title without practising their profession during the registration period.

Find more on registration data for nurses and midwives in the [About section](#) of the NMBA's website.

Practitioner audits to be conducted in October and November

The Australian Health Practitioner Regulation Agency (AHPRA) and NMBA will be conducting audits of nurses and midwives in October and November, to monitor compliance with mandatory [registration standards](#). Audits are an important part of the way the NMBA and AHPRA can better protect the public. They help to ensure that nurses and midwives are meeting the mandatory registrations standards and provide important assurance to the community and the NMBA.

¹ The NMBA currently recognises five registration types:

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

* Principal place of practice

Continuing professional development

Continuing professional development (CPD) is a key registration standard for all health practitioners. To meet the requirements of the CPD registration standard, nurses and midwives registered with the NMBA are expected to do a minimum number of hours directly relevant to their context of practice.

CPD is the means by which members of the professions maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives.

The NMBA has developed a [fact sheet](#) that clearly sets out the required hours of CPD that nurses and midwives must undertake

A few key things to note:

- Where a nurse or a midwife works part time the CPD requirements apply as outlined in the [fact sheet](#) – there is no reduction in hours if you work part time.
- A nurse or midwife who is registered but not working (such as maternity leave or extended overseas travel) is still required to meet the CPD requirements outlined in the [fact sheet](#).

See our [Registration and endorsement](#) section for more information.

Registration with conditions for internationally qualified nurses and midwives

In February 2014, the NMBA introduced a [new model](#) for assessing registration applications from internationally qualified nurses and midwives. This model requires applicants to be assessed against the NMBA [registration standards](#) and hold qualifications that meet the [eight qualification criteria](#) of the assessment model.

As part of the model the NMBA has also identified three categories of internationally qualified applicants who may be eligible for registration with conditions. These applicants will have conditions for supervised practice placed on their registration. The conditions aim to ensure that only nurses and midwives who are competent to practise in Australia are registered with the NMBA.

The three categories are:

- Midwives with qualifications that do not meet the continuity of care experience requirements,
- Registered nurses with [Australian Qualifications Framework](#) (AQF) level 6 qualifications solely in mental health, paediatric or disability nursing, and
- Nurses and midwives with qualifications that do not meet all medication management requirements.

Supervised practice must be in health settings that currently provide clinical experience placements for [NMBA-approved programs of study](#). Specific supervision requirements including the reporting and time requirements for the supervised practice are determined on a case-by-case basis. The supervision conditions have been planned carefully to balance the impact of the supervision on employer time.

More information for nurses, midwives and employers can be found on the [internationally qualified nurses and midwives](#) section of the NMBA website.

Consultations update

Endorsement for scheduled medicines – rural and isolated practice

In October 2015, the NMBA will conduct public consultation on the registration standard endorsement for scheduled medicines (rural and isolated practice). This standard allows nurses with this endorsement to supply scheduled medicines under protocol.

The consultation is part of the NMBA's review of the ongoing need for the standard. The NMBA will also conduct an international literature review on prescribing and medication management by registered nurses, registered midwives and other relevant (non medical practitioner) regulated health professions.

Outcomes from the research and consultation will inform the NMBA's decision making in regard to potential educational and regulatory requirements to support prescribing by registered nurses and registered midwives.

More information on the NMBA's public consultations is available on the [NMBA website](#).

Registered nurse standards for practice update

In June, the NMBA conducted a public consultation on *Registered nurse standards for practice*. A large number of responses were received from a variety of respondents. The NMBA would like to thank all respondents for their time and feedback.

Analysis of responses, along with observational analysis of the draft RN standards will inform the final version of the RN standards for practice, which will be approved by the NMBA. The new RN standards for practice will be released in the next few months. A summary of the responses from the public consultation is being prepared and will be available soon on the [NMBA website](#).

Notifications case studies

Enrolled nurse providing inadequate or inappropriate treatment

The NMBA received a notification from an employer about an enrolled nurses' performance and clinical practice over an 18 month period. During this period the employer reported that patients had been subjected to inadequate and inappropriate treatment that could have been detrimental to the persons in the nurses' care.

An investigation found that while the nurse did not specifically address each issue raised in the complaint, the nurse did accept responsibility for their errors and had taken a number of steps to address their performance issues.

As a result of the investigation, the NMBA imposed conditions on the nurses' registration, which included successful completion of education. At the first renewal following the outcome of the notification, the nurse failed to renew and remains unregistered. The conditions were not satisfied during the period of registration prior to the renewal period.

Lack of care delivery

A notification was received by the NMBA about a midwife via telephone, about the standard of care provided by the midwife. The woman had engaged the midwife to deliver her baby.

The woman stated that when she went into labour the midwife was with her for ten hours. The midwife then left to attend to another woman who was in labour and left the woman with an unregistered and unqualified doula.

The midwife returned approximately ten hours later, the woman’s labour continued for another two hours, after which the woman was transported to hospital for an emergency caesarean section as the baby was in distress.

The notification also raised issues about inappropriate comments made by the midwife in the postnatal care period and concerns raised about fees charged for services not provided.

The NMBA decided to take immediate action and a range of conditions were placed on the midwife’s registration.

Other NMBA news

Farewell to NMBA’s retiring board members



In August 2015, the NMBA farewelled four board members, all of who had been on the inaugural Board, first appointed in 2009. Below are some of their perspectives on what they’re most proud of in the time they have served on the NMBA.



Professor Mary Chiarella - practitioner member from NSW

“I think I am most proud of the program of inquiry and regulatory research that the NMBA has put in place over the six years we have been together. Good decisions are made on good evidence and regulatory research is still relatively embryonic to a great degree. The contribution that NMBA has made to

nursing and midwifery regulatory knowledge is highly regarded internationally and is more importantly a strong foundation on which to make regulatory policy decisions. I am also proud of the way in which the members of the NMBA have worked collaboratively with each other and with AHPRA. The National Scheme was always a hybrid, a compromise between the Productivity Commission’s vision and the professions’ concerns. That it has succeeded so well to date is something for us all to be proud of.”



Ms Louise Horgan - practitioner member from WA

“I am proud of the achievements of the NMBA. Our two professions have encountered the most profound changes to our regulatory system. Over the past six years, I have encountered the leadership and collegiality of my fellow board members. We have built a sustainable framework of evidence-

based regulation. The NMBA is well regarded nationally and is the envy of many regulators internationally.”



Ms Mary Kirk - practitioner member from ACT

“After six years, as part of the NMBA and the National Scheme, I am left with a feeling of deep satisfaction as a result of the achievements of the NMBA as a whole and especially for the way we were a cohesive unit who realised the strengths in each other and capitalised on those strengths to generate creative solutions

in an often challenging and dynamic environment. Also, the NMBA and its integrated relationship with the whole Scheme is seen as a world leader in nursing and midwifery regulation and in that light our registrants and the public can be assured of evidence based practice standards and codes as a foundation for best practice – I am really proud of being part of taking that tradition into the National Scheme and enhancing it as I can’t think a better return on investment for our registrants and the public.”



Dr Christine Murphy - community member from Victoria

Definition of Pride: a feeling of deep pleasure or satisfaction derived from one’s own achievements.

“I am not proud of anything that I personally achieved on the board of NMBA because everything that was achieved was achieved together – we

spoke as one even when at times we may not have initially agreed on a position or a decision during a board debate or discussion.

I am proud of our culture, our work ethic and whilst there are too many achievements to list that this board has accomplished since 2009 in terms of its challenging and ambitious program of work over the last six years, I am proud to say that we have been leaders in setting the pace in research projects and other broad ranging initiatives in both professions that have earned respect and recognition both in national and international arenas.

I am also proud of each and every one of our national and State and Territory board members – for all the passion and commitment that they have invested in order to protect the public. And finally, I am proud of our nation’s nurses and midwives.

It has been an honour and a privilege to be a part of the NMBA and serve the public in this way.”

Welcome to our new board members

The NMBA welcomes four new members commencing in September, the members have all been appointed for three years and are as follows:

- Ms Jennifer Wood - practitioner member from Western Australia
- Ms Annette Symes practitioner member from New South Wales
- Mr Christopher Helms practitioner member from Australian Capital Territory
- Ms Nicoletta Ciffolilli community member from Western Australia

We will feature detailed profiles of these new board members in future newsletters.

Have your say on how the nursing and midwifery professions are regulated!

Do you want to provide leadership, be more engaged with, and strengthen the nursing and midwifery professions? The NMBA invites you to become a board, committee or panel member with the National Board of the NMBA.

Applications are now sought from the following:

- registered nurses, midwives and enrolled nurses for appointment to the Victorian Board of the Nursing and Midwifery Board of Australia who reside and practice in Victoria.
- enrolled nurses and registered midwives for appointment to the list of approved persons for appointment to panels who reside and practice across all jurisdictions.

You can influence how the nursing profession is regulated. [Apply here!](#)

More information is available on the [NMBA website](#).

Meet the NMBA at these events

The NMBA understands the importance of engaging with nurses and midwives to tell them about how it regulates nurses and midwives. NMBA members will attend and hosting a booth at the following upcoming conferences.

[ACN National Nursing Forum 2015](#)
Brisbane
14-16 October 2015

[ACM 19th Biennial Conference](#)
Gold Coast
5-8 October 2015

International events attended by the NMBA

Attending international conferences is part of NMBA’s commitment to learning from and engagement with its international nursing and midwifery counterparts. It also strengthens the NMBA’s engagement internationally with nurses and midwives.

Earlier this year the NMBA attended two key international events.



ICN - South Korea - (l to r) Ms Margaret Winn, Community Member (NMBA), NSW, Ms Tanya Vogt, Executive Officer (NMBA), Ms Jocelyn Small, former Program Manager (NMBA) and Ms Petrina Halloran, Policy Manager (NMBA)

ICN – South Korea

NMBA members and representatives from AHPRA attended the International Council of Nurses (ICN) conference held in Seoul, South Korea in June this year.

The NMBA hosted a small exhibition booth and gave three presentations at the conference:

- Review of the development of the *Registered nurse standards for practice*,
- An analysis of notifications about nurses and midwives, and
- A regulatory perspective and the Australian context of issues to be addressed from the World Health Organization’s global strategy on human resources for health.



ICM - Japan - Ms Tanya Vogt, Executive officer (NMBA) with conference attendees.

ICM – Japan

NMBA members and the Executive Officer attended the International Confederation of Midwives (ICM) Asia Pacific Regional Conference held in Yokohama Japan in July this year. The theme for the conference was *Midwifery care for every mother and their newborn*.

The conference provided a unique opportunity for all attendees to better understand the successes and challenges for midwifery in the Asia Pacific region – complicated by the large diversity of these countries, cultures, maternity systems and outcomes for women and babies. A rewarding experience was a visit to the Yamamoto Birth Centre, which provided greater understanding of the different models of maternity service delivery in Japan.



NMC wreath at the Anzac Day commemorative service in Melbourne.

Nurses Memorial Centre Anzac Day commemorative service in Victoria

In April this year, the Nurses Memorial Centre (NMC) held an Anzac Day commemorative service at the Nurses War Memorial in Melbourne. The service led by Reverend Ruth Redpath was held 19 April (prior to Anzac Day) to allow nurses to march in the Anzac day services.

This commemorative service was dedicated to the nurses who gave their lives and health in service to their country in times of war and peace. 54 representatives including Katrina Swire from the Victorian Board of the NMBA laid wreaths in the memory of those who served. One of the most outstanding wreaths was made of hand knitted poppies as part of the 100 year ANZAC anniversary

National Scheme news

AHPRA joins Facebook

Earlier this year the AHPRA joined Facebook as another means by which we can engage with the public and practitioners. We'll be sharing similar content on Facebook that we do on Twitter: news from AHPRA and the National Boards, along with photos from events and forums.

Visit our [Facebook](#) page.

Changes to Medicines Australia code of conduct affecting health practitioners

Health practitioners should be aware of changes to the Medicines Australia Code of Conduct. Medicines Australia is a membership organisation for pharmaceutical companies in Australia. Its Code of Conduct sets standards for the advertising and promotion of prescription medicines and applies to all member organisations. The revised code requires member companies to publicly disclose payments made to health professionals for their expert service or when financial

support is provided for education purposes, including airfares, accommodation and conference registration fees.

The new requirements in the code come into effect on 1 October 2015 and reporting of all payments will be mandatory from 1 October 2016. More information is available on [Medicines Australia's website](#).

Queensland complaints data have been published

AHPRA and the National Boards have published detailed performance data about notifications management in Queensland.

A co-regulatory system has been in place in Queensland since July 2014 and all complaints about Queensland registered health practitioners are received by the Office of the Health Ombudsman (OHO). The Health Ombudsman is responsible for managing serious complaints relating to the health, conduct and performance of health practitioners in Queensland, and determines which complaints go to AHPRA and the National Boards after assessing their severity.

AHPRA provides quarterly data to the OHO about its performance in managing the complaints which come to AHPRA and the National Boards from the OHO. These data provide quantitative information about the number of complaints received and timelines for managing them.

The first report, which was published in May, includes detailed performance data about notifications management for the first three quarters from 1 July 2014 and 31 March 2015.

Analysis of these data, detailing matters managed by AHPRA and the National Boards, indicates:

- complaint referral patterns from the OHO to AHPRA are variable month to month
- on early trends, AHPRA is receiving 50 per cent fewer complaints than for the comparable period in 2013/14. This suggests the OHO is not accepting, is retaining and/or is closing most matters that the Ombudsman considers do not warrant further action. Of those we manage, more than 70 per cent require further regulatory action, and
- investigation timelines continue to be a major focus for AHPRA and the Boards. Sixty seven of the matters open with AHPRA for longer than 18 months are about 25 practitioners. Multiple complaints about the same practitioner require more complex investigations.

AHPRA continues to focus on decreasing the time it takes to investigate matters, finalising more old investigations and improving the notifier and practitioner experience.

AHPRA will publish more national performance data throughout the next financial year.

The Queensland report is published on the AHPRA website [Statistics](#) page.

AHPRA welcomes ministers' response to National Scheme review report

The Australian Health Workforce Ministerial Council met on 7 August 2015 at the COAG Health Council meeting to consider the final report of the independent review of the National Scheme.

The purpose of the independent review was to identify what is working well in the National Scheme and the opportunities to improve and strengthen the operation of the scheme to regulate health professions to protect the public.

Ministers expressed strong support for the work of the National Scheme, noted that it was now embedded in the health system and was among the most significant and effective reforms of health profession regulation in Australia and internationally.

More information about the review can be found on the [COAG Health Council](#) website and on [AHPRA's](#) website.

Royal commission on child sexual abuse

The National Boards and AHPRA have been following the Royal Commission into institutional responses to child sexual abuse and its implications for the regulation of health practitioners. The issues raised in the Royal Commission are serious and disturbing.

The National Boards and AHPRA are committed to learning from the evidence before the Royal Commission and its findings and are taking action to make sure our regulatory system is responsive to anyone who has been sexually abused by a registered health practitioner, who comes forward.

If you have a concern about a health practitioner call:

- AHPRA on 1300 419 495 (all states and territories except NSW and Qld)
- NSW – 1800 043 159
- Qld – 133 646 (133 OHO)

Keep in touch with the NMBA

- Visit the [NMBA website](#)* for registration standards, codes, guidelines and FAQ.
* Please make sure you are using the most up-to-date browser version when viewing the NMBA website.
- Lodge an [online enquiry form](#).
- For registration enquiries, call 1300 419 495 (from within Australia) or +61 3 9275 9009 (for overseas callers).
- Address mail correspondence to: Dr Lynette Cusack RN, Chair, Nursing and Midwifery Board of Australia, GPO Box 9958, Melbourne, VIC 3001.