

Executive Officer
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Dear Executive Officer

RE: Austin Health response to NMBA public consultation paper 'Endorsement as a nurse practitioner registration standard and supporting documentation'.

Thank you for providing the opportunity to submit feedback on the above discussion paper. It is excellent to see the registration standards are being reviewed. Overall, we are very happy with the revised standards and they accurately reflect the professional standard required of a practicing nurse practitioner.

There are some areas of the registration standards that we would like to comment on:

1. In Attachment 1 part c, page 7: This point describes the completion of a Board approved nurse practitioner qualification. It is important that the 'pharmacology for prescribing, therapeutics and diagnostics and research' subjects are explained in greater detail or insert '.....including **Board approved** Masters units in pharmacology for prescribing, therapeutics and diagnostics and research ...'. As it is currently written for the Masters equivalence subjects, it may be misinterpreted that these subjects do not have to be Board approved.
2. In Attachment 2, page 11: 'Advanced practice nursing'. This section needs to link advanced practice with the nurse practitioner role. An introductory sentence at the beginning of this section that links both concepts would be beneficial such as it is expected that an endorsed nurse practitioner practices in an advanced practice role..... or move the final section on page 12 and change the title ('Relationship between the nurse practitioner and advanced practice nursing) to the beginning of this section on page 11. The 'Advanced practice nursing' section on pages 11 and 12 are repetitive. Also part of this section has been repeated on page 9.
3. In Attachment 2, page 13: 'Assessment of advanced practice for nurse practitioner endorsement'.
This section discusses the clinical component of the advanced practice role when meeting the 5000 hours of advanced practice for endorsement. The document states 'Advanced

practice nursing.....may not purely be confined to clinical work'. The nurse practitioner role is a clinical advanced practice role. The extended scope of practice for a nurse practitioner is based on advanced clinical skills and advanced decision making based on their assessment skills (as per your definition on page 9). You can only achieve a high level of competency in assessment skills through advanced practice in a clinical role. A component of the advanced practice role is to be a leader in the speciality and to mentor staff. However it is not designated as a management role. It is imperative that the number of hours for endorsement must be based on a designated clinical role. For example, we do not want the scenario where an applicant who works three quarters of her time in a clinical advanced practice role and a quarter of her time in a designated management role being endorsed based on 3000 hours of advanced practice in a clinical role and 2000 hours in a designated management role. This will become an issue of clinical risk particularly, in patient safety. The NMBA has the duty of care to minimise clinical risk.

4. The table of contents in the registration standard could be expanded to reflect all sections in the standard.
5. Additional points to be included in the document:
 - a. It would be useful for applicants if there was an additional attachment about how to format your CV and application for endorsement.
 - b. Also to include the link to the NMBA PD log template as an example of a log for professional development. As part of maintaining your registration as a nurse practitioner additional professional development must be undertaken.

Regards



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On behalf of the Nurse Practitioner committee
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