
AHPRA

Review of stakeholder perceptions of AHPRA and the National Boards

A Social Research Project

November 2018

Supplementary report prepared for:
The Nursing and Midwifery Board of Australia

Truly[®]
Deeply



Introduction

- Truly Deeply has been engaged by the Australian Health Practitioner Agency (AHPRA) to test the perception of sentiment towards AHPRA and the National Boards. This review is intended to help AHPRA and National Boards better understand what stakeholders think and feel about the organisation and to identify how to facilitate ongoing confidence and trust in the work performed by AHPRA and National Boards.
- The study has used a combination of both qualitative and quantitative approaches, specifically extended interviews (face to face and via the telephone), focus groups and online surveys.
- A single, integrated report has been provided to AHPRA documenting the key themes and results.
- A separate summary has been provided for each of the National Boards based on the results of the online survey with practitioners.
- The purpose of this report is to present a subset of findings specifically for the **Nursing and Midwifery Board of Australia**.

An overview of the methodology



A **four stage** approach that combined both qualitative and quantitative research approaches has been used.

Stage 1 comprised a total of 53 qualitative interviews. This consisted of interviews with the Chair of every National Board (15); the Executive Officer of almost every National Board (13), Government health providers (3); major health employers (3); Aboriginal and Torres Strait Islander Health Strategy group representatives (5); Co-regulatory partners (4); Professions Reference Group members (3); representatives from CALD communities (2) and 'Other' various stakeholders (5).

These interviews were conducted between August 10 and September 26, 2018.

Stage 2 involved three focus groups. The three groups were conducted with i) Members of the Community Reference Group; ii) Members of the Professions Reference Group and iii) Accreditation Authority representatives.

These groups were conducted between August 14 - 22, 2018.

Stage 3 consisted of an online survey with practitioners from all 15 registered professions.

This survey was conducted between September 17 – 25, 2018.

Stage 4 consisted of an online survey with a representative sample of the Australian general public.

This survey was conducted between September 17 – 25, 2018.

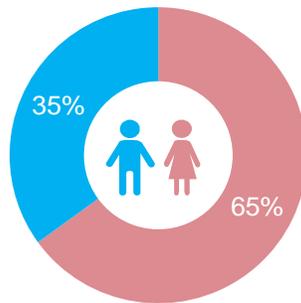
Quantitative approach

- Online surveys were conducted with practitioners as well as the broader community following the qualitative investigation. Truly Deeply developed the questionnaires in consultation with AHPRA.
- The questionnaires were developed to allow initial findings in the qualitative to be further explored and validated. Additional pre-codes and lists of words and statements were included in the survey following feedback from interviews and discussion with stakeholders.
- Respondents to the Community Survey were sourced using an external panel provider.
- Participants in the Practitioner Survey were sourced by AHPRA (using software that allowed the survey to be deployed to a random sample of practitioners in each profession).
- The practitioner sample has been weighted to ensure an equal ‘voice’ within the total sample of registered health practitioners (with the sample of ‘nurses’ and ‘midwives’ further separated). This has been done to ensure that the views of (for example) of ‘psychologists’, which accounted for 14% of responses to the survey, does not distort the views of other professions, which accounted for a much smaller response overall to the survey.
- Once the surveys were closed, statistical analysis was conducted by Truly Deeply to summarise and compare the quantitative findings.

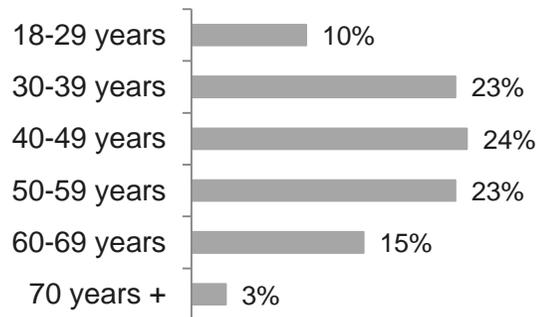
	Community Survey	Practitioner Survey
Fieldwork dates	September 19 - 25	September 19 - 27
Responses	1,020	5,694
Email invitations sent	na	100,257
Response rate	na	6.0%

Sample of registered practitioners (n = 5,694)

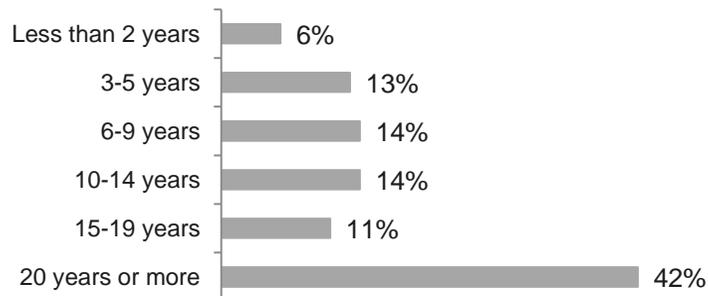
Gender



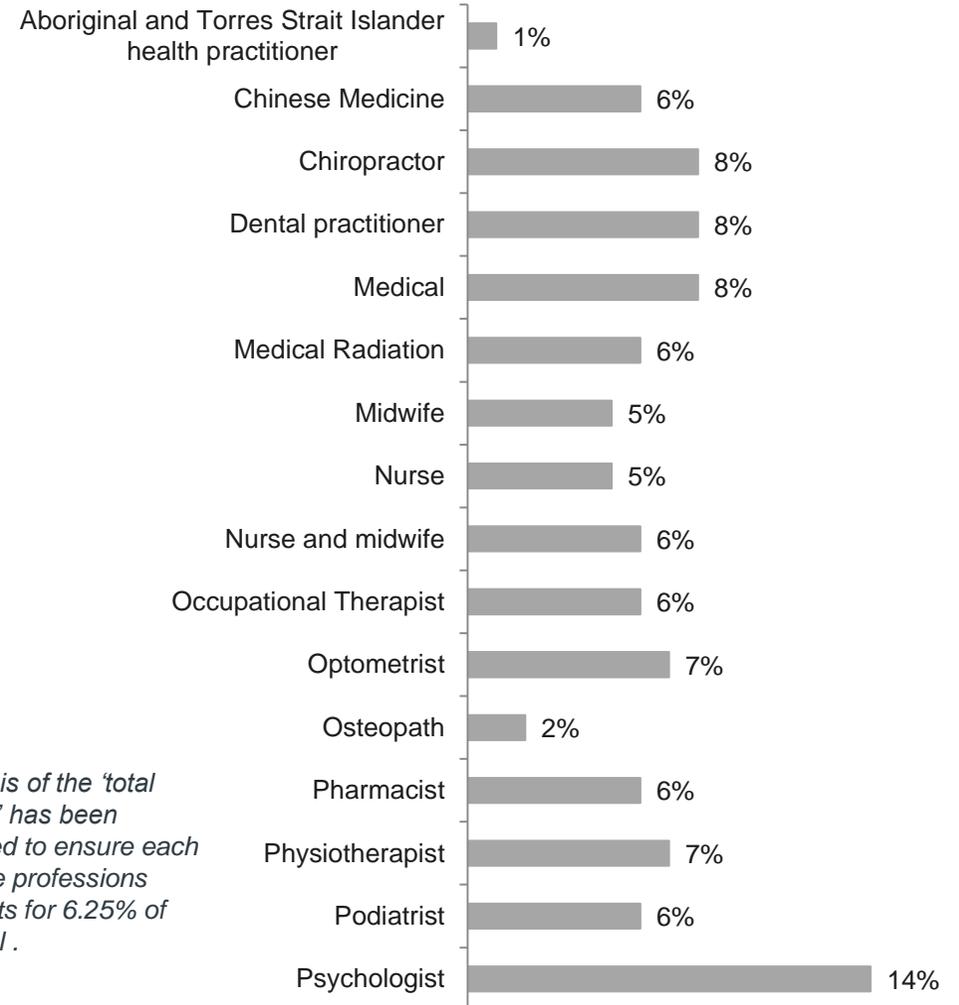
Age



Years in practice



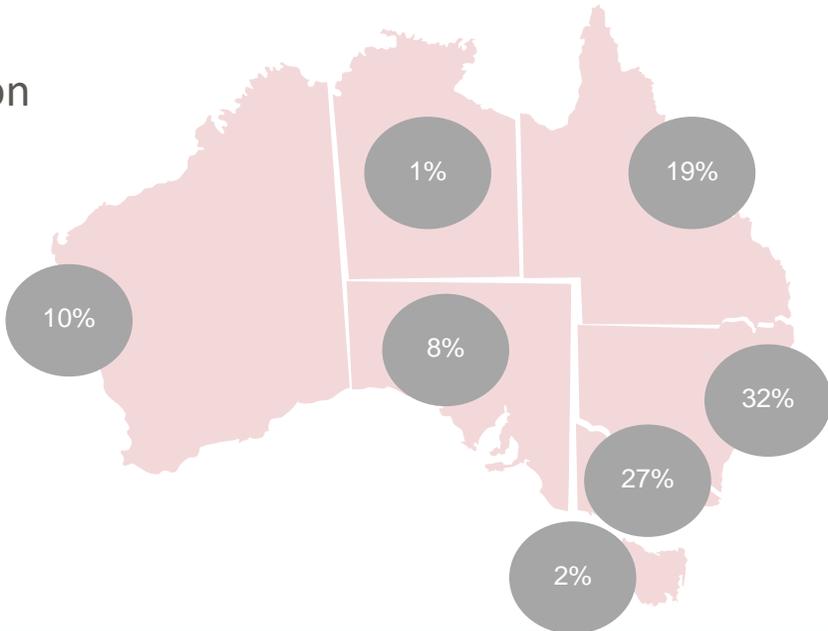
Practitioner type*



**Analysis of the 'total sample' has been weighted to ensure each of these professions accounts for 6.25% of the total.*

Sample of registered practitioners (n = 5,694)

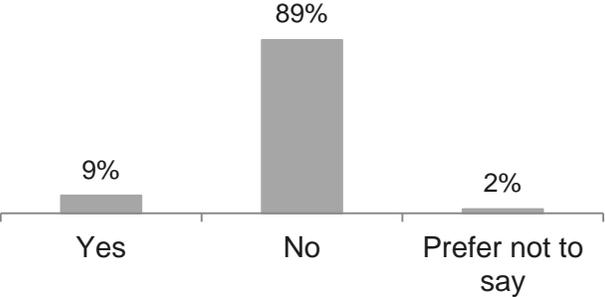
Location



Metro: 66%

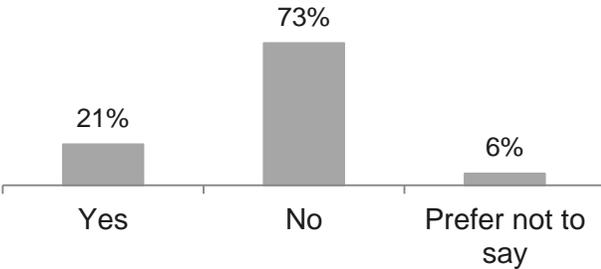
Regional : 34%

% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



* As identified by individual respondents

% who have ever been audited to check their compliance with the mandatory registration standards*



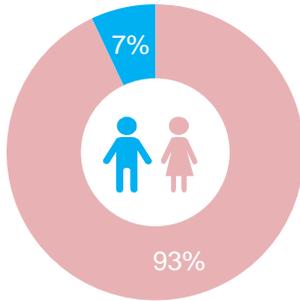
* As identified by individual respondents

Summary of results of the online survey with registered health practitioners.

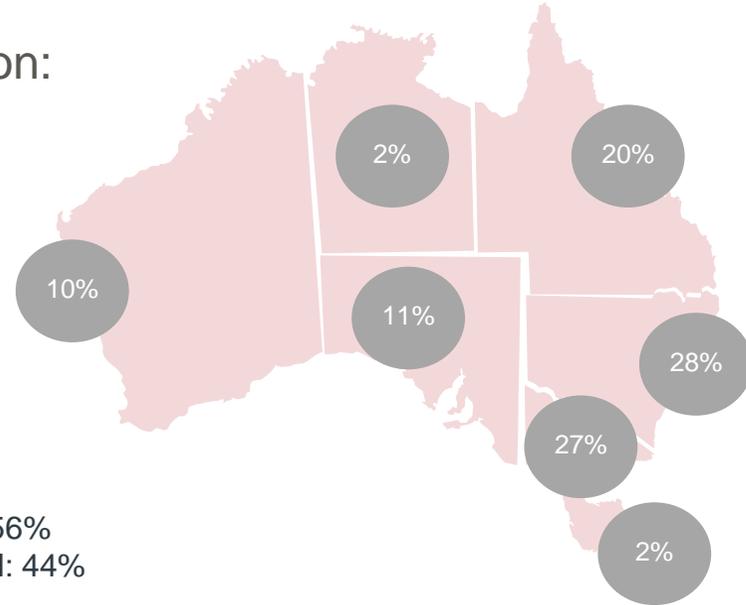
Specific insights into the responses from:
nurses and midwives

Sample of Nurses and Midwives (n=943)

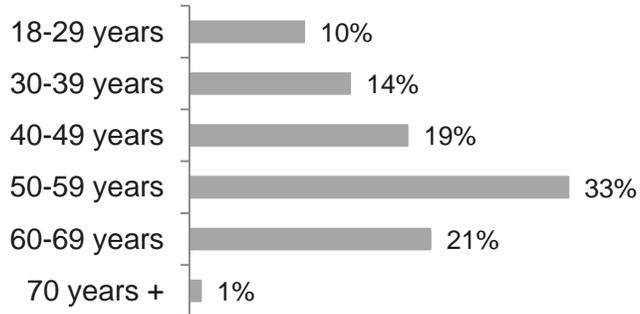
Gender:



Location:

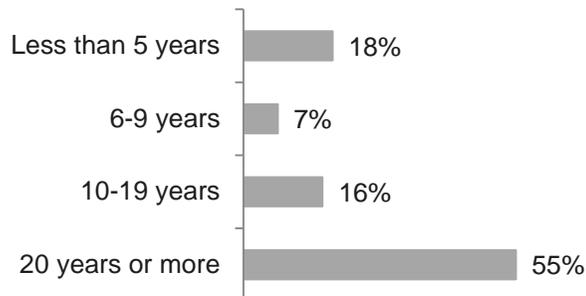


Age:

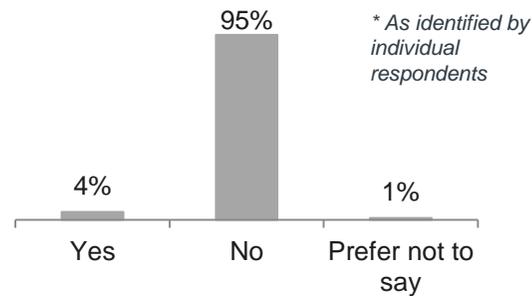


Metro: 56%
Regional: 44%

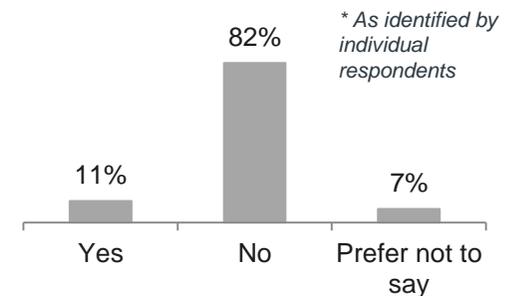
Years in practice:



% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



% who have ever been audited to check their compliance with the mandatory registration standards*



Perceptions of the Nursing and Midwifery Board of Australia (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)?

Base: Total sample of **nurses and midwives** registered with this Board (n=943)

Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Regulators	42%	(+4%)
For practitioners	43%	(+7%)
Necessary	40%	(+5%)
Administrators	37%	(+2%)
Decision-makers	35%	(+8%)
For the public	25%	(+2%)
Bureaucratic	24%	(-2%)
Competent	23%	(+5%)
Advocates	22%	(+4%)
Accessible	17%	(+5%)

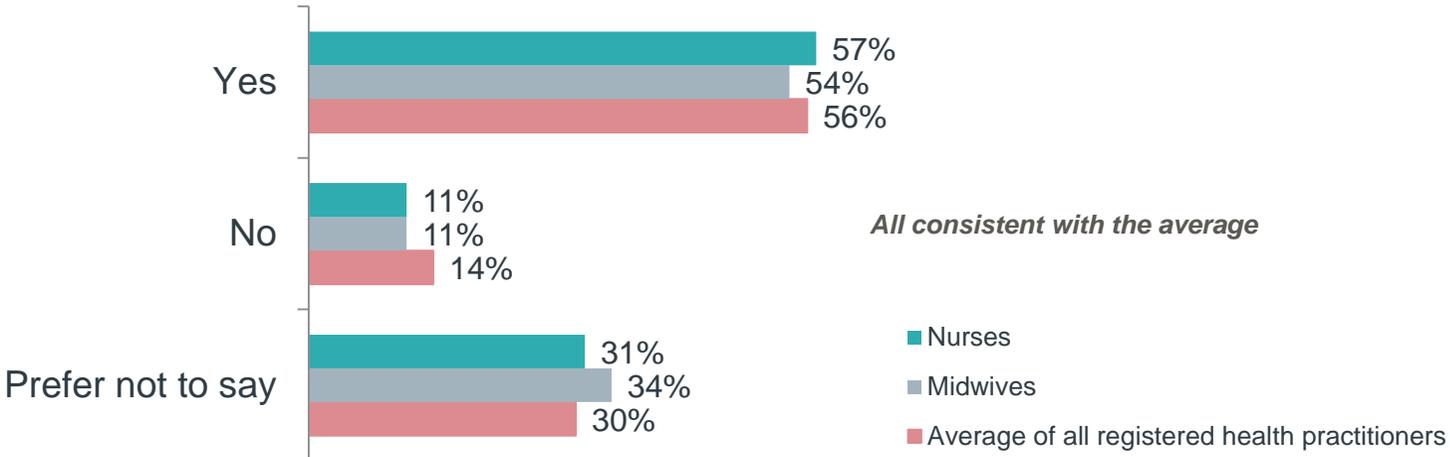
Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Shows leadership	19%	(+6%)
Supportive	15%	(+2%)
Fair	13%	(+2%)
Helpful	13%	(+1%)
Trustworthy	13%	(-)
Good communicators	12%	(+1%)
Responsive	12%	(+2%)
Approachable	11%	(-1%)
Out of touch	9%	(-3%)
Rigid	9%	(-2%)

Green indicates a result *significantly higher* than the average across all professions.

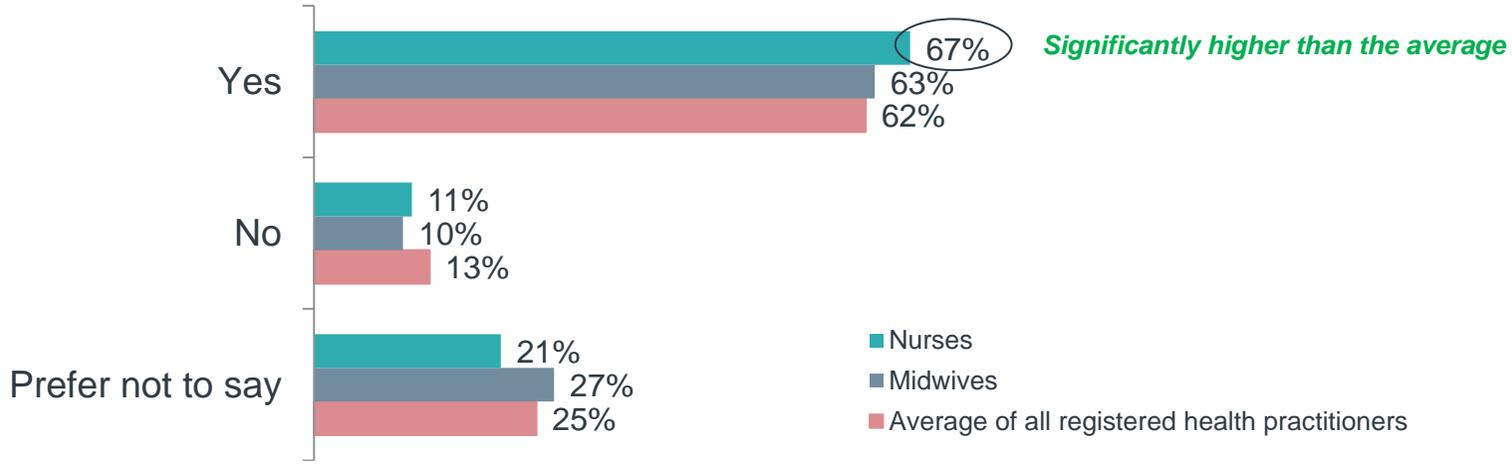
Orange indicates a result *significantly lower* than the average across all professions.

Levels of confidence and trust in the Nursing and Midwifery Board of Australia

Q. Do you feel confident that your National Board is doing everything it can to keep the public safe?



Q. Do you trust your National Board?



What are the indicators of trust and barriers to trust in the Nursing and Midwifery Board of Australia

Indicators of trust: **67% trust the Board**

I have never found them to be untrustworthy in their actions.

History of positive results.

Fair especially when unfair complaints are made.

Have the best interests of the profession and the public in mind at all times.

Because it is setting standards to maintain the integrity of nursing and midwifery.

Long standing history. Understanding and fair.

Standards are kept up to date and policies and protocols checked and changed. Accreditation occurs to keep standards in place.

Excellent communication; research oriented; best practice.

They have public interest at heart. They set the standard for which nurses and midwives must adhere to.

Nurses need to maintain a high level of professionalism. The profession has changed markedly & NMBA is trusted to assist nurses to maintain those standards.

Full list of responses provided separately

Barriers to trust: **11% DO NOT trust the Board**

I trust them mostly although I feel like they are too soft on drug taking and antisocial behaviour by the professionals they manage.

I feel the duplication of functions, the parochial attitudes and lack of vision are not conducive to a 21st Century Health Care System or profession.

Lack of experience and knowledge with the board.

Because compared with the medical boards, the NMBA is submissive and does not support staff when they are under constant attack.

My distrust is limited to the experiences I have witnessed, observed and experienced with the practice of overseas trained nurses from certain ethnic backgrounds. I feel that it should be a more thorough assessment of the validity of their training and language skills before Registration is approved.

Out of touch bureaucracy – unhelpful.

I feel it does not always have the interest of its members as its priority and is willing to sacrifice their career to appease the public's perception of their role.

Perceptions of AHPRA amongst nurses and midwives (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with AHPRA?

Base: Total sample of nurses and midwives registered with this Board (n=943)

Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Regulators	55%	(+1%)
Administrators	51%	(-1%)
Necessary	48%	(+8%)
For practitioners	46%	(+16%)
For the public	36%	(-2%)
Bureaucratic	34%	(-6%)
Decision-makers	32%	(+7%)
Rigid	16%	(-2%)
Intimidating	14%	(-7%)
Controlling	14%	(-3%)

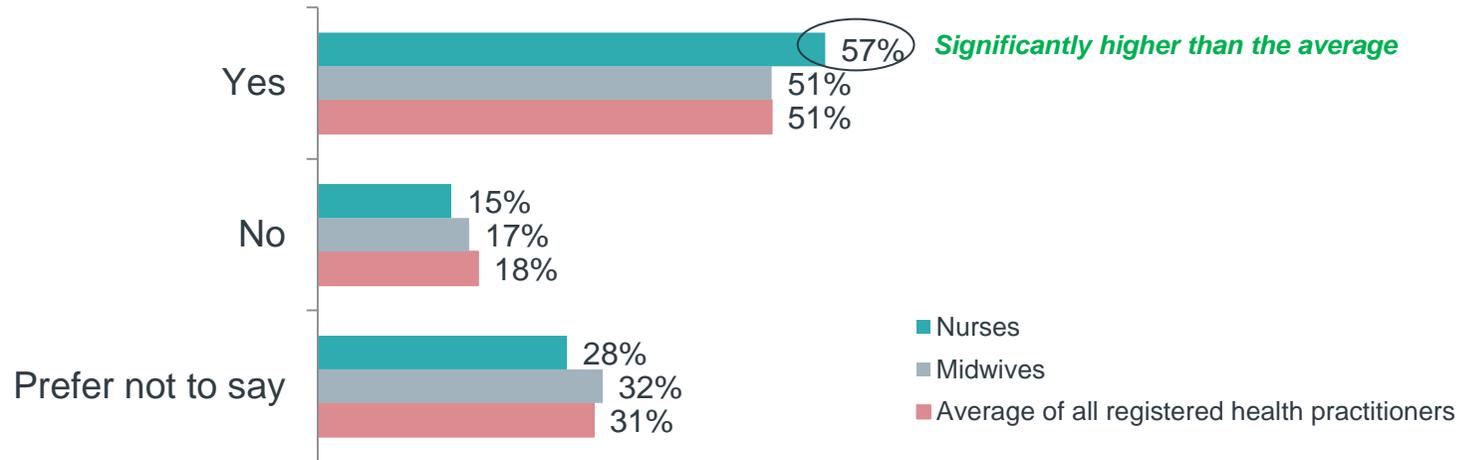
Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Accessible	18%	(+5%)
Competent	17%	(+2%)
Advocates	13%	(+5%)
Poor communicators	11%	(-3%)
Good communicators	10%	(-2%)
Helpful	11%	(+2%)
Trustworthy	11%	(+2%)
Out of touch	11%	(-1%)
Approachable	10%	(+1%)
Shows leadership	10%	(+3%)

Green indicates a result *significantly higher* than the average across all professions.

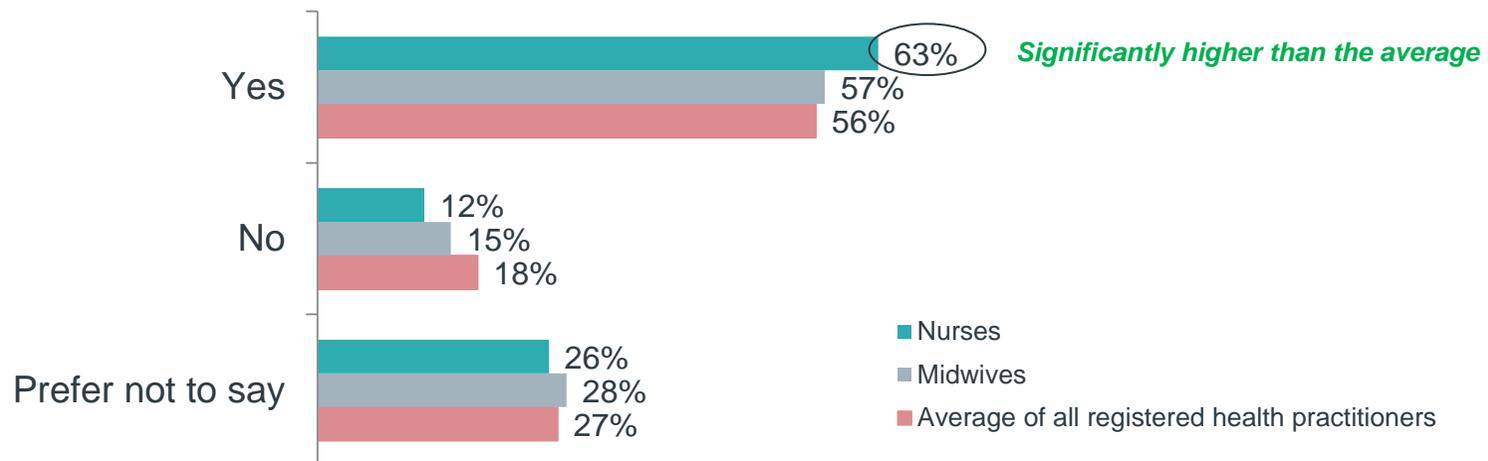
Orange indicates a result *significantly lower* than the average across all professions.

Levels of confidence and trust in AHPRA amongst nurses and midwives

Q. Do you feel confident that **AHPRA** is doing everything it can to keep the public safe?



Q. Do you trust **AHPRA**?



What are the indicators of trust and barriers to trust in AHPRA amongst nurses and midwives

Indicators of trust: **63% trust AHPRA**

Professional and involved in nurses profession and competency.

They are bound by law.

We need to trust someone.

I believe they care for the public & the health professionals.

Professional body.

My experiences with AHPRA have been professional and fair.

Because that is the governing body that make sure I am a safe practitioner.

It is well organised, and communicates well and I believe with transparency.

Because it can show the public that the people looking after them are qualified.

AHPRA appears to be competent, available on line and successful in the regulation and registration of nurses and midwives.

Full list of responses provided separately

Barriers to trust: **12% DO NOT trust AHPRA**

Media reports associated with poor clinical practices and the handling of same. Media reports of certain levels of practitioner being afforded more leniency than others Operates as secret business/operations, lacks transparency.

Some decisions I have seen seem inappropriately harsh.

From my observations it seems that certain sub-sections of healthcare practitioners are given free reign to practice in a way that goes against best evidence, are allowed to advertise in a way that goes against code, and are not reprimanded when publicly attacking their peer/allied practitioners.

I had bad experience in terms of my registration.

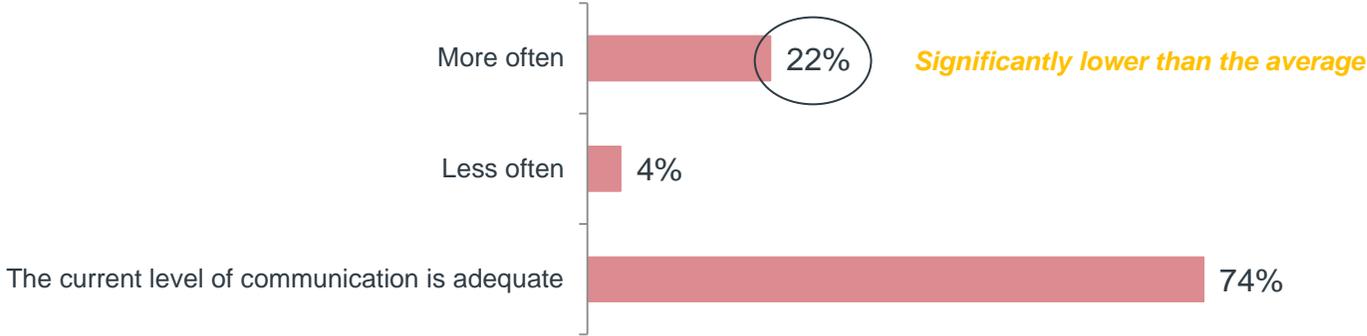
They seem bogged down in bureaucracy and out of touch with the reality of whether a practitioner is competent to remain registered.

They rule their practitioners under a veil of fear.

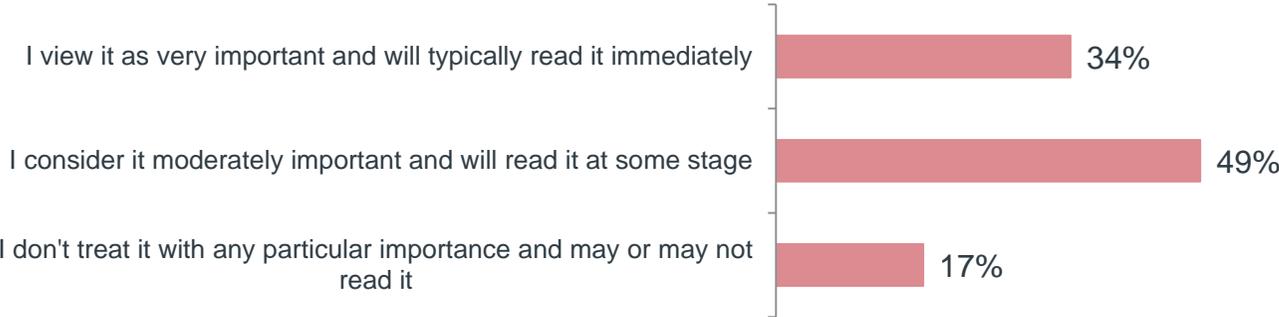
I have seen countless examples of Health Practitioners being held as 'guilty before innocent' when vexatious complaints are made. They impose on the Nation/health Practitioners an undertone that is "abide or be punished".

Response to communication by the Nursing and Midwifery Board of Australia

Q. Would you like (National Board) to communicate with you.....?



Q. How do you typically respond to communication you receive from (National Board)?



Base: Total sample of practitioners registered with this specific Board (n=943)

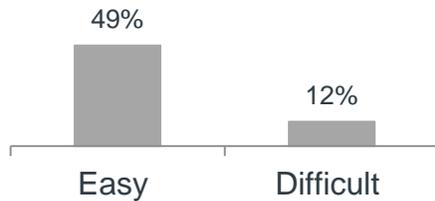
Use of the Nursing and Midwifery Board of Australia website

Q. How often do you visit the website of (your National Board)?



Base: Total sample of practitioners registered with this board

Q. How easy or difficult is it to find the information you were looking for on the (National Board) website?



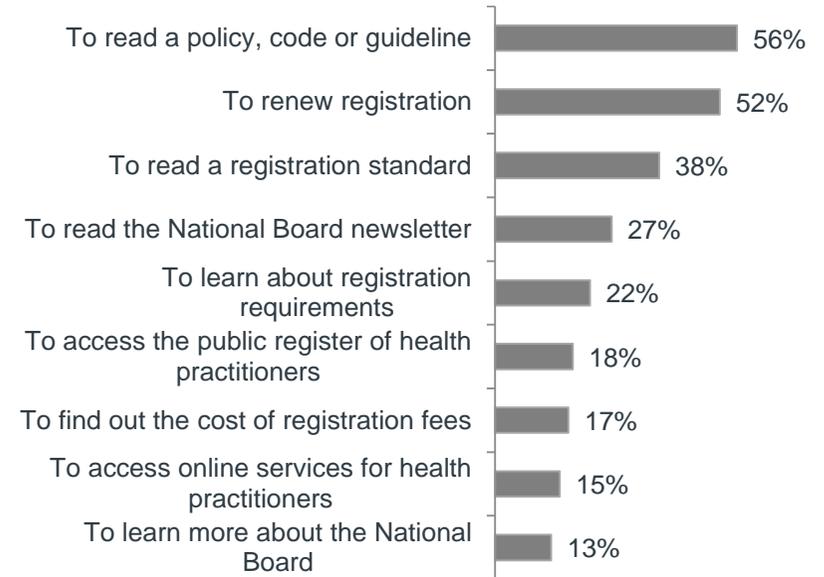
Base: Practitioners who have visited that board's website

Q. Is there any information you have looked for on the website of (National Board) but not been able to find?



Base: People who have visited that board's website

Reasons for visiting the National Board website



Additional information sought by practitioners include:

- *Bullying in the workplace*
- *how many hrs required for CPD*
- *Return to practice midwifery course, links didn't work*
- *Tried to find a clear policy about EN's carrying S8 keys in aged care facilities. Could not find it easily at all and never did.*
- *Vaccine position statement*
- *There is a lot of info that is simply hard to find if you do not already know specifically what you are looking before e.g. policies codes of practice / standards.*

Additional feedback from Nurses

Sample of open ended responses *(full list of responses provided separately)*

I suppose I see AHPRA as being the umbrella of all Health Practitioners and Nursing and Midwifery the group that is aligned with Nurses themselves and should understand and support us better.

I think this is a good survey to try to understand how to raise your profile with health professionals and help them to understand how you can be a leader for them.

My view of AHPRA is probably not great because I only hear from them yearly when my registration fee is due and I feel the fee is quite high. Also from what I've heard from others regarding the process of being audited, or having to prove how medical and mental health issues don't affect practice.

I would like to learn more about both of them and what they actually do.

I use the NMBA site rather than the AHPRA site as it contains the relevant information I need. I have made the assumption that if AHPRA requires something of me as a nurse it would come via the NMBA.

Thank you, great job!!

I believe it is necessary to have these organisations to ensure the public receive the best level of care.

Nothing about AHPRA and the Board but I am concerned about the level of knowledge nurses have about the board and their registration classifications and professional practice standards.

I do get their separate roles confused at times.

Yes, make what the two roles do clearer!!

Knowing more about the functions of AHPRA and the board would be useful, maybe something going out on registration renewal.

I would like information from both organisations to be clear in their detail and their expectation of me as a professional person. I would like to think that they are there to both support me in my professional capacity and keep me well advised about regulatory issues.

Additional feedback from Midwives

Sample of open ended responses *(full list of responses provided separately)*

Nursing and Midwifery Should be separate boards.

AHPRA communication is appalling, processing times for registration ridiculous a system is outdated. There should be online process like ANMAC have instead of having to post documents and long wait times between receiving and assessments.

The NMBA does not appropriately acknowledge Midwifery as a distinct profession separate from nursing. Midwifery is not a branch of nursing and should not be lumped together with nursing in the context of regulation. The NMBA is driven by nurses who want to retain Midwifery as a branch of nursing simply to retain strength in numbers. It does not reflect the distinct qualities of the two professions, both of which are valuable in very different ways. In other countries Midwifery is regarded as a form of family medicine or primary health. We should follow this model in my view.

I interact minimally with these organisations to maintain my registration to do my job, beyond this I have no interest in them.

Very difficult to get straightforward answers to easy questions regarding nursing registration. I am still thoroughly confused as to who regulates MCHNs in Victoria, neither board was any help.

There needs to be a greater consistency in what they advise about registration. I know everyone's case is different but when I re-registered I was told a different story about requirements every day!!

We need a separate Midwifery board that has midwives rather than nurses or medical doctors influencing regulation. A review of the increasing regulation and audit of private practice midwives needs to be undertaken. In terms of public safety these measures are leading to increases of free birthing rather than improving safety.

Why are we paying registration fees to AHPRA when things like Bacchus Marsh were allowed to happen by AHPRA? I do not feel that AHPRA protects me or the public at all considering the amount of reported practitioners that are still allowed to practice that are concerning.

More information

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