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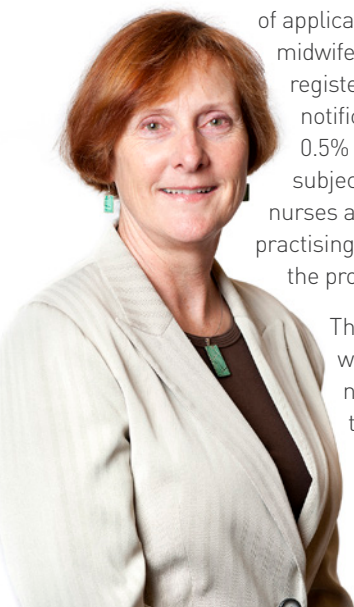
## Message from the Chair

Welcome to the final Nursing and Midwifery Board of Australia (NMBA) newsletter for 2016. We have had a busy year with the implementation of the revised registration standards and standards for practice. To ensure that nurses and midwives are aware of the changes to the standards, we have held information forums across the country and spoken to more than 5,000 nurses and midwives at these events. We received excellent feedback from those who attended the forums and the members of the NMBA enjoyed meeting with nurses and midwives and talking to them about regulation. Thank you to all the nurses and midwives who took the time to come and learn about the changes.

We recently released the 2015/16 [Annual report](#), which provides information about the work of the NMBA in partnership with the Australian Health Practitioner Regulation Agency (AHPRA). In

2015/16, we have seen a 16.2% increase in the number of applications for registration as a nurse or midwife. On a national basis, the percentage of registered health practitioners who received a notification during the year was 1.5%, but only 0.5% of nurses and 0.3% of midwives were the subject of a notification. This means that most nurses and midwives are doing a great job and practising in line with the expected standards of the professions.

This year we have kept you informed as we reviewed the codes of conduct for nurses and midwives. We will release the draft codes of conduct for public consultation on our website in January 2017, so look out for an email from us asking for your feedback.



We have also been updating you throughout 2016 about the development of the national health support service for nurses and midwives. Our work to have the service commence in early 2017 is progressing well and we are looking forward to this resource being available to assist nurses and midwives with their health.

I would like to thank the members of our National Board and state and territory boards, and the staff from AHPRA who support them, for their contributions to the work of the NMBA during this year.

I wish you all a safe and happy festive season and thank you for your ongoing commitment to your professions.

#### Dr Lynette Cusack RN

Chair, Nursing and Midwifery Board of Australia

## NMBA news

### Have your say on the *Code of conduct* for your profession in January 2017

In January 2017, nurses and midwives will receive an invitation from the NMBA to have their say on the revised *Code of conduct* for their profession (the codes). The codes set out the legal requirements, professional behaviour and conduct expectations for all nurses and midwives in all practice settings in Australia.

The codes are important for the professions, the healthcare system and the public. The codes are used:

- to support individual nurses and midwives in the delivery of safe practice and fulfilling their professional roles
- as a guide for the public and consumers of health services about the standard of conduct and behaviour they should expect from nurses and midwives

- to help the NMBA protect the public, in setting and maintaining the standards set out in the code and to ensure safe and effective practice, and
- when evaluating the professional conduct of nurses and midwives.

This January will be your chance to review the draft codes and have your say. All nurses and midwives will receive an invitation to participate via email. Your feedback will help the NMBA to make sure the codes are clear and easy to understand, and most importantly that they accurately capture the conduct required of nurses and midwives.

The NMBA looks forward to hearing your thoughts on the draft codes next month!

## Nurses and midwives in the National Scheme in 2015/16: 0.5% or less receive a notification

In 2015/16, 99.5% of registered nurses and 99.7% of midwives practised without receiving a notification, and over 60% of notifications made about nurses and midwives resulted in no further action being taken.

AHPRA has released its 2015/16 annual report, giving an overview of the nursing and midwifery workforce in Australia from the wider perspective of the National Registration and Accreditation Scheme.

AHPRA works in partnership with the NMBA to regulate nursing and midwifery in Australia, particularly supporting the NMBA in registration and notification issues.

On 30 June 2016, there were 380,208 enrolled nurses, registered nurses and midwives registered across Australia. This represents a national increase of 2.7% from the previous year.

On a national basis, the percentage of registered health practitioners with notifications received during the year was 1.5%. The percentage of all registered nurses with notifications received was 0.5%, which is 1% lower than the national percentage across all registered health professions.

The percentage of all registered midwives with notifications received was 0.3%, which is 1.2% lower than the national percentage.

While the total number of notifications about nurses and midwives rose from last year, over 60% of notifications about nurses and midwives closed this year resulted in no further action being taken by the NMBA. No further action is taken when, based on the available information, the NMBA determines there is no risk to the public that requires regulatory action.

You can find out more in the [2015/16 AHPRA annual report](#).

## Information forums for nurses and midwives across Australia explain 1 June changes

The NMBA travelled across Australia in 2016 to engage with thousands of nurses and midwives at information forums about the changes to registration standards, standards for practice and guidelines.

On 1 June 2016, changes to the NMBA registration standards, standards for practice and guidelines for nurses and midwives took effect. These changes were made to make the obligations for nurses and midwives clearer, allowing them to be more effective in how they provide care to the public.

One major change on 1 June was the introduction of the Registered nurse standards for practice, which replaced the *Registered nurse competency standards*. The development of the new *Registered nurse standards for practice* included an international literature review, observations of registered nurse (RN) practice, and consultation with close to 10,000 stakeholders. The NMBA encourages all RNs to be familiar with this key document as it sets the NMBA's expectations of contemporary RN practice in Australia.

We have had great turnouts across the country for our information forums, with over 5,000 nurses and midwives meeting the NMBA in person and via videoconference at multiple forums in every state and territory. A sincere thank you to all of those who were able to attend. We have used the questions and feedback we received from nurses and midwives at these events to provide better information across all our communications, to benefit the entire workforce.

For more information on the changes to registration standards, standards for practice and guidelines that took effect on 1 June this year, please read the [news item](#).



Nurses and midwives at an NMBA information forum held at John Hunter Hospital, Newcastle.



NMBA members Melodie Heland, Dr Lynette Cusack (Chair), Angela Brannelly, Allyson Warrington and Nicoletta Ciffolilli attend an information forum at Queen Elizabeth II Medical Centre, Perth.

## Registration

### FAQ: Meeting the recency of practice registration standard

The NMBA [Registration standard: Recency of practice](#) requires nurses and midwives to have recent experience practising their profession and to make sure their professional skills are up to date.

*What do you mean by practice?*

Practice means any role, whether you get paid or not, in which you use your skills and knowledge as a nurse and/or midwife.

Practice doesn't just mean direct clinical care, it can also include using your professional knowledge in non-clinical roles like research, administration, policy or any other roles that impact on nursing and midwifery services.

*What evidence will I need to demonstrate my recency of practice?*

You need to provide evidence that you have practised for a period equivalent to a minimum of 450 hours, within the past five years.

The types of evidence you can provide include:

- a service statement from your employer
- pay slips
- income statement for the year, and
- other documents showing the hours and dates that you worked.

*Do the hours I have worked need to be continuous?*

No, your hours can be accumulated over the past five years.

*If I hold registration as both a nurse and midwife, do I need to meet the recency of practice requirements for both professions?*

Yes, you need to be able to show that you have practised for the equivalent of 450 hours in nursing **and** the equivalent of 450 hours in midwifery, over the past five years.

However, if you consider an aspect of your work could provide evidence for both nursing and midwifery practice, you may make a case for that. An example of this could be caring for women who have had a caesarean section, and their babies.

*If I have an endorsement, do I need to meet the recency of practice requirements to keep my endorsement?*

Yes. You need to maintain recency of practice relevant to the endorsement that you hold and declare annually that you have practised for the equivalent of 450 hours relevant to your endorsement over the past five years.

*What happens if I am unable to meet the recency of practice requirements?*

If you have not worked sufficient hours over the past five years, you need to contact the AHPRA office in your state or territory to get advice about your individual circumstances.

You may be asked to successfully complete:

- supervised practice as approved by the NMBA, or
- a re-entry to practice program approved by the NMBA.

*What if I change from a non-clinical role to a clinical role, or vice versa?*

If you have practised in a clinical or non-clinical role for 450 hours in the past five years, you can meet the recency of practice registration standard. However, the NMBA expects you (and your employer) to take steps to ensure you are educated, trained and competent to practise in any new role you take on. This is particularly important if you are transitioning from non-clinical to clinical practice, and/or changing your context or scope of practice.

*For more information*

You can find the [recency of practice standard on the NMBA website](#).

### 1 January 2017: New guidelines for privately practising midwives take effect

From 1 January 2017, the *Safety and quality guidelines for privately practising midwives* (the guidelines) take effect for all privately practising midwives, including those with an endorsement for scheduled medicines.

The NMBA held four midwifery-specific information forums across Australia in 2016, to share information about the changes with midwives in private practice and those holding endorsements for scheduled medicines and/or eligible midwife notation.

The guidelines replace the current *Safety and quality framework for privately practising midwives attending homebirths*. If you are a midwife in private practice, you will need to familiarise yourself with the new guidelines, and may need to update your practice to meet the requirements and be compliant with them by 1 January 2017.

The key changes made in the guidelines are:

- the requirement for a risk assessment based on the Australian College of Midwives (ACM) *National midwifery guidelines for consultation and referral*
- the presence at a homebirth of two registered health professionals, who are educated to provide maternal and newborn care, and skilled and current in maternity emergency management and maternal/neonatal resuscitation, one of whom is a midwife
- completion of a professional practice review program (PPRP), and
- demonstration of annual competencies in adult basic life support, neonatal resuscitation and training.

To find out more please view the [guidelines and supporting fact sheet](#), which cover all the changes.

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## Nursing and midwifery regulation at work: Notification case studies

### Tribunal reprimands enrolled nurse for failing to advocate for her patient

A tribunal has found an enrolled nurse had engaged in unprofessional conduct after failing to advocate for her patient and for failing to make adequate notes in the patient record.

The Victorian Civil and Administrative Tribunal (VCAT) found that Ms Catherine George engaged in unprofessional conduct in relation to two allegations. The tribunal reprimanded Ms George and imposed conditions on her registration, requiring her to undertake and complete further education in the form of a law and ethics course, which includes a component on documentation requirements.

For more information, please read the [news item](#).

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## Keep in touch with the NMBA

- Visit the [NMBA website](#) for registration standards, codes, guidelines and FAQ.
- 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.