

Evidence supporting the changes to the English language proficiency requirements for students with English as a second language undertaking nmbSA approved courses leading to Registration or Enrolment

1. Background

English Language Proficiency (ELP) is a requirement that an applicant who is a non-native speaker of English (i.e. English as a second language) will be required to provide as evidence when submitting an application to the Nursing and Midwifery Board of South Australia (The Board) for registration as a nurse or midwife or enrolment as a nurse.

The Board has reviewed and determined changes to the policy for English Language Proficiency requirements for registration and enrolment based on the best available evidence and to ensure the continuing integrity of the ELP requirements.

nmbSA's English Language Proficiency Policy is required to be comprehensive and consistent in its approach so that there is no potential for discrimination or inequity in the process or outcome for applicants who are non-native speakers of English. This applies to both internationally qualified nurses and midwives as well as international students for whom English is a second language who undertake a nmbSA approved course leading to registration or enrolment as a nurse or midwife.

nmbSA's English Language Policy must effectively address risks to the community and where possible, align with nationally consistent standards of all state and territory nursing and midwifery regulatory authorities (NMRAs). This is extremely important when applying mutual recognition provisions across states and territories and New Zealand and in recognition of the move to a National Registration and Accreditation Scheme for Nursing and Midwifery by 1 July 2010.

2. Evidence

The Australian Nursing and Midwifery Council (ANMC) Report - *National Standards for the Assessment of Internationally Qualified Nurses and Midwives for Registration and Migration* (source www.anmc.org.au)

During 2007/2008 the ANMC undertook a project to develop national standards for the assessment of internationally qualified nurses and midwives for registration and migration. The aim of the project was to research and formulate national standards for the assessment of internationally qualified nurses and midwives who apply for registration in, and migration to, Australia, irrespective of their country of origin. The project was undertaken to coincide with the work of the Council of Australian Governments (COAG) in April 2007 to progress towards the introduction of national registration for health professionals by July

2010. A final report from the consultant was presented to the June 2008 meeting of the ANMC Board. The final report comprises two documents:

1. the literature review and draft standards;
2. the implementation strategy for the new standards.

The eight Australian state and territory NRMAs confirmed the implementation of Standard 2 from 1 July 2009 and have given their support to the implementation of Standards 1 and 3-5 as of 1 January 2010. The possible introduction of Standard 6 in its present form or combined with a competency based assessment, is still very much in an embryonic stage with little detail available except for what is in the final report. Funding for the project was made available from the Professional Services Development Program from the then Department of Education Science and Training.

Standard 2 – *The applicant meets English Language Proficiency requirements for the nursing and midwifery professions* has been developed on the best available evidence for the assessment of internationally qualified nurses and midwives who are non-native speakers of English for registration and migration.

Standard 2, *The Applicant Meets English Language Proficiency Requirements* incorporates the following requirements:

1. English language proficiency test criteria;
Applicant must achieve an:
OET (Occupational English Test) score of a B pass or higher in all four sections of the test (Reading, Listening, Writing and Speaking);
Or
IELTS (International English Language Testing System) score in all four sub bands of 7.0 or higher in Reading, Listening, Writing and Speaking with an Academic score of no less than 7 overall.
2. Applicant must achieve the test score for an OET or IELTS at a single sitting within the previous two years.
3. Applicant can undertake the OET or IELTS test on-shore or offshore.
4. Applicant must organise for the documentary evidence of the test outcome to be supplied directly to the nursing and midwifery regulatory board.
5. No waiver to the English language requirements.

Standard 2 does not specifically address the English Language Proficiency requirements of applicants who are non native speakers of English and apply for registration as a nurse or midwife or enrolment as a nurse following successful completion of an **nmbSA** approved nursing or midwifery course. This presented a significant concern for **nmbSA** because in accepting the requirements outlined in Standard 2 for internationally qualified nurses and midwives there was a need to ensure that a consistent and fair English language standard is applied to all non-native speakers of English applying to **nmbSA** for registration or enrolment.

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The following table outlines the different requirements between the **nmbSA** approved Standard 2 for Internationally qualified nurses and midwives effective from 1 July 2009 and the existing **nmbSA** approved standard for students who are non-native speakers of English undertaking a **nmbSA** approved course leading to registration or enrolment (until 31 December 2009).

English Language Proficiency Requirements	ANMC & nmbSA approved Standard 2 for Internationally Qualified nurses and midwives (from 1 July 2009)	nmbSA approved standard for students who are non-native speakers of English undertaking a nmbSA approved course leading to registration or enrolment (Current to 31 December 2009)
OET (Occupational English Test)	Score of a B pass or higher in all four sections of the test (Reading, Listening, Writing and Speaking)	Score of a B pass or higher in all four sections of the test (<i>Reading, Listening, Writing and Speaking</i>)
IELTS (International English Language Testing System)	Score in all four sub bands of 7.0 or higher in <i>Reading, Listening, Writing and Speaking</i> with an Academic score of no less than 7 overall	Score of <i>at least 6.5 in Reading and Listening</i> and a score of at least 7.0 in Writing and Speaking with an overall band score of 7 or greater.
Repeat sub-band tests	OET – Test in one sitting IELTS – Test in one sitting	OET – <i>multiple tests</i> IELTS – Test in one sitting
Test Validity timeframe	Test completed within the last two years	Test undertaken within previous two years of applying to nmbSA for registration or enrolment
Testing on-shore or off-shore	On-shore or off-shore testing	<i>On-shore testing only</i>
Receipt of test outcome	Applicant must organise for the documentary evidence of the test outcome to be supplied directly to the nursing and midwifery regulatory board.	Applicant must organise for the documentary evidence of the test outcome to be supplied directly to the nursing and midwifery regulatory board
Waiver of the Requirement to produce an English Language Proficiency test	No waivers	<i>Two waivers Waiver 4 and 5 of the nbsa English Language Proficiency Requirements</i>

Additional evidence relied upon by the Board in determining the changes to the English language proficiency policy are included under each of the English Language Proficiency requirements listed in the left hand column of the table above.

3. OET (Occupational English Test)

OET is an English Language Test recognised by the Commonwealth Department of Immigration and Citizenship for skilled migration as well as NMRAs in Australia and New Zealand and other regulated health professions - **no change**

4. IELTS (International English Language Testing System)

IELTS is an English Language Test recognised by the Commonwealth Department of Immigration and Citizenship for migration as well as NMRAs in Australia and New Zealand and other regulated health professions.

A change to the IELTS score was made to increase the IELTS test scores in *Reading and Listening* sub bands from 6.5 to 7.0 resulting in an Academic score of 7 in all of the four sub bands (Reading, Listening, Writing and Speaking). However, the overall score of no less than 7 remains unchanged. This was based primarily on the following evidence.

The Department of Immigration and Citizenship does not require a person who is applying for skilled migration to provide evidence of satisfactory completion an English Language test if they can provide evidence they are registered as a nurse or midwife in Australia. The rationale for this approach is that the standard of English Language Proficiency required by a state or territory NMRA for registration or enrolment is of a higher standard e.g. IELTS Academic overall score of no less than 7. It is noted that an IELTS of 5 (General test) is an accepted test result for the Regional Sponsored Migration Scheme (*source: ANMC Registration Standards Committee minutes 23 April 2009*).

Both IELTS and OET are approved by the Australian Department of Immigration and Citizenship as appropriate English Language tests for the assessment of applicants for skilled migration to Australia. The levels recommended for a pass appear to be comparable in terms of difficulty. An OET – IELTS benchmarking study concluded that although the two tests are approximately equal in degree of difficulty and do test some common features they are not strictly equivalent in what they measure. However, the best fit is between the IELTS Band 7 in all sub bands and straight B grades on the OET (*source Elder C (2007) OET IELTS Benchmarking Study Report Language Testing Research Centre University of Melbourne*).

IELTS and OET are accepted by health profession regulatory boards in Australia as the two preferred English language proficiency tests for non-native speakers of English and many require a minimum score of 7 in all sub-bands in the IELTS; e.g. Australian Medical Boards and Dental Boards.

In February 2007, the Nursing and Midwifery Council (NMC), United Kingdom raised the English language proficiency criteria and require all internationally qualified nurses and midwives to achieve an IELTS – Academic score of 7 in each of the four sub-bands. This was a result of public consultations, evidence collected from the British Council and lobbying by patient groups for a higher English language proficiency requirement as the poor command of English was a source of frustration and considered a risk to the public's health and safety.

In January 2009, the Nursing Council of New Zealand (NCNZ) moved to an IELTS of 7 in all sub bands with no waivers for applicants who are non-native speakers of English. The Australian state and territory NMRAs are the NCNZ's *Trans Tasman Mutual Recognition 1997* (TTMR) partner. It is important that there is consistency of approach that does not compromise New Zealand's standard by an overseas qualified nurse or midwife seeking registration first with an Australian NMRA that has a lower standard of English language proficiency prior to applying for mutual recognition with NCNZ. This undermines the NCNZ and places the public of New Zealand at risk because they are required under the TTMR legislation to automatically accept these nurses and midwives for registration even when they have not met the New Zealand standard for English language proficiency.

5. Repeat sub-band tests

IELTS – one test sitting

The IELTS is comprised of modules that are dependent on each other. Cambridge UK IELTS have advised the Australian Nursing and Midwifery Council, the authorised assessing authority for the Department of Immigration and Citizenship (DIAC) which undertakes skills assessments of internationally qualified nurses and midwives seeking permanent migration in Australia, that their preference is for one test sitting (*source: ANMC Registration Standards Committee minutes 23 April 2009*). – **no change**

OET – multiple repeat sub-band tests

The OET has independent band testing and therefore does not support the requirement for one test sitting. In the absence of evidence to either support or refute OET's position a number of factors were considered. A number of the factors were presented by Fel Bisiani, Manager OET* and other sources including:

- nurses are the largest cohort accessing OET (approximately 50%). 30 to 40% of those who sit OET get the requisite grade in each band. As a consequence, there is a view by OET that applicants are presenting too early for the test rather than focusing their efforts on English language skill acquisition*;
- the potential risk of language attrition in applicants who pass one, two or three bands with a significant time lapse until the additional band(s) are passed which could be up to two years with the existing two year test validity timeframe;
- this risk may be further compounded where the tests are taken while the person remains off-shore in a non English speaking country;

- score validity timeframe for the bands, *Listening and Reading* is considered approximately 2 to 3 years with the bands, *Speaking and Writing* 1 to 2 years*;
- the higher the level of English Language acquisition, the slower the decline in English language proficiency*;
- depending on where the applicant is residing and their on-going immersion in the daily use of English language the level of literacy achieved in the second language will affect attrition. Attrition is more likely to occur with the productive skills than the receptive ones. That is, once you have learned to comprehend in a second language you are unlikely to lose the skill, although you may become less fluent in the productive skills of speaking and, to a lesser extent, writing, due to lack of contact and practice (*Tomiyaama, M 2000 Child Second Language Attrition: a Longitudinal Case study Applied Linguistics 21(3) pp304 -332*).

In consideration of the above and the acknowledgement that effective communication in all four bands *Reading, Listening, Writing and Speaking*, is an essential requirement for the provision of safe quality nursing and midwifery care to patients or clients, it was determined that there be a consistent approach to the access of repeat sub-band tests. It was determined that protection of the public underpins the English Language Proficiency policy and therefore both OET and IELTS results in all four bands should be undertaken at one test sitting. (*source: ANMC Registration Standards Committee minutes 23 April 2009*).

6. Test Validity timeframe

No change.

The IELTS test partners (the British Council, IDP Australia and the University of Cambridge ESOL examinations) recommend that a receiving organisation does not accept a Test Report form that is more than two years old and for this reason Test report forms will not be issued for tests taken more than two years ago (*source: ANMC Registration Standards Committee minutes 23 July 2009 – presentation by Ms Anne Marie Cooper Head of IDP, International Development Program of Australian Universities and Colleges in Australia*).

Evidence for rate at which English Proficiency declines before and after cut-off point. (*source Paper titled 2 Year Validity of the IELTS Test Report by Sacha DeVelle, Research and Validation, IELTS, 25 February 2008*)

Language attrition reflects a decrease in language proficiency at the individual level due to the non-use and subsequent gradual forgetting of that language (Cook, 2002). With non use a language becomes less accessible to the memory system, to the point where knowledge is lost (de Bot & Hulsen, 2002).

The rate at which English proficiency declines is dependent upon a number of factors particular to second language acquisition. These include (but are not limited to) age, level of proficiency, learning styles and individual differences (i.e., motivation, aptitude, intelligence, level of first language). There is a growing body of empirical studies (both quantitative and qualitative) that address the question of attrition sequences over time. That research shows an

emergence in the first stage of attrition of a gradual increase in processing time for the retrieval of linguistic information. In the next stage information becomes temporarily inaccessible in certain conditions but retrievable in others. In the final stage of language attrition linguistic information becomes completely inaccessible (Hansen, 2001; Nakuma, 2006). However, quantifying the exact start and finish points of the attrition process, and applying such claims to a high stakes test such as IELTS, raises a number of fairness issues. This is most obvious in terms of the role of individual differences for second language acquisition, and the difficulty in generalising the findings from one individual or group to the wider population. The learning and subsequent forgetting of a second language will depend on a myriad of factors related to the individual.

For these reasons a 2 year period is the generally accepted time frame for when English proficiency begins to deteriorate. This 2 year time frame is recommended by The TOEFL test run by The Educational Testing Service, Princeton and the TCF French test awarded by the French Ministry of Education; and is widely acknowledged by the L2 language teaching community as a fair and equitable validity period for an individual's current level of English proficiency.

References

- De Bot, K. & Hulsen, M. (2002), *Language Attrition: Tests, Self-Assessment and Perceptions*, in V. Cook (Ed) *Portraits of the L2 User*. Multilingual Matters, Clevedon.
- Hamers, J. & Blanc, M. (2000), *Bilinguality and Bilingualism* (2nd Edition) CUP: Cambridge.
- Hansen, L. (2001), The fate of the start. *Annual Review of Applied Linguistics* (21) pp. 60 - 73
- Nakuma, C. (2006), Researching Fossilization and Second Language Attrition: Easy Questions, Difficult Answers (pp. 21 – 34) in Han, Z. & Odlin, T. (Eds) *Studies of Fossilization in Second Language Acquisition* Multilingual Matters, Clevedon.

OET supports the test validity timeframe of two years because it is a recognised international standard and the evidence that supports a score validity timeframe for the bands, *Listening and Reading* to be approximately 2 to 3 years with the bands, *Speaking and Writing* to be approximately 1 to 2 years

Given the inevitable variability of individual attributes and circumstances, it is difficult to draw firm conclusions about appropriate policy for score validity (duration). While it would seem reasonable for listening and reading as valid for a fairly lengthy period (say 2-3 years) it may be justifiable to impose slightly more stringent demands for speaking and writing (say 1-2 years). The research on rates of retention remains patchy and applying a different ruling for different skills may be administratively problematic. (source: Elder C (2009) *Referenced notes titled Attrition of Second Level Proficiency Levels from Fel Bisiani, Manager OET*)

DIAC requires the IELTS or OET test result to be completed within 12 months form the time of lodging the application and it is not uncommon for some universities to accept only a year.

7. Testing on-shore or off-shore

The requirement to accept both on-shore and off-shore testing nationally was a departure from **nmbSA's** current policy for on-shore testing only. This was originally introduced to **nmbSA's** English Language Proficiency policy in September 2006 in response to issues identified with fraudulent test scores of applicants from China.

The three top source countries for nursing and midwifery in Australia currently are the Philippines, India and China where fraud and corruption are prevalent. DIAC is fully aware of these problems and continues to monitor them while continuing to allow off-shore English language testing for skilled migration. In January 2009, representatives of DIAC informed ANMC and the ANMC Registration Standards Committee of cases of registered nurses applying for General Skilled Migration who had studied undergraduate nursing programs on-shore for at least two years and who did not meet the minimum IELTS requirements. The relevant education providers and state and territory NMRAs were subsequently informed by DIAC.

All state and territory NMRAs, with the exception of **nmbSA**, accept both on-shore and off-shore testing. Retaining **nmbSA's** current position for on-shore testing was considered problematic for the following reasons:

- Both the IELTS – Academic and OET are currently marked at a central locality (i.e. IELTS – Academic in Cambridge, United Kingdom and OET in Melbourne, Australia) and neither provides detail on the certificate of where the test was undertaken. The information regarding the location of the test centre comes from the applicant.
- all other NMRAs allow for off-shore testing which may force applicants to seek initial registration in other state and territory NMRAs and then obtain registration in South Australia through the *Mutual Recognition Act 1992*, thereby overcoming **nmbSA's** more stringent requirement for on-shore testing.
- DIAC currently relies on the NMRAs to assess internationally qualified nurses and midwives for English language proficiency before they will issue a visa. The requirement for on-shore testing means that an internationally qualified nurse or midwife intending to work in South Australia would need to come to Australia to sit the English language test before they could apply for registration with **nmbSA**. Apart from the obvious financial disincentive, particularly if they fail and are required to resit the test, applicants are more likely to source another state or territory NMRA for registration and either remain there or gain registration in South Australia via the *Mutual Recognition Act 1992* thereby avoiding **nmbSA's** on-shore testing requirement.
- In August 2008, Senior Managers of both OET (Fel Bisiani) and IELTS (Anne Marie Cooper) reported that their organisations have stringent processes in place to prevent fraud including facial recognition and photo identification training and that these processes are regularly reviewed. DIAC, ANMC and all NMRAs are negotiating a memorandum of understanding that will enable information sharing following problem

identification and assist in promptly resolving these issues as they arise or minimising the risk.

- progress towards implementation of the National Registration and Accreditation Scheme by 1 July 2010 is likely to see the adoption of the ANMC Standard 2 as it has been adopted by ANMC and all state and territory NMRAs effective from 1 July 2009.

It was considered prudent for off-shore testing to be accepted into the **nmbSA** policy with the caution that on-going monitoring be required to identify and action any identified issues relating to fraudulent activity in relation to English Language testing off-shore.

8. Receipt of test outcome

Unchanged.

This approach is one of a number of strategies used by the state and territory NMRAs, ANMC and the English language testing authority, IELTS or OET to address the increasing incidence of fraud.

9. Waiver of the Requirement to produce an English Language Proficiency test

An important criteria in the ANMC Standard 2, *The Applicant Meets English Language Proficiency Requirements* is number 5; *No waiver to the English language requirements*. This criterion aligns with all other regulated health professions in Australia and international Nursing and Midwifery Regulatory Authorities e.g. United Kingdom since the beginning of 2007 and New Zealand since January 2009.

nmbSA offers two waivers for non native speakers of English who can produce evidence of English Language Proficiency to meet either Waiver 4 (students undertaking a Bachelor degree course leading to registration) or Waiver 5 (students undertaking an 18 month diploma course leading to enrolment).

The Board took action to tighten the requirements of Waiver 4 in 2008 however it continues to be increasingly difficult to support and apply the criteria within Waivers 4 and 5 of the **nmbSA**'s current English Language Proficiency policy with accuracy and certainty about the standard of English language proficiency of students who are non native speakers of English. More importantly, many of the assumptions upon which these waivers were originally based are unknown and/or are no longer relevant and have little evidentiary basis for **nmbSA** to confidently assert that a non-native speaker of English will have acquired the standard of English language proficiency of an IELTS or OET test if they complete an undergraduate program of two years full-time study in Australia and/or undertake three years of secondary school studies in an English speaking country.

This is put into clear perspective when one does not know the beginning standard of the student's English Language proficiency. It is acknowledged that **nmbSA** approved education providers are able to determine their own requirements for admission to courses and provide for English Language entry standards to be met by students through a variety of means. While the education providers state the entry requirement for an individual student is an Academic IELTS test score of 5.5 for a course leading to enrolment and 6.0 to 6.5 for a course leading to registration, many students who are non native speakers of English do not need to take a recognised IELTS - Academic or OET test to meet the English Language entry requirements. In the Australian Universities Quality Agency Project (AQUA) report titled *Good Practice Principles for English Language Proficiency for International Students in Australian Universities*, the Explanation of Principle 4 under Theme 2 *Prospective Students and Entry Standards* states:*Given the practical impossibility of equating these other means with English language test scores, universities need to find other means to assure themselves that students entering through pathways (including articulation from other studies, completion of English language courses and foundation programs) are equipped to participate effectively in their studies.*

This is of critical importance considering students undertake supervised supernumerary clinical practice within the first year of their course of study and the means are currently not universally in place in academic institutions. In addition, there are real concerns that for some students their learning may be compromised due to an insufficient grasp of the English language rather than an aptitude for the content of the nursing or midwifery course.

It is generally understood amongst teachers of English to speakers of other languages (TESOL) and supported by research, that students who undertake 20 hours of English language studies per week for ten weeks (total 200 hours) will increase their IELTS score by half a band (0.5) (*source Elder C and O'Loughlin K (2003) Score gains on IELTS after 10-12 weeks of intense English Study IELTS Research Report Volume 4 62-87*).

The requirements of the Commonwealth *Education Services for Overseas Students Act 2000 (ESOS)* are such that while the education provider may provide at little or no cost and/or encourage the uptake of English Language courses by international students, these students are not obliged to attend any additional education other than the award requirements for which they have enrolled as a student.

Relatively recent changes to the ESOS Act have also resulted in the removal of the requirement for an international student to attend the course topics on campus, allowing them to access on-line and off-campus topics and thereby further reducing the opportunity for interaction and communication in English during the course.

Other factors such as students of similar cultural background living and socialising together and potentially speaking in their native language combined with the absence of any requirement for formal English Language studies makes it extremely difficult to effectively judge that the standard of English Language proficiency of these applicants is equivalent to an IELTS or OET standard.

Representatives from the Commonwealth Department of Immigration and Citizenship meet regularly with the ANMC Registration Standards Committee and continue to report incidences whereby persons who have been registered with a state or territory NMRA and subsequently apply for skilled migration provide evidence of an IELTS or OET test score that is well below the required standard. ANMC staff who receive and assess applications for skilled migration from nurses and midwives have identified similar issues and this has resulted in DIAC pursuing individual Memorandum of Understanding with each NMRA and ANMC to facilitate improved sharing of this information and other matters including fraudulent documents and identification relied upon in assessing a person's credentials.

A report from the Australian Universities Quality Agency Project (AQUA) titled *Good Practice Principles for English Language Proficiency for International Students in Australian Universities* was funded by the Department of Education, Employment and Workplace Relations (DEEWR) in 2008. This report highlights that there is increased awareness of the importance that English proficiency is playing in the educational outcomes of international students studying in Australia. A number of key ideas guiding the Steering Committee convened by Dr Jeanette Baird, Audit Director AQUA is an admission that some students do not enter university with sufficient English skills to meet their studies and that most students will need assistance with their English development during their education. The good practice principles reinforce the university's responsibility for their student's English proficiency in participating in their studies.

Exemption to new English Language Proficiency Test Criteria

Exemption to the **nmbSA** definition of international student, and therefore the **nmbSA** English language proficiency requirements *may be considered if the international student can provide evidence to the satisfaction of **nmbSA** that they were born, and educated at primary and secondary level, in one of the four English speaking countries recognised by the Australian Department of Immigration and Citizenship i.e. Canada excluding the French speaking provinces such as Quebec and New Brunswick, the Republic of Ireland, the United Kingdom and the United States of America*

Upon the request from the University of Adelaide, the Board considered an approach that would overcome the unplanned and avoidable impact on those international students who can demonstrate that they were born and educated at primary and secondary level in a recognised English speaking country e.g. United Kingdom and the United States of America etc.

Internationally qualified nurses and midwives are easily identifiable when determining whether to apply the Board's English Language Proficiency requirements. The existing Board policy uses the term *non-native speaker of English* to identify all applicants where English is a second language. This term was incorporated in the Board's English Language Proficiency Policy in 2006/2007 following input from local and interstate experts in English language research and teaching.

For consistency, the Board agreed the term *non-native speaker of English* be replaced by *international student* and the Board subsequently defined the term *international student* at a meeting on 3 September 2009. The definition of an *International Student* is *a student who is enrolled in, or has successfully completed, a nmbSA approved course leading to registration or enrolment and was not born and educated at primary and secondary level in Australia or New Zealand.*

This definition aligns with the term *internationally qualified nurse or midwife* and addresses the increasing difficulty in clearly identifying all those students enrolled in nursing and midwifery courses leading to registration, enrolment or endorsement who have English as a second language. International students on student visas are readily identifiable, however, the above definition now identifies an increasing number of people for whom English is a second language and who migrate to Australia and then obtain permanent residency and subsequently enrol as a student in a nursing or midwifery course. It is important to note the General English Language requirements for migration to Australia are significantly lower than the Academic English Language Proficiency requirements for registration as a nurse or midwife or enrolment as a nurse.

In considering an exemption to criteria 5 of the nationally approved ANMC Standard 2 for students enrolled in an **nmbSA** approved nursing and midwifery course, it was important that the Board ensured that:

- the exemption effectively protects the health and safety of the public;
- there is no diminishing of the national standards established and approved by the Board in the **nmbSA** English Language Policy;
- the exemption is straightforward and easy to interpret by all concerned including students, education providers, the public and **nmbSA** staff;
- it is administratively efficient and consistently applied by **nmbSA** staff responsible for processing applications for registration, enrolment and endorsement.

The Board's recently approved definition of *International Students* also captures those international students from English speaking countries that the Department of Immigration and Citizenship (DIAC) currently exempts from the requirement for an English language test for migration. DIAC identifies New Zealand, Canada, New Zealand, the Republic of Ireland, the United Kingdom and the United States of America as English speaking countries however with the increase in temporary and permanent global migration, evidence of citizenship in an English speaking country may not necessarily demonstrate evidence of being a native speaker of English.

The inclusion of the words *born* and *educated at primary and secondary level* have been drawn from similar exemption provisions of the Australian Veterinary Board Councils Inc that assess internationally qualified professionals for registration. These provisions were originally sourced from the Australian Education International (AEI) and Commonwealth National Office of Overseas Skills Recognition (NOOSR).