



Aboriginal and Torres Strait
Islander Health Practice
Chinese Medicine
Chiropractic
Dental
Medical
Medical Radiation Practice
Nursing and Midwifery
Occupational Therapy
Optometry
Osteopathy
Pharmacy
Physiotherapy
Podiatry
Psychology

Australian Health Practitioner Regulation Agency

Practitioner audit report

March 2014

Phase three pilot: Nursing and midwifery

Introduction

About this document

This report presents the findings and recommendations from phase 3 pilot audit, undertaken by the NSW AHPRA office audit team from May 2013 to November 2013.

Two registration standards for nurses and midwives were audited – recency of practice and continuing professional development. The purpose of the audit (pilot) was to focus on continuing the development of an overall auditing framework and audit program for roll out to all regulated health professions across Australia.

The overall practitioner audit project was designed to determine the frequency, size and type of audits required as well as develop and establish the audit methodology to be developed for the National Scheme.

This report will present the findings for the nursing and midwifery professions. The reports for previous pilot audits are available on the respective board websites (pharmacy, optometry and chiropractic).

About the National Scheme

AHPRA supports and works with the National Boards responsible for regulating 14 health professions in Australia.

The primary role of the National Boards is to protect the public and facilitate access to health services. National Boards set the standards and policies that all registered practitioners must meet. AHPRA's operations are governed by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The 14 National Boards are:

- Aboriginal and Torres Strait Islander Health Practice Board
- Chinese Medicine Board
- Chiropractic Board
- Dental Board
- Medical Board
- Medical Radiation Practice Board
- Nursing and Midwifery Board
- Occupational Therapy Board
- Optometry Board
- Osteopathy Board
- Pharmacy Board
- Physiotherapy Board
- Podiatry Board, and
- Psychology Board

More information about the role of AHPRA and the National Boards is published at www.ahpra.gov.au and on individual National Board websites, accessible through the AHPRA site.

Registration standards

Each National Board sets registration standards that practitioners must meet to be registered to practise. The National Law requires Boards, at a minimum, to set five standards – the four detailed below and also a standard in relation to English language skills.

- criminal history check (CHC)
- continuing professional development (CPD)
- recency of practice (ROP), and
- professional indemnity insurance (PII).

The audit focused on practitioners' compliance with two of the four registration standards:

- continuing professional development (CPD) and
- recency of practice (ROP).

More information about the Nursing and Midwifery Board of Australia's (the Board) registration standards are published at www.nursingmidwiferyboard.gov.au/Registration-Standards

The audit process

The phase 3 pilot audit used the audit framework from the phase 2 pilot i.e. run in conjunction with the renewal registration period.

This audit took place from May 2013 to November 2013 and assessed practitioners' compliance with two registration standards (continuing professional development and recency of practice) for the registration period 1 December 2011 to 30 November 2012.

Selection and sample size

AHPRA engaged an external statistician to advise on an appropriate sample selection and size for the audit. A fixed sample size was chosen, to provide a high rate of reliability and to ensure the results could be applied across the profession as a whole. As a result, among audited registrants:

The random selection method ensured each registrant had an equal opportunity of being selected.

Registrants were selected from all nurses and midwives including those with endorsements / notations, who had renewed at least once with the Nursing and Midwifery Board of Australia in the National Scheme.

The table below summarises how registrants selected for the audit compared to the overall population (at the time of audit) in regards to the location they practice. In terms of location of practice, these results reveal the audit sample is representative of the population of registrants as a whole.

| State / territory | % of sample | Total no. of registrants | % of population |
|-------------------|-------------|--------------------------|-----------------|
| ACT | 1.1 | 5696 | 1.4 |
| NSW | 31.1 | 110960 | 28.0 |
| NT | 0.9 | 4280 | 1.1 |
| QLD | 13.2 | 75542 | 19.0 |
| SA | 9.7 | 35383 | 8.9 |
| Tas | 2.6 | 9234 | 2.3 |
| Vic | 26.5 | 105353 | 26.5 |
| WA | 10.2 | 39590 | 10.0 |
| No PPP | 4.7 | 10840 | 2.7 |
| Total | 100 | 396878 | 100 |

Approximately 90% of registered nurses and midwives are female and this was also the split observed for those selected into the audit. Again, these data reveal the audit sample is representative of the population of registrants as a whole in terms of participant's gender.

Assessment process

The audit team comprised one Senior Assessor and two Audit Assessors. The assessors were based in the New South Wales AHPRA office and experienced in processing and assessing applications for registration and renewal and trained on the audit framework.

Processes were detailed and tools provided to assessors before the start of the pilot.

After reviewing the material provided by registrants, the audit assessors could determine:

- the registrant had complied with all of the requirements of the registration standards
- the registrant had not met the requirements of the registration standards and request further information.
- the registrant had not complied with all of the requirements of the registration standards and refer the matter to the Board.

Audit results

Audit outcomes

As with the previous pilots, each audited registrant was allocated into one of the following audit outcome categories:

| Audit outcome category | Description | % of practitioners |
|---------------------------|---|--------------------|
| Completed the audit | Registrants that submitted a renewal request, were audited and sent a successful renewal outcome letter | 84.5 |
| Changed to non-practising | Registrants who prior or during the audit and renewal period changed to a 'non-practising' status | 1.4 |
| Failed to renew | Registrants who did not respond to the renewal request which would mean their registration being administratively withdrawn | 7.7 |
| Board submission | Board submission numbers related to those registrants who did not comply with one or more standards at the time of the audit. | 4.4 |
| Withdrew application | Those registrants who made their intention known they would not renew or during the renewal process decided to withdraw after seeking further information from the audit team | 1.6 |
| Other | Those registrants that did not end the audit process due to unforeseen circumstances | 0.4 |

Assessment process

For the purposes of this report, the process is divided into three stages:

| Audit stage | Description | Results |
|------------------|---|---|
| Renewal request | When registrants make their intention to renew their registration (either online or via submission of a paper form) | 88% of registrants applied to renew by the close of the formal renew period (31 May 2013) |
| Audit response | When supporting evidence has been received by the audit team to begin assessment | Number of days to respond Average: 31 Maximum: 139 |
| Audit completion | When the audit team have assessed a registrant against the standards and flag the audit as being successfully completed | Days for audit completion: Average: 37 Minimum: 1 Maximum: 181 |

Request for additional information

Additional information was requested from registrants for a number of reasons.

- No documentation provided with audit checklist.
- CPD log incomplete or further clarification of entries required.
- Statement of service from employer not provided, filled out incorrectly, illegible or supplied in the incorrect format.
- More detail required on the breakdown of recency of practice where a practitioner holds dual registration.

Current status

AHPRA, on behalf of and in conjunction with National Boards has:

- established a permanent audit team as a business as usual audit function supported by policies and procedures developed and maintained by AHPRA. All professions have commenced auditing.
- developed and refined an audit campaign decoupled from the renewal process to provide an efficient and effective service for all National Boards that is nationally consistent wherever deemed appropriate.
- invested in software to support the audit function and ensure integration with registration, notification and compliance software, as appropriate.
- enhanced the registrant experience through the refinement of information, documentation and systems to ensure requirements are clearly articulated, fair and transparent; and user friendly for the practitioner.
- planned further enhancements to continuously improve the registrant experience i.e. online upload of documents capability.