Supervisor’s summative report

Updated February 2019

Enrolled nurse

The supervisor’s summative report template is a tool to provide final assessment to the Nursing and Midwifery Board of Australia (NMBA).

It is essential that you read the [Enrolled nurse standards for practice](http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx) in conjunction with this document. When completing this document, the standards, domains, and indicators are to be considered.

The NMBA’s[Framework for assessing standards for practice for registered nurses, enrolled nurses and midwives](http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Frameworks.aspx)should also be referred to throughout the duration of the program and during the completion of this document.

Supervision summative (final) report template

Supervision reports completed by the supervisor in consultation with the supervisee are to be submitted to the Australian Health Practitioner Regulation Agency (AHPRA) for the NMBA’s consideration:

* as stipulated by the NMBA on approval of a *Supervised practice plan* (SPP) and otherwise as required by the NMBA.
* upon completion of an approved period or supervised practice and
* together with an application for general registration following a period of provisional registration.

For information on reports and reporting requirements, please refer to the NMBA’s [Supervision guidelines for nurses and midwives.](http://www.nursingmidwiferyboard.gov.au/Registration-and-Endorsement/reentry-to-practice.aspx)

Supervision report details

**Date of report:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of supervisee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature of supervisee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisee registration number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Commencement date of SPP/placement**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Conclusion date of SPP/placement:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of approved supervised practice location/education provider**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of approved Ward/Unit/Clinic**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Have there been any changes to the practice location since provisional registration was granted (for the purpose of supervised practice)**

[ ]  Yes

[ ]  No

If yes, please provide details

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**Name of principal supervisor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature of principal supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of secondary supervisor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature of secondary supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of additional supervisor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature of additional supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1. Have there been any changes in the principal or secondary supervisors since supervision commenced?**

[ ]  Yes**[[1]](#footnote-2)**

[ ]  No

If yes, please provide details

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**2. Reason for supervision (tick one):**

[ ]  Provisional registration/general registration with conditions for re-entry to practice - Supervised practice component only (Pathway 1)

[ ]  Condition or undertaking requiring supervision for a health, performance, or conduct matter

[ ]  Registration with condition (e.g. Internationally qualified nurse)

[ ]  Other - please list\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Supervision level at completion:**

please tick level of supervision at time of report)

[ ]  Level 1 (Direct) [ ]  Level 2 (Indirect)

**4. How many hours has the supervisee completed?**

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| **Activity** | **Since last report**  | **Cumulative in total** |
| Hours of direct patient/client contact (e.g. assessment and/or treatment of individuals*)* |  |  |
| Hours of professional development (outside of patient/client related activity) occurring during rostered hours at practice location |  |  |
| Hours taken as sick leave or absent from practice (on a rostered day of practice) |  |  |

Supervisee summative self-assessment summary

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| **Supervisee’s self-assessment** |
| **Self-assessment of supervisee’s development against the** [Enrolled nurse standards for practice](http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx) ***(to be completed by the supervisee)***Mark with a cross on the scale of 1 to 5 where 5 is standard met. |
|  | ***Addressed*** | ***Summative assessment*** |
|  |  |  |  | 1 | 2 | 3 | 4 | 5 |
| 1. Functions in accordance with the law, policies and procedures affecting enrolled nurse practice
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Practises nursing in a way that ensures the rights, confidentiality, dignity and respect of people are upheld
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Accepts accountability and responsibility for own actions
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Interprets information from a range of sources in order to contribute to planning appropriate care
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Collaborates with the registered nurse, the person receiving care, and the healthcare team when developing plans of care
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Provides skilled and timely care to people receiving care and others whilst promoting their independence and involvement in care decision-making
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Communicates and uses documentation to inform and report care
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Provides nursing care that is informed by research evidence
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Practises within safety and quality improvement guidelines and standards
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Engages in ongoing development of self as a professional
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Supervisor assessment**

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| **Supervisor’s report** |
| **List details of the supervisee’s competence against the** [Enrolled nurse standards for practice](http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx) ***(to be completed by principal supervisor – if further comment is required please elaborate within report)***Mark with a cross on the scale of 1 to 5 where 5 is standard met. |
|  | ***Addressed*** | ***Summative assessment*** |
|  |  |  |  | 1 | 2 | 3 | 4 | 5 |
| 1. Functions in accordance with the law, policies and procedures affecting enrolled nurse practice
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Practises nursing in a way that ensures the rights, confidentiality, dignity and respect of people are upheld
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Accepts accountability and responsibility for own actions
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Interprets information from a range of sources in order to contribute to planning appropriate care
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Collaborates with the registered nurse, the person receiving care, and the healthcare team when developing plans of care
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Provides skilled and timely care to people receiving care and others whilst promoting their independence and involvement in care decision-making
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Communicates and uses documentation to inform and report care
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Provides nursing care that is informed by research evidence
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Practises within safety and quality improvement guidelines and standards
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Engages in ongoing development of self as a professional
 | Yes [ ]  | No [ ]  |  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

Supervision report (summative)

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| **Learning objectives listed in supervised practice plan** *(attach additional sheet if required)* | **Summative assessment (evaluation)**1. Met
2. Not yet met but may be achievable[[2]](#footnote-3)
3. Not met and not achievable[[3]](#footnote-4)
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**Have issues or problems noted in formative (interim) reports been resolved (if applicable)?**

Yes **[ ]**  No **[ ]**  Not applicable **[ ]**

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| **Issue or problem noted in formative report**  | **Measures taken and outcome**  |
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**Summative assessment report against the Enrolled nurse standards for practice**

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| Professional and collaborative practice**Standard 1: Functions in accordance with the law, policies and procedures affecting enrolled nurse practice** |
| The enrolled nurse 1. Demonstrates knowledge and understanding of commonwealth, state and /or territory legislation and common law pertinent to nursing practice.
2. Fulfils the duty of care in the undertaking of EN ­practice.
3. Demonstrates knowledge of and implications for the NMBA standards, codes and guidelines, workplace policies and procedural guidelines applicable to enrolled nursing practice.
4. Provides nursing care according to the agreed plan of care, professional standards, workplace policies and procedural guidelines.
5. Identifies and clarifies EN responsibilities for aspects of delegated care working in collaboration with the RN and multidisciplinary health care team.
6. Recognises own limitations in practice and competence and seeks guidance from the RN and help as necessary.
7. Refrains from undertaking activities where competence has not been demonstrated and appropriate education, training and experience has not been undertaken.
8. Acts to ensure safe outcomes for others by recognising the need to protect people and reporting the risk of potential for harm.
9. When incidents of unsafe practice occur, reports immediately to the RN and other persons in authority and, where appropriate, explores ways to prevent recurrence.
10. Liaises and negotiates with the RN and other appropriate personnel to ensure that needs and rights of people in receipt of care are addressed and upheld.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If considered not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| Professional and collaborative practice**Standard 2: Practises nursing in a way that ensures the rights, confidentiality, dignity and respect of people are upheld** |
| The enrolled nurse: 1. Places the people receiving care at the centre of care and supports them to make informed choices.
2. Practises in accordance with the NMBA standards codes and guidelines.
3. Demonstrates respect for others to whom care is provided regardless of ethnicity, culture, religion, age, gender, sexual preference, physical or mental state, differing values and beliefs.
4. Practises culturally safe care for (i) Aboriginal and Torres Strait Islander peoples; and (ii) people from all other cultures.
5. Forms therapeutic relationships with people receiving care and others recognising professional boundaries.
6. Maintains equitable care when addressing people’s differing values and beliefs.
7. Ensures privacy, dignity and confidentiality when providing care.
8. Clarifies with the RN and relevant members of the multi-disciplinary healthcare team when interventions or treatments appear unclear or inappropriate.
9. Reports incidents of unethical behaviour immediately to the person in authority and, where appropriate, explores ways to prevent recurrence.
10. Acknowledges and accommodates, wherever possible, preferences of people receiving nursing care.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| Professional and collaborative practice**Standard 3: Accepts accountability and responsibility for own actions** |
| The enrolled nurse: 1. Practises within the EN scope of practice relevant to the context of practice, legislation, own educational preparation and experience.
2. Demonstrates responsibility and accountability for nursing care provided.
3. Recognises the RN[[4]](#footnote-5) as the person responsible to assist EN decision-making and provision of nursing care.
4. Collaborates with the RN to ensure delegated responsibilities are commensurate with own scope of practice.
5. Clarifies own role and responsibilities with supervising RN in the context of the healthcare setting within which they practice.
6. Consults with the RN and other members of the multidisciplinary healthcare team to facilitate the provision of accurate information, and enable informed decisions by others.
7. Provides care within scope of practice as part of multidisciplinary healthcare team, and with supervision of a RN.
8. Provides support and supervision to assistants in nursing (however titled) and to others providing care, such as EN students, to ensure care is provided as outlined within the plan of care and according to institutional policies, protocols and guidelines.
9. Promotes the safety of self and others in all aspects of nursing practice.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |
| **Provision of care****Standard 4:** **Undertakes comprehensive assessments** |
| The enrolled nurse: 1. Uses a range of skills and data gathering techniques including observation, interview, physical examination and measurement.
2. Accurately collects, interprets, utilises, monitors and reports information regarding the health and functional status of people receiving care to achieve identified health and care outcomes.
3. Develops, monitors and maintains a plan of care in collaboration with the RN, multidisciplinary team and others.
4. Uses health care technology appropriately according to workplace guidelines.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| **Provision of care****Standard 5: Collaborates with the RN, the person receiving care and the healthcare team when developing plans of care** |
| The enrolled nurse: 1. Develops and promotes positive professional working relationships with members of the multi-disciplinary team.
2. Collaborates with members of the multi-disciplinary healthcare team in the provision of nursing care.
3. Contributes to the development of care plans in conjunction with the multidisciplinary healthcare team, the person receiving care and appropriate others[[5]](#footnote-6).
4. Manages and prioritises workload in accordance with people’s care plans.
5. Clarifies orders for nursing care with the RN when unclear.
6. Contributes to and collaborates in decision-making through participation in multidisciplinary healthcare team meetings and case conferences.
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| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| **Provision of care****Standard 6: Provides skilled and timely care to people whilst promoting their independence and involvement in care decision–making** |
| The enrolled nurse: Provides care to people who are unable to meet their own physical and/or mental health needs.Participates with the RN in evaluation of the person’s progress toward expected out­comes and the reformulation of plans of care. Promotes active engagement and the independence of people receiving care within the health care setting by involving them as active participants in care, where appropriate.Demonstrates currency and competency in the safe use of healthcare technology. Exercises time management and workload prioritisation.Recognises when the physical or mental health of a person receiving care is deteriorating, reports, documents and seeks appropriate assistance. |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| **Provision of care****Standard 7: Communicates and uses documentation to inform and report care**  |
| The enrolled nurse: 1. Collects data, reviews and documents the health and functional status of the person receiving care accurately and clearly.
2. Interprets and reports the health and functional status of people receiving care to the RN and appropriate members of the multidisciplinary healthcare team as soon as practicable.
3. Uses a variety of communication methods to engage appropriately with others and documents accordingly.
4. Prepares and delivers written and verbal care reports such as clinical handover, as a part of the multidisciplinary healthcare team.
5. Provides accurate and appropriate information to enable informed decision making by others.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| Reflective and analytical practice**Standard 8: Provides nursing care that is informed by research evidence**  |
| The enrolled nurse: 1. Refers to the RN to guide decision-making.
2. Seeks additional knowledge/information when presented with unfamiliar situations
3. Incorporates evidence for best practice as guided by the RN or other appropriate health professionals.
4. Uses problem-solving incorporating logic, analysis and a sound argument when planning and providing care.
5. Demonstrates analytical skills through accessing and evaluating healthcare information and quality improvement activities.
6. Consults with the RN and other relevant health professionals and resources to improve current practice.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| Reflective and analytical practiceStandard 9: Practises within safety and quality improvement guidelines and standards |
| The enrolled nurse: 1. Participates in quality improvement programs and accreditation standards activities as relevant to the context of practice.
2. Within the multi-disciplinary team, contributes and consults in analysing risk and implementing strategies to minimise risk.
3. Reports and documents safety breaches and hazards according to legislative requirements and institutional policies and procedures.
4. Practises safely within legislative requirements, safety policies, protocols and guidelines.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| Reflective and analytical practice**Standard 10: Engages in ongoing development of self as a professional**  |
| The enrolled nurse: 1. Uses the *Enrolled nurse standards for practice* to assess own performance.
2. Recognises the need for, and participates in, continuing professional and skills development in accordance with the NMBA’s *Continuous professional development* *registration standard*.
3. Identifies learning needs through critical reflection and consideration of evidence-based practice in consultation with the RNs and the multidisciplinary healthcare team.
4. Contributes to and supports the professional development of others.
5. Uses professional supports and resources such as clinical supervision that facilitate professional development and personal wellbeing.
6. Promotes a positive professional image.
 |
| **Summative assessment****Rating:** Competent **[ ]**  Not competent **[ ]**  **If not competent please provide comments below:** |
| **Date: Principal supervisor’s signature:** |

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| **Supervisee’s response (supervisee to complete)** |
| **This summative report and its contents have been discussed with me by my principal supervisor** Yes **[ ]**  No **[ ]**  |
| **Supervisee’s summary comments:**  |

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| **Supervisor summary (supervisor to complete)** |
| **This summative report and its contents have been discussed with the supervisee** Yes **[ ]**  No **[ ]**  |
| **Supervisor’s summary comments:**  |

Recommendation for registration (to be completed by the principal supervisor):

I declare that the supervisee named in this document has completed the minimum number of supervised practice hours specified by the Nursing and Midwifery Board of Australia, has been deemed competent in all the standards for practice elements and can be recommended for general registration.

Yes **[ ]**  No\* **[ ]**

\*supporting documentation must be attached

Principal supervisor’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal supervisor’s registration number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisee’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

Principal supervisor declaration

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of principal supervisor) declare that the information contained in the attached supervision report about the work of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of supervisee) is true and correct.

**Signature of principal supervisor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of supervisee**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who do you send it to?

All documentation should be sent to the AHPRA office in your capital city, as listed on the contact us section of the AHPRA website ([www.ahpra.gov.au](http://www.ahpra.gov.au))

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| AHPRA Nursing and Midwifery Registrations **or** Notifications (select appropriate division) GPO Box 9958In your capital city (refer below) | You may contact the Australian Health Practitioner Regulation Agency on 1300 419 495 or you can lodge a web enquiry at [www.ahpra.gov.au](http://www.ahpra.gov.au)  |
| Sydney NSW 2001Adelaide SA 5001 | Canberra ACT 2601Perth WA 6001 | Melbourne VIC 3001Hobart TAS 7001 | Brisbane QLD 4001Darwin NT 0801 |

For information on the Nursing and Midwifery Board of Australia refer to the NMBA website [www.nursingmidwiferyboard.gov.au/](http://www.nursingmidwiferyboard.gov.au/)

1. A [Request for change in circumstances for nurses and midwives undertaking supervised practice (form ACCL-40)](http://www.nursingmidwiferyboard.gov.au/Registration-and-Endorsement/Forms.aspx)  is to be submitted to the NMBA with each change of supervisor (Pathway 2 registrants completing an [approved program of study](http://www.nursingmidwiferyboard.gov.au/Accreditation/Approved-Programs-of-Study.aspx) are not required to complete this form if remaining at the same practice location). [↑](#footnote-ref-2)
2. Not achievable during the time period of placement. Supervisors are required to explain rationale and plan [↑](#footnote-ref-3)
3. Supervisors should contact the NMBA as soon as practical if the learning objectives are not achievable [↑](#footnote-ref-4)
4. Where an enrolled nurse is working in maternity services setting it is expected that they will be supervised by a midwife. [↑](#footnote-ref-5)
5. Appropriate others include those in direct association with the person receiving care (with his/her consent) such as family, unpaid and paid carers, volunteers and clergy. [↑](#footnote-ref-6)