

Registration standard: Endorsement as a nurse practitioner

Consultation report

February 2016

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Foreword

The Nursing and Midwifery Board of Australia (NMBA) works in partnership with the Australian Health Practitioner Regulation Agency (AHPRA) in the regulation of nurses and midwives in Australia.

The NMBA sets the national standards, codes and guidelines that nurses and midwives must meet to be registered in Australia. The standards include five core registration standards, required under the Health Practitioner National Law, as in force in each state and territory (the National Law) and other profession specific registration standards. These standards, codes and guidelines provide nurses, midwives, employers and the public with information about the minimum standards required to practice as a registered nurse and/or registered midwife in Australia.

Since the commencement of the National Registration and Accreditation Scheme (the National Scheme) in 2010, the NMBA has established a systematic process to review, consult on and develop all standards codes and guidelines.

In 2010, the NMBA developed the *Endorsement as a nurse practitioner registration standard* (the current standard) under section 95 of the National Law which was approved by the Australian Health Workforce Ministerial Council (AHWMC). Since November 2010, registered nurses have been able to apply to the NMBA for endorsement as a nurse practitioner if they met the requirements of the current standard. The current standard describes the required qualification and experience that a registered nurse must demonstrate when applying for endorsement as a nurse practitioner

When a registered nurse meets the requirements of the current standard they are endorsed and are able to use the protected title of 'nurse practitioner'. In addition to being endorsed, the current standard enables nurse practitioners to prescribe scheduled medicines and eligibility to access the Medicare Benefits Schedule (MBS) and the Pharmaceutical Benefits Scheme (PBS).

The current standard was reviewed as a part of the NMBA's systematic process to review registration standards, codes and guidelines. The NMBA considered that the current standard was effective in regulating nurse practitioners. For this reason, the NMBA consulted on the proposal to continue the current standard inclusive of minor amendments, and to align the current standard with the *Nurse practitioner standards for practice*, which were developed in 2014.

Public consultation was carried out over an eight week period from 24 October 2014 to 19 December 2014 and a total of eleven submissions were received from stakeholders. Submissions were received from the health sector, government, professional organisations, nurses, students and other stakeholders. The feedback received in the consultation helped inform the NMBA's review of the current standard.

The *Registration standard: Endorsement as a nurse practitioner* (the revised standard) was approved by AHWMC on 30 October 2015.

From 1 June 2016, the revised standard will come into effect, replacing the current standard.

The revised standard was published on the NMBA website on 1 February 2016 to allow nurses, employers and the public time to become familiar with the updated requirements set by the NMBA.

The NMBA and AHPRA would like to thank all those who responded to this consultation. Responses to the consultation are published on the NMBA <u>website</u>.

1. Introduction

Section 38 of the National Law enables the NMBA to develop, and recommend to the Australian Health Workforce Ministerial Council, registration standards about issues relevant to the eligibility of nurses and midwives for registration or their suitability to competently and safely practise the profession. Section 95 of the National Law empowers the NMBA to develop, and recommend to the Australian Health Workforce Ministerial Council (AHWMC), a registration standard about the NMBA's requirements to endorse the registration of a registered nurse as being qualified to practise as a nurse practitioner.

In 2010, the NMBA developed the *Endorsement as a nurse practitioner registration standard* (the current standard) under section 95 of the National Law which was approved by AHWMC. The current standard commenced on 1 November 2010.

1.1 The main issues

The review of the current standard was carried out as a part of the NMBA's systematic process to review registration standards, codes and guidelines. The NMBA considered that the current standard was effective in both initial endorsement requirements and the ongoing regulation of nurse practitioners. For this reason the NMBA proposed to continue with the current standard inclusive of minor amendments.

1.2 Consultation process

The National Law requires all National Boards to undertake wide-ranging consultation on the content of any proposed registration standard.

In undertaking the review of the current standard, the NMBA followed the agreed process set out in the <u>consultation process</u> document which is published on the AHPRA website. The process included an assessment of the proposed standard against the <u>Procedures for the development of registration</u> <u>standards</u> which include the Council of Australian Governments (COAG) principles for best practice regulation.

In March 2014, the NMBA conducted a forum with stakeholders to evaluate the current standard and obtain feedback on its effectiveness. Representatives from state and federal governments, nurse practitioners, the nursing profession, medical professionals and education providers attended the forum and gave feedback on each criterion of the current standard.

In July 2014, the NMBA sought preliminary feedback from key stakeholders on a revised *Registration* standard: Endorsement as a nurse practitioner (the revised standard).

From 24 October 2014 to 19 December 2014 the NMBA consulted publicly on the revised standard. The consultation paper, with the revised standard was published on the NMBA website and was sent to government and key stakeholders for nursing and midwifery, including professional associations and consumer organisations. The NMBA also published a media release about the consultation and publicised the consultation in communiqués and newsletters. Appendix 1 sets out the key changes to the revised standard, based on the consultation feedback received in both preliminary and public phases and the rationale for changes made.

Changes to guidelines relating to endorsement as a nurse practitioner

Feedback from the consultation also resulted in the separation of the current *Guidelines on* endorsement as a nurse practitioner into the Safety and quality guidelines for endorsement as a nurse practitioner and the development of distinct *Guidelines: For nurses applying for endorsement as a* nurse practitioner. The *Guidelines: For nurses applying for endorsement as a nurse practitioner* consolidates information for applicants and incorporates application pathways 1 and 2.

1.3 Breakdown of responses

Eleven written responses were received from external stakeholders. The majority of submissions (6) were from professional nursing organisations including regulators, specialist colleges, professional associations and accreditation councils, with another two from individuals. A further three submissions were received from government departments.

2. Overview of responses

Overall, there was general support for the revised standard.

The main issues highlighted by respondents related to clarification of terms and the definitions of advanced nursing practice, advanced practice nursing, and nurse practitioner. Some submissions supported greater flexibility in the revised standard, particularly in relation to the criterion requiring three years or 5,000 hours of practice prior to endorsement.

2.1 Summary of responses

Key themes of responses

Seven key themes were identified from the responses.

1. Whether the requirements under *What must I do?* of the nurse practitioner standard relates to initial or ongoing endorsement

Feedback from the majority of respondents indicated the revised standard could be misinterpreted as to whether there is an ongoing eligibility requirement to work 3 years' full-time or 5,000 hours within the past six years. This was not the NMBA's intent and ongoing requirements for endorsement are as set out in the NMBA's *Registration standard: Recency of practice.*

2. Definition and use of the terms 'advanced practice nursing' versus 'advanced nursing practice'

Feedback raised concerns amongst the majority of respondents regarding the use of these definitions. Submissions highlighted that the definitions for advanced practice nursing and advanced nursing practice needed to be consistent in all NMBA publications.

3. Definition and use of the term 'nurse practitioner'

Respondents highlighted the need for the term to be consistent in all NMBA publications.

4. Reference to compliance with the NMBA's *Recency of practice* and *Continuing professional development registration standards* in criteria (e) of the standard.

A number of respondents highlighted the requirement of criterion 5. of the revised standard which requires compliance with the NMBA's *Recency of practice and Continuing professional development* registration standards. They raised the issue that compliance with these registration standards on application can only be with respect to the standard required for registered nurses as the applicant is not endorsed as a nurse practitioner at the time of application.

5. Reference to endorsed nurses having access to the Medicare Benefits Scheme (MBS) and the Pharmaceutical Benefits Scheme (PBS), in the *Safety and quality guidelines* section of the standard

Feedback from respondents did not support linking the nurse practitioner endorsement 'access' to the Medicare Benefits Scheme (MBS) and the Pharmaceutical Benefits Scheme (PBS), as it is not automatic (it requires the nurse practitioner to be in private practice) and limits the scope of the nurse practitioner standard. The submissions recommended that the reference to the *Safety and quality guidelines* should not specifically refer to nurse practitioners with access to the MBS and the PBS. Respondents felt that the guideline should provide a regulatory framework for all nurse practitioners, including those with access to the MBS and or PBS.

6. Reference to compliance with the National Law should include reference to co-regulatory authorities and relevant definitions

A number of respondents raised the need for referencing auditing and investigating for compliance against registration standards or reporting notifiable conduct, to a statement that AHPRA operates in a co-regulatory model in Queensland and New South Wales, and may not be the only entity involved

in undertaking these activities should they arise. Feedback also recommended a reference to the difference of these definitions in the co-regulatory jurisdictions.

3. Summary of changes and other decisions

Following the public consultation on the revised standard a number of agreed minor changes for clarity were made. In finalising the changes, the NMBA took into consideration feedback from both preliminary and public consultation, their experience with the current standard, and the objectives and guiding principles of the National Law and the regulatory principles of the National Scheme.

3.1 Changes to the consultation draft standard

The key changes to the revised *Registration standard: Endorsement as a nurse practitioner* are detailed in <u>Appendix 1</u>.

4. Future work

As part of the review of the standard, the NMBA has undertaken a revision of the associated Safety and quality guidelines for endorsement as a nurse practitioner and the Guidelines: For nurses applying for endorsement as a nurse practitioner. These have been published on the NMBA's website along with the revised standard.

5. Conclusion

This report describes the NMBA's consultation process on the review of the current standard. The NMBA received a wide range of views which they have carefully considered in framing the revised standard. The revised standard describes the required qualification and experience that a registered nurse must be able to demonstrate when applying for initial endorsement as a nurse practitioner, as well as the ongoing requirements to maintain endorsement as a nurse practitioner.

In revising standards, codes and guidelines, the NMBA must balance its statutory duty to protect the public with the other objectives of the National Law and their underlying regulatory principles, such as proportionality and fairness for those subject to their regulation. The NMBA believes that this balance has been achieved in the revised standard. The NMBA will also continue to monitor the effectiveness of the revised standard and the emergence of any new evidence in this area. Further reviews of the standard will be conducted in future, incorporating new research and any information gathered about how the revised standards are working in practice.

The NMBA and AHPRA thank all those who contributed to the review process and provided valuable feedback on these important issues.

Glossary

Current standard means the current *Registration standard for endorsement as a nurse practitioner* developed by the NMBA and approved by the Australian Health Workforce Ministerial Council on 4 April 2011.

National Law means the Health Practitioner Regulation National Law, as in force in all states and territories.

National Scheme means the National Registration and Accreditation Scheme for health professions. More information about the National Scheme is available at <u>www.ahpra.gov.au</u>

Nursing and Midwifery Board of Australia (NMBA) means the national body responsible for the regulation of nurses and midwives in Australia.

Revised standard means the revised *Registration standard: Endorsement as a nurse practitioner* developed by the NMBA as part of this review and approved by the Australian Health Workforce Ministerial Council on 30 October 2015.

Appendix 1

The key changes to the revised Registration standard: Endorsement as a nurse practitioner

Change	Rationale
The following wording has been added under What must I do?' <i>When applying for endorsement</i> as a nurse practitioner	Feedback indicated the proposed standard could be misinterpreted as to whether there is an ongoing eligibility requirement to work 3 years full time or 5,000 hours within the past 6 years. This is not the NMBA's intent and ongoing compliance is as set out in the NMBA's <i>Registration standard: Recency of practice.</i> The proposed wording ' <i>When applying for</i> <i>endorsement</i> ' will provide scope for any application for endorsement whether initial or applying a second time to capture the list of requirements.
 The reference to 'advanced practice nursing' in criterion 2. under 'What must I do?' has been changed to 'advanced nursing practice'. 2. the equivalent of three (3) years' full-time experience (5,000 hours) at the clinical advanced nursing practice level, within the past six years, from the date when the complete application seeking endorsement as a nurse practitioner is received by the NMBA 	The definition of 'advanced nursing practice' as set out in the NMBA's approved <i>Nurse</i> <i>practitioner standards for practice</i> (2014) has been added to the registration standard for clarity and consistency.
Definition of nurse practitioner: A <i>Nurse practitioner</i> is an advanced practice nurse endorsed by the NMBA to practise within their scope under the legislatively protected title 'nurse practitioner' under the National Law.	For clarity and consistency the definition of 'nurse practitioner' is taken from the NMBA's approved <i>Nurse practitioner standards for</i> <i>practice</i> (2014).
 Definition of qualification under 'What must I do?' has been updated to 'approved program of study' to align with the National Law 3. Successful completion of : an NMBA-approved program of study leading to endorsement as a nurse practitioner, or a program that is substantially equivalent to such an NMBA-approved program of study leading to endorsement as a nurse practitioner as a nurse program of study leading to endorsement as a nurse program of study heading to endorsement as a nurse practitioner as a nurse practit	The definitions ('Approved program of study' and 'Program that is substantially equivalent') have been amended accordingly to align with the terminology used i.e.: approved program not qualification. The definition has also been amended and expanded to distinguish between nursing-related masters at postgraduate level and other non- nursing masters programs.
Approved program of study means a postgraduate nursing masters degree approved by the NMBA under section 49 of the National Law and included in the NMBA-approved list of programs of study for endorsement as a nurse practitioner, including NMBA-approved masters level units in advanced health assessment, pharmacology for prescribing, therapeutics and diagnostics and research.	

Change	Rationale
Safety and quality guidelines section:	It was recommended that the reference to the Safety and quality guidelines (page 8) should
The reference to MBS and PBS in the definition of the Safety and quality guidelines for nurse practitioners has been removed and the title amended to reflect this is specifically for nurse practitioners.	not specifically refer to nurse practitioners with access to MBS and PBS. The guidelines should provide a regulatory framework for all nurse practitioners, including those with access to the MBS and or PBS.
Safety and quality guidelines for nurse practitioners	
The Safety and quality guidelines for nurse practitioners outlines the regulatory requirements for nurse practitioners, providing clarity and support to practise in their role as a nurse practitioner.	
The wording regarding the co-regulatory model has been amended:	Reference has been made to the different definitions in a co-regulatory jurisdiction. The revised standard includes reference to AHPRA operating in a co-regulatory model in Queensland and New South Wales and therefore may not be the only entity involved in undertaking these audits and investigations for compliance against standards or reporting of notifiable conduct should they arise.
The NMBA and AHPRA operate in a co- regulatory model in some jurisdictions and	
may not be the only entities involved in completing assessment related to a notification. In co-regulatory definitions these terms may be described differently but have the same intent.	