Ahpra

Practitioner and community perceptions of the Australian Health Practitioner Regulation Agency (Ahpra) and the National Boards: 2019

A Social Research Project

November 2019

Supplementary report prepared for: *The Nursing and Midwifery Board of Australia*





Introduction

- Truly Deeply was first engaged in 2018 by the Australian Health Practitioner Regulation Agency (Ahpra) to assess the perception and sentiment towards Ahpra and the National Boards.
- The review was intended to help National Boards and Ahpra better understand what stakeholders think and feel about the organisation and to identify how to facilitate ongoing confidence and trust in the work performed by Ahpra and the National Boards.
- The benchmark 2018 study used a combination of qualitative and quantitative approaches, specifically extended interviews (face to face and via the telephone), focus groups and online surveys.
- Given the value of the insights delivered through the 2018 benchmark study to Ahpra and National Boards, the decision was taken to update the quantitative measures by conducting the online survey with practitioners and the general public in November 2019.
- A single, integrated report has been provided to Ahpra documenting the key themes and results.
- A separate summary has been provided for each of the National Boards based on the results of the online survey with practitioners.
- The purpose of this report is to present a subset of findings specifically for **the Nursing and Midwifery Board of Australia.**

An overview of the methodology

A two stage approach using online surveys has been used.

Stage 1 consisted of an online survey with practitioners from all 15 registered professions. This survey was conducted between October 30-November 8, 2019.

Stage 2 consisted of an online survey with a representative sample of the Australian general public. This survey was conducted between November 1– 6, 2019.

Quantitative approach

- Online surveys were conducted with practitioners as well as the broader community following the qualitative investigation.
- The 2019 questionnaires was very similar to the 2018 questionnaires, with only a small number of additions.
- Respondents to the Community Survey were sourced using an external panel provider. Quotas were placed on the sample for gender, age and location to ensure a nationally representative sample was achieved.
- Participants in the Practitioner Survey were sourced by Ahpra (using software that allowed the survey to be deployed to a random sample of practitioners in each profession).
- The practitioner sample has been weighted to ensure an equal 'voice' within the total sample of registered health practitioners (with the sample of 'nurses' and 'midwives' further separated). This has been to done to ensure that the views of professions with larger numbers of practitioners do not outweigh the views of professions with much smaller numbers of practitioners.
- For comparison between the sub-analysis groups, chi square or independent tests were conducted as appropriate, with significant differences at the 95% confidence interval indicated where applicable.

	Community Survey	Practitioner Survey	
Fieldwork dates	Nov 1-6	Oct 30-Nov 8	
Responses	2,048	5,944	
Email invitations sent	na	109,625	
Response rate	na	5.4%	



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2019 sample of registered practitioners (n = 5,944)



Practitioner type*



 * Figures may not add to 100%. Missing figures accounted for by 'prefer not to say'

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2019 sample of registered practitioners (n = 5,944)



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Summary of results of the online survey with registered health practitioners.

Specific insights into the responses from: **Nurses and midwives**



Sample of nurses and midwives (n=1,012)



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2019: Perceptions of the nursing and midwifery profession among

practitioners* (Top 20 Associations)

Q. Which of the following words do you strongly associate with **your profession?** Base: Total sample of practitioners registered with this specific Board (N=1,012)

Perceptions in 2019	% of practitioners with that perception	Difference compared to the average across all professions	Perceptions in 2019	% of practitioners with that perception	Difference compared to the average across all professions
Hardworking	48%	(+18%)	Competent	19%	(-3%)
Professional	39%	(-8%)	Passionate	19%	(+5%)
Caring	39%	(+10%)	Committed	16%	(-)
Compassionate	34%	(+7%)	Nurturing	14%	(+8%)
Respected	26%	(+4%)	Team oriented	10%	(+2%)
Trusted	26%	(+4%)	Honest	8%	(-1%)
Dedicated	25%	(-4%)	Kind	7%	(+3%)
Empathetic	22%	(-)	Community minded	6%	(-6%)
Knowledgeable	22%	(-8%)	Reputable	6%	(-4%)
Responsible	19%	(-1%)	Approachable	6%	(-5%)

Green indicates a result *significantly higher in 2019* than the average across all professions. **Orange** indicates a result *significantly lower in 2019* than the average across all professions.

* New question for 2019

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Perceptions of the Nursing and Midwifery Board of Australia (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)? Base: Total sample of **nurses and midwives** registered with this Board (n=1,012)

Perceptions in 2019	% of practitioners with that perception of the Board	Difference compared to the average across all professions	Perceptions in 2019	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Regulators	47%	(+7%)	Supportive	13%	(-)
For practitioners	42%	(+10%)	Accessible	12%	(+1%)
Necessary	40%	(+7%)	Helpful	11%	(-)
Administrators	39%	(+5%)	Responsive	10%	(+1%)
Decision-makers	34%	(+10%)	Trustworthy	10%	(-1%)
Bureaucratic	23%	(-4%)	Approachable	10%	(+1%)
Advocates	23%	(+6%)	Good communicators	9%	(-1%)
For the public	21%	(-2%)	Transparent	9%	(+2%)
Shows leadership	18%	(+6%)	Out of touch	8%	(-4%)
Competent	15%	(+1%)	Fair	7%	(-4%)

Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

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Summary of changes 2018-19: Perceptions of the Nursing and Midwifery Board of Australia

Q. Which of the following words or statements, if any, do you strongly associate with the **(National Board)?** Base: Total sample of practitioners registered with this specific Board

% of practitioners with that perception of the Board	2018 N=943	2019 N=1,012	% of practitioners with that perception of the Board	2018 N=943	2019 N=1.0	
Regulators	42%	47%	Supportive	15%	13	
For practitioners	43%	42%	6 Accessible	17%	12%	
Necessary	40%	40%	Helpful	13%	119	
Administrators Decision-makers	37%	39%	39%Responsive12%34%Trustworthy13%	12%	10% 10% 10%	
	35%	34%		13%		
Bureaucratic	24%	23%	Approachable	11%		
Advocates	22%	23%	Good communicators	12%	9%	
For the public	25%	21%	Transparent	9%	9%	
Shows leadership Competent	19%	18%	Out of touch	touch 9%		
	23%	15%	Fair	13%	7%	

Green indicates a result *significantly higher in 2019* compared with the 2018 result. **Orange** indicates a result *significantly lower in 2019*. compared with the 2018 result

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Levels of confidence and trust in the Nursing and Midwifery Board of <u>Australia</u>

Q. Do you feel confident that your National Board is doing everything it can to keep the public safe?



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Average of all registered health practitioners

Midwives

What are the indicators of trust and barriers to trust in the Nursing and <u>Midwifery Board of Australia</u>

Indicators of trust: 66% trust the Board

I assume they have standards to meet to effectively perform their role.

There when you need them for advice, help etc.

Professional, no evidence not to trust.

Nurses are the most trusted professionals in Australia. NMBA must be doing something right.

I think that the Board is working towards ensuring safe, effective and responsible professionalism for nurses and midwives.

Provides clear guidelines regarding standards and scope of practice. Maintains standards of practice.

They protect the public and nursing professionals. They do their best to make the public and government aware of short falls in ratios etc that are preventing exceptional care that the consumer needs.

I have only had a few encounters, but they are always helpful.

I have inherent trust that Board Members perform their roles in an ethical and legally responsible manner.

Barriers to trust: 8% DO NOT trust the Board

If there was more focus on the standard of education, then less risk to the public; too light with decisions and penalties; sense that the staff and investigators are not nurses and don't understand practice.

Don't trust any bureaucracy - more for their own justification than the individual.

They are only for the public and don't support nurses.

I get nothing out of them I feel they are not for the practitioner and I don't actually know what they do.

Everything takes so long. Questions are not answered promptly. When someone is working with conditions, it's not clear why and for how long etc.

They make odd decisions - seem to not advocate for nursing as strongly as they should be.

I am not confident that processes are applied consistently Bureaucratic, out of touch.

Full list of responses provided separately

Q. Which of the following words or statements, if any, do you strongly associate with Ahpra? Base: Total sample of nurses and midwives registered with this Board (n=1,012)

Perceptions in 2019	% of practitioners with that perception of Ahpra	Difference compared to the average across all professions	Perceptions in 2019	% of practitioners with that perception of Ahpra	Difference compared to the average across all professions
Regulators	58%	(+4%)	Controlling	13%	(-2%)
Administrators	48%	(+2%)	Rigid	12%	(-4%)
Necessary	45%	(+9%)	Competent	12%	(+1%)
For practitioners	39%	(+13%)	Out of touch	11%	(-3%)
For the public	34%	(-1%)	Poor communicators	10%	(-5%)
Bureaucratic	33%	(-7%)	Helpful	9%	(+2%)
Decision-makers	29%	(+8%)	Shows leadership	9%	(+2%)
Intimidating	15%	(-1%)	Trustworthy	7%	(-)
Accessible	14%	(+1%)	Supportive	9%	(+1%)
Advocates	13%	(+4%)	Responsive	9%	(+2%)

Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

Summary of changes 2018-19: Perceptions of Ahpra among nurses and midwives

Q. Which of the following words or statements, if any, do you strongly associate with Ahpra? Base: Total sample of practitioners registered with this specific Board

% of practitioners with that perception of the Board	2018 N=943	2019 N=1,012	% of practitioners with that perception of the Board	2018 N=943	201 N=1,0	
legulators	55%	58% Controlling		14%	13%	
Administrators	51%	48%	Rigid	16%	12	
Necessary	48%	45%	Competent	17%	12	
For practitioners For the public Bureaucratic	46%	39% 34%	Out of touch	11%	11	
	36%		Poor communicators	11%	10	
	34%	33%	Helpful	11%	9	
Decision-makers	32%	29%	Shows leadership	10%	9	
Intimidating	14%	15%	Trustworthy 11%	7%		
Accessible	18%	14%	Supportive	9%	9	
Advocates	13%	13%	Responsive	11%	9	

Green indicates a result *significantly higher in 2019* compared with the 2018 result. **Orange** indicates a result *significantly lower in 2019*. compared with the 2018 result

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Levels of confidence and trust in Ahpra among nurses and midwives





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What are the indicators of trust and barriers to trust in Ahpra among nurses and midwives

Indicators of trust: 61% trust Ahpra

Ahpra as a registration board has set professional guidelines and mandatory requirements to maintain registration. Being under the radar of Ahpra all health professional are held accountable.

Ensuring all Health Professionals practice within their scopes professionally; safely, yet competently skilled for the roles.

From events Ahpra held before was pretty reliable.

I have no reason to not trust them.

They ensure that practitioners are registered and competent in their fields as well as abide by codes of conduct.

Because they regulate all the practitioners in healthcare to ensure Australia has high standards of care and that every healthcare practitioner meets the standards that are required to deliver high care in Australia.

They are always out there helping.

I understand the role requires accountability for monitoring professional standards.

Barriers to trust: 13% DO NOT trust Ahpra

Yearly registration fee for lowly paid Enrolled nurses is too high. Why should we pay the same as Division 1 nurses and much more than teachers in Victoria. I hope you are enjoying your large salaries at our expense.

Very negative stories continuously from colleagues who have dealt with them. They don't act upon important issues I have raised with them.

Unfairness in how nurses are reprimanded in comparison to medical staff.

They are there for the public and do not support health practitioners.

It's run by bureaucrats who only care about ticking boxes, and do not care about the negative impacts its decisions and actions may have on health practitioners.

There appears to be delays in taking action when professional misconduct is suspected potentially putting the community at risk.

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Full list of responses provided separately

Response to communication by the Nursing and Midwifery Board of Australia

Q. Would you like (National Board) to communicate with you....?



Q. How do you typically respond to communication you receive from (National Board)?



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Use of the Nursing and Midwifery Board of Australia website



2019: Reasons for visiting the National Board website



Additional information sought by practitioners included (but was not limited to)...

- How to download my registration certificates and save them.
- Information regarding child health nursing.
- Certificate of good standing application.
- Restrictions on registration for direct entry midwives in SCN.
- Had difficulty just recently trying to find the Competencies that have turned into standards.

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Sample of open-ended responses when invited to comment about overall perception of Ahpra and/or the

National Board (full list of responses provided separately)

Having worked overseas recently I realise how fortunate I am to be a registered nurse in Australia. Our strict guidelines set by NMBA and Ahpra keeps a registered nurse at a professional level at all times, that I feel proud of to be a part of.

Keep up the good work.

I think that the board and APHRA are held with some fear in regard to complaints about professional misconduct.

I am not fully aware about Nursing Midwifery Boards roles and responsibility; I think the board needs to improve the communication and aware the nurses.

I feel we pay to much for our fees \$160 a year.

I believe that having a national registration board and process is a huge improvement from the State based system.

Need to make yourselves more known to the public and need to start defending the people that pay annual fees, otherwise, you just become the licensing body. You're the body that should be taking up the fight to make bullying in nursing unacceptable as an example.

Great as an employer to be able to check the registrations of staff.

I wish Ahpra could be more supportive to nurses jobs, especially when there has been a complaint. It affects every aspect of our career and lives and Ahpra officers pick things down to the bones and imply aspects that are not even there. You will always, always believe a doctor over a nurse and this is just a hierarchy way of looking at things. There is no point a nurse even giving her side of the story, even an opinion when there is a doctor involved in some way. They have more to lose than a nurse so will lie through their teeth, and Ahpra will always be blindsided by the dazzle.

One reminder ONLY is needed for Registration Renewal, the excessive amounts of reminders is tantamount to stalking & not appreciated by an intelligent, professional who is fully aware of their requirements.

Nursing Board needs young people.

We need these organisations to keep health professionals honest and the public safe.

Sample of open-ended responses when invited to comment about overall perception of Ahpra and/or the

National Board (full list of responses provided separately)

I did not realise that the Nurses Board still existed. I thought that it had been taken over by Ahpra. I am unsure about what their role is now.

I'm upset that Ahpra decided to not send out certificates for renewal of registration this year, in particular the wallet card. It has always been helpful to have my number on a card so I can access the website without trying to remember my membership number. Perhaps a permanent card with basic registration details could be pursued?

When nurses and midwives and other health practitioners are reported and under investigation- be kind to them and offer support. I know of many doctors reporting independent midwives as a witch hunt. The worse thing about it is women suffer. Women lose their ability to make informed choices. Give women the opportunity to give birth at home under a fully qualified, competent and knowledgeable Midwife. The evidence is there in current empirical research that home birth is a safe option for low risk women.

I'm concerned that the NMBA and Ahpra are not practicing 'woman-centred care' towards their own nurses and midwives. If a nurse or midwife is out of practice for 5 years, they're faced with having to do a bridging course. I find this incredibly unfair when nurses and midwives have worked so hard to gain registration. A nurse/midwife does not lose their skills after 5 years. Many nurses/midwives can not afford to pay for childcare and therefore choose to stay home with their children, only to find afterwards that they are facing an extremely stressful and costly bridging course. I would like to think Ahpra and the NMBA would have more confidence in their professionals and would be supportive and reasonable.

Very disappointed with the initial process of registering with Ahpra upon emigrating to Australia, far too lengthy and repetitive. Dedicated board just for nursing far more effective. Also very disappointed that neither Ahpra nor state boards could give definitive answers, in my situation regarding registration in child health nursing. My perception was that they could be helpful regarding basic information but role specific: they could not help me. In UK, all manner of nursing is governed by the one board making life much easier for registered health workers who need support.

Midwifery is a separate profession and needs a separate board. It is antiquated to have both professions under the same board. There are fundamental differences that need to be teased out and dealt with in separate ways.

Please be more vigilant with rogue practitioners. It is YOUR responsibility as the governing board to protect the public. Stop sitting on your hands.

Please separate out nurses and midwives from each other. We are so different! Nobody else has a combined board so it doesn't make sense that we have too.

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