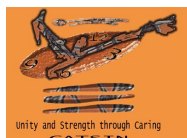


# AUSTRALIAN PEAK NURSING FORUM



19 March 2007

Dr Louise Morauta  
Deputy Secretary  
Department of the Prime Minister and Cabinet  
3-5 National Circuit Canberra ACT 2600

Dear Dr Morauta

## **National Registration and Accreditation**

Thank you for the opportunity to provide further comment on the proposed arrangements for national registration and accreditation.

The overriding principles for nursing and midwifery in considering the new arrangements for national registration and accreditation are ensuring the protection of the public and maintaining the highest standards of nursing and midwifery care to the Australian community.

The support of nursing and midwifery is on the basis that the new scheme will deliver improvements on current registration and accreditation arrangements, and that the scheme can be achieved through a model which is cost neutral to the community, nurses and midwives.

Our response is structured to respond to issues raised in the power point slides which were the basis of the consultation meeting of 13 March 2007.

## **SLIDE 4 – Structure of scheme**

The structure as outlined is supported with the following changes to reflect the roles of the various bodies.

1. The APNF does not support the establishment of an Agency Management Board. The National Office should perform secretariat functions for the national registration and accreditation scheme.
2. Change the title of the National Panels (for each profession) to Board eg. National Nursing and Midwifery Board OR Nursing and Midwifery Board of Australia.
3. Change the title of the State and Territory Registration Committees to Regulation Council eg. NSW Nursing and Midwifery Regulation Council.

## **SLIDE 6 – Roles and responsibilities of Health Ministers**

The following roles and responsibilities for Health Ministers are supported:

- policy directions,
- endorsement of registration and accreditation standards

- appointment of the CEO (not other staff) to the National Registration and Accreditation Secretariat,
- appointments to the profession specific National Registration and Accreditation Boards in accordance with the legislation which should specify the size and composition of the Board,
- endorsement of appointments to the State and Territory Regulation Councils,
- approval for existing bodies to undertake accreditation functions (providing there is only one body approved for each registered professional group),
- no role in individual registration and accreditation decisions.

#### **SLIDE 7 – Roles and responsibilities of profession specific National Registration and Accreditation Boards**

The following roles and responsibilities for the profession specific National Registration and Accreditation Boards are supported:

- development and review of national profession specific registration and accreditation standards (in consultation with other professional groups, members of the profession, consumers and other stakeholders),
- national oversight of registration and accreditation functions,
- development of national guidelines for investigating complaints, hearing disciplinary matters and managing impaired professionals,
- assessment for registration of practitioners educated in other countries,
- decisions on and management of any national profession specific projects or standing committees,
- delegation of regulatory functions to State and Territory Regulation Councils,
- professional representation of and education about registration, regulation and accreditation functions nationally and internationally,
- conducting or commissioning research relevant to registration, regulation and accreditation.

The composition of the Board should be 2/3 from profession + consumer representation with the chair to come from the profession.

#### **SLIDE 8 – Roles and responsibilities of profession specific State and Territory Regulation Committees (Councils)**

The following roles and responsibilities for the profession specific State and Territory Regulation Councils are supported:

- decisions on the registration of individuals within national profession specific guidelines,
- investigation of complaints consistent with national guidelines as determined by the profession specific national Board,
- disciplinary matters within national guidelines,
- management of impaired practitioners within national guidelines,

Because of the size of the nursing and midwifery workforce it is anticipated there will be a need for a State or Territory Regulation Council in each state and territory. The composition should be an appropriate mix of representation from the professions and from consumers.

The notion that there should be no need to refer to the national profession specific Board before a decision is taken on an individual is supported as the State and Territory Councils will operate within national guidelines.

There must be an absolute commitment to existing staff being offered employment in the state and territory offices of the National Registration and Accreditation Secretariat.

#### **SLIDE 9 – Roles and responsibilities of National Registration and Accreditation Secretariat**

The establishment of an Agency Management Board is not supported. If the profession specific National Registration and Accreditation Boards are properly supported by an appropriately

resourced national office acting as secretariat there is no further need for additional management boards. There is considerable concern that the Agency Management Board will add significantly to the cost of the proposed national scheme which will ultimately be borne by individual practitioners through their registration fees.

The National Registration and Accreditation Secretariat should be funded by Government. Fees for individual practitioners should not be increased to support additional layers of bureaucracy.

- maintaining national registers for each health profession regulated under the scheme,
- establishing business operations and business rules,
- providing secretariat support functions for profession specific National Registration and Accreditation Boards,
- establishing processes to ensure national professional standards for registration and accreditation are developed, reviewed, accepted by the profession and the community and forwarded to Health Ministers for endorsement in a timely manner,
- endorsing profession specific National Registration and Accreditation Board fees and budget,
- having no role in individual registration and accreditation decisions, and
- having no role in endorsing profession specific national registration and accreditation standards.

#### **SLIDE 10 – Committee of Chairs**

This would seem to be a sensible arrangement to facilitate cross professional communication, sharing of ideas, and promoting consistency between professions. There seems little need to include such an arrangement in legislation, particularly as there is little information given as to what its role and function would be. Such a Committee should only ever have an advisory role.

#### **SLIDE 11 – Role of existing accreditation bodies in new scheme**

The notion that existing national accreditation bodies are endorsed by Health Ministers to provide national accreditation services for the first three years of the scheme is supported. These bodies should operate within profession specific national registration and accreditation standards and fair and transparent operational and governance processes. There should be only one national accreditation body endorsed within each registered professional group.

#### **SLIDE 12 – Budget and fees**

There should be one national fee for each registered professional group. The cross subsidisation of other registered professional groups is not supported. The fees paid by nursing and midwifery practitioners should be available for use by the National Nursing and Midwifery Board to fulfill regulatory and accreditation functions at both the national and state and territory levels. These include:

- research and policy work required for the development and maintenance of registration and accreditation standards,
- national oversight of registration and accreditation functions,
- national and international representation of nursing and midwifery on matters relating to regulation and accreditation,
- development of national guidelines for investigating complaints, hearing disciplinary matters and managing impaired professionals,
- involvement in international regulatory work,
- legal expenses,
- provision of grants and scholarships to support the maintenance of continuing competence of individuals,

Nursing and midwifery does not support registration fees being set by the National Registration and Accreditation Secretariat. Registration fees should be set by the National Nursing and Midwifery Registration and Accreditation Board.

The National Registration and Accreditation Secretariat should be funded by Government. Fees for individual practitioners should not be increased to support additional layers of bureaucracy.

There may be a role for the National Registration and Accreditation Secretariat in endorsing the fees set by and the budget of the profession specific National Registration and Accreditation Board.

### **SLIDE 13 – Terminology**

As stated earlier, terminology is critically important and should reflect the role and responsibilities of the entity being described.

Reference to the Agency Management Board should be deleted. The National Office should perform secretariat functions for the national registration and accreditation scheme. As a Secretariat this body should have a Chief Executive Officer (appointed by Health Ministers) and staff. There is no need for a Board of Management which would add considerable cost to the national scheme.

The title of the National Panels (for each profession) should be changed to Board eg. National Nursing and Midwifery Board OR Nursing and Midwifery Board of Australia. This would more accurately reflect their function.

The title of the State and Territory Registration Committees should reflect their significant responsibilities in the scheme eg: NSW Nursing and Midwifery Regulation Council. This would more accurately reflect their function.

Yours sincerely



**JILL ILIFFE**  
Federal Secretary  
Australian Nursing Federation



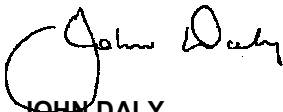
**ROSEMARY BRYANT**  
Executive Director  
Royal College of Nursing Australia



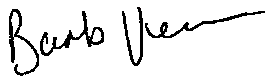
**KAREN COOK**  
Executive Director  
Australian Nursing and Midwifery Council



**SALLY GOOLD**  
Chair  
Congress of Aboriginal and Torres Strait Islander Nurses



**JOHN DALY**  
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**BARBARA VERNON**  
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Australian Council of Midwives