



**SUBMISSION TO THE NURSING AND MIDWIFERY BOARD
OF AUSTRALIA (NMBA) CONSULTATION ON A DRAFT
POLICY FOR RE-ENTRY TO PRACTICE FOR NURSES AND
MIDWIVES**

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50 O'Dea Avenue WATERLOO NSW 2017

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Introduction

The New South Wales Nurses' Association (NSWNA) is the industrial and professional body that represents over 53,000 nurses in New South Wales. The membership of the NSWNA comprises all those who perform nursing work, from assistants in nursing, who are unregulated, to enrolled and registered nurses at all levels including management and education.

The NSWNA is greatly concerned with many aspects of the re-entry to practice requirements. We are extremely pleased that we have this opportunity to express our concerns and hopefully some of the inequities and unfairness may be addressed.

Arbitrariness of requirement to complete a re-entry to practice program

NSWNA does not support the requirement for every nurse and midwife seeking to return to practice after a break of more than 5 years to complete a re-entry to practice program. There is no evidence that supports this prescribed time frame.

We believe re-entry should be on the basis of meeting competencies relevant to the profession and to the area in which the practitioner practices or proposes to practice and other Board requirements for registration, such as 'fit and proper', medical fitness and English language proficiency (for non-native speakers of English).

The expectation that nurses and midwives who haven't practiced for 10 years undertake another qualification without the opportunity to demonstrate competence is outrageous. We contend that there must be transparent policies in place to judge the competence of the individual nurse or midwife.

In our view a re-entry to practice program should be required only once it has been assessed as necessary following consideration of the nature, extent, period and recency of an individual's previous practice as provided for in S38 (1) (e) of the National Law.

Retrospectivity of application

Retrospective application of the recency of practice standard left many nurses in NSW with as little as 6 months to provide evidence of 3 months practice. This means that many nurses and midwives in NSW who have taken a career break to have children believing that they would be able to renew their registration and return to work when the children enter pre-school have had their plans disrupted.

Quite understandably, many were unaware of their new obligations as their focus was on their children. It is our opinion that applying this standard retrospectively can be perceived as discriminatory.

Further, there are some who have attempted to complete the mandated 3 months full time practice but have not had time to accrue the full complement of hours prior to the deadline. That is, there is a group of nurses who are currently working as RNs who will be forced to resign if the policy is adopted as is.

While we accept the principle that recency of practice is a component of ongoing competency and support the recency of practice standard, we strongly believe that there is a cohort of nurses and midwives in NSW who deserve some special consideration with regard to recency of practice.

Lack of accessibility to re-entry to practice programs in NSW

Our third key area of concern is the lack of access, both in terms of affordability and availability of appropriate Board approved entry to practice pre-registration programs.

There is one Board approved entry to practice pre-registration program in NSW at the present and the cost of this program is \$10,000. We believe this cost is a major barrier that prevents many nurses and midwives from returning to practice. This is particularly galling given that NSW Health has just committed to creating 1400 new nursing and midwifery positions to address a staffing crisis in NSW.

In our view it must be a priority of the Board to ensure that nurses and midwives have access to a range of affordable programs that reflect the fact that, depending on a variety of factors, some nurses and midwives will require far less support than others in order to return to practise safely.

Prior to 1 July 2010, NSW nurses and midwives returning to practice after greater than 5 years break were generally required to complete a 3 month period on supervised practice. There is no evidence that this arrangement compromised patient safety. We urge the Board to consider this option as a reasonable compromise for the cohort of NSW nurses and midwives who have been disadvantaged by the introduction of retrospective arrangements.

Please contact Kate Adams, Manager of Professional Services at this office if you would like to clarify any of the issues raised.

Yours sincerely



BRETT HOLMES
General Secretary