**Submission by the Australian Nursing and Midwifery Federation** 

# Australian Nursing and Midwifery Accreditation Council public consultation for the review of the Nurse Practitioner Accreditation Standards

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# Introduction

The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of more than 320,000 nurses, midwives and carers across the country.

Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.

Our strong and growing membership and integrated role as both a professional and industrial organisation provide us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.

Through our work with members we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.

The ANMF appreciates the opportunity to provide feedback to the Australian Nursing and Midwifery Accreditation Council (ANMAC) for the public consultation for the draft revised *Nurse Practitioner Accreditation Standards (NPAS)*.

The ANMF has been a lead organisation in the conception and development of the nurse practitioner role in Australia. The majority of the 2,688 nurse practitioners in this country are ANMF members. We are a staunch advocate for this peak clinical role for registered nurses, which is integral to improving access for people to evidence-based, safe, and effective health and aged care. There remains much to be done to ensure there is a substantial increase in the numbers of registered nurses electing to undertake the pathway to nurse practitioner endorsement. Regular review of the nurse practitioner regulatory framework is essential to ensuring there are no unnecessary barriers for registered nurses choosing to pursue the nurse practitioner pathway. Revising the accreditation standards, registration standard and guidelines concurrently is commended as it is important to consider the nurse practitioner regulatory framework as a whole when considering whether it is fit for purpose and to meet the objective of improving flexibility.



The ANMF supports the change to allow registered nurses to accumulate the required 5,000 hours of clinical advanced practice while they complete their nurse practitioner master's study as this somewhat lessens the burden of the hours required for endorsement. However, we seek clarification as to how this number of hours has been determined and suggest that research be undertaken to establish if there is evidence to support this number of advanced practice clinical hours, or whether it can be reduced to lessen this barrier to uptake of the role of nurse practitioner in Australia.

The ANMF offers the following feedback in response to the consultation questions.

# Consultation questions

**Nurse Practitioner Accreditation Standards (NPAS)** 

### Question 1:

Do you consider the proposed entry requirements in terms of length of experience as a registered nurse working at advanced practice level, to be appropriate for a program of study leading to endorsement as a nurse practitioner?

☐ Yes

⊠ No

Please provide a reason for your response.

The draft accreditation standards are aligned with the intent to ensure the master's degree admission requirements are fair, equitable and transparent. The proposed program entry requirements set out in Standard 1.3 are clear and easy to understand. The reduced minimum hours of practice prior to entry to the master's program is welcomed if the requirement for 5000 hours of clinical advanced practice for endorsement remains. However, questions remain about how advanced nursing practice will be determined and who will determine that the applicant meets the criteria. How will the regulator ensure that this process is managed effectively and with integrity? Schools of nursing often have little to do with admissions which are handled by administrative staff remote to the school. The ANMF considers the minimum number of hours specified at Standard 1.3c. should be reduced to 1800 hours from 2000 hours as this is 1 year full-time equivalent employment at 38 hours per week for 46-48 weeks, as nurses are entitled to 4-6 weeks of annual leave per annum.

There needs to be clear criteria that details how advanced nursing practice hours are determined and who is responsible for this assessment. Standard 1.3d. should not require the 1000 hours of advanced nursing

practice to be immediately prior to entry to the nurse practitioner program. The ANMF requests that the words 'immediately prior to entry' be removed. Standard 1.3b. requires the applicant to have general registration as a registered nurse with the NMBA which ensures recency of practice. There are a multitude of reasons for registered nurses to require time away from work. These include but are not limited to carer responsibilities, parental leave, ill health, family/community deaths, elderly carer responsibilities, cultural responsibilities, gender disparities and inequality, socio-economic risks and low income, social isolation, limited community resources, disability, and environmental impacts (including natural disasters). The requirement for advanced nursing practice hours immediately prior to entry to a program is unreasonable and unnecessary. It could unfairly preclude registered nurses who, for reasons outside their control, may be required to take time away from nursing practice. To our knowledge, there is no evidence to suggest that a break between undertaking advanced nursing practice hours and entry to a nurse practitioner program would cause risk to the public, conversely, this will arguably negatively impact the pipeline of registered nurses progressing to nurse practitioner.

### Question 2:

Do you consider the proposed program entry requirements which remove the requirement for the registered nurse to be working at advanced practice level in a specified clinical context, to be appropriate for a program of study leading to endorsement as a nurse practitioner?

☑ Yes

□ No

### Please provide a reason for your response.

The proposed change to the program entry requirements, which removes the requirement for the registered nurse to be working at advanced practice level in a specified clinical context, is a much more realistic approach to admission to the master's degree. The role of the nurse practitioner has changed since the current accreditation standards were developed in 2015 and endorsed nurse practitioners are able to work autonomously across areas of clinical practice as generalist practitioners consistent with their scope of practice, rather than the approach that was taken when Australia first introduced nurse practitioner models of care. The proposed approach will ensure that ANMAC has developed accreditation standards for contemporary practice and is able to align with the commitment of the Australian Government to the strategic plan for the nurse practitioner workforce that they have developed in consultation with the profession, and deliver the set of actions that can be implemented to address nurse practitioner workforce issues, and enhance the delivery of nursing care to the people of Australia.

Many registered nurses, once they have commenced practice, move areas as they determine their particular specialist or generalist clinical field of interest and commit to that area of practice. This clinical experience provides a valuable foundation for advanced practice but may not be their area of advanced practice. Requiring the registered nurse applying for the program to have been working at an advanced practice level prior to commencing the master's program, with those hours counting toward the 5000 hours required for endorsement, ensures the registered nurse is committed to the clinical context and has knowledge, understanding and clinical skills required for advanced clinical practice.

### Question 3:

Has the new five domain format retained the essential requirements that are present in current standards? If you answer 'no' please identify what elements you consider are missing.

□ No

Please provide a reason for your response.

The revised five-domain format covers the essential elements that are present in the current standards, retain the expected criteria and are clearer with the removal of duplication. The essential evidence guide will assist with providing a comprehensive understanding of the requirements.

### Question 4:

Will education programs accredited against the draft revised Nurse Practitioner Accreditation Standards prepare students to meet the NMBA Nurse Practitioner Standards for Practice on graduation?

✓ Yes

☐ No

Please provide a reason for your response.

The draft revised *Nurse Practitioner Accreditation Standards* have the potential to prepare students to meet the NMBA *Nurse Practitioner Standards for practice* but whether this occurs will depend on the skill of the curriculum designers, those accrediting/monitoring the programs, those teaching and supervising the students and commitment by the education provider to uphold a high standard. It would be useful to pilot the draft revised standards against existing programs.

Although Standard 3.9 and the associated footnote on pp.7-8 is clearer than Standard 8.2 in the current Accreditation Standards, the ANMF remains concerned that the term supernumerary should not be taken to mean unpaid. Whether undertaking supernumerary integrated professional practice where the student

is employed, rostered, counted in the roster or not, they should be paid by their employer for the 300 hours. This protected and supported integrated professional practice should allow the student to develop the knowledge and skills for expanded practice to meet the NMBA *Nurse practitioner standards for practice*.

### Question 5:

Are there any other issues that you wish to comment on? If so, please respond below.

□ No

Please provide a reason for your response.

The revised *Nurse Practitioner Accreditation Standards* should include the expectation that registered nurses enrolled in nurse practitioner master's programs will undertake clinical reflective supervision as part of their practice. This could be included under Standard 5 Assessment.

There is currently significant variation in the length of Masters of Nurse Practitioner programs. It is unclear why this is the case. There should be clarity about the expected length of the program of study.

## Conclusion

Thank you for this opportunity to provide feedback to the public consultation for the draft revised ANMAC *Nurse Practitioner Accreditation Standards*. A clear and accessible pathway to advanced clinical practice and the qualifications necessary for endorsement are essential to supporting registered nurses to consider and take on this challenging role and to subsequently grow the nurse practitioner workforce for the benefit of people needing and receiving health and aged care. The draft revised *Nurse Practitioner Accreditation Standards* cover the essential elements, retain the expected criteria and are clearer with the removal of duplication. However, as indicated in response to the first consultation and re-iterated in this response, amendments are required to address the practice hours for admission and to remove the necessity for advanced nursing practice hours to be undertaken immediately prior to entry to the program. The reduction in the minimum hours of practice prior to entry and the removal of the requirement for advanced practice hours to be in a specified clinical context is welcomed. This change is consistent with contemporary nursing and nurse practitioner practice.

# References

<sup>1</sup> November 2 and Maidwife and Decade

<sup>&</sup>lt;sup>1</sup> Nursing and Midwifery Board of Australia. (2023). Registrant Data – Reporting period: 01 July 2023 to 30 September 2023. Available at: <a href="https://www.nursingmidwiferyboard.gov.au/About/Statistics.aspx">https://www.nursingmidwiferyboard.gov.au/About/Statistics.aspx</a>