

23 December 2024

Ms Sue Dawson
Independent Reviewer
NRAS Complexity Review
Email: NRASComplexityReview@Health.gov.au
Sue.Dawson@Health.gov.au

Dear Ms Dawson,

Re: NRAS Complexity Review - Consultation Paper 1

The Australian Nursing and Midwifery Federation (ANMF), Australia's largest national union and professional nursing and midwifery organisation, welcomes the *Review of complexity in the National Registration and Accreditation Scheme (the Review).* The ANMF strongly supports the National Registration and Accreditation Scheme (NRAS), but agrees, as identified by the Review Consultation Paper 1 (the Paper), the capacity of the scheme to fulfill its core functions is hindered by duplication of processes, layers of bureaucracy, inflexibility and a lack of intersectorial collaboration.

Regulation requirements under the NRAS for registrants can be inflexible, burdensome and cause significant distress. The Paper comprehensively details the duplication, delays in managing notifications, lack of consistency and slow reactivity of regulation to workforce and health care system issues that contribute to the negative experiences of registrants and can impact on public safety. The reforms proposed in the Paper have the potential to broadly address many of these issues and the ANMF would like to take this opportunity to provide feedback as representatives of the largest health profession in Australia.

### Collaboration and Oversight

The ANMF supports reform that strengthens collaboration between regulatory processes. The issues in the Aged care sector demonstrate the need for inter-agency collaboration to drive safe, quality care. The onus of public safety in health care does not solely lie with health practitioner conduct. Regulation of health practitioners must not occur in isolation but intersect with other regulatory mechanisms. Regulation that takes into consideration broader system issues to ensure health practitioners have access to the resources to uphold their regulatory obligations, will ultimately protect public safety in the provision of health care services. High level regulatory processes to ensure a stronger strategic connection between interrelated regulatory agencies and government are essential.

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The industrial and professional organisation for nurses, midwives and assistants in nursing in Australia



Following on from this, the ANMF supports a review of Health Minister powers, however with some hesitation. The Final Report from the Royal Commission into Aged Care Quality and Safety was tabled in the Australian Parliament on 1 March 2021. There are many recommendations from this report that have not yet been acted upon demonstrating insufficient Ministerial powers to enact urgent change. The ANMF supports independence in the regulation authority but does not support the risk of politicisation of health professions which could result in decision making based on political agendas. Any changes to Health Minister powers need to balance their ability to act to benefit public safety against the use of decision making to gain political ground. Safeguards to ministerial powers need to be considered to ensure industry guidance, knowledge and experience direct policy relating to health practitioner regulation and accreditation.

## Complexity for registrants

In an endeavour to *identify areas of unproductive and unnecessary complexity within the NRAS* (p16), it is important that the nuances of profession specific regulation are not lost. Nurses and midwives must continue to regulate their professions. They understand the nuances and knowledge required to practice safely and competently and the education required to do that. Widespread homogenisation of health professions regulation risks loss of professional expertise and individualised professions' contribution to the health system. Harmonisation and streamlining of workforce regulation must only be applied where practitioner specific contexts of practice are immaterial and in the overarching guiding principles to regulation across the Boards to ensure consistency and fairness. The Boards should continue to guide policy development pertaining to their own profession/s.

Reform to simplify the complex nature of regulation should enhance the consistency, transparency, flexibility and accessibility but must remain contextual to the practitioner. ANMF members frequently report frustration and distress with current AHPRA processes with regards to the unproductive and unnecessary complexity of registration, renewal, and notifications. Specifically, issues with the skill and knowledge of AHPRA staff dealing with complaints, poor continuity and communication regarding management of complaints, imposed conditions that do not align with workforce capacity and extensive delays as applications and notifications progress through multiple decision-making processes.

This is demonstrated in the recent AHPRA review of the notifications experience which highlights the devastating impact on health practitioners of an ineffective system of handling complaints, particularly where in 75% of cases, a notification results in no further action. This approach and resulting stress also have the potential to significantly impact the practitioner's decision to remain working in the profession, exacerbating workforce shortages. Whilst it is understood AHPRA is taking steps to action recommendations from that review, the flow on effect to improve experiences for registrants has not yet been realised. As a matter of urgency, measures must be put in place to streamline AHPRA engagement with registrants and reduce the number of decision-making entities that delay resolution of applications and notifications. Those dealing with notifications and complaints must be skilled and knowledgeable in the area to ensure appropriate and timely triage and management of each case.



As a result of this Review, existing AHPRA processes must be further strengthened, and the layers of excessively complicated administrative procedures addressed to improve the experience for registrants. As the Paper identifies, "efforts to minimise the stress for practitioners should continue to be an important focus for National Scheme Regulators" (p57).

Furthermore, whilst the ANMF supports a consumer-centric approach to health care, reforms to complaints handling to enhance the consumer experience must not add additional layers of decision-making and delays to an already burdensome process for registrants.

#### Accreditation

Whilst responsive accreditation systems are important, it must also be recognised that changes to accreditation need to be sustainable, and not so frequent as to lead to confusion and issues in following standards. Accreditation and the development of standards must be high level, to allow individual providers to meet local workforce needs and philosophical underpinnings of curriculum design.

# Expanding health professional regulation

The ANMF supports implementation of reform that addresses issues related to unregulated health professionals.

For example, Assistants in Nursing (however titled) contribute significantly to the delivery of health care services, particularly in aged care and increasingly in acute care services, yet there is no standard of practice nor specific code of conduct to guide this workforce. Due to their regulatory obligations, nurses and midwives accept responsibility for care delegated to assistants in nursing (however titled) in the absence of clear national processes establishing a minimum level of expected skill, knowledge and professional conduct. This exposes nurses and midwives to regulatory risk.

There is also an increasing reliance by the public on unregulated health professionals in maternity services as midwifery care is stripped back due to inadequate funding and workforce supply issues. People can position themselves as childbirth educators, doulas, birth keepers, early childhood experts (e.g. sleep consultants) with limited or non-evidence-based education and training, and are providing services to vulnerable women, people giving birth and their families, at times with devastating outcomes. Yet, the burdensome nature of privately practising midwife regulation prevents quality, safe, evidence-based care from being more widely available in the private sector. The lack of regulation of these service providers enables them to act freely, make false claims, promote their services utilising questionable marketing techniques, and does not support consumers to make informed decisions relating to their health care needs and choice of health care provider.

As the Paper identifies, consumers of health care expect safe and appropriate standards of treatment and care from health professionals and do not discern between those who are regulated and unregulated. The ANMF supports defining minimum expected standards for all health professionals, including those currently not regulated through negative licensing or similar arrangements to capture the broader health care workforce beyond those currently regulated under existing mechanisms, thereby increasing public safety.



To this end, the ANMF supports reform of the NRAS that leads to increased transparency, efficiencies, flexibility and consistency for registrants. Aligning health practitioner regulation with other health sector regulation will result in greater cohesion and safety in health care delivery. It is also essential that current frustrations and delays for registrants are addressed. The ANMF is keen to continue to collaborate with other stakeholders to ensure the NRAS remains fit for purpose and meets the needs of registrants as well as community expectations. We look forward to further work with you for the NRAS Complexity Review in the New Year.

Yours sincerely,

**Annie Butler** 

**Federal Secretary**