

Review of Accreditation Standards: Registered Nurse Re- entry to the Register and Entry Programs for Internationally Qualified Registered Nurses Seeking Registration in Australia.

First Consultation Paper

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Consultation Paper

1. Aim of the Review

The aim of the review of the Australian Nursing and Midwifery Council (ANMC) *Standards and Criteria for the Accreditation of Nursing and Midwifery Courses: Re-entry to the Register Standards Registered Nurses (2010)* (RN Re-entry)¹ and development of accreditation standards for Entry Programs for Internationally Qualified Registered Nurses (EPIQ – RN) is to review and update the accreditation standards in light of the move to the National Registration and Accreditation Scheme (NRAS) and the recent review of the Registered Nurse Accreditation Standards (2012).

The work of each of the jurisdictions in developing the current RN Re-entry accreditation standards is recognised and valued and the review of these accreditation standards seeks to build on this platform. The process undertaken for the successful review of the Registered Nurse Accreditation Standards (2012) will provide the model for conducting the review and development of the RN Re-entry and EPIQ-RN accreditation standards. Utilising this model will ensure previous learning benefits the current process and uphold consistency across all accreditation standards development.

Constructive and respectful engagement was the hallmark of the review and development of the Registered Nurse Accreditation Standards (2012) and this process will underpin the review and development of these standards. The review will be conducted in consultation with all key stakeholders to ensure that the accreditation standards are contemporary, comprehensive, clearly articulated and nationally consistent. The existing *Standards and Criteria for the Accreditation of Nursing and Midwifery Courses: Re-entry to the Register Standards Registered Nurses (2010)* can be accessed via the following web link: [RN Re-entry to the Register Accreditation Standards](http://www.anmac.org.au/userfiles/file/ANMC_RN_Re-entry_to_the_Register). Currently there are no accreditation standards to enable assessment of programs for internationally qualified nurses seeking to register in Australia, with ANMAC having to utilise the entry and re-entry standards for the registration category.

2. Purpose of this Consultation Paper

This Consultation Paper outlines the context, aim and objectives of the review and development of the accreditation standards for RN Re-entry and EPIQ -RN. It describes the process of consultation and proposes a number of key areas for consideration by interested stakeholders.

It is intended for distribution to organisations and agencies that have an interest in the accreditation standards and who wish to contribute to this review in writing or via scheduled discussion forums. For the review to be effective, it is essential that the critical input of organisations and agencies with an interest in the education of registered nurses is optimised. Under the National Law the Australian Nursing and Midwifery Accreditation Council (ANMAC) has responsibility for these standards and intends to synthesise and translate this feedback into refining and improving the accreditation standards so as to continue to safeguard and promote the health, safety and wellbeing of those Australians requiring nursing care.

¹ Australian Nursing & Midwifery Council (2010) *Standards and Criteria for the Accreditation of Nursing and Midwifery Courses: Re-entry to the Register Standards Registered Nurses* viewed at http://www.anmac.org.au/userfiles/file/ANMC_RN_Re-entry_to_the_Register on 29 December 2012.

3. Preamble

On 14 July 2006, The Council of Australian Governments (COAG) agreed to establish a single national registration scheme for health professionals, beginning with the nine professional groups then registered in all jurisdictions. COAG further agreed to establish a single national accreditation scheme for health education and training, in order to simplify and improve the consistency of current arrangements². Bills were successively put before state and territory parliaments, commencing with Queensland, to enact the legislation known as the Health Practitioner Regulation National Law Act (or the 'National Law') to establish the scheme. The Act provides for the adoption of a national law to establish a national registration and accreditation scheme for health practitioners. The object, objectives and guiding principles are articulated in Section 4 Part 1 and are reproduced below with phrases relating to accreditation of education providers and programs of study highlighted³ :

- (1) The object of this Law is to establish a national registration and accreditation scheme for—
 - (a) the regulation of health practitioners; and
 - (b) the registration of students undertaking—
 - (i) programs of study that provide a qualification for registration in a health profession; or
 - (ii) clinical training in a health profession.
- (2) The objectives of the national registration and accreditation scheme are—
 - (a) to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered; and
 - (b) to facilitate workforce mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction; and
 - (c) to facilitate the provision of high quality education and training of health practitioners; and
 - (d) to facilitate the rigorous and responsive assessment of overseas-trained health practitioners; and
 - (e) to facilitate access to services provided by health practitioners in accordance with the public interest; and
 - (f) to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.
- (3) The guiding principles of the national registration and accreditation scheme are as follows—
 - (a) the scheme is to operate in a transparent, accountable, efficient, effective and fair way;

² Council of Australian Governments (2008), *Intergovernmental Agreement for a National Registration and Accreditation Scheme for the Health Professions*. Viewed at <http://www.ahpra.gov.au/Legislation-and-Publications/Ministerial-Directives-and-Communiqués.aspx> on 14 December 2012.

³ Health Practitioner Regulation National Law Act 2009 (QLD). Accessed 14 December 2012 at <http://www.ahpra.gov.au/Legislation-and-Publications/Legislation.aspx>

(b) fees required to be paid under the scheme are to be reasonable having regard to the efficient and effective operation of the scheme;

(c) restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of an appropriate quality.

Following the introduction of the National Law, the ANMC was approved under the National Registration and Accreditation Scheme (NRAS) as the independent accreditation authority for all nursing and midwifery education providers and programs of study leading to registration and endorsement in Australia.

Subsequently, ANMC changed its name to ANMAC to reflect its principal role as an accrediting authority. Along with responsibility for accrediting education providers and programs of study leading to a qualification in the professions of nursing and midwifery, ANMAC has legislated responsibility for regular review and improvement of the accreditation standards underpinning this accreditation function for all professional categories under its mandate⁴.

Professional education accreditation is concerned with the quality of the profession and its work, from the perspective of the public interest and community safety. It is part of a broader process of assuring the community that, having completed an accredited education program, beginning professional practitioners have achieved agreed professional outcomes and are able to practise in a safe and competent manner equipped with the necessary foundation knowledge, professional attitudes and essential skills.

This process itself however, relies on two other fundamental building blocks:

1. That the education providers themselves are authorised to issue the relevant qualification and are evaluated to assure continued quality learning outcomes for their graduates.

Qualifications are specified, classified and defined by the Australian Qualifications Framework (AQF)⁵ and their associated Register lists Authorised Issuing Organisations. The Tertiary Education Quality and Standards Agency (TEQSA) has responsibility for evaluating all higher education providers for quality assurance purposes and protecting the integrity of the Australian higher education system. See section 6 for more information on TEQSA.

2. That there exists a set of agreed and contemporary competency standards for the profession, against which the capability of graduates can be assessed.

The Nursing and Midwifery Board of Australia (NMBA) adopted the ANMC's National Competency Standards for enrolled and registered nurses, midwives and nurse practitioners in 2010⁶. These standards articulate the core competencies by which individual performance is assessed to obtain and retain a licence to practice, issued by the NMBA, as an enrolled nurse, registered nurse, registered midwife and nurse practitioner in Australia. However, these Competency Standards are used not only by the NMBA for health professionals to self-assess their competence as part of the annual renewal of licence

⁴ Health Practitioner Regulation National Law Act 2009 (QLD). Accessed 14 December 2012 at <http://www.ahpra.gov.au/Legislation-and-Publications/Legislation.aspx>

⁵ Australian Qualifications Framework Council (2011), *Australian Qualifications Framework First edition 1 July 2011*. Viewed at: http://www.aqf.edu.au/Portals/0/Documents/Handbook/AustQuals%20FrmwrkFirstEditionJuly2011_FINAL.pdf on 16 December 2012.

⁶ Australian Nursing and Midwifery Council (2006). *National Competency Standards for the Registered Nurse*. Viewed on the Nursing and Midwifery Board Australia website at: <http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#competencystandards> on 16 December 2012.

process; but also to assess nurses and midwives educated overseas seeking to work in Australia; and to assess nurses and midwives returning to work after breaks in practice. They are also used to assess the performance of nurses and midwives involved in professional conduct matters. Higher education providers use the National Competency Standards when developing nursing curricula and to assess student performance; as do employers when evaluating graduate performance.

The accreditation process administered by ANMAC is an efficient and effective proxy for the external assessment of each individual graduate against the relevant competency standards. Professional program accreditation must ensure that necessary professional standards are protected, while not inhibiting diversity and innovation nor constraining continuous quality improvement. However, it is critical that the relevant professional accreditation standards are regularly reviewed to ensure their continued relevance in the light of changes in pertinent health and education legislation, policy, delivery or ethos⁷.

4. Context of the Review

As the independent accrediting authority for nursing and midwifery programs of study, ANMAC has responsibility for maintaining and developing the integrity of accreditation standards for professions under its mandate. In addition:

In developing an accreditation standard for a health profession, an accreditation authority must undertake wide-ranging consultation about the content of the standard.

Section 46 (2) of the National Law

Under Section 49(1) of the National Law, graduates of programs of study will not be eligible for registration or endorsement unless the program of study undertaken is accredited by an approved accreditation authority and that such accreditation is approved by the NMBA as meeting the education requirements for licensing as a Registered Nurse.

In October 2011 ANMAC commenced the review of the Registered Nurse Standards and Criteria leading to Registration and Endorsement in Australia (2009). The review process was underpinned by extensive stakeholder and other consultation. The NMBA endorsed the Registered Nurse Accreditation Standards (2012) in October 2012. The NMBA has final responsibility for approving programs of study leading to registration as a nurse or midwife, and has supported this process of review and development and will ultimately approve or not approve the revised accreditation standards (see Section 47 of the National Law).

The current accreditation standards for RN re-entry were developed by key industry stakeholders including professional bodies, regulators and academics in 2010 and subsequently adopted by the NMBA. In light of the review and development of the Registered Nurse Accreditation Standards in 2012 it is imperative that the RN re-entry standards are contemporised to provide assurance to NMBA, the community and all other stakeholders that graduates of these programs are competent to practice, meeting at a minimum the entry level competency standards for registration. The current standards are notably inconsistent with the accreditation standards for entry programs

⁷ ANMAC Consultation Paper: Review of Registered Nurse Accreditation Standards 2011

leading to registration as a registered nurse in Australia and raise serious questions relating to a primary objective of the National Law as outlined in Section 3⁸:

...to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered.

Currently there are no accreditation standards to enable assessment of programs for internationally qualified nurses seeking to register in Australia, with ANMAC having to utilise the entry and re-entry standards for the registration category. The RN re-entry standards have been utilised as they are most relevant to programs for nurses who have practiced previously, but whose competence in the contemporary Australian health care environment is unknown. The current RN re-entry standards are not appropriate standards against which to assess the programs that provide for internationally qualified nurses seeking to register in Australia. However, without specific standards for these internationally qualified nurses, the re-entry standards are the only ones available for use.

ANMAC, the NMBA and the community must be assured that nurses seeking re-entry to the register undertake an accredited program that ensures a sound theoretical and practical framework to support a safe and competent return to contemporary practice while recognising that nurses undertaking these courses require a flexible, responsive framework of study and practicum which acknowledges their scope of practice and meets their individual needs.

The review and development of accreditation standards for programs for registered nurse re-entry to the register will be the standards against which education providers and programs will be assessed by ANMAC. The programs will provide preparation for registered nurses for re-entry to professional practice after a lapse in practice and removal from the register for a period exceeding the regulatory recency of practice requirement⁹.

ANMAC, the NMBA and the community must be assured that internationally qualified nurses seeking to register in Australia meet the relevant competency standards to safely practice in the Australian environment. Currently there are no accreditation standards for programs that provide for internationally qualified nurses.

The development of accreditation standards for entry programs for internationally qualified registered nurses seeking to register in Australia will be the standards against which education providers and programs will be assessed by ANMAC as assuring internationally qualified nurses undertake an approved program of study to prepare for practice in Australia.

The objective of the RN Re-entry and EPIQ-RN programs is to ensure graduates are able to meet the NMBA approved competencies to practice in the context of the current Australian health environment; therefore it is reasonable that the standards must articulate at a minimum, the desired competency outcomes of the entry level graduate programs.

In Australia and overseas there are a multiplicity of requirements for both re-entry to practice for registered nurses and for entry to the register for internationally qualified registered nurses. In many developed nations, including the UK, Ireland, Canada, New Zealand, South Africa and the United States there are requirements for demonstrating equivalency of qualification and competency to practice in the contemporary healthcare environment prior to being granted registration. For internationally qualified nurses there is an additional requirement to demonstrate proficiency in language. Re-entry and internationally qualified nurses may then be required to undertake

⁸ Health Practitioner Regulation National Law Act 2009 (QLD) accessed at <http://www.ahpra.gov.au/Legislation-and-Publications/Legislation.aspx> 14 November 2012

⁹ NMBA Recency of Practice Policy accessed at http://www.nursingmidwiferyboard/recency_of_practice_policy on 25 January 2013.

variations on programs of protected learning and a period of supervised practice. In the United States and Canada nurses are also required to successfully sit an exam prior to being granted registration.

The requirement to demonstrate recency of practice is in alignment with the other health professions in Australia. Review of return to practice requirements for the other health professions demonstrates varying degrees of regulation and ranges from the individual demonstration of continuing professional development to requirement to undertake supervised practice to completion of a National Board approved re-entry to practice program^{10 11 12}.

Internationally qualified nurses seeking initial registration in Australia must satisfy five criteria around establishment of identity, English language proficiency criteria for the nursing and midwifery professions, meeting current Australian nursing and midwifery education standards, evidence of recency of nursing practice and demonstrate 'fitness to practise' nursing in Australia¹³.

In Australia, assessment of competence programs are designed for Australian registered nurses who have not practiced within the profession for a period of more than five years but not exceeding ten years and wish to update their nursing practice, skills, knowledge and competency in order to return to the workforce. These programs are also an NMBA approved pathway for internationally qualified nurses to achieve the level of competency and skills required for registration as a nurse by the NMBA¹⁴. These programs are very often run conjointly.

While the standards for these two categories of nurses seeking to register or re-register may not necessarily be identical there are certain synergies in the requirements that programs providing for these graduates must address. There must be a clear focus on contemporary practice and socialisation in the Australian context and demonstration of workplace competence with the added requirement for ensuring safe effective communication in the health care context for internationally qualified nurses.

5. Relevant Health Policy

The review and development of the accreditation standards for programs for re-entry to the register and for entry programs for internationally qualified nurses seeking initial registration in Australia must be undertaken in the context of the current national and international health policy environment.

The implementation of a number of major reforms in the governance, funding and provision of health services are underway at the present time^{15 16}. In addition, a number of new national agencies¹⁷ have been formed over the past 3 years, in particular Health Workforce Australia (HWA),

¹⁰ Shepard et al (2009) Requirements for Re-registration and re-entry for physiotherapists into the workforce in Australia and overseas accessed at: <http://www.ingentaconnect.com/content/maney/ptr/2009/00000014/00000001/art00004>

¹¹ Evaluation of the Need for Re-entry Programs

¹² Medical Board of Australia Recency of Practice

¹³ Framework for the Assessment of Internationally Qualified Nurses and Midwives for Registration

¹⁴ NMBA Re-entry to Practice Policy

¹⁵ National Health & Hospitals Reform Commission 2009 accessed at [http://www.health.gov.au/internet/nhhrc/publishing.nsf/Content/nhhrc-report on 17Februaryuy 2013](http://www.health.gov.au/internet/nhhrc/publishing.nsf/Content/nhhrc-report%20on%2017Februaryuy%202013).

¹⁶ HWA - National Health Workforce Innovation and Reform Strategic Framework for Action 2011–2015. <http://www.hwa.gov.au/sites/uploads/hwa-wir-strategic-framework-for-action-201110.pdf>

¹⁷ For example: Independent Hospital Pricing Authority – IHPA; National Performance Authority – NPA; Australian Commission on Safety and Quality in Health Care - ACSQHC; Australian National Preventive Health Agency – ANPHA; Health Workforce Australia – HWA.

resulting in a developmental and ongoing influence upon the role and number of registered nurses within the broader system of professional health services delivery.

While the full impact of these reforms is still evolving, the policy intent, at least at the Commonwealth level, is relatively clear. There is a clear mandate for all health professionals to be more involved in physical and mental health promotion and early intervention to prevent illness or its progression. A greater emphasis on primary and sub-acute care settings is required along with the need for stronger inter-professional awareness, collaboration and communication to better support people with complex illness and those who have the capacity to self-care. Facilitating transition from one health care setting to another is critical to the success of the reforms, as is familiarity with health informatics including person-controlled and electronic health care records.

Consequently, to practice in the contemporary Australian environment programs of study leading to registration as a registered nurse require a greater emphasis on understanding the cost drivers of health care as well as enhanced knowledge of and accountability for quality improvement, performance measurement, care coordination and practising and promoting an environment of cultural safety. Broader experience and knowledge of complex care, community, primary and sub-acute health care settings are all indicated while not losing sight of the contemporary role of the nurse. Superior communication and teamwork, delegation and supervision capabilities will be essential pre-requisites in the emerging health care environment, along with the capacity to innovatively use information technology and electronic resources both in care delivery and to research the growing evidence base for improved care and treatment methods.

Re-entry to practice has been identified by successive state and territory governments as a key strategy to building a sustainable and suitably skilled nursing workforce with the Federal government estimating between 25 000 - 30 000 qualified nurses in Australia who are not currently practicing in the profession¹⁸. There are a number of state/territory based initiatives as well as national initiatives that articulate strategies such as scholarships, subsidised programs for re-entry to practice and financial incentives paid to both re-entering practitioners and their employers¹⁹. The Productivity Commission reported on the success of a number of these initiatives in the Report Australia's Health Workforce in 2005²⁰ however what remains unsaid are the challenges that Governments faced when these nurses and midwives sought to re-enter the workforce²¹.

Significant challenges identified as facing registered nurses seeking to return to practice after a period out of the work force include:

- Socialisation to the contemporary professional nursing role.
- Re-development of workplace competence, both clinical and organisational.
- Incorporating the concept of evidence based or research informed practice into nursing care.
- The availability of support systems and resources.

¹⁸ Nursing and Midwifery Workforce 2011 Report – Australian Institute of Health and Welfare accessed at [Nursing and Midwifery Workforce 2011 - Australian Institute of Health and Welfare](#) on 4 January 2013.

¹⁹ Department of Health and Aging 2008 accessed at [Bringing Nurses Back to the Workforce](#) on 12 January 2013.

²⁰ Health Workforce 2025 Doctors, Nurses and Midwives - Vol 1(2012) accessed at [www.hwa.gov.au/health-workforce-2025](#) on 29 November 2012.

²¹ Adrian, A; *Protecting the Community Balancing Safety and Risk – Re-entry to Practice for Nurses and Midwives in Australia* 2009.

- The cost and availability of re-entry programs^{22 23}.

An increasing reliance on skilled migration to meet essential workforce requirements – with Australia having a high level of dependence on internationally recruited health professionals relative to most other OECD countries, has resulted in increased demand for programs for international nurses and midwives seeking to register in Australia²⁴. International migration of health care professionals is a significant component of globalised labour markets²⁵. The impact is multifaceted and the issues for both the health care professionals and the countries involved are complex. Australia must balance the ethical recruitment of international nurses, not denying them the opportunity to live and professionally flourish in Australia, with the global obligation to ensure a sustainable local supply of nurses. Australia should strive to develop strategies to develop the local nursing workforce through effective workforce planning, education and training and retention²⁶

Challenges identified both in Australia and overseas for internationally qualified nurses seeking registration are similar to the challenges that face nurses seeking to re-enter practice after a protracted period away from the profession. Both groups have practiced as nurses previously with their current competency in the contemporary Australian environment an unknown. In addition, for internationally qualified nurses the literature identifies communication in the health care setting as a critical issue, with a demonstrated proficiency at the current required level as not necessarily ensuring safe and mutually effective communication. In particular, the complexities of the technological and specialised language used by nurses together with the nuances of spoken communication have been identified by patients, employers and international nurses themselves as problematic²⁷.

The literature describes a number of barriers confronting internationally qualified nurses and found that sustained migration of international nurses has resulted “in a dramatic ethnic diversification of the Australian nursing profession”²⁸. Studies have identified that non-native English speaking internationally qualified nurses had to overcome numerous barriers prior to employment including qualification recognition and language assessment. Native English speaking internationally qualified nurses are more readily accepted into the profession, while non-native English speaking internationally qualified nurses may be confronted with feelings of disadvantage and rejection by peers, including experiences of racism and discrimination²⁹.

In America, native nurses identified a number of issues when working with international nurses, including communication and differences in decision making, behavioural norms and role expectations³⁰. International nurses identify a number of factors affecting adjustment to working in

²² Long J, West S; *Returning to Nursing after a Career Break – Elements of Successful Re-entry AJAN 2007* accessed at [Returning to Nursing after a Career Break - Elements of Successful Re-entry](#) on 20 January 2013.

²³ Adrian A; *Protecting the Community Balancing Safety and Risk – Re-entry to Practice for Nurses and Midwives in Australia* 2009.

²⁴ Health Workforce 2025 Doctors, Nurse and Midwives - Vol 1 viewed at www.hwa.gov.au/health-workforce-2025 on 29 November 2012

²⁵ Hawthorne L, *Health Workforce Migration to Australia Policy Trends and Outcomes 2004-2010*; cleared for circulation May 2012.

²⁶ WHO, World Health Organisation 2010, Global Code of Practice on the International Recruitment of Health Personnel, accessed at http://www.who.int/entity/hrh/migration/code/code_en.pdf on 20 February 2013.

²⁷ Kingma M, *Nurses on the Move: Diversity and the work environment* 2008 accessed at www.ncbi.nlm.nih.gov/pubmed on 20 January 2013.

²⁸ Hawthorne L, *The Globalisation of the Nursing Workforce: Barriers Confronting Overseas-qualified Nurses in Australia*. *Nursing Inquiry* 2001

²⁹ Deegan Dr J. Simkin Dr K *Expert to Novice: Experiences of Professional Adaptation Reported by Non-English Speaking Nurses in Australia* http://www.ajan.com.au/Vol27/AJAN_27-3.pdf#page=32

³⁰ Davis CR 2005 *Characteristics of International Practical Nurses Graduates in the United States Workforce – 2003–2004*. Commission on Graduates of Foreign Nursing Schools Report.

the USA, such as variations in health care systems, language competency, integrating into America nursing practice, knowledge of medications and pharmacology, and proficiency in technology³¹.

The Commission on Graduates of Foreign Nursing Schools in Canada identified the major challenges facing international nurses practising outside their own country. The key themes that emerged were differences in language, culture and the practice of nursing, with particular issues regarding telephone interactions and engaging with health care professionals, patients and their families³².

In a case study of internationally recruited nurses in Ireland, the most prevalent themes related to competency, education, and racial and social integration issues. It emerged that the level of competency required for the provision of quality care was not standard and scope of practice varied across nationalities.

The themes identified throughout the literature^{33 34 35} both in the Australian and the international context articulate communication, competency, education, and racial and social integration as the most common issues and suggest six major and often overlapping areas that must be addressed in any program for internationally qualified nurses seeking registration in Australia:

- Socialisation to the contemporary Australian professional nursing role
- Acquisition of English language and other communication skills
- Adapting to Australian style of interpersonal and professional relationships
- Development of workplace competence, both clinical and organisational
- Provision of culturally congruent care to diverse populations
- Availability of culturally safe support systems and resources.

6. Relevant Education Policy

Like healthcare policy, higher education has undergone significant policy change in recent times. The Australian Government's response to the Review of Australian Higher Education (the Bradley Review)³⁶ in December 2008 heralded a period of transformation in post-secondary education in this country. The report highlighted the importance of the education sector as a key determinant in Australia's ability to compete effectively in a global context and it called for an 'outstanding, internationally competitive higher education system' (pg. xi). The review pointed to the need for structural reform and increased funding as well as improved quality, equity and access.

The Australian Government's response to the Bradley Review included an increased focus on quality to build Australia's reputation in tertiary education. In May 2011, the Government announced the establishment of an independent national body to regulate and assure the quality of all types of higher education - The Tertiary Education Quality and Standards Agency (TEQSA). The Government

³¹ Davis CR. 2005 *Crossing Borders International Nurses in the US Workforce* accessed at <http://www.intlnursemigration.org/assets/pdfs/Davis> on 20 January 2013.

³² Commission on Graduates of Foreign Nursing Schools (2005)

2004 *Think Tank Monograph: Building Global Alliances II: The Evolving Healthcare Migration*. Philadelphia, Pennsylvania, USA.

³³ Deegan Dr J. Simkin Dr K *Expert to Novice: Experiences of Professional Adaptation Reported by Non-English Speaking Nurses in Australia* http://www.ajan.com.au/Vol27/AJAN_27-3.pdf#page=32

³⁴ Denton, S. 2009 Nation-to-nation: Challenges to addressing the effects of emerging global nurse migration on health care delivery. *Policy, Politics and Nursing Practice* accessed at http://ppn.sagepub.com/cgi/content/abstract/7/3_suppl/76s on 10 January 2013.

³⁵ Hawthorne LA. *The Globalisation of the Nursing Workforce: Barriers Confronting Overseas-qualified Nurses in Australia*. *Nursing Inquiry* 2001

³⁶ Australian Government (2008), *Review of Australian Higher Education – Final Report*. Viewed at:

http://www.deewr.gov.au/HigherEducation/Review/Documents/PDF/Higher%20Education%20Review_one%20document_02.pdf on 15 December 2012.

also committed to ensuring that growth in the higher education sector will be underpinned by a robust quality assurance and regulatory framework, which places a renewed emphasis on student outcomes and the quality of the student experience³⁷.

A government initiative arising from the Bradley Review has been the publication in July 2011 of a revised Australian Qualifications Framework (AQF). This has been updated by the publication of Australian Qualifications Framework 2013 in January 2013. The AQF is the national policy for regulated qualifications in Australian education and training. It incorporates the qualifications from each education and training sector into a single comprehensive national qualifications framework which comprises 10 levels of qualification from Certificate 1 to Doctoral Degrees at level 10, with a Bachelor Degree sitting at level 7. The AQF articulates the learning outcomes expected within each level of education in relation to knowledge, skills and the application of both. The purpose of the criteria is to ensure the integrity of qualifications and standardisation across a range of education providers, settings and delivery modes. The AQF Register of Recognised Education Institutions and Authorised Accreditation Authorities³⁸ lists every AQF qualification and the organisations authorised to issue those qualifications.

It is essential that any review of the current ANMAC standards for program accreditation is cognisant of these policy changes within education as well as their context, given the history of nursing education in Australia.

Australian nursing education followed a global trend from 1984 onwards when the Commonwealth announced its in-principle support for the transfer of registered nurse educational preparation from the hospitals into the higher education sector. This transfer was a staged process with states and territories changing at different times, but the transfer was essentially complete by the end of 1993³⁹.

Globally, research demonstrates that a more highly educated nursing workforce not only improves patient safety and quality of care but also reduces mortality⁴⁰. The Global Standards for the initial education of professional nurses and midwives, developed by the World Health Organisation (WHO), establish educational criteria and outcomes that are based on evidence and competency, promote the progressive nature of education and lifelong learning and ensure the employment of practitioners who are competent and who, by providing quality care, promote positive health outcomes in the populations they serve⁴¹. The global standards articulate a minimum qualification for a registered nurse as a bachelor level qualification undertaken in a higher education setting.

In Australia, Registered Nurses must have undertaken a Bachelors Degree with an accredited higher education provider before they are able to apply for entry to the Register. Nurses who are qualified overseas must have a minimum qualification of a Bachelor degree, or a qualification combined with experience that is comparable in duration and content to the nationally agreed minimal educational standard for nursing in Australia if they wish to apply to enter the Register.

³⁷ Australian Government (2009), *Transforming Australia's Higher Education System*. Viewed at <http://www.deewr.gov.au/HigherEducation/Documents/TransformingAusHigherED.pdf> on 15 December 2012.

³⁸ The AQF Register of Recognised Education Institutions and Authorised Accreditation Authorities accessed at www.aqf.edu.au on 15 December 2012.

³⁹ Department of Education, Science and Training, *National Review of Nursing Education* – Jointly Commissioned by the Minister for Health and Ageing and the Minister for Education, Science and Training. Viewed at: <http://www.dest.gov.au/archive/highered/programmes/nursing/paper1.htm#top> on 15 December 2012.

⁴⁰ WHO World Health Statistics, 2007. Geneva World Health Organisation 2007.

⁴¹ Global Standards for the Initial Education of Professional Nurses and Midwives, World Health Organisation 2009 accessed at [Global Standards for the Initial Education of Professional Nurses and Midwives](http://www.who.int/nursing/standards/global-standards-for-the-initial-education-of-professional-nurses-and-midwives) on 13 December 2012.

Currently in Australia RN Re-entry and EPIQ –RN programs are provided in a number of settings across the education and training sector – higher education, Vocational Education and Training (VET) as Registered Training Organisations (RTO); and in the private and public sectors. Given this diversity it is vital to ensure that the Accreditation Standards are comprehensive, evidence based, founded in best practice and articulate attainment of a level of professional competency to assure the community that accredited programs of study will graduate students who meet or exceed the relevant National Competency Standards to practice in the contemporary Australian environment.

There is currently variance in the qualification awarded to graduates of RN re-entry programs ranging from a non-qualification award, a certificate of attainment to the award of a Bachelor of Nursing. A number of the VET sector “bridging” and health service delivered programs are non-award – providing graduates with certification to provide to the NMBA as evidence for registration. These programs are generally around 480 hours, combining theory and clinical practice experience - many with the option of early exit after 240 hours for re-entry and 280 hours for EPIQ -RN. A small number of universities offer the award Bachelor of Nursing (re-entry). These programs are 12 months in length and available to nurses who have been previously been registered regardless of initial qualification.

The length and content of these programs is consistent with RN re-entry programs and EPIQ- RN offered in other developed countries. In the United States and Canada there is a further requirement for nurses to pass a theoretical exam prior to being granted registration.

The award of a qualification on successful completion of a program of study leading to re-entry to the register or EPIQ-RN requires careful consideration. The objective of these courses is to graduate nurses who meet the entry level standard to practice as a registered nurse, while recognising that these students bring a spectrum of knowledge and experiences. In Australia, a qualification cannot be awarded twice for the same course of study. For those wishing to re-enter the Australian Register and who are required by the NMBA to undertake a program of study, the question arises as to whether a further qualification should be offered upon successful completion? If so, then at what level should this qualification be awarded?

7. Consultation Process

Following the decision to review the Accreditation Standards, an Expert Advisory Group was established by the ANMAC Board comprising the following people:

- ANMAC Board Member – Professor Robert Meyenn (Chair Expert Advisory Group)
- Chair of ANMAC Board– Professor Jill White
- ANMAC Board Member – Ms Joanna Holt
- ANMAC Board Member – Adjunct Associate Professor Fiona Stoker
- Commonwealth Chief Nurse and Midwifery Officer – Dr Rosemary Bryant
- Chair of Nursing (Mental Health Nursing) Flinders University - Professor Eimear Muir-Cochrane
- Monash University School of Nursing and Midwifery -Professor Wendy Cross
- Assistant Federal Secretary, Australian Nursing Federation – Ms Yvonne Chaperon
- Chief Executive Officer ANMAC – Ms Amanda Adrian

- Director of Accreditation Services ANMAC – Ms Donna Mowbray
- Accreditation Manager ANMAC – Ms Melissa Cooper
- Accreditation Manager ANMAC – Dr Susan Bragg
- Project Officer ANMAC – Ms Kate Jackson

The Expert Advisory Group developed a schedule for the review and development of the accreditation standards at its first meeting on 15 October 2012. Key stakeholders were identified for the purposes of participation in the process of consultation. These can be found at Appendix A.

The Consultation Paper has been developed by the Expert Advisory Group and will be distributed to all identified stakeholders and placed on the ANMAC website. The consultation process will include a number of methods for stakeholders to input into the process of review of the accreditation standards.

Two rounds of iterative consultation forums are planned:

Round 1:

- Three consultation forums held in different states: Melbourne – 24 April 2013, Perth 30 April 2013 and Brisbane 7 May 2013.

Round 2:

- “Hub” consultation forum: Sydney 4 July 2013.

Feedback from the first round of consultation will inform the development of a draft set of Accreditation Standards which will be circulated to stakeholders for comment and be the subject of consultation at the second “Hub” forum to be held in Sydney. Stakeholders will also be offered the opportunity to provide feedback in writing.

Alternatively, feedback can be sent via a dedicated email address:

standardsreview@anmac.org.au

.Other interested parties are welcome to contribute their views during the course of the review. The ANMAC website will be updated to reflect the stages of the review.

8. Objectives of the Review

This review of the accreditation standards will be conducted in consultation with all key stakeholders with the aim of developing consensus on a revised set of Standards that:

- Align with the recently revised ANMAC Registered Nurse Accreditation Standards (2012).
- Are contemporary and consistent with emerging research, policy and relevant industry guidance.
- Ensure the possession of the required range of competencies while ensuring their sustainability in practice.
- Are underpinned by the ANMAC protocol and principles for accreditation standards.

9. Key Aspects of the Accreditation Standards Requiring Consideration by Stakeholders

The process of reviewing and developing the accreditation standards will require a number of iterative steps to ensure that the final outcome is one which is well supported and robust. It will be critical to assess whether the accreditation standards are complete and with sufficient evidence to cover all the domains necessary to assure the NMBA, and the community, that a graduate of an accredited RN re-entry-to-practice program or EPIQ-RN is fit to be registered and can practice in a safe and competent manner. Each of the current accreditation standards and accompanying criteria must also be assessed for correctness to ensure their continued validity given the rapidly moving health and education environment in Australia. It will be necessary to assess the rigour of each accreditation standard and its accompanying criteria to ensure that the expectation of education providers is neither too high nor too low. Finally, it will be necessary to ensure the standards align with the Registered Nurse Accreditation Standards (2012) to facilitate consistency.

While the standards for these two categories of nurses seeking to register or re-register are not necessarily identical there are certain synergies in the requirements that programs providing for these graduates must address. A clear focus on contemporary practice in the Australian context including suitable content on the health issues specific to Aboriginal and Torres Strait Islander peoples must be a primary focus.

Identified areas of challenge for registered nurses either re-entering the profession after a period of time away from practice or a program of study that leads to an internationally qualified nurse meeting the NMBA requirements for registration include, inter alia:

- Provision of comprehensive nursing care in contemporary health care settings in Australia with a focus on the National Health Priorities.
- Fostering the development of critical reasoning and reflection, conceptualisation, innovative thinking and the ability to transfer skills and knowledge to new and novel situations.
- Communicating with influence in the setting of contemporary Australian practice.
- Development of a deep understanding of the history, health and culture of Aboriginal and Torres Strait Islander peoples.
- Delivery of safe cultural practice.
- Use of a range of information technologies.
- Knowledge of the Australian social, cultural, political and economic context in which health services operate and where graduates are employed.
- Development of the skills for independent study and a commitment to lifelong learning and encourage graduates to take responsibility for the development of nursing as a discipline and profession.

There are additional challenges that face international nurses in the transition to safe and professionally fulfilling practice in Australia including communication in the Australian healthcare context and autonomous practice for nurses whose cultural and professional experience may be undertaken in a more hierarchical model.

QUESTIONS REQUIRING RESPONSES

The following questions have been formulated by the Expert Advisory Group to focus discussion and encourage debate. Feedback is welcomed and can be given in writing in response to this Consultation Paper or via an electronic survey where the questions below have been reproduced for ease of stakeholder contribution to the consultation process. The survey can be accessed via:

<https://www.surveymonkey.com/s/SNMWNX3>

Responses to the questions would be appreciated by close of business 19 April 2013 in preparation for the first Consultative Forum/s on 24 April 2013.

The objective of the RN Re-entry and EPIQ-RN programs is to ensure graduates are able to meet the NMBA approved competencies to practice in the context of the current Australian health environment; therefore it is reasonable that the standards must articulate at a minimum, the desired competency outcomes of the entry level graduate programs. The Registered Nurse Re-entry Accreditation Standards (RTR - RN) and the Standards for Entry Programs for Internationally Qualified Registered Nurses (EPIQ-RN) have previously been considered as separate Standards.

While the standards for these two categories of nurses seeking to register or re-register may not necessarily be identical there are certain similarities in the requirements that programs providing for these graduates must address. There must be a clear focus on contemporary practice and socialisation in the Australian context and demonstration of workplace competence with the added requirement for ensuring safe effective communication in the health care context for internationally qualified nurses.

1. Do you believe that a single core set of Standards could be used to accredit both these programs of study or two quite discrete sets of Standards - one for each program?
 - a. Single core set of Standards to address both programs
 - b. A discrete set of Standards for each program
 - c. Other options?
2. What content should be included in these programs as a minimum to ensure graduates have a sound understanding of the context of Australian health care systems, scope of practice, nursing inquiry and critical thinking, professional expectation, cultural awareness, language and communication skills and nursing informatics? ANSWER IN FREE TEXT

In Australia, assessment of competence programs are designed for Australian registered nurses who have not practiced within the profession for a period of more than five years but not exceeding ten years and wish to update their nursing practice, skills, knowledge and competency in order to return to the workforce. These programs are also an NMBA approved pathway for internationally qualified nurses to achieve the level of competency and skills required for registration as a nurse by the NMBA⁴². These programs are very often run jointly.

3. An assessment of competence (or 'challenge test') may need to be undertaken by every applicant to ascertain the behaviours, knowledge and skills that they possess in relation to the National Competency Standards. What type of education provider should be accredited/approved to undertake this assessment?

⁴² The NMBA Re-entry to Practice Policy accessed at [NMBA Re-entry to Practice policy](#) on 24 January 2013.

- a. Only those already providing an accredited Bachelor of Nursing program of study?
 - b. Any Higher Education Provider registered with Tertiary Education Quality and Standards Agency (TEQSA) regardless of whether they are currently approved to deliver a BN program of study?
 - c. Any Vocational Education and Training (VET) provider who is registered with the Australian Skills Quality Authority (ASQA)?
 - d. Any Registered Training Organisation?
 - e. Other options e.g. health services?
4. Once the assessment of competence is conducted, should the applicant :
- a. Have a customised education program developed? Yes/No? Comment:
 - b. Be given credit for units within a standard program of study where they have proven their competence? Yes/No? Comment:
 - c. Be permitted to directly apply for registration if they successfully pass all competencies? Yes/No? Comment:
5. Should a similar assessment of competence be conducted on successful completion of the program, with successful applicants only able to apply for Registration?
- a. Yes
 - b. No

The length of these programs varies from 480 hours for a non award “bridging” program to a 12 month higher education program. Many of these programs have the option of early exit after 240 hours for RTR - RN and 280 hours for EPIQ -RN.

6. What is the minimum length required for a program of study to ensure graduates meet the competency standards? ANSWER IN WEEKS
7. Should there be a maximum number of professional placement hours offered to those applicants who are not assessed meeting the National Competency Standards?
- a. If yes, how many hours?
 - b. No?
8. It is acknowledged that exposure to a diverse range of professional placement settings is difficult to achieve with limited hours for RTR - RN and EPIQ - RN programs however, is it important that applicants undertake placement in a prescribed number of different settings, such as medical, surgical etc?
- a. Yes important, list the number and types of settings that applicants should undertake?
 - b. Less important?
9. Should those wishing to re-enter onto the Australian Register be provided with a qualification upon successful completion of the relevant RTR - RN program?
- a. Yes, If so what AQF level should that qualification be? (e.g. AQF level 8)
 - b. No

c. Other options?

10. For internationally qualified nurses who are registered in another country and are required by the NMBA to undertake a program of study, should a qualification be offered upon successful completion of an accredited program of study in Australia?

a. Yes, If so what AQF level should that qualification be? (e.g. AQF Level 8)

b. No

c. Other options?

11. Are there any other questions or issues that have not been raised in the above questions?

10. Conclusion

The aim of this review of the Australian Nursing and Midwifery Council Registered Nurse Re-entry and EPIQ –RN Standards and Criteria is to update the accreditation standards in light of the move to the National Registration and Accreditation Scheme and recent changes in higher education and health policy. The consultation process is critical to ensuring that the revised Accreditation Standards are consistent, contemporary, comprehensive, clearly articulated and respected by the profession and relevant education providers. It will be conducted in an open and transparent manner with many opportunities and channels for interested stakeholders to provide feedback and participate in discussion.

The ANMAC Board will oversee the process of review which will be coordinated by the Board appointed Expert Advisory Group and led by ANMAC's Director of Accreditation - Ms Donna Mowbray. The review is expected to be completed by August 2013 with the intention of providing an updated set of accreditation standards, acceptable to the professions and relevant education providers, for the approval of the Nursing and Midwifery Board Australia in September 2013.

Glossary and Abbreviations

- AHPRA** the Australian Health Practitioner Regulation Agency (AHPRA) is the organisation responsible for the implementation of the National Registration and Accreditation Scheme across Australia. AHPRA supports the National Health Practitioner Boards in implementing the National Registration and Accreditation Scheme.
- ANMAC** the Australian Nursing and Midwifery Accreditation Council is the independent accrediting authority for Nursing and Midwifery under the National Registration and Accreditation Scheme. ANMAC sets standards for accreditation and accredits nursing and midwifery programs and providers.
- ANMC** the Australian Nursing and Midwifery Council was the peak national body responsible for the facilitation of a national approach to nursing and midwifery regulation prior to the introduction of the National Registration and Accreditation Scheme in 2010. The ANMC worked with the state and territory Nursing and Midwifery Regulation Authorities in evolving standards for statutory nursing and midwifery regulation, the development of national competency standards and codes of conduct and ethics for nurses and midwives.
- AQF** the Australian Qualifications Framework is the national policy for regulated qualifications in Australian education and training. It incorporates the qualifications from each education and training sector into a single comprehensive national qualifications framework.
- AUQA** Australian Universities Quality Agency has been subsumed by the newly established Tertiary Education Quality and Standards Agency.
- COAG** Council of Australian Governments is the peak intergovernmental forum in Australia, comprising the prime minister, state premiers, territory chief ministers and the president of the Australian Local Government Association.
- Education provider** is a university or other higher education institution, or a recognised training organisation (RTO) that is responsible for a program the graduates of which are eligible to apply for nursing or midwifery registration or endorsement.
- EPIQ** Entry program for internationally qualified nurses seeking initial registration in Australia
- Health Practitioner Regulation (Administrative Arrangements) National Law Act 2008** administrative arrangements established under the first stage of the National Registration and Accreditation Scheme for the Health Professions (Act A).
- Health Practitioner Regulation National Law Act 2009, or the National Law.** The National Law is contained in the Schedule to the Act. This second stage legislation provides for the full operation of the National Registration and Accreditation Scheme for the Health Professions from 1 July 2010 and covers the more substantial elements of the national scheme, including registration arrangements, accreditation arrangements, complaints, conduct, health and performance arrangements, and privacy and information-sharing arrangements. The purpose of the National Law is to protect the public by establishing a national scheme for the regulation of health practitioners and students undertaking programs of study leading to registration as a health practitioner.

HWA Health Workforce Australia is an initiative of the Council of Australian Governments. It was established to meet the future challenges of providing a health workforce that responds to the needs of the Australian Community.

NMBA Nursing and Midwifery Board of Australia works in partnership with AHPRA to protect the public and guide the professions of Nursing and Midwifery. The functions of the NMBA include registering nursing and midwifery practitioners and students; developing standards, codes and guidelines for the nursing and midwifery professions; handling notifications, complaints, investigations and disciplinary hearings; assessing overseas trained practitioners who wish to practice in Australia; and approving accreditation standards and accredited programs of study.

NRAS National Registration and Accreditation Scheme

Program is the full program of study and experiences that are required to be undertaken before a qualification, recognised under the Australian Qualifications Framework (AQF), such as a Bachelor of Nursing can be awarded to a graduate who successfully completes the program.

TEQSA the Tertiary Education Quality and Standards Agency which was established in July 2011 to regulate and assure the quality of Australia's large, diverse and complex higher education sector. From January 2012 the Tertiary Education Quality and Standards Agency will register and evaluate the performance of higher education providers against the new Higher Education Standards Framework. TEQSA will undertake both compliance assessments and quality assessments.

Appendix A

KEY STAKEHOLDERS IN THE REVIEW OF ACCREDITATION STANDARDS FOR REGISTERED NURSE RE-ENTRY TO THE REGISTER PROGRAMS AND ENTRY PROGRAMS FOR INTERNATIONALLY QUALIFIED NURSES

Key Stakeholders

| PRINCIPAL AGENCIES | STAKEHOLDER CONSULTATION | EXPERT ADVISORY GROUP |
|--|---|--|
| Nursing and Midwifery Board of Australia | Australian Nursing & Midwifery Accreditation Council Board | Australian Nursing and Midwifery Accreditation Council Board representative |
| Australian Health Practitioner Regulation Agency | Nursing & Midwifery Board of Australia | Australian Nursing and Midwifery Accreditation Council Board representative |
| Tertiary Education Quality and Standards Agency | Health Professions Accreditation Councils' Forum | Council of Deans of Nursing and Midwifery representative |
| Australian Nursing & Midwifery Accreditation Council | Consumer Health Forum of Australia | Australia and New Zealand Council of Chief Nurses representative |
| Health Workforce Australia | Commonwealth Chief Nurse | Australian Nursing Federation representative |
| Australian Health Ministers Advisory Council | Australian & New Zealand Council of Chief Nurses | Australian Nursing and Midwifery Accreditation Council Chief Executive Officer |
| Australian & New Zealand Council of Chief Nurses | Council of Deans of Nursing and Midwifery Australia & New Zealand | Australian Nursing and Midwifery Accreditation Council Director of Accreditation Services |
| Ministerial Council for Tertiary Education and Employment | Health Workforce Australia | Australian Nursing and Midwifery Accreditation Council Accreditation Manager/s |
| Commonwealth Department of Health and Ageing | Australian Nursing Federation | Australian Nursing and Midwifery Accreditation Council Standards Development & Review Coordinator (SDRC) - TBA |
| Health Workforce Principal Council | Australian College of Nursing | |
| Department of Foreign Affairs and Trade | Community Services & Health Industry Skills Council | |
| Department of Immigration and Citizenship | Congress of Aboriginal & Torres Strait Islander Nurses | |
| Department of Education, Employment and Workplace Relations | Coalition of National Nursing Organisations | |
| Department of Industry, Innovation, Science, Research and Tertiary Education | TAFE Directors Australia | |
| | Australian Council for Private Education and Training | |
| | National Rural Health Alliance | |
| | Australian Private Hospitals Association | |
| | Nursing Council of New Zealand | |
| | Midwifery Council of New Zealand | |