



Australian
Nursing & Midwifery
Accreditation Council

Annual Report 2016–17



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Accreditation Council

Annual Report 2016–17

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1. Overview

About ANMAC

ANMAC Highlights 2016–2017

Message from the Chair

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Our organisation

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About ANMAC

The Australian Nursing and Midwifery Accreditation Council (ANMAC) is the independent accrediting authority for nursing and midwifery education under Australia's National Registration and Accreditation Scheme.

ANMAC helps to protect the health and safety of the Australian community by establishing high-quality standards of nursing and midwifery education, training and assessment.

We facilitate the development of accreditation standards in consultation with our stakeholders and professional representatives. We are also responsible for determining whether programs of study for nurses and midwives seeking to practice in Australia meet required accreditation standards.

ANMAC's Skilled Migration Services is responsible for assessing the skills of nurses and midwives who want to migrate to Australia under the General Skilled Migration program.

Annual reporting is an integral part of our corporate governance framework. It describes the achievements, performance, outlook and financial position of ANMAC for each financial year.

ANMAC team photo



ANMAC Highlights 2016–2017

ACCREDITATION SERVICES

Accredited
37 programs
of study



51% INCREASE ▲ FROM 2016–17

Assessed 9 major
modifications to accredited
program of study



100

Minor modifications to
accredited programs of study

47

transitions from the HLT51612 training
package to the HLT54115 training package

202

Annual Declarations/Program
Monitoring Report (from February 2017)



LAUNCHED A
RISK BASED
ACCREDITATION
PROCESS



Commenced
the review of
Registered Nurse
Accreditation
Standards



Published the
Enrolled Nurse
Accreditation
Standards 2017

SKILLED MIGRATION SERVICES

NUMBER OF FULL ASSESSMENTS CONDUCTED

242



4449 MODIFIED
ASSESSMENTS
CONDUCTED

Total applications received

4692



19% INCREASE ▲ FROM 2016–17

ANMAC

Hosted two
international
delegations



FROM HONG KONG AND IRAN

Prepared
submission for
the accreditation
systems review



ANMAC
Team Day

HELD IN APRIL TO LINK VISION TO
THE WORK WE DO AND CREATE HIGH
PERFORMING TEAMS

Message from the Chair

It has been another extraordinary year for ANMAC with the Board focusing on governance and strategy through the objectives and deliverables of the initiatives in the Strategic Plan 2016–2018.

Ms Ann Kinnear
ANMAC Board Chair



The four strategic objectives remain fit for purpose and are:

- quality evidence based standards, accreditation and assessment
- engaged stakeholders
- sound governance framework
- strong fiscal position.

These objectives enabled us to provide a strong response to the discussion paper for the national Review of Accreditation Systems, with a strong focus on the move to a risk-based approach to accreditation.

Accreditation is a key business area of ANMAC, following completion of the Analytical Review of Accreditation the organisation has implemented a risk-based approach to accreditation of education programs. The risk-based process was launched in February 2017. The risk-based accreditation process focuses on three areas of the Accreditation Framework, program accreditation; program changes and monitoring. This process aims to focus on the areas that provide the most risk to safe and high-quality education of nurses and midwives and to protect the public from harm. This is a gradual process which will be fully implemented over the five year accreditation cycle.

To remain contemporary and forward thinking a revised constitution was endorsed by Directors at the 2016 Annual General Meeting. As a result, 2016-17 has been a transition year for the Board to implement the changes to the makeup of the Board and Board Committees to support their function. In keeping with many similar not for profit organisations the number of Board Directors has been reduced from thirteen to nine. The new structure retains the five-member Directors and four non-member Directors. To ensure the Board operates and complies within the relevant laws and obligations, the Directors undertook an analysis using a Board skills matrix linked to the responsibilities and requirements of governing the organisation. The result demonstrated the need to target suitably qualified people to complement the skills of the member Directors. The Board is recruiting to four new non-member positions and has identified the need for candidates who are experts in fields of accreditation, the Vocational Education and Training sector and finance.

ANMAC works closely with the Nursing and Midwifery Board of Australia as we are appointed as an independent body to undertake the accreditation functions as deemed. This year, the process for the national Review of Accreditation Systems has been useful for the Board to review the accreditation functions we perform under the *National Health Practitioner Law Act 2009* with other Health Profession's Accreditation Councils in Australia and overseas. It was also important to explore and make recommendations for improvements in the broader governance and regulatory processes for Accreditation of Health Professions education programs.

The *National Health Practitioner Regulation Law 2009* is clear regarding the requirements for consultation with stakeholders in the development of standards for accreditation. ANMAC recognises the relationship and role our stakeholders contribute to the functions of the organisation and input into the development of our accreditation standards. We would like to thank everyone who takes the time to contribute to the development of the accreditation standards and the pool of people who form the assessment teams. Thank you to the nurses and midwives on our Accreditation Committees who assist ANMAC in determining the accreditation status of Nursing and Midwifery Programs.

ANMAC's fiscal position is healthy and the organisation is continuing to work towards improving operational effectiveness and efficiencies. It is also necessary for ANMAC to plan for a number of contingencies as we wait for the outcome of the national Review of Accreditation Systems due later this year. The Board is pleased ANMAC has been recognised as an organisation that is moving forward with a risk-based approach to accreditation and that we are aiming at reducing duplication in processes undertaken by other authorities. The work in accreditation is dynamic and will continue to be enhanced over the next year.

I would like to thank all the Directors of the Board who have provided high level leadership in managing the changes to the governance structure and I thank them the dedication they have shown in making ANMAC the organisation it is today.

I would also like to thank the staff and the committee members who undertake the valuable work that contributes to the quality and safety of care the Australian community receives through the services that registered nurses and midwives provide.

At ANMAC, we are committed to providing high value, high quality services and look forward to another year of innovation and improvement.



Ms Ann Kinnear
ANMAC Board Chair

Chief Executive Officer's message

It has been another dynamic year for ANMAC and I am pleased it was a successful one. Due to changes in staffing levels and the configuration of our new office space, we welcomed the Chief Executive Officer and employees from the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM) to co-locate with us. CATSINaM is one of our member organisations and the co-location has created a closer partnership.

Clinical Professor
Fiona Stoker
Chief Executive Officer



This year we also welcomed the Australian Pharmacy Council to Lancaster Place. The close proximity of the Pharmacy Council and the Australian Medical Council, already housed at Lancaster Place, has increased communication and co-operation between all organisations.

ANMAC has been active in the national Accreditation Systems Review, submitting a comprehensive response to review questions. I was pleased to hear that the Review Team positively acknowledged the changes we have made in moving to a risk-based approach to accreditation. The risk-based accreditation process was launched in February 2017 and the accreditation team are gradually implementing it as education providers provide their annual monitoring reports. The new accreditation process has a sharper focus on monitoring which ensures the continuing quality of programs over the period of accreditation. I would like to thank our

Accreditation Services team for the hard work they continue to put into implementing and refining the risk-based approach.

ANMAC's submission to the Accreditation Systems Review has highlighted our work in reducing duplication in, and costs related to, the accreditation process. Our memorandum of understanding with the Tertiary Education Quality Standards Agency and Australian Skills Quality Authority supports ANMAC's move to reduce duplication in process.

This year we began to review the Registered Nurse Accreditation Standards and will put into practice the stakeholder feedback on the review process. The Enrolled Nurse Accreditation Standards were approved in May by the Nursing and Midwifery Board of Australia. I thank Jackie Doolan, Project Lead and her team who worked with the Expert Advisory Group on this. I also thank all stakeholders who provided input into the review and development of these accreditation standards.

ANMAC employees continue to implement initiatives associated with these Board strategic objectives:

- quality evidence-based standards, accreditation and assessment
- engaged stakeholders
- sound governance framework
- strong fiscal position.

In April, we held our annual team day. I shared my vision for ANMAC and linked our work back to the Board's strategic objectives. We also worked on our values and committed to becoming a high-performing organisation. The team day was facilitated by Business Olympian Group. We will continue working with Business Olympian Group over the next 12 months

to implement initiatives that support the work we began on our team day. I would like to thank the staff at ANMAC for their enthusiasm and hard work in achieving the Board strategic objectives this year.

To continue to improve our relationship with stakeholders, we concentrated on our communication strategy to inform and engage with our broad range of clients.

The Board is implementing changes to the governance framework through the revised Constitution. Board Directors approved the new Constitution at the November 2016 Annual General Meeting. At the end of June 2017, ANMAC reported a strong fiscal position thanks to the support of employees in managing costs. The ANMAC Board were aware that should the Accreditation Review outcome recommended changes that impacted on the viability of the company, there had to be enough surplus to cover the costs of closing the company. We will continue to reserve the amount of surplus however, ANMAC will be able to invest in improving the process of accreditation and assessor training next year.

We continue collaborating with the Health Professions Accreditation Collaborative Forum to identify ways we can improve interprofessional learning and practice. ANMAC's proximity to the Pharmacy Council and Australian Medical Council has resulted in closer collaboration and I have been invited to join a committee run through the Medical Council. Its CEO has given me an overview of the Council's National Training Centre and role in assessing internationally qualified medical practitioners.

ANMAC continues to provide the Secretariat function for the Australasian Osteopathic Accreditation Council. Both organisations benefit from sharing information about accreditation across the nursing, midwifery and osteopathy professions.

ANMAC continues to investigate how to incorporate interprofessional collaboration into how we work in 2017–18 and the CEO of the Australian Pharmacy Council has been invited to be a member of the professional reference group for the review of the Registered Nurse Accreditation Standards.

Our Skilled Migration Services team worked hard to deal with the increase in applications for skilled migration and reduce assessment waiting time. This year the team changed processes to a case-

management approach, which has improved customer service. A dedicated person is now in place to manage the phone calls and provide consistent information.

In May 2017, I attended the International Council of Nurses Congress in Barcelona. The Congress ran over four days with more than 8000 delegates. A range of speakers concentrated on the World Health Organization's Sustainable Development Goals and how nursing can support them. Nursing leadership is needed to transform care outside the health care system and improve world health. Nurses can influence inequality across what Dr Margaret Chan, former director-general of the World Health Organization, says is 'a world that is so out of balance [it] is neither stable or secure.'

I also visited the Nursing and Midwifery Council (NMC) in the United Kingdom to discuss accreditation. The NMC has a program for change running over the next five years in nursing and midwifery education in England. It will introduce a new governance framework for education and is consulting on the NMC Education Framework: Standards for Education and Training. The NMC is also considering prescribing competencies at pre-registration level, which they refer to as prescriber readiness.

Next financial year, ANMAC will continue to implement the risk-based accreditation process and improve client service. We will also continue implementing our electronic documents system. The system will be implemented in Skilled Migration Services first, once the filing system architecture is updated accreditation will move to electronic applications.

Next financial year, we also look forward to the outcome of the national Accreditation Systems Review and will continue to fulfil our obligations under the *Health Practitioner Regulation National Law 2009*.



Clinical Professor Fiona Stoker
Chief Executive Officer

Our organisation

Our organisation and employees are supported by the Corporate Services team.

Corporate Services:
Erin Moss, Louise
Straughair, Mandy
Fogarty, George
Kadmos



Staff not in photo:
Jason Smart and
Vanessa Cook



During 2016–17, employee numbers slightly decreased from 28.3 to 28.01 full-time equivalent, despite voluntary departures and an organisational restructure. The restructure created some recruitment opportunities, supporting organisational growth.

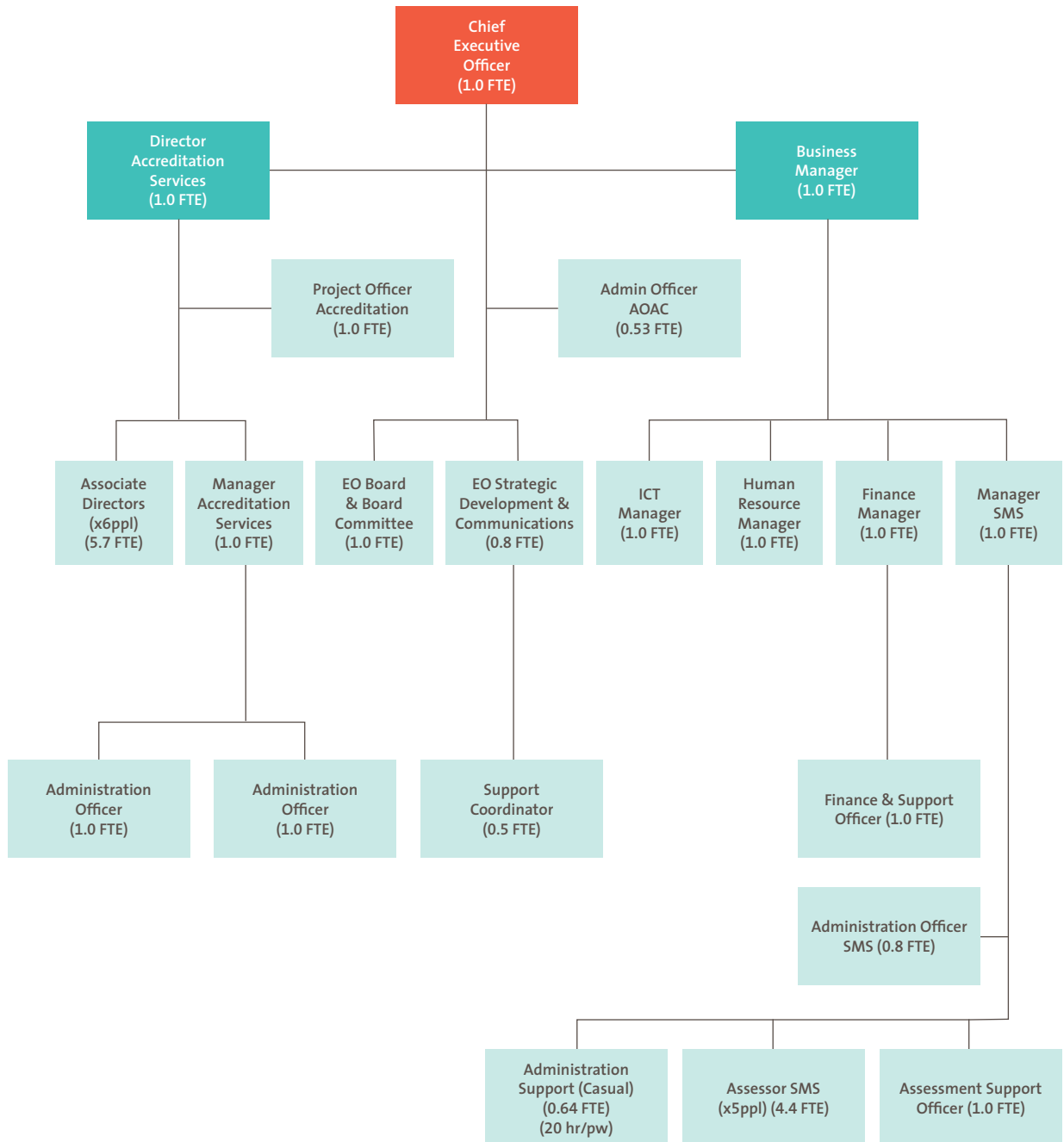
The team is responsible for ensuring our operational requirements and organisational goals are met by providing expertise and support in:

- human resources, recruitment and workforce planning
- employee learning and development
- work, health and safety
- information and communications technology
- financial management
- risk management, audit and compliance.

New employee appraisal system

In our continuing effort to improve organisation, team and individual performance, ANMAC developed a new employee appraisal system in 2016–17. This will be implemented in 2017–18. Salary classification and competency frameworks were also developed to support the appraisal system to provide a consistent platform for classifying jobs.

Figure 1: ANMAC organisation chart for 2016–17



ANMAC team
at the April team
building day



Learning and development

The second half of 2016–17 saw strong emphasis on employee learning and development activities. Employees attended courses in Excel, InDesign, Illustrator, SharePoint, Photoshop, Acrobat payroll, taxation, fringe benefits tax, strategic planning, governance, workplace relationships and project management.

Some employees began or continued external study to enhance their career progression. Courses include Doctorate of Philosophy, Masters of Business Administration, Graduate Certificate in Contemporary Information Practices, Diploma of Business Administration and Certificate IV in Accounting.

Employees also continued professional development and stakeholder engagement by attending conferences:

- Australian College of Nursing National Nursing Forum
- International Council of Nurses Congress
- Migration Institute of Australia National Conference
- Skilled Migration Assessing Authorities Forum.

ANMAC team day

Employees participated in a team development day in April with our Chief Executive Officer (CEO), Fiona Stoker, sharing her vision for ANMAC. We explored how to incorporate our values into our work to achieve this vision and create high-performing teams across the organisation. The day was facilitated by the Business Olympian Group.

Health safety and wellbeing

We continued with our commitment to providing a safe and healthy workplace. The Work Health and Safety Working Group met regularly to ensure we continue to meet our compliance obligations.

Information and communications technology

Personal information security is an integrated component of our operations. It is not the sole responsibility of our information and communications technology area.

During 2016–17, ANMAC stepped up efforts to protect the information it collects against cyber threats. Our privacy and security arrangements include appropriate training, resourcing and ensuring a management focus. This fosters a privacy and security aware culture among employees. Maintaining this culture and embedding it into our daily work requires the support of and promotion by all employees.

2. Sound governance framework

Governance

ANMAC Board

Committees

2

Governance

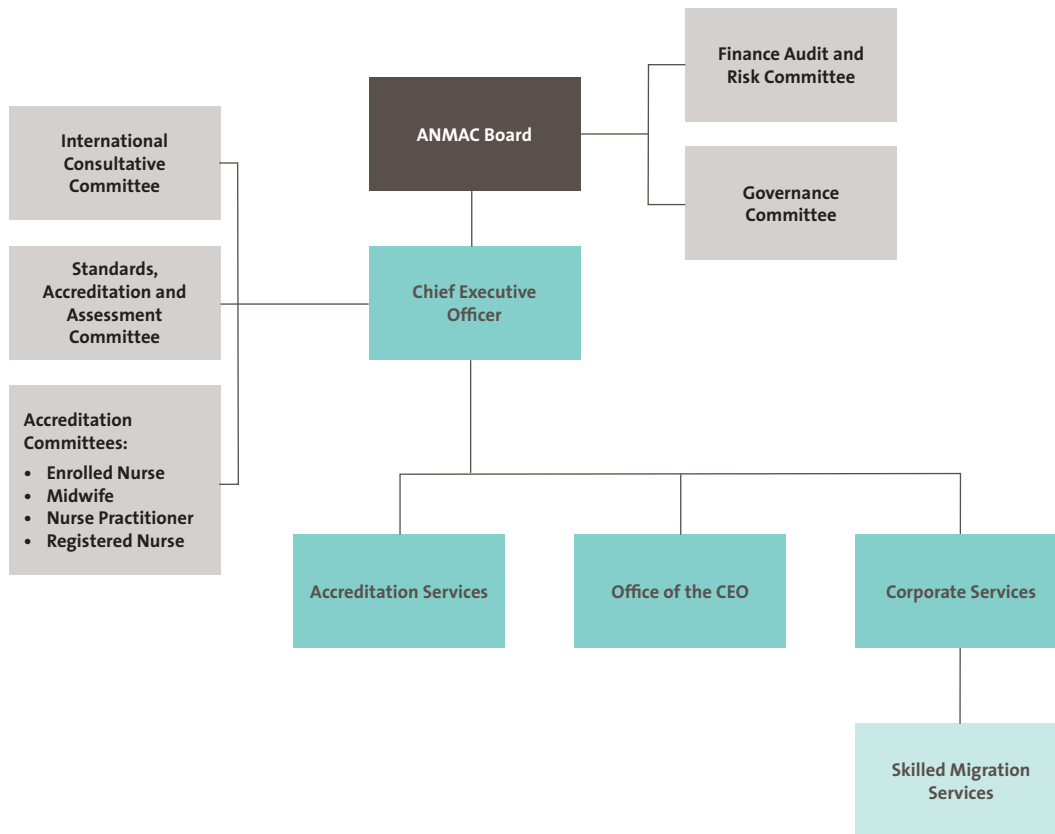
ANMAC was established by the Nursing and Midwifery Board of Australia (NMBA) as Australia's independent accreditation authority for nursing and midwifery professions. Since incorporation, ANMAC and its Board have been diligent in establishing and maintaining the governance framework and systems required to underpin the accreditation function.

Governance team:
Kera Holmes, Sarah
Ross, Alison Sette,
Fiona Stoker



In 2016–17, Board committees, expert advisory groups and professional reference groups, each with their own terms of reference, manage key governance responsibilities. The International Consultative Committee and ANMAC's four accreditation committees (one each for registered nurses, midwives, nurse practitioners and enrolled nurses) continued their important work as ANMAC operational and technical advisory committees.

Figure 2: ANMAC governance structure 2016–17



ANMAC Board

The ANMAC Board comprises representatives from a wide range of stakeholder organisations, enabling us to maximise robust expert and community input into our governance decisions. The Board meets bimonthly. Five meetings were held in 2016–17 (Table 1).

Back row L to R:
Kylie Ward, Robert
Meyenn, Helen
Edwards, Janine
Mohamed, Debra
Thoms, Fiona Stoker.

Front Row L to R:
Lee Thomas, Ann
Kinnear, Eileen Jerga.
(missing from photo
Karen Bradley, Wendy
Cross, Leone English,
Peter Bayley, Leena
Sudano).



Directors come from these member organisations:

- Australian College of Midwives
- Australian College of Nurses
- Australian Nursing & Midwifery Federation
- Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
- Council of Deans of Nursing and Midwifery (Australia and New Zealand).

Other directors are:

- one nominee from the vocational education and training sector
- one nominee from the Australian Government
- one nominee from the Australian Health Workforce Ministerial Council
- one expert from the education sector
- one expert from the nursing and midwifery education sector
- three representatives from the community.

Board Directors

Ann Kinnear

Certificate in Nursing, RM, BSc, MSc
Chief Executive Officer
Australian College of Midwives
Australian Capital Territory
Nominee—Australian College of Midwives

Professor Robert Meyenn

TCert, MEd, PhD
Emeritus Professor
Charles Sturt University
New South Wales

Adjunct Associate Professor Karen Bradley

RN, BSc(Nsg), ML, MACN, AFACHSM, GAICD
Chief Nurse and Midwifery Officer
Western Australia Department of Health
Western Australia
Nominee—Australian Health Workforce
Ministerial Council

Professor Wendy Cross

RN, RPN, BAppSc(AdvNsg), MEd, PhD, FACN, FACMHN,
MAICD
Associate Dean
Nursing and Allied Health, Faculty of Medicine,
Nursing and Health Sciences
Monash University
Victoria
Nominee—Council of Deans of Nursing and
Midwifery

Professor Helen Edwards OAM

PhD, BA (Hons), BA, DipAppSc, RN, FACN, FAAN, MAICD,
OAM
Assistant Dean (International and Engagement)
Faculty of Health
Queensland University of Technology
Queensland

Leone English

RN(Vic), BN, BTch (Adult), MEd(Adult),
GradDip(Mgt) Dean
Faculty of Health Science, Youth and
Community Studies
Holmesglen Institute
Victoria
Resigned in July 2016

Janine Mohamed

RN BA Grad Dip (Aboriginal Affairs and
Administration)
Chief Executive Officer
Congress of Aboriginal and Torres Strait Islander
Nurses and Midwives
Australian Capital Territory
Nominee—Congress of Aboriginal and Torres Strait
Islander Nurses and Midwives

Lee Thomas

RN, RM(Neo), BN, MRCNA
Federal Secretary
Australian Nursing and Midwifery Federation
Australian Capital Territory

Adjunct Professor Debra Thoms

RN, RM, BA, MNA, Grad Cert Bioethics, Adv Dip Arts,
FACN(DLF), FACHSM(Hon), GIA(Cert)
Chief Nursing and Midwifery Officer
Department of Health
Australian Capital Territory

Adjunct Professor Kylie Ward

RN, MMgt, Dip App Sci (Nursing), Acute Care Cert.,
FACN, Wharton Fellow, MAICD
Chief Executive Officer
Australian College of Nursing
Australian Capital Territory

Community Directors

Peter Bayley

Grad Dip Mgt, Corporate Directors Diploma,
Grad Cert Finance, Advanced Business Valuations
Professional Certificate
Retired Health Executive
New South Wales
Resigned in October 2016

Eileen Jerga AM

BA, MBA, AICD
Company Director
Australian Capital Territory

Leena Sudano

Dip AppSci(Nsg), Cert Mid, BN, GradDip Labour
Studies, BLaw(Hons), GradDip Legal Practice, GAICD
Company Director
South Australia
Resigned in October 2016

Table 1: Attendance at board meetings, by director, in 2016–17

NAME	BOARD MEETING				
	15-AUG 2016	15-NOV 2016	7-FEB 2017	11-APR 2017	13-JUN 2017
Peter Bayley	•	-	-	-	-
Karen Bradley	x	•	•	•	•
Wendy Cross	x	•	•	•	•
Helen Edwards	•	•	•	•	•
Eileen Jerga	•	•	•	•	•
Ann Kinnear	•	•	•	•	x
Bob Meyenn	•	x	•	x	•
Janine Mohamed	x	•	•	•	•
Leena Sudano	x	-	-	-	-
Lee Thomas	•	x	x	•	x
Debra Thoms	•	•	x	•	x
Kylie Ward	•	•	•	•	•

• Present x Absent - Not a member at time of meeting

Board strategic objectives

The ANMAC Board will revise the strategic plan in August 2017. The strategic plan articulates our identity, objectives and outcomes. These four key strategic objectives were identified for 2016–18:

1. quality evidence-based standards, accreditation and assessment
2. engaged stakeholders
3. sound governance framework
4. strong financial position.

Strategic outcomes

Focusing on our strategic objectives, we will ensure that:

- the community, ANMAC members and government are assured that nurses and midwives are being educated by accredited providers
- nurses and midwives undertake education programs that meet national accreditation standards—only internationally qualified nurses and midwives assessed as meeting the NMBA requirements for registration in Australia are eligible for skilled migration
- education providers have quality standards that provide a framework for the education of nurses and midwives and hold ANMAC in high regard for sound advice and guidance.

ANMAC Board Constitution

The Board endorsed the new constitution at the Annual General Meeting in October 2016. The new Constitution is contemporary and in line with the type a not-for-profit organisation would operate under. It succinctly captures the role of ANMAC's member organisations and directors.

The composition of the Board and Board Committees was addressed at the Annual General Meeting and the Board reduced from thirteen to nine members. The number of Board Committees reduced from three to two with the Governance Committee and Finance Audit and Risk Committee remaining in the revised governance structure. The Strategic Accreditation and Assessment Committee was disbanded. The transition to the new composition will be completed at the Annual General Meeting in October 2017.

Committees

As part of our governance arrangements and accreditation responsibilities, the ANMAC Board has established several committees. These help us fulfil our strategic goals and meet our legal obligations.

The Board appoints a Chair and develops terms of reference for each committee. Each committee makes recommendations to the Board.

The Board and committees are governed under ANMAC's committee policy and terms of reference.

Board committees

GOVERNANCE COMMITTEE

Purpose

Ensure ANMAC's governance systems, including the governance policies and procedures underpinning the conduct of the organisation comply with regulatory requirements and reflect contemporary business, governance, policy and ethical requirements in Australia.

Objectives

Deal with matters relating to:

- strategic directions of the organisation and development of the framework for the conduct of the organisation's business
- CEO remuneration, key performance indicators and annual review
- workplace health and safety
- Company Secretary
- ANMAC Constitution—review and amendment, and notice to the Board
- ANMAC Board and Committee governance policy
- conduct of ANMAC Board meetings.

FINANCE, AUDIT AND RISK COMMITTEE

Purpose

Ensure the Board is provided with high-level oversight of financial reporting, risk management and audit.

Objectives

Deal with matters relating to the:

- monitoring of monthly and annual financial statements
- review of annual capital and operating budgets, and recommending approval to the Board
- oversight and review of the external audit process—assessing the terms of engagement and remuneration of the auditor, recommending to the Board the appointment of the auditor, considering the scope and quality of external audits, and reviewing audit reports
- review of the effectiveness of internal audits and internal control systems
- oversight of ANMAC's risk management practices and periodic review of key risks to the organisation
- periodic review of ANMAC's risk management plan, insurances, delegations' policy, procurement policy, business continuity plan and other high-level policies relevant to the Committee's purpose.

STANDARDS, ACCREDITATION AND ASSESSMENT COMMITTEE

Purpose

Ensure the standards, policies and procedures underpinning assessment and accreditation are effective, fair and based on contemporary research and best practice in the interests of promoting and protecting the health of the community.

Objectives

Ensure all accreditation standards are in place and reviewed from time to time, in accordance with the National Law.

- Advise on policy and procedures relative to accreditation, assessment and the monitoring of programs of study and ensure they operate effectively and efficiently and in a framework of risk management and quality improvement, including International Services.
- Monitor and evaluate feedback from clients and other stakeholders to improve systems and processes.
- Oversee the policy analysis, review and response of external policies relevant to the functions of ANMAC.
- Commission research or best practice reviews in areas that will improve the effectiveness of assessment, accreditation and the monitoring of programs of study where evidence is equivocal or lacking.

The last meeting of the Standards, Accreditation and Assessment Committee was held in September 2016. Following the CEO's review of its terms of reference and purpose, the committee was replaced by the Strategic, Accreditation Advisory Committee. The new committee reports to the CEO and will be appointed in July 2017.

Technical advisory committees

INTERNATIONAL CONSULTATIVE COMMITTEE

Purpose

Ensure ANMAC is strategically engaged with key stakeholders responsible for matters relevant to the migration and workforce of internationally qualified nurses and midwives.

Objectives

- Liaise with key strategic stakeholders to discuss international issues that are relevant to the migration of international nurses and midwives.
- Liaise with government departments and key nursing and midwifery stakeholders on key policy decisions such as Visa applications and other matters pertaining to the migration of internationally qualified nurses and midwives.
- Provide advice to the CEO on strategic issues arising through the International Consultative Committee that may impact on ANMAC's business.
- Look at workforce issues relating to internationally qualified nurses and midwives.

ENROLLED NURSE ACCREDITATION COMMITTEE

Purpose

Promote and protect the health of the Australian community by:

- reviewing the assessment outcomes of enrolled nurse programs of study leading to registration undertaken by appointed ANMAC assessment teams
- making recommendations on accreditation of the programs of study to ANMAC.

Objectives

- Review reports from individual assessment teams and ensure there is sufficient evidence that a program being assessed meets the accreditation standards.
- Make recommendations to ANMAC on whether accreditation should be granted, granted conditionally or not granted.
- Recommend the establishment of a review panel if irreconcilable differences arise between the accreditation committee (and assessment team) and an education provider.
- Review, ratify and provide advice on monitoring reports.

MIDWIFE ACCREDITATION COMMITTEE

Purpose

Promote and protect the health of the Australian community through assuring the quality of nursing education by:

- reviewing the outcomes of assessments undertaken by ANMAC assessment teams for midwifery programs of study
- making recommendations to ANMAC on accreditation.

Objectives

- Review reports from individual assessment teams and ensure there is sufficient evidence that a program being assessed meets the required education standards.
- Make recommendations to ANMAC on whether the program should be recommended to the NMBA for accreditation.
- Recommend the establishment of a review panel if irreconcilable differences arise between the accreditation committee (and assessment team) and an education provider.
- Review, ratify and provide advice on monitoring reports.

NURSE PRACTITIONER ACCREDITATION COMMITTEE

Purpose

Promote and protect the health of the Australian community through assuring the quality of nursing education by:

- reviewing the outcomes of assessments undertaken by ANMAC assessment teams for nurse practitioner programs of study
- making recommendations to ANMAC on accreditation.

Objectives

- Review reports from individual assessment teams and ensure there is sufficient evidence that a program being assessed meets the accreditation standards.
- Make recommendations to ANMAC on whether the program should be recommended to the NMBA for accreditation.
- Recommend the establishment of a review panel if irreconcilable differences arise between the accreditation committee (and assessment team) and an education provider.
- Review, ratify and provide advice on monitoring reports.

REGISTERED NURSE ACCREDITATION COMMITTEE

Purpose

Promote and protect the health of the Australian community through assuring the quality of nursing education by:

- reviewing the outcomes of assessments undertaken by ANMAC assessment teams for registered nurse programs of study
- making recommendations to ANMAC on accreditation.

Objectives

- Review reports from individual assessment teams and ensure there is sufficient evidence that a program being assessed meets the accreditation standards.
- Make recommendations to ANMAC on whether the program should be recommended to the NMBA for accreditation.
- Recommend the establishment of a review panel if irreconcilable differences arise between the accreditation committee (and assessment team) and an education provider.
- Review, ratify and provide advice on monitoring reports.

3. Quality evidence based standards, accreditation and assessment

Accreditation Services

Skilled Migration Services

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Accreditation Services

The accreditation of nursing and midwifery programs of education leading to registration and endorsement is a function of the *Health Practitioner Regulation National Law Act 2009 (Qld)* (the National Law) delegated to ANMAC by the NMBA. This delegation also authorises ANMAC to monitor approved programs of study to ensure programs continue to meet approved accreditation standards.

L to R:
Frances Rice, Kate Imeson, Melanie Schaefer, Jackie Doolan, Melissa Cooper, Margaret Gatling, Julie Watts, Wendy Penney, Bridget Roache, Sara Stelfox



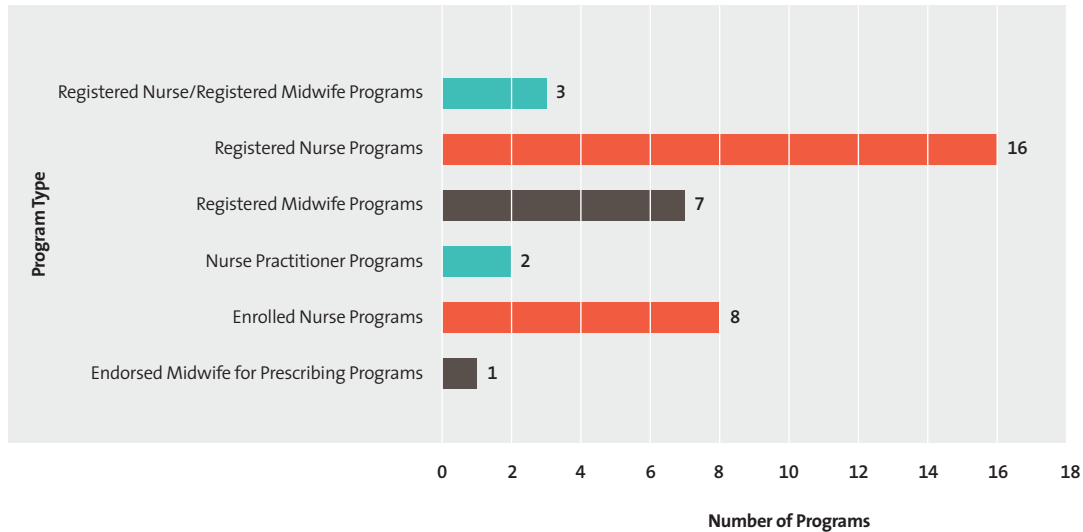
Under the National Law, ANMAC is delegated to develop accreditation standards for nursing and midwifery professions. In developing these standards, ANMAC consults widely with the Australian community. By doing so, the community can be assured that beginning professional practitioners who have completed an accredited program of study, have achieved agreed professional outcomes and are equipped with the foundation knowledge, professional attitudes and essential skills necessary to practice and care for people in a safe manner.

Major achievements in 2016–17

- accredited 37 programs of study
- assessed 9 major modifications to accredited programs of study
- assessed 100 minor modifications to accredited programs of study
- assessed 47 transitions from the HLT51612 training package to the HLT54115 training package
- launched a risk-based accreditation process
- published the *Enrolled Nurse Accreditation Standards 2017*
- started the review of the Registered Nurse Accreditation Standards (2012)

Of the 37 programs accredited the distribution is as follows, 3 dual degree programs, 16 registered nurse programs, 7 registered midwife programs, 2 nurse practitioner programs and 1 program leading to endorsement for scheduled medicines for midwives. (Figure 3).

Figure 3: Programs accredited in 2016–17



Quality improvement

RISK-BASED ACCREDITATION

ANMAC launched a risk-based accreditation process in February 2017, following an extensive review. The new process is standards focused and underpinned by risk-based assessment.

Risk assessment influences three key areas of our accreditation framework:

1. program accreditation
2. program changes
3. monitoring.

Risk assessment assigns a risk rating of low, medium or high to all nursing and midwifery education programs. It is conducted on all programs at the conclusion of the assessment process and annually as part of the preparation of the program monitoring report. We are the only health profession accreditation council to have introduced risk-based accreditation.

ANMAC works with education providers to ensure that continued compliance with accreditation standards does not stifle innovation or continuous quality improvement. While program changes are supported and encouraged, education providers must report them to ANMAC. Reporting requirements are determined by the program's risk rating.

ENROLLED NURSE ACCREDITATION STANDARDS LAUNCH

A critical element in accreditation is the use of evaluative accreditation standards. ANMAC regularly reviews and improves accreditation standards, so they continue to be relevant and effective in contemporary education and health care environments.

The review of the *Australian Nursing and Midwifery Council's Standards and Criteria for the Accreditation of Nursing and Midwifery Courses: Enrolled Nurse, February 2009* started in July 2015. The review incorporated wide-ranging consultation with stakeholders, in accordance with the law governing the National Registration and Accreditation Scheme. Stakeholder consultation opportunities were provided at stages. Feedback was collected by written submission, online survey responses and through face-to-face consultation forums.

The review finished in May 2017, when the Enrolled Nurse Accreditation Standards 2017 were approved by the Nursing and Midwifery Board. They came into effect with the publishing of them on our website (20 June 2017). ANMAC stakeholders, including education providers of Diploma of Nursing programs and organisations involved in reviewing the standards were notified by email that the NMBA had approved them. Our website was an effective communication tool in this process. Resources on the website detailed key changes to the standards and transition arrangements for providers.

The Enrolled Nurse Accreditation Standards 2017 now incorporate the same standard titles, concepts, terminology and—in most cases—definitions used in other ANMAC accreditation standards. Several qualitative changes were integrated across the *Enrolled Nurse Accreditation Standards 2017*.

Customer service

At the end of 2016–17, there were 215 accredited nursing and midwifery programs of study. Their distribution by registration type (Figure 4) is similar to the distribution of programs accredited in 2016–17 this financial year.

The Accreditation Services team continues communicating with stakeholders through multiple channels, including telephone, email and in person, at conferences and events. Our website remains a key communication tool for informing education providers about our work.

Section 50 of the National Law requires ANMAC to monitor approved programs of study so they continue to meet the standards they were accredited against. We do this by conducting routine, targeted or random monitoring of approved programs of study and through our complaints management systems.

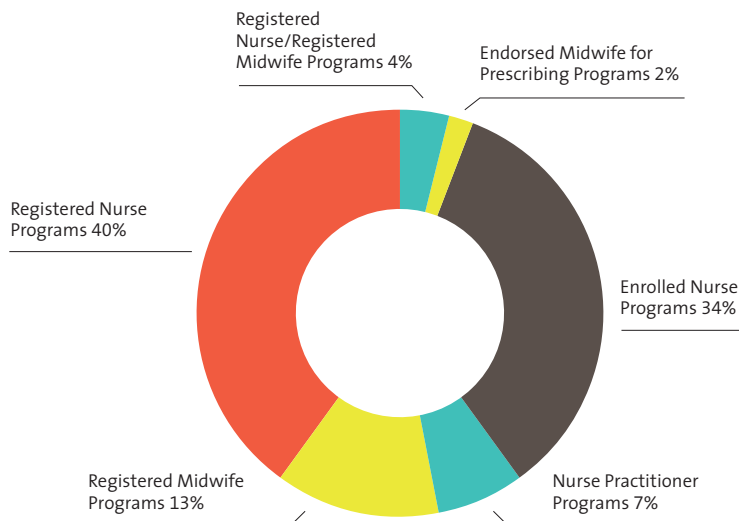
Monitoring an approved program can include:

- reviewing the annual declaration and program monitoring reports provided by education providers
- setting and reviewing reporting requirements
- conducting site visits
- investigating complaints.

This year, we have:

- assessed 11 complaints deemed to be in scope
- reviewed 202 annual declaration and program monitoring reports
- reviewed 19 special reports.

Figure 4: Distribution of currently accredited programs by registration type



Ongoing work

The development and review of the Registered Nurse Accreditation Standards began in June 2017 with the establishment of a professional reference group. This group comprises representatives of key stakeholders and nursing professionals who share insights into regulation, education and health policy. Membership ensures a greater diversity of views in the development and review process.

The process used for reviewing and developing the Registered Nurse Accreditation Standards has changed for these standards. Process changes were informed by the stakeholder survey conducted in 2016, which identified these four areas for improvement:

- need for greater diversity of views to be represented in consultation
- opportunity for broader awareness of the consultation process, particularly among clinicians
- desire for genuine consultation not just 'lip service' for pre-determined outcomes
- simplification of language and process for those unfamiliar with policy reviews, to encourage broader participation.

In response to survey results, ANMAC increased the opportunity for a wide range of stakeholders to participate, with feedback requested by written submission or by answering an online survey.

The introduction of a discussion paper for stakeholders, early in the process, provides an opportunity for them to genuinely inform the development of the accreditation standards. The paper contains key issues that may impact the review of the accreditation standards as identified in a literature search. All information provided to stakeholders is written in plain English to encourage broader participation.

In the interest of increasing transparency, ANMAC publishes written submissions (with permission from stakeholders) and a summary of the survey results. ANMAC and the professional reference group leading the review provides stakeholders with a response to feedback from consultation rounds. This is also published online.

The development and review process for the Registered Nurse Accreditation Standards will take approximately 12 months.

Skilled Migration Services

ANMAC's Skilled Migration Services assesses the skills of nurses and midwives who want to migrate to Australia under the General Skilled Migration program. We do this by assessing the qualifications and work experience of nurses and midwives, reviewing their qualifications and course transcripts and assessing their work experience through professional references. We determine if applicants have the nursing or midwifery qualifications and experience needed for permanent migration to Australia.

Back row L to R:
Jamie Sette, Kim Porozny, Demelza Rowley, Kathryn Baird.

Front Row L to R:
Dhanushka Drummond, Luke Cochrane, Aeyasha Mohammed.



Staff not in photo:
Pan Warburton and Toni Pye.



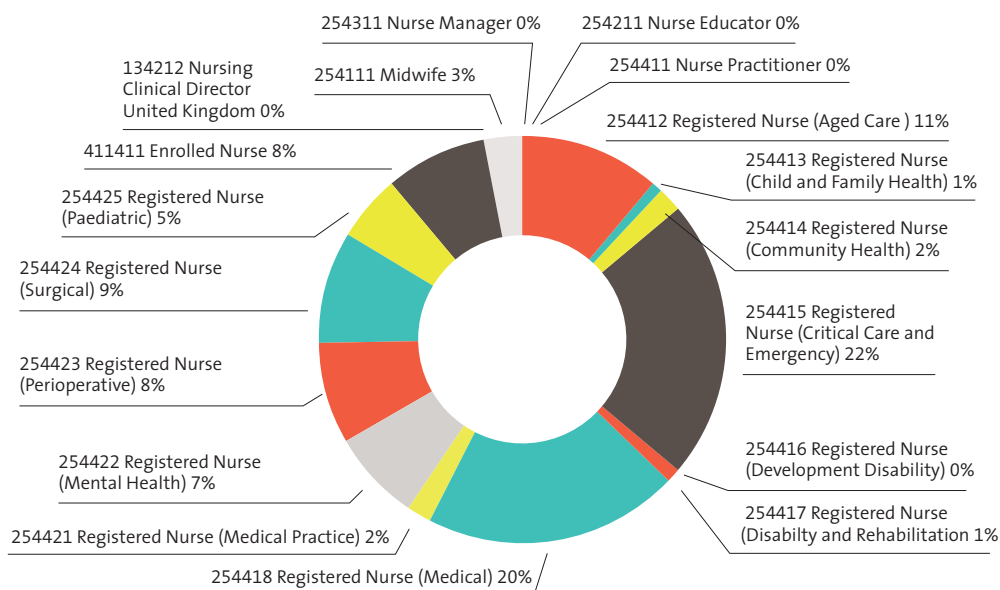
We are an independent assessing authority that has been authorised by law to conduct these assessments by the departments of Immigration and Border Protection and Education and Training.

Skilled Migration Services work closely with the Australian Health Practitioner Regulation Agency (AHPRA) and the NMBA to ensure nurses and midwives found suitable for migration are also suitable for registration. These organisations continue to work together to reduce process duplication for internationally qualified nurses and midwives wishing to work in Australia.

Major achievements in 2016–17

- 242 Full Assessments conducted
- 4449 Modified Assessments conducted
- Total Applications received 4692

Figure 5: Final ANZSCO codes used for applications completed in 2016–17



Applications fall into two categories:

- Modified assessment—for applicants holding current registration in Australia or New Zealand.
- Full assessment—for applicants not holding current registration in Australia or New Zealand, but who have a minimum bachelor level qualification in nursing from the Canada, Ireland, Hong Kong, United Kingdom.

In 2016–17, Skilled Migration Services received 4692 applications from nurses and midwives seeking a skills assessment, an increase of 19% from the previous year. Of those, 4449 were modified assessments and 242 full assessments. In 26% of applications a migration agent was acting on the applicant’s behalf.

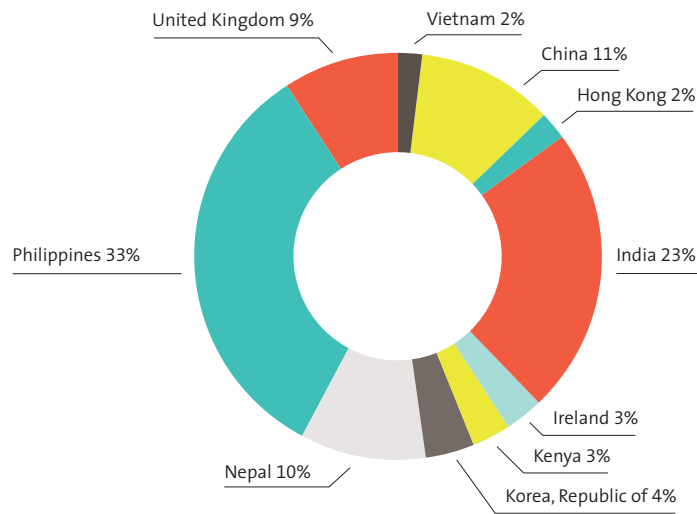
Skilled Migration Services uses Australian and New Zealand Standard Classification of Occupation (ANZSCO) codes to categorise applicants for migration purposes. These codes are used for statistical purposes and appear on the Skilled Occupations List (SOL) and the Consolidated Sponsored Occupations List (CSOL).

The ANZSCO code must appear on the SOL for independent visa applications and the CSOL for sponsored applications for an applicant to be selected to apply for the visa.

In 2016–17, 57.9% of applications were classified as Not Elsewhere Classified. This code is used for nurses who do not fit into an area of expertise and for new Australian graduates yet to gain work experience. After Not Elsewhere Classified—as shown in Figure 5—the most common ANZSCO codes were Medical (20%), Critical Care and Emergency (22%), Aged Care (11%), Enrolled Nurse (8%) and Midwife (3%).

Countries of birth have been used to determine where applicants are migrating from (Figure 6). Applicants from the Philippines represent the largest number at 33%, similar to numbers from 2015-16. India represents 23% of applicants, followed by China (11%), Nepal (10%) and the United Kingdom (9%). Ireland, Kenya, United States and Hong Kong numbers remain similar to previous years (2% to 3%).

Figure 6: Country of birth of applicants in 2016–17



Customer service

We continue to build on changes recommended following the quality review of Skilled Migration Services in 2015–16. We have improved customer service by streamlining email communication and reviewing documents sent to applicants to ensure that concise and easy-to-understand information is communicated at appropriate times during the assessment process.

To enhance customer service for applicants living in Australia, the final letter based on assessment outcome is now sent by registered post. This has created efficiencies for ANMAC by significantly reducing the number of letter reissues.

Efficiencies have also been created in the assessment process, by conducting a pre-assessment on applications upon receipt. This means ANMAC can complete the entire assessment process quickly and in one go.

As part of its improved customer service focus, the Skilled Migration Services team participated in additional training developed by a senior registered nurse. The improved capacity of assessors has resulted in a more efficient assessment process.

In response to the steady and consistent increase of applications, ANMAC has recruited two new assessors and a part-time administration officer to the team.

Ongoing work

In 2016–17, work began on implementing an online portal for applicants. The portal will allow applicants to submit documents online and see the status of their application at any time. It will also streamline the assessment process by removing many time-consuming tasks involved with processing hard-copy applications.

4. Engaged Stakeholders

Stakeholder engagement and collaboration

A large, bold, red number '4' is positioned on the right side of the page. It is set against a white rectangular background that is tilted slightly to the right. The number is composed of thick, solid red lines.

Stakeholder engagement and collaboration

Stakeholder engagement framework

Our Stakeholder Engagement Framework (the framework) was implemented in March 2017. It sets out the principles guiding our approach to stakeholder engagement and recognises that different levels of engagement are required for different purposes. The framework commits our engagement activities to be purposeful, relevant, open, honest, inclusive and responsive.

The framework was informed by stakeholder's responses to an online survey about ANMAC and the accreditation process. We used information provided by our stakeholders to develop the framework, which enables us to meet their needs and expectations.

National engagement activities

Our relationships with regulators, peak bodies and education providers in the higher education sector and vocational education and training sector continue to grow. In February 2017, ANMAC and the Tertiary Education Quality and Standards Agency signed a Memorandum of Understanding to promote cooperation and information sharing. In 2015, ANMAC and the Australian Skills Quality Authority signed a Memorandum of Understanding which is still in place.

We continue to foster a strong relationship with the Council of Deans Nursing and Midwifery (Australia & New Zealand) by attending its biannual meetings. These meetings enable us to share detailed information about changes to the accreditation process, including the launch of the risk-based assessment for education programs and the review and development process for the Registered Nurse Accreditation Standards.

In the interest of collaboration, information sharing and issues resolution, we attend the bimonthly liaison group meetings with the Executive Officer of the NMBA and members of the AHPRA and NMBA policy teams.

We are also members of the:

- Australian Health Professions Accreditation Councils Forum—giving us an opportunity to contribute individually and collectively to issues of national importance to the regulated health professions, particularly in accreditation of education, training and continuing professional development. Membership comprises the accreditation authorities of the regulated professions.
- Accreditation Liaison Group—giving us an opportunity to discuss the operation of the National Registration and Accreditation Scheme, regarding accreditation, education and training. Memberships comprise the AHPRA, Chairs of the national boards and accreditation authorities for regulated health professions.
- National Nursing and Midwifery Education Advisory Network—giving us an opportunity to discuss workforce issues. This advisory body provides high-level strategic advice to health ministers on issues relating to future planning, coordination and development of the nursing and midwifery workforce in Australia.

ANMAC is also an observer at meetings of the:

- Coalition of National Nursing and Midwifery Organisations, giving us an opportunity to network with nursing and midwifery organisations. This alliance works collectively to advance the nursing and midwifery profession to improve health care. It was established to represent the national interests of nurses and midwives in all sectors of the health profession. It comprises specialist national nursing and midwifery organisations from many different areas of practice.



Remembrance Ceremony at Australian War Memorial

SPECIAL OCCASIONS

In May 2017, ANMAC joined celebrations held in the Australian Capital Territory to mark the International Day of the Midwife (5 May) and the International Nurses Day (12 May). We participated in the Remembrance Ceremony held at the Australian War Memorial on 9 May by laying a wreath to commemorate the nurses who represented Australia in conflicts around the world. A few ANMAC employees attended the ACT Nursing and Midwifery Excellence Awards Dinner on 11 May to celebrate the distinctive contribution made individually and/or collectively by nurses and midwives to the people they care for.

CONFERENCES

In 2016–17, ANMAC was represented at the Australian College of Nursing's, National Nursing Forum. We attended to promote our work and explore with delegates where nursing is as a profession today. We also shared insights and discussed how nurses can harness their 'now power' to lead solutions to Australia's health and aged care challenges.

In November 2016, employees from Skilled Migration Services attended the Migration Institute of Australia National Conference. This gave them the opportunity to network with migration agents. Skilled Migration Services also attended the Skilled Migration Assessing Authorities Forum held by the Department of Education and Training. This provided an opportunity to network with other assessing authorities and discuss best practice in this area.

Top:
Meeting with
Iranian delegation



Below:
Meeting with
delegation from
Hong Kong



International engagement activities

During 2016–17, ANMAC had many opportunities to engage with stakeholders on an international level, including sharing and comparing accreditation processes for nursing and midwifery with delegations from Iran (December 2016) and Hong Kong (March 2017).

We met with Carolyn Reed, Chief Executive/ Registrar, Nursing Council of New Zealand in March to share information about ANMAC's new risk-based accreditation model, which was introduced in February and which education providers are transitioning to. We discussed the upcoming move to outcome-based assessment for Internationally Qualified Nurses and Midwives in Australia. We also discussed the status of the Enrolled Nurse Accreditation Standards, the upcoming review of the Registered Nurse Accreditation Standards and the similarities and differences for both organisations on common themes. Both ANMAC and the Nursing Council of New Zealand recognise the value in sharing regulatory information and are committed to meeting regularly.

Our CEO met with Anne Trotter, Assistant Director of Education and Standards and three policy advisors from the Nursing and Midwifery Council (United Kingdom) in May 2017. Discussions focused on internationally qualified nurses, accreditation processes and standards development.

In May 2017, our CEO and Director of Accreditation Services attended the International Council of Nurses Congress in Barcelona. The Congress is the largest international event for nurses and explored their leading role in care transformation, with a focus on universal health coverage, the Sustainable Development Goals and human resources for health.

Ongoing

The review and development of the Registered Nurse accreditation standards will be a significant piece of stakeholder consultation work over the next 12 months. In line with Section 46(2), ANMAC must ensure wide-ranging consultation on the content of new or revised standards.

Stakeholders will be invited by email to provide feedback throughout the review and development process and given three opportunities to participate in the consultation process.

The first consultation round will accept feedback by written submission or by response to an online survey. The second round will accept feedback by written submission or by response to an online survey. It will include a consultation forum held in Canberra. The final round will accept feedback by written submission only.

To increase transparency throughout the review and development process we will publish feedback from stakeholders and a summary of online survey results at the end of each consultation round. The professional reference group will respond to the feedback to keep stakeholders abreast of issues and how their feedback is being considered. We will use our website as a key communication tool throughout the review and development processes.

In line with our strategic objective of 'engaged stakeholders', we will seek more opportunities to engage with our stakeholders. This will include a stronger and more targeted presence at nursing and midwifery conferences, particularly those organised by our member organisations.

5. Financials

5

Director's Report

The directors of Australian Nursing and Midwifery Accreditation Council Limited (ANMAC) present the annual financial statements of ANMAC for the financial year ended 30 June 2017.

INFORMATION ON DIRECTORS		
Ann Kinnear	Chairperson	
Professor Robert Meyenn	Deputy Chairperson	
Adjunct Professor Debra Thoms		
Peter Bayley	(Community Director)	(resigned: 15 November 2016)
Adjunct Associate Professor Karen Bradley		
Professor Wendy Cross		
Professor Helen Edwards OAM		
Leone English		(resigned: 23 August 2016)
Eileen Jerga AM	(Community Director)	
Janine Mohamed		
Leena Sudano	(Community Director)	(resigned: 30 October 2016)
Lee Thomas		
Adjunct Professor Kylie Ward		

The names of each person who has been a director during the year and to the date of this report are:

Ann Kinnear	
Qualifications	Certificate in Nursing, RM, BSc, MSc
Experience	Ann Kinnear is the Company Secretary and Chief Executive Officer of the Australian College of Midwives (ACM) Pty Ltd and has been the CEO for six years. Ann is responsible for working with and supporting the ACM Board and managing the College to fulfil its objectives, in particular to maximize the quality of midwifery and maternity care for Australian women and their families. She is an inaugural Director on the Board of the Rhodanthe Lipsett Indigenous Midwifery Charitable Fund and is the Public Officer. Ann has extensive experience in governance, management, policy and leadership across a career spanning several decades.
Adjunct Professor Debra Thoms	
Qualifications	RN, RM, BA, MNA, Grad Cert Bioethics, Adv Dip Arts, FACN(DLF), FACHSM(Hon), GIA(Cert)
Experience	Professor Debra Thoms is the Chief Nursing and Midwifery Officer with the Australian Government and has held this position since September 2015. Prior to this she was the Chief Executive Officer of the Australian College of Nursing. From 2006 - 2012 she was the Chief Nursing and Midwifery Officer in NSW and has held a number of senior roles in the NSW Public Health System and interstate over a number of years. She is an Adjunct Professor with the University of Technology, Sydney and The University of Sydney.
Professor Robert Meyenn	
Qualifications	TCert, MEd, PhD
Experience	Emeritus Professor, Charles Sturt University. Former Dean, Faculty of Education. Former Chair of the Board Australian Volunteers International. Member of Board, Australian College of Law. Robert is the Deputy Chairperson of ANMAC.
Peter Bayley	
Qualifications	Grad Dip Mgt, Corporate Directors Diploma, Grad Cert Finance, Advanced Business Valuations Professional Certificate
Experience	Peter has 38 years health administration experience in public and private health sectors including as CEO of private hospitals, Director/Chair of a rural medical service company, Project Manager for two GP Super Clinics and presently as a director of three companies in the residential aged care, primary healthcare and disability sectors.

Adjunct Associate Professor Karen Bradley	
Qualifications	RN, BSc(Nsg), ML, MACN, AFACHSM, GAICD
Experience	Adjunct Associate Professor Karen Bradley has extensive experience in nursing, clinical leadership and health service management in the public and private health care sectors in Western Australia. Karen was appointed to the role of Chief Nurse and Midwifery Officer at the Department of Health Western Australia in 2014, providing strategy, workforce planning/development and policy advice to the professions, key internal and external stakeholders and government. Karen's previous positions include Area Director of Nursing and Midwifery with the South Metropolitan Health Service and Executive Director of Nursing and Midwifery with WA Country Health Service. In both of these roles Karen's experience also included significant organisational leadership roles in organisational governance, patient safety and clinical governance, workforce planning and clinical service planning. From 2004 to 2008 Karen was a member of the WA Health Reform Implementation Taskforce leading a range of clinical service reforms across the public health system at a time of extensive change and reform. Previous to this, Karen was the Director of Inpatient Services at St John of God Health Care Subiaco. Karen has a Masters in Leadership and is a graduate member of the Australian Institute of Company Directors.
Professor Wendy Cross	
Qualifications	RN, RPN, BAppSc(AdvNsg), MEd, PhD, FACN, FACMHN, MAICD
Experience	<p>Professor Wendy Cross has built a successful career in nursing, nursing research and nurse education. She has been awarded numerous research and teaching grants and has extensive experience in a range of nursing and management roles.</p> <p>From 2002 to 2007, she was employed as a senior executive at Monash Health, working in practice development, clinical governance, policy and procedure development, performance management and appraisal, workforce planning and other activities. In 2007, Wendy joined Monash University, School of Nursing and Midwifery with a focus on mental health nursing research, and was appointed Head of the School of Nursing and Midwifery 2009-2016. She currently has the position of Associate Dean, Nursing and Allied Health, in the Faculty of Medicine, Nursing and Health Sciences.</p> <p>She has a Bachelor of Applied Science in Advanced Nursing, a Master of Education by Research (Ed Psych) and a Doctor of Philosophy. Wendy's primary research interests include mental health and mental health nursing, clinical supervision, practice development, workplace learning, and broad based research methods including both quantitative and qualitative paradigms.</p>
Professor Helen Edwards OAM	
Qualifications	PhD, BA(Hons), BA, DipAppSc, RN, FACN, FAAN, MAICD, OAM
Experience	Helen is currently a Board Member of Metro North Hospital and Health Service in Queensland and has previously served on Boards of three Retirement Villages. She has over 30 years of experience in the higher education sector and has served as Head of the largest school of nursing in Queensland. Helen is an active researcher with a significant track record of research funding and high impact publications.
Leone English	
Qualifications	RN(Vic), BN, BTCh(Adult), MEd(Adult), GradDip(Mgt)
Experience	Leone English is Dean, Faculty of Health Science, Youth and Community Studies, at Holmesglen Institute in Melbourne. She has over 30 years' experience within a range of clinical, academic and senior management positions within health care and health professional education.
Eileen Jerga AM	
Qualifications	BA, MBA, AICD
Experience	<p>Eileen Jerga is a Board Director on the ANMAC Board, the ACT Veterinary Surgeons Board and the ACT Nursing and Midwifery Board. Eileen is currently also a member of the Department of Health Protocol Advisory Sub Committee, a subcommittee of the Medical Services Advisory Council, the Vascular Prostheses Clinical Advisory Group, the Medical Benefits Review Intensive Care and Emergency Medicine Clinical Committee and a PBAC Reference Group. Eileen was also recently appointed to the National Stroke Foundation Stroke Guidelines Advisory Committee.</p> <p>Prior to her Directorship and Committee roles, Eileen was the CEO of the Heart Foundation, ACT, from 1999 to 2006.</p>

Janine Mohamed	
Qualifications	RN BA GradDip (Aboriginal Affairs and Administration)
Experience	Janine Mohamed is a proud Narrunga Kurna woman from South Australia. Over the past 20 years she has worked in nursing, management, workforce and health policy, and project management in the Aboriginal and Torres Strait Islander health sector. Many of these years have been spent in the Aboriginal Community Controlled Health Sector at state and national levels. Currently she is the CEO of the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM). She has initiated and managed many Aboriginal and Torres Strait Islander health workforce projects including national board governance standards, workforce development and cultural safety.
Leena Sudano	
Qualifications	DipAppSci(Nsg), Cert Mid, BN, GradDip Labour Studies, BLaw(Hons), GradDip Legal Practice, GAICD
Experience	Leena Sudano's broad experience includes direct service delivery, advocacy, management and leadership roles in the health and community services sectors. She has worked in NSW, South Australia, Victoria and England. Her experience also includes change agent roles in statutory authorities focused on improving racial equality, and consumer rights in the health and community services sectors. She served as South Australia's first Health and Community Services Commissioner 2005-2012. She is a member of the NPS Consumer Advisory Group and the SA Civil and Administrative Tribunal.
Lee Thomas	
Qualifications	RN, RM(Neo), BN, MRCNA
Experience	Prior to taking on her current role as the Federal Secretary of the Australian Nursing and Midwifery Federation, Lee Thomas served as Branch Secretary of the ANF (SA Branch) for eight years, and has had more than 20 years' experience in the nursing and midwifery professions.
Adjunct Professor Kylie Ward	
Qualifications	RN MMgt, DipAppSci(Nsg), Acute Care Cert., FACN, Wharton Fellow, MAICD
Experience	Adjunct Professor Kylie Ward has had a successful and celebrated career as a Nursing Leader and Health and Aged Care Executive in Australia for over 25 years. She has held positions of Managing Director, Director of Clinical Operations, Director of Nursing and Midwifery, Director of the Division of Medicine, Associate Director of Women's and Children's Health and Executive Director of Nursing and Midwifery in three major health services in NSW and Victoria. She has been a NUM, After Hours Coordinator, Campus Manager, Bed Manager and Patient Flow Manager. Her clinical background is in intensive care and aged care. Kylie's expertise is in transformational leadership and management, organisational culture, change management, models of care, redesign and clinical informatics. She has been a lecturer for Masters Degree and undergraduate Masters Degree nursing students in leadership and management at Monash University. Kylie Ward is now the Chief Executive Officer of the Australian College of Nursing.

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

Objectives and strategies

ANMAC aims to provide high quality nursing and midwifery practice to meet the needs of the Australian Community. This is achieved through the strategy of implementing a nationally consistent approach to regulation, which meets and responds to the needs of the Australian community and is recognised internationally for high standards and professionalism.

Principal activities and achievements

The principal activities of ANMAC during the financial year were:

- review of accreditation standards
- the accreditation of nursing and midwifery programs leading to registration
- the assessment of the skills and qualifications of overseas nurses and midwives for migration
- A more streamlined and efficient organisational structure was implemented
- Increased stakeholder engagement; and
- Quality reporting to the Nursing and Midwifery Board of Australia

During the financial year 2016–17, ANMAC processed 4,692 applications for assessment of qualifications.

During the financial year 2016–17, ANMAC accredited 32 nursing and midwifery programs.

No significant changes in the nature of ANMAC's activities occurred during the financial year.

Measurement of performance

ANMAC measures its performance during the year by critically assessing its outcomes against the following criteria:

- commitment to quality health care and safe nursing and midwifery practice;
- accountability to the community through nursing and midwifery regulatory authorities;
- leadership in health and professional regulatory environments;
- constructive collaboration with stakeholders in areas of mutual interest;
- integrity in all business practices;
- social and environmental responsibility;
- evidence based decision making;
- outcome focused business performance; and
- continuous enhancement of business capability.

Operating results and review of operations

The surplus of ANMAC for the year ended 30 June 2017 was \$1,352,047 (2016: \$327,463).

Members guarantee

Australian Nursing and Midwifery Accreditation Council Limited is a company limited by guarantee. In the event ANMAC is wound up, the Constitution states that each member is required to contribute a maximum of \$100 each towards any outstanding obligations of ANMAC.

Meetings of directors

During the financial year, 5 meetings of directors (including committees of directors) were held. Attendances by each director during the year were as follows:

DIRECTORS' MEETINGS		
	Number eligible to attend	Number attended
Ann Kinnear	5	4
Adjunct Professor Debra Thoms	5	3
Professor Robert Meyenn	5	3
Peter Bayley	1	1
Adjunct Associate Professor Karen Bradley	5	4
Professor Wendy Cross	5	4
Professor Helen Edwards OAM	5	5
Leone English	1	1
Eileen Jerga AM	5	5
Janine Mohamed	5	4
Leena Sudano	1	-
Lee Thomas	5	2
Adjunct Professor Kylie Ward	5	5

Auditor's independence declaration

The auditor's independence declaration in accordance with s60-40(1) in the *Australian Charities and Not-for-profits Commission Act 2012*, for the year ended 30 June 2017 has been received and can be found on page 7 of the financial report.

Signed in accordance with a resolution of the Board of Directors:



Ann Kinnear
Chair
15 September 2017



Professor Robert Meyenn, Deputy Chair
Deputy Chair
15 September 2017



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Hardwickes
ABN 35 973 938 183

Hardwickes Partners Pty Ltd
ABN 21 008 401 536

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approved under Professional
Standards Legislation

Auditors Independence Declaration under Section 60-40(1) of the Australian Charities and Not-for-profits Commission Act 2012 to the Directors of Australian Nursing and Midwifery Accreditation Council Limited

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2017, there have been no contraventions of:

- (i) the auditor independence requirements as set out by *s60-40(1)* in the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- (ii) any applicable code of professional conduct in relation to the audit.

Hardwickes
Chartered Accountants

Robert Johnson FCA
Partner

Dated: 15 September 2017

Canberra



**Statement of Comprehensive income
For the year ended 30 June 2017**

	Note	2017 \$	2016 \$
Revenue	2	6,747,552	6,066,970
Communications and marketing		(10,356)	(81,116)
Compliance costs		(7,937)	(14,246)
Consultancy expenses		(290,463)	(508,201)
Corporate expenses		(289,103)	(269,080)
Depreciation expense	9(a)	(98,840)	(127,954)
Employee benefits expense		(3,475,728)	(3,710,360)
IT expenses		(225,456)	(215,694)
Operating lease — rent of premises		(603,324)	(388,396)
Other expenses		(13,950)	(46,197)
Other property expenses		(42,765)	(43,052)
Recruitment expenses		(23,520)	(28,663)
Travel expenses		(314,063)	(306,548)
Current year surplus before income tax		1,352,047	327,463
Income tax expense	1(a)	-	-
Net current year surplus		1,352,047	327,463
Total comprehensive income for the year		1,352,047	327,463

**Statement of Financial Position
For the year ended 30 June 2017**

	Note	2017 \$	2016 \$
Assets			
Current assets			
Cash and cash equivalents	4	4,402,989	3,268,423
Trade and other receivables	5	44,550	1,773
Other financial assets	6	127,716	164,213
Current tax receivable	7	7,436	19,544
Other assets	8	185,584	143,270
Total Current Assets		4,768,275	3,597,223
Non-current assets			
Plant and equipment	9	773,569	839,627
Other assets	8	-	7,443
Total non-current assets		773,569	847,070
Total assets		5,541,844	4,444,293
Liabilities			
Current Liabilities			
Trade and other payables	10	188,936	233,741
Other financial liabilities	11	38,920	84,859
Employee provisions	12	467,938	527,774
Other financial liabilities	13	545,952	731,357
Total current liabilities		1,241,746	1,577,731
Non-current liabilities			
Other financial liabilities	11	782,745	678,875
Employee provisions	12	42,991	65,372
Total non-current liabilities		825,736	744,247
Total liabilities		2,067,482	2,321,978
Net assets		3,474,362	2,122,315
Equity			
Retained surplus		3,474,362	2,122,315
Total equity		3,474,362	2,122,315

**Statement of Changes in Equity
For the year ended 30 June 2017**

2017	Retained surplus	Totals
	\$	\$
Balance at 1 July 2016	2,122,315	2,122,315
Surplus attributable to members of the entity	1,352,047	1,352,047
Balance at 30 June 2017	3,474,362	3,474,362

2016	Retained surplus	Totals
	\$	\$
Balance at 1 July 2015	1,794,852	1,794,852
Surplus attributable to members of the entity	327,463	327,463
Balance at 30 June 2016	2,122,315	2,122,315

Statement of Cash Flows
For the year ended 30 June 2017

	Note	2017 \$	2016 \$
Cash flows from operating activities			
Receipts from fees, sales and grants		6,939,767	5,530,100
Payments to suppliers and employees		(5,857,681)	(5,618,205)
Interest received		47,697	67,745
Net cash provided by/(used in) operating activities	21	1,129,783	(20,360)
Cash flows from investing activities			
Proceeds from sale of plant and equipment		2,132	4,351
Purchase of plant and equipment		(33,846)	(191,505)
Proceeds from/(purchase for) financial assets		36,497	2,915,389
Net cash provided by/(used in) investing activities		4,783	2,728,235
Net increase/(decrease) in cash held		1,134,566	2,707,875
Cash and cash equivalents at beginning of financial year		3,268,423	560,548
Cash and cash equivalents at end of financial year	4	4,402,989	3,268,423

Notes to the financial statements For the year ended 30 June 2017

The financial report covers Australian Nursing and Midwifery Accreditation Council Limited as an individual entity. Australian Nursing and Midwifery Accreditation Council Limited is a not-for-profit company limited by guarantee, incorporated and domiciled in Australia.

The functional and presentation currency of Australian Nursing and Midwifery Accreditation Council Limited is Australian dollars.

The financial report was authorised for issue by the Directors on 15 September 2017.

Comparatives are consistent with prior years, unless otherwise stated.¹ Summary of Significant Accounting Policies.

Basis of Preparation

Australian Nursing and Midwifery Accreditation Council Limited applies Australian Accounting Standards — Reduced Disclosure Requirements as set out in AASB 1053: *Application of Tiers of Australian Accounting Standards*.

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards - Reduced Disclosure Requirements of the Australian Accounting Standards Board (AASB) and the *Australian Charities and Not-for-profits Commission Act 2012*. The company is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

Australian Accounting Standards set out accounting policies that the AASB has concluded would result in financial statements containing relevant and reliable information about transactions, events and conditions. Material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless stated otherwise.

The financial statements, except for the cash flow information, have been prepared on an accruals basis and are based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities. The amounts presented in the financial statements have been rounded to the nearest dollar.

1 Summary of Significant Accounting Policies

(a) Income tax

The company is exempt from income tax under Division 50 of the *Income Tax Assessment Act 1997*.

(b) Leases

Lease payments for operating leases, where substantially all of the risks and benefits remain with the lessor, are charged as expenses on a straight-line basis over the life of the lease term.

Lease incentives under operating leases are recognised as a liability and amortised on a straight-line basis over the life of the lease term.

(c) Cash and cash equivalents

Cash and cash equivalents include cash on hand, deposits held at-call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts.

(d) Accounts Receivable and Other Debtors

Accounts receivable and other debtors include amounts due from members as well as amounts receivable from customers for services rendered in the ordinary course of business. Receivables expected to be collected within 12 months of the end of the reporting period are classified as current assets. All other receivables are classified as non-current assets.

(e) Revenue and other income

Grant income

Non-reciprocal grant revenue is recognised in profit or loss when the entity obtains control of the grant and it is probable that the economic benefits gained from the grant will flow to the entity and the amount of the grant can be measured reliably.

If conditions are attached to the grant which must be satisfied before the entity is eligible to receive the contribution, the recognition of the grant as revenue will be deferred until those conditions are satisfied.

When grant revenue is received whereby the entity incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the grant revenue is recognised in the statement of financial position as a liability until the service has been delivered to the contributor; otherwise the grant is recognised as income on receipt.

Service income

Revenue from the rendering of a service is recognised upon the delivery of the service to the customer on a percentage of completion basis.

Accreditation revenue

Accreditation revenue is brought to account on the basis of the stage of completion of each accreditation. As such ANMAC estimates the stage of completion of each accreditation that is in progress at the end of the reporting period. The estimates are based on a series of milestones that have been determined by management.

Interest revenue

Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets.

Other income

Other income is recognised on an accruals basis when the company is entitled to it.

All revenue is stated net of the amount of goods and services tax (GST).

(f) Goods and services tax (GST)

Revenue, expenses and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO).

Receivables and payable are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the ATO is included as part of receivables or payables in the statement of financial position.

Cash flows are presented on a gross basis. The GST components of cash flows arising from investing and financing activities, which are recoverable from or payable to the ATO, are presented as operating cash flows included in receipts from customers or payments to suppliers.

(g) Plant and equipment

Plant and equipment are measured on the cost basis and are therefore carried at cost less accumulated depreciation and any accumulated impairment losses. In the event the carrying amount of plant and equipment is greater than the estimated recoverable amount, the carrying amount is written down immediately to the estimated recoverable amount and impairment losses are recognised either in profit or loss or as a revaluation decrease if the impairment losses relate to a revalued asset. A formal assessment of recoverable amount is made when impairment indicators are present (refer to Note 1(j) for details of impairment).

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the company and the cost of the item can be measured reliably. All other repairs and maintenance are recognised as expenses in profit or loss in the financial period in which they are incurred.

Plant and equipment that have been contributed at no cost, or for nominal cost, are valued and recognised at the fair value of the asset at the date it is acquired.

Depreciation

The depreciable amount of all fixed assets, including capitalised lease assets, is depreciated on a straight-line basis over the asset's useful life to the entity commencing from the time the asset is available for use.

Leasehold improvements are depreciated over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

The depreciation rates used for each class of depreciable asset are:

Fixed asset class	Depreciation rate
Plant and Equipment	20%–27%
Furniture, Fixtures and Fittings	11%–27%
Computer Software	27%

The assets' residual values and useful lives are reviewed, and adjusted if appropriate, at the end of each reporting period.

Gains and losses on disposals are determined by comparing proceeds with the carrying amount. These gains or losses are recognised in profit or loss in the period in which they arise. When revalued assets are sold, amounts included in the revaluation surplus relating to that asset are transferred to retained surplus.

(h) Accounts Payable and Other Payables

Accounts payable and other payables represent the liability outstanding at the end of the reporting period for goods and services received by the company during the reporting period which remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

(i) Financial instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when the entity becomes a party to the contractual provisions to the instrument. For financial assets, this is equivalent to the date that the company commits itself to either purchase or sell the asset (ie trade date accounting is adopted). Financial instruments are initially measured at fair value plus transaction costs except where the instrument is classified "at fair value through profit or loss", in which case transaction costs are recognised as expenses in profit or loss.

Classification and subsequent measurement

Financial instruments are subsequently measured at fair value, amortised cost using the effective interest method, or cost.

Amortised cost is calculated as the amount at which the financial asset or financial liability is measured at initial recognition less principal repayments and any reduction for impairment, and adjusted for any cumulative amortisation of the difference between that initial amount and the maturity amount calculated using the effective interest method.

(i) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are subsequently measured at amortised cost. Gains or losses are recognised in profit or loss through the amortisation process and when the financial asset is derecognised.

(ii) Held-to-maturity investments

Held-to-maturity investments are non-derivative financial assets that have fixed maturities and fixed or determinable payments, and it is the company's intention to hold these investments to maturity. They are subsequently measured at amortised cost. Gains or losses are recognised in profit or loss through the amortisation process and when the financial asset is derecognised.

(iii) Financial liabilities

Non-derivative financial liabilities other than financial guarantees are subsequently measured at amortised cost. Gains or losses are recognised in profit or loss through the amortisation process and when the financial liability is derecognised.

Impairment of non-financial assets

At the end of each reporting period, the company assesses whether there is objective evidence that a financial asset has been impaired. A financial asset or a group of financial assets is deemed to be impaired if, and only if, there is objective evidence of impairment as a result of the occurrence of one or more events (a “loss event”), which has an impact on the estimated future cash flows of the financial asset(s).

For financial assets carried at amortised cost (including loans and receivables), a separate allowance account is used to reduce the carrying amount of financial assets impaired by credit losses. After having taken all possible measures of recovery, if management establishes that the carrying amount cannot be recovered by any means, at that point the written-off amounts are charged to the allowance account or the carrying amount of impaired financial assets is reduced directly if no impairment amount was previously recognised in the allowance account.

When the terms of financial assets that would otherwise have been past due or impaired have been renegotiated, the company recognises the impairment for such financial assets by taking into account the original terms as if the terms have not been renegotiated so that the loss events that have occurred are duly considered.

Derecognition

Financial assets are derecognised where the contractual rights to receipt of cash flows expire or the asset is transferred to another party whereby the entity no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are discharged, cancelled or have expired. The difference between the carrying amount of the financial liability, which is extinguished or transferred to another party, and the fair value of consideration paid, including the transfer of non-cash assets or liabilities assumed, is recognised in profit or loss.

(j) Impairment of non-financial assets

At the end of each reporting period, the entity reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs of disposal and value in use, is compared to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is recognised in profit or loss.

Where the future economic benefits of the asset are not primarily dependent upon the asset's ability to generate net cash inflows and when the entity would, if deprived of the asset, replace its remaining future economic benefits, value in use is determined as the depreciated replacement cost of an asset.

Where it is not possible to estimate the recoverable amount of an individual asset, the entity estimates the recoverable amount of the cash-generating unit to which the asset belongs.

Where an impairment loss on a revalued individual asset is identified, this is recognised against the revaluation surplus in respect of the same class of asset to the extent that the impairment loss does not exceed the amount in the revaluation surplus for that class of asset.

(k) Employee benefits

Short-term employee provisions

Provision is made for the company's obligation for short-term employee benefits. Short-term employee benefits are benefits (other than termination benefits) that are expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related service, including wages, salaries and sick leave. Short-term employee benefits are measured at the (undiscounted) amounts expected to be paid when the obligation is settled.

Other long-term employee provisions

Provision is made for employees' long service leave and annual leave entitlements not expected to be settled wholly within 12 months after the end of the annual reporting period in which the employees render the related service. Upon the remeasurement of obligations for other long-term employee benefits, the net change in the obligation is recognised in profit or loss as part of employee benefits expense.

The company's obligations for long-term employee benefits are presented as non-current employee provisions in its statement of financial position, except where the company does not have an unconditional right to defer settlement for at least 12 months after the end of the reporting period, in which case the obligations are presented as current provisions.

(l) Critical Accounting Estimates and Judgements

Transaction and balances

The directors evaluate estimates and judgements incorporated into the financial statements based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the company.

Key judgements

(i) Accreditation revenue

Accreditation revenue is brought to account on the basis of the stage of completion of each accreditation. As such ANMAC estimates the stage of completion of each accreditation that is in progress at the end of the reporting period. The estimates are based on a series of milestones that have been determined by management. While there is a level of estimation error in relation to the milestones, the Directors do not believe that there is a significant risk of material adjustment in the future.

(ii) Employee benefits

For the purpose of measurement, AASB 119: Employee Benefits defines obligations for short-term employee benefits as obligations expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related services. The company expects most employees will take their annual leave entitlements within 24 months of the reporting period in which they were earned, but this will not have a material impact on the amounts recognised in respect of obligations for employees' leave entitlements.

(m) Economic dependence

The ability of Australian Nursing and Midwifery Accreditation Council Limited to undertake the role as the independent accreditation authority for the nursing and midwifery profession in Australia, is dependent on the receipt of funding from the Australian Health Practitioner Regulation Agency, which has been secured until 30 June 2019. Without this funding Australian Nursing and Midwifery Accreditation Council Limited would be unable to undertake the accreditation role. Due to the uncertainty of the NRAS review, a surplus has been maintained as a safety net in the event that ANMAC is closed. This will assist in paying not only the lease liabilities, but also any redundancies and other outstanding liabilities.

2 Revenue and Other Income

	Note	2017 \$	2016 \$
Operating activities			
– Accreditation income		1,860,064	794,035
– Grant income		2,658,661	3,378,903
– Overseas assessment fees		2,035,620	1,654,242
– Sundry income		140,691	87,186
Non-operating activities			
– Profit on disposal of plant and equipment		1,068	-
– Finance charges income		-	11,739
– Lease incentive payment amortised	1(b)	-	73,120
– Interest received		51,448	67,745
Total revenue		6,747,552	6,066,970

3 Operating Segments

	Accreditation		Skilled Migration Services and Other		Total	
	2017 \$	2016 \$	2017 \$	2016 \$	2017 \$	2016 \$
Revenue						
Grant income received	2,658,661	3,799,794	-	-	2,658,661	3,799,794
Less: unspent funds carried forward	-	(420,891)	-	-	-	(420,891)
Accreditation income	1,860,064	794,035	-	-	1,860,064	794,035
Overseas assessments	-	-	2,035,620	1,654,242	2,035,620	1,654,242
Other revenue	54,974	110,949	138,233	43,982	193,207	154,931
Make good payment amortised	-	52,362	-	20,758	-	73,120
Finance charges	-	2,792	-	8,947	-	11,739
	4,573,699	4,339,041	2,173,853	1,727,929	6,747,552	6,066,970
Expenses						
Direct expenses	1,812,326	2,301,928	715,264	575,536	2,527,590	2,877,464
Overheads	2,294,332	2,289,592	573,583	572,451	2,867,915	2,862,043
	4,106,658	4,591,520	1,288,847	1,147,987	5,395,505	5,739,507
Net surplus/(deficit)	467,041	(252,479)	885,006	579,942	1,352,047	327,463

4 Cash and cash equivalents

		2017	2016
	Note	\$	\$
Cash on hand		500	500
Cash at bank		1,386,209	1,652,053
Deposits at call		3,016,280	1,615,870
		4,402,989	3,268,423

5 Trade and other receivables

		2017	2016
	Note	\$	\$
Current			
Trade receivables		44,550	1,773
Total current trade and other receivables	18	44,550	1,773

The carrying value of trade receivables is considered a reasonable approximation of fair value due to the short-term nature of the balances.

6 Other financial assets

		2017	2016
	Note	\$	\$
Current			
Held-to-maturity financial assets	6(a)	127,716	164,213
Total current assets		127,716	164,213

(a) Held-to-maturity investments comprise:

Fixed interest securities — current		127,716	164,213
	18	127,716	164,213

7 Tax assets

		2017	2016
	Note	\$	\$
Current			
GST receivable		7,436	19,544
Current tax receivable		7,436	19,544

8 Other Assets

	Note	2017 \$	2016 \$
Current			
Prepayments		171,357	78,196
Accrued income		6,823	3,072
Lease incentive		7,404	62,002
		185,584	143,270
Non-current			
Lease incentive		-	7,443
		-	7,443

9 Plant and equipment

	Note	2017 \$	2016 \$
Plant and equipment			
At cost		195,078	238,544
Accumulated depreciation		(124,984)	(137,065)
Total plant and equipment		70,094	101,479
Furniture, fixtures and fittings			
At cost		828,283	862,275
Accumulated depreciation		(126,856)	(133,094)
Total furniture, fixtures and fittings		701,427	729,181
Computer software			
At cost		2,990	57,532
Accumulated depreciation		(942)	(48,565)
Total computer software		2,048	8,967
Total plant and equipment		773,569	839,627

(a) Movements in carrying amounts of plant and equipment

Movement in the carrying amounts for each class of plant and equipment between the beginning and the end of the current financial year:

	Plant and Equipment	Furniture, Fixtures and Fittings	Computer Software	Total
	\$	\$	\$	\$
Year ended 30 June 2017				
Balance at the beginning of year	101,479	729,181	8,967	839,627
Additions	9,092	24,754	-	33,846
Disposals — written down value	(985)	(79)	-	(1,064)
Depreciation expense	(39,492)	(52,429)	(6,919)	(98,840)
Balance at the end of the year	70,094	701,427	2,048	773,569
Year ended 30 June 2016				
Balance at the beginning of year	69,878	40,030	22,041	131,949
Additions	82,515	756,000	2,990	841,505
Disposals — written down value	(5,254)	-	(619)	(5,873)
Depreciation expense	(45,660)	(66,849)	(15,445)	(127,954)
Balance at the end of the year	101,479	729,181	8,967	839,627

10 Trade and other payables

	Note	2017 \$	2016 \$
Current			
Unsecured liabilities			
Payroll payables		73,334	159,166
		115,602	74,575
	18	188,936	233,741

11 Other financial liabilities

		2017	2016
	Note	\$	\$
Current			
Lease incentive liabilities		38,920	84,859
Total current borrowings		38,920	84,859
Non current			
Lease incentive liabilities		782,745	678,875
Total non-current borrowings		782,745	678,875
Total borrowings	18	821,665	763,734

The lease incentive liabilities are related to the rental premises of 15 Lancaster Place, Majura Park, described in note 14. The liability is recognised over the period of the lease of 10 years. In the prior year, the interest portion was separately recognised as a finance charge income as reflected in Note 2. The liability is represented by a lease incentive asset of \$69,445 per note 8 and fit-out costs of \$650,000. The office fit-out costs are reflected under additions in Note 9(a). The lease incentive asset comprises of various benefits which ANMAC can utilise up to 20 February 2018. The liability to refund Canberra Airport for the office fit-out costs is reduced to nil over a 10 year period.

12 Employee provisions

		2017	2016
	Note	\$	\$
Current			
Annual leave		228,048	273,978
Long service leave		239,890	253,796
		467,938	527,774
Non current			
Long service leave		42,991	65,372
		42,991	65,372

13 Other liabilities

	2017	2016
Note	\$	\$
Current		
Income received in advance — accreditations	545,952	310,466
Unspent grant	-	420,891
	545,952	731,357

The Nursing and Midwifery Board of Australia (NMBA) grant acquittal was submitted on the 12 September 2016. The amount of the unspent grant as a result of the acquittal submitted by ANMAC was \$420,891. This was treated as a liability in the statement of financial position in the prior year.

14 Capital and Leasing Commitments

(a) Operating Leases

Non-cancellable operating leases contracted for but not recognised in the financial statements:

	2017	2016
Note	\$	\$
Minimum lease payments under non-cancellable operating leases:		
- not later than one year	375,700	510,765
- between one year and five years	1,638,978	1,629,734
- later than five years	1,712,053	2,172,585
	3,726,731	4,313,084

The operating leases are related to ANMAC's office premises:

- ANMAC entered into a rental agreement on the 20 February 2016 for \$358,809 p.a. The premises are 15 Lancaster Place Majura Park.
- Majura Park lease expires on 19 February 2026. Lease payments increase by 3.5% per annum.
- Level 2 Empire Chambers, University Avenue lease expires on 31 July 2017.

15 Contingencies

Contingent Liabilities

Australian Nursing and Midwifery Accreditation Council Limited had the following contingent liabilities at the end of the reporting period:

Under the rental lease agreement for Majura Park there are contingent liabilities for repayment of the lessor's fitout contribution or if the exception clause applies, an early surrender payment. The liabilities are contingent on a Repayment Event occurring as defined in the rental lease. The calculation of the contingent liabilities is determined by the rental lease agreement and the values are reducing over a set time period. The value of the contingent liabilities at year end are: Repayment of lessor's fitout contribution \$578,500 (2016: \$650,000) or if applicable, Early surrender payment \$390,984 (2016: \$390,984).

16 Events after the end of the Reporting Period

The financial report was authorised for issue on 15 September 2017 by the Board of Directors.

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the company, the results of those operations or the state of affairs of the company

17 Related Parties

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other parties unless otherwise stated. No related party transactions occurred during the year except for the payments to executive management personnel as per the remuneration Note 19.

18 Financial Risk Management

The company's financial instruments consist mainly of deposits with banks, short-term investments, accounts receivable and payable and leases.

The totals for each category of financial instruments, measured in accordance with AASB 139 as detailed in the accounting policies to these financial statements, are as follows:

	Note	2017 \$	2016 \$
Financial Assets			
Cash and cash equivalents	4	1,386,709	1,652,553
Short-term deposits	4	3,016,280	1,615,870
Held-to-maturity investments	6	127,716	164,213
Loans and receivables	5	44,550	1,773
Total financial assets		4,575,255	3,434,409
Financial Liabilities			
Financial liabilities at amortised cost			
– Trade and other payables	10	188,936	233,741
– Borrowings	11	821,665	763,734
Total financial liabilities		1,010,601	997,475

19 Key Management Personnel Disclosures

Any person(s) having authority and responsibility for planning, directing and controlling the activities of the entity, directly or indirectly, including any director (whether executive or otherwise) of that entity, is considered key management personnel (KMP).

The totals of remuneration paid to the key management personnel of Australian Nursing and Midwifery Accreditation Council Limited during the year are as follows:

	Note	2017 \$	2016 \$
KMP compensation		935,530	721,987
		935,530	721,987

20 Auditors' Remuneration

	2017	2016
Note	\$	\$
Remuneration of the auditor of the company, Hardwicks Chartered Accountants, for:		
– auditing the financial statements	16,000	20,000
– other services (Duesburys Nexia)		800
– prior year under/(over) accrual	(4,000)	3,585
Total	12,000	24,385

21 Cash Flow Information

(a) Reconciliation of result for the year to cash flows from operating activities

Reconciliation of net income to net cash provided by operating activities:

	2017	2016
Note	\$	\$
Surplus for the year	1,352,047	327,463
Non-cash flows in surplus:		
– amortisation of lease incentive payment	-	(73,120)
– depreciation	98,840	127,954
– loss on disposal of plant and equipment	(1,068)	1,522
– finance charges on lease incentive payment	-	(11,738)
– increase in expenses by lease incentives	119,972	129,147
Changes in assets and liabilities:		
– (increase)/decrease in trade and other receivables	(46,528)	288,407
– (increase)/decrease in prepayments	(93,161)	(56,999)
– increase/(decrease) in income in advance	(185,405)	(802,228)
– increase/(decrease) in trade and other payables	(44,805)	78,869
– increase/(decrease) in GST payable/(receivable)	12,108	(22,066)
– increase/(decrease) in provisions	(82,217)	(7,571)
Cash flow from operations	1,129,783	(20,360)

22 Members' Guarantee

The company is incorporated under the *Corporations Act 2001* and is a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$100 each towards meeting any outstandings and obligations of the company.

23 Company Details

The registered office and principal place of business of the company is:

Australian Nursing and Midwifery Accreditation Council Limited
Level 1, 15 Lancaster Place
Majura Park
Canberra Airport ACT 2609

The directors of the company declare that, in the directors' opinion:

1. The financial statements and notes, as set out on pages 8 to 25, are in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* and:
 - a. comply with Australian Accounting Standards – Reduced Disclosure Requirements and the *Australian Charities and Not-for-profits Commission Regulation 2013*; and
 - b. give a true and fair view of the financial position of the company as at 30 June 2017 and of the performance for the year ended on that date.
2. There are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

This declaration is signed in accordance with subs 60.15(2) of the *Australian Charities and Not-for-profits Commission Regulation 2013*.



Ann Kinnear
Chair
15 September 2017



Professor Robert Meyenn
Deputy Chair
15 September 2017



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Independent Auditor's Report

To the members of Australian Nursing and Midwifery Accreditation Council Limited

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Australian Nursing and Midwifery Accreditation Council Limited (the company), which comprises the statement of financial position as at 30 June 2017, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, other explanatory information and the directors' declaration.

In our opinion, the accompanying financial report of Australian Nursing and Midwifery Accreditation Council Limited has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the company's financial position as at 30 June 2017 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards - Reduced Disclosure Requirements and the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the company in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Information Other than the Financial Report and Auditor's Report Thereon

The directors are responsible for the other information. The other information comprises the information included in the entity's annual report for the year ended 30 June 2017, but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.



Responsibilities of Directors for the Financial Report

The directors of the company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards - Reduced Disclosure Requirements and the *Australian Charities and Not-for-profits Commission Act 2012* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

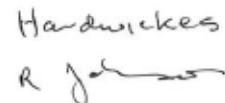
Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Hardwicks
Chartered Accountants



Robert Johnson FCA
Partner

Canberra
Dated: 15 September 2017

Annex A—Membership of ANMAC Committees

Governance Committee Membership

Chair

Lee Thomas—ANMAC Board Director

Members

Ann Kinnear—ANMAC Board Director (Chair)

Eileen Jerga AM—ANMAC Community Board Director

Leone English—ANMAC Board Director—resigned July 2016

Finance, Audit and Risk Committee Membership

Chair

Peter Bayley—ANMAC Community Board Director—resigned October 2016

Deputy chair

Eileen Jerga AM—ANMAC Community Board Director

Members

Leena Sudano—ANMAC Community Board Director—resigned October 2016

Adjunct Professor Debra Thoms—ANMAC Board Director

Standards, Accreditation and Assessment Committee Membership

Chair

Professor Bob Meyenn—ANMAC Board Director, Educational Expert, New South Wales

Deputy Chair

Professor Wendy Cross—ANMAC Board Director, nominee of the Council of Deans Nursing & Midwifery (Australia and New Zealand), Victoria

Members

Dr Tom Buckley—Chair, Nurse Practitioner Accreditation Committee, New South Wales

Professor Phillip Della—Chair, Registered Nurse Accreditation Committee, Western Australia

Leone English—ANMAC Board Director, VET Higher Education nominee, Victoria—resigned July 2016

Colleen Gibbs—CATSINaM nominee, Australian Capital Territory

Gabrielle Koutoukidis—Chair, Enrolled Nurse Accreditation Committee, Victoria

Dr Jan Taylo—Chair, Midwife Accreditation Committee, Australian Capital Territory

International Consultative Committee

Chair

Professor Wendy Cross—ANMAC Board Director, Victoria

Deputy chair

Professor Bob Meyenn—ANMAC Board Director, New South Wales

Members

Nick Blake—Australian Nursing and Midwifery Federation nominee, Victoria

Sharon Cole—Midwifery Council of New Zealand representative, New Zealand

Liz Campbell-Dorning—Department of Education, Employment and Workplace Relations nominee, Australian Capital Territory

Chris Carman—Migration Institute of Australia nominee, New South Wales

Samantha Clausen—Representative from AHPRA, South Australia

Professor Lesleyanne Hawthorne—International Health Workforce representative, Victoria

Carolyn Reed—Nursing Council of New Zealand representative, New Zealand

Anne Samuelson—International Education Provider—The Australian College of Nursing, Australian Capital Territory

Sarah Stewart—Representative from Midwifery, Australian Capital Territory

David Bottrill—Department of Immigration and Citizenship nominee, Australian Capital Territory

Ros Bauer—Department of Health

Kim Debenham—Department of Foreign Affairs and Trading

Enrolled Nurse Accreditation Committee

Chair

Gabrielle Koutoukidis—Dean, Faculty of Health Science, Youth & Community Studies, Holmesglen, Victoria

Deputy Chair

Julie Fereday—Learning Portfolio Manager, Health, Central Institute of Technology, Western Australia

Members

Professor Melanie Birks—Head of Nursing, Midwifery and Nutrition, College of Healthcare Sciences, Division of Tropical Health and Medicine, James Cook University, Queensland

Debbie Blow—Director of Community Services, Health and Nursing, TAFE Gold Coast, Queensland

Robin Girle—Nurse Manager, Nursing and Midwifery Practice and Workforce Unit, South Eastern Sydney Local Health District, New South Wales

Susan Hopkins—Educational Manager CS&H, TAFE SA, South Australia

Wayne Johnston—Project Officer, Department of Nursing, Paramedicine & Health Science Foundations, Victoria Polytechnic—commenced January 2017

Kate Stainton—Registered Nurse, Newcastle Private Hospital, Teacher—Hunter TAFE, Newcastle—commenced January 2017

Registered Nurse Accreditation Committee

Chair

Professor Phillip Della—Deputy Pro Vice-Chancellor Health Sciences, Curtin University, Western Australia

Deputy chair

Associate Professor Nikki Phillips—Senior Lecturer in Nursing, Director of Undergraduate Studies, School of Nursing and Midwifery, Deakin University, Victoria

Members

Professor Jane Conway—Deputy Head of School and Professor Teaching, Learning and Scholarship, School of Health, University of New England, New South Wales

Professor Iain Graham—Dean of Health and Head of School, School of Health and Human Sciences, Southern Cross University (Lismore), New South Wales

Leeanne Heaton—Head of Program (BN), School of Nursing & Midwifery, Higher Education Division, Central Queensland University, Mackay, Queensland—commenced August 2016

Erin McLeod—ADON Education, Nursing and Midwifery, THS—Southern Region, Royal Hobart Hospital, Tasmania

Dr Rhonda Wilson—Lecturer Mental Health Nursing, School of Health, University of New England, New South Wales—commenced August 2016

Mary Miller—Director Nursing & Midwifery Workforce & Reform, WA Country Health Service, Perth, Western Australia—commenced August 2016/resigned May 2017

Dr Nicholas Ralph—Senior Lecturer (BN Program Coordinator), School Coordinator (Learning & Teaching) School of Nursing & Midwifery, Faculty of Health, Engineering and Sciences, University of Southern Queensland, Queensland—commenced August 2016

Professor Ramon Shaban—Director, Clinical Chair, Infection Prevention and Control, Griffith University and Gold Coast Hospital and Health Service, Queensland—resigned March 2017

Midwife Accreditation Committee Membership

CHAIR

Dr Jan Taylor—Associate Professor of Midwifery, Disciplines of Nursing & Midwifery, Faculty of Health, University of Canberra, Australian Capital Territory

Deputy chair

Associate Professor Joanne Gray—Associate Dean, Teaching & Learning, Faculty of Health, University of Technology Sydney, New South Wales

Members

Janice Butt—Coordinator, Midwifery Education, King Edward Memorial Hospital (KEMH) & Associate Director, Midwifery, Curtin University, Western Australia—resigned 30 June 2017

Professor Deborah Davis—Professor of Midwifery, Clinical Chair. Convener, program in prescribing for registered midwives and Postgraduate midwifery programs—ACT Health and University of Canberra, Australian Capital Territory—commenced July 2016

Adjunct Professor Elaine Dietsch—School of Nursing and Midwifery, Griffith University, Queensland

Amelia Druhan—Parent Educator, Calvary Health Care, Bruce, Australian Capital Territory—commenced July 2016

Dr Michelle Newton—BN/BM Course Coordinator, La Trobe University, Victoria

Dr Lisa Nissen—Professor (Head), School of Clinical Sciences, Queensland University of Technology, Queensland

Dr Mary Sidebotham—Associate Professor/Program Director Master of Primary Maternity Care, School of Nursing and Midwifery, Griffith Health, Griffith University, Queensland—commenced July 2016

Associate Professor Moira Williamson—Head of Midwifery Program, Central Queensland University, Noosaville, Queensland

Nurse Practitioner Accreditation Committee

Chair

Dr Thomas Buckley—Course coordinator—Clinical Nursing and Nurse Practitioner, University of Sydney, New South Wales

Deputy chair

Dr Haakan Strand—Senior Lecturer, Program Convener-Master of Nurse Practitioner Studies, The University of Queensland, Queensland

Members

Professor Maxine Duke—Head of School of Nursing & Midwifery, Deakin University, Victoria

Dr Grainne Lowe—Vice President, Australian College of Nurse Practitioners, Victoria

Professor Catherine Hungerford—Head of School, School of Nursing, Midwifery and Indigenous Health, Charles Sturt University (Wagga Wagga), New South Wales

Dr Lisa Nissen—Professor (Head), School of Clinical Sciences, Queensland University of Technology, Queensland

Stuart Smith—Emergency Nurse Practitioner, Modbury Hospital, South Australia

John Smithson—Senior Lecturer/Course Coordinator of Nurse Practitioner Course, School of Nursing, Midwifery and Nutrition, James Cook University, Queensland – commenced July 2016

