

Parliament House
EAST MELBOURNE VIC 3002

Email: council@parliament.vic.gov.au

Dear Mr Willis

Inquiry into the Performance of the Australian Health Practitioner Regulation Agency

Australian College of Nursing is pleased to provide the following comments in relation to the Inquiry into the Performance of the Australian Health Practitioner Regulation Agency (AHPRA).

On 1 July 2012 Royal College of Nursing, *Australia* (RCNA) and The College of Nursing unified to become Australian College of Nursing (ACN). In 2011, RCNA responded to the national Senate Finance and Public Administration Committee's *Inquiry into the administration of health practitioner registration by AHPRA*. Issues and evidence raised by RCNA's submission were cited in the Senate Standing Committee's subsequent report.

RCNA'S general feedback of 2011 regarding the performance of AHPRA noted that despite some teething problems involved in the implementation of the National Registration and Accreditation Scheme (NRAS), it heralded an important step forwards in national health workforce planning and reform. ACN strongly supports the national registration of health practitioners to improve public and patient safety and acknowledges that introducing nationally consistent standards and registration processes across ten different boards from eight states and territories remains a significant undertaking.

Notwithstanding ACN's strong support for the NRAS and establishment of AHPRA, it has been a point raised by some members that AHPRA have had difficulties processing their queries. For example, it has been reported that staff handling telephone inquiries have had some difficulty in answering specific questions regarding nursing and midwifery scope of practice and registration, and have at times, not been able to adequately address the queries made. The importance of staff being able to answer callers' queries regarding scope of practice, or at the very minimum, being able to direct callers to resources that are currently available for nurses and midwives, should not be overlooked.

Additionally, ACN does not have specific information relating to the budget of AHPRA. It is our understanding that AHPRA is funded from registration and renewal fees paid by

health practitioners. As the largest health practitioner groups, the nursing and midwifery fees will generate significant income for AHPRA. It is essential that the income generated from these groups does not subsidise the registration costs of other professions.

ACN believes that some of the recommendations made by RCNA to the national Senate Inquiry of 2011 have continuing relevance, and predominantly relate to adequate allocation of resources. Recommendations made included:

- AHPRA be resourced at all levels to ensure that they are commensurate with the numbers of registered practitioners, so that efficient quality service is provided at all times;
- Communication methods/processes be reviewed to ensure consistency of messages and to enable responses to be provided in a timely manner;
- Staff responding to inquiries have the requisite knowledge to provide appropriate advice and electronic information needs to be easily accessible, labelled appropriately and updated in a timely manner;
- Processes be reviewed to ensure timely efficient registration; and
- Regular evaluation processes be put in place to implement ongoing quality improvement measures.

It is noted though that in the intervening period the overall functioning and responsiveness of AHPRA has improved. It is important to recognize the magnitude of the change undertaken nationally in establishing this national approach and to have some initial problems would not be unusual. Despite the initial problems encountered by the establishment of AHPRA, ACN remains in full support of the NRAS. Nurses and midwives have advocated for some time for their registration to apply across State and Territory jurisdictions and in implementing the NRAS, nurses are able to flexibly work in different regions without incurring cumbersome administrative penalties. Additionally, the establishment of AHPRA allows national accreditation standards to be streamlined through the various health professional boards and governance structures relevant to each profession, such as the Nursing and Midwifery Board of Australia (NMBA). The consistency of accreditation and registration across the country remains invaluable to the nursing and midwifery professions and to the community in ensuring appropriate standards are in place.

Please do not hesitate to contact me for any further queries or clarifications.

Yours sincerely



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Chief Executive Officer
Australian College of Nursing

1 February 2013