

## Guidelines

Effective XX XX XXXX

### Recency of practice

#### Introduction

The Nursing and Midwifery Board of Australia (NMBA) undertakes functions as set by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). While the National Law recognises nursing and midwifery as two distinct professions, the NMBA regulates the practice of both the nursing profession and the midwifery profession in Australia, and one of its key roles is to protect the public.

The NMBA does this by developing registration standards, professional codes, guidelines and standards for practice which together establish the requirements for the professional and safe practice of both nurses and midwives in Australia. Given the requirements of recency are consistent across both professions, these guidelines (and the associated registration standard) applies to both.

These guidelines provide information about the NMBA's recency of practice requirements and how you can meet the requirements of the [Registration standard: Recency of practice](#) (RoP registration standard).

#### Do these guidelines apply to me?

These guidelines apply to all enrolled nurses (ENs), registered nurses (RNs) and midwives renewing their registration including endorsements, and all applicants for nursing or midwifery registration or endorsement. These guidelines do not apply to those with student registration or non-practising registration.

While it is your responsibility as a practitioner to ensure the requirements of the RoP registration standard and guidelines are met, the content in these guidelines can also be used by employers of nurses and midwives and may assist them when providing support towards fulfilling the requirements.

#### 1) The requirements to maintain and demonstrate recency of practice

##### What is recency of practice?

Recency of practice means that a nurse or midwife has maintained an adequate connection with, and recent practice in, the profession since qualifying for or obtaining registration. To demonstrate recency of practice you need to have evidence that shows you have maintained an adequate connection with, and the required hours of recent practice in, the profession.

As outlined in the RoP registration standard, to meet the requirements for recency of practice you must:

1. Be able to demonstrate an adequate connection with the profession.

**And**

2. Complete a minimum of:
  - a. 300 hours of practice in the previous two years, or
  - b. 450 hours of practice in the previous three years, or
  - c. 750 hours of practice in the previous five years

This means that you can work part-time or have an absence from practice and still meet the requirements of the standard.

The 450 hours of practice can be at any time during the previous three years or the 750 hours can be at any time during the previous five years, in one block or multiple blocks, prior to submitting your application to register or renew. For example, you could practice in year one, have year two off and practice again in year three.

Recent graduates registered with the NMBA must complete a minimum of 300 hours of practice within the **first two** years of completing their program of study leading to registration as a nurse or midwife. This is equivalent to approximately eight weeks full-time.

The following table shows some of the ways that you can meet the minimum hours of practice requirements of the RoP registration standard in the previous two, three or five years.

**Table 1: Meeting the minimum RoP hours of practice requirements (examples)**

Year	Practitioner A	Practitioner B	Practitioner C	Practitioner D	Practitioner E	Practitioner F
2020	150 hours	0 hours	100 hours	50 hours	150 hours	100 hours
2019	150 hours	300 hours	50 hours	0 hours	150 hours	0 hours
2018	0 hours	0 hours	300 hours	400 hours	150 hours	0 hours
2017	0 hours	0 hours	0 hours	0 hours	150 hours	300 hours
2016	0 hours	0 hours	0 hours	0 hours	150 hours	350 hours

Meeting the NMBAs minimum requirements for recency of practice does not automatically satisfy your professional and ethical responsibilities. Your responsibilities include ensuring that you recognise and work within your scope of practice to which you are educated, authorised and competent to perform and provide safe and effective care.

### What is meant by adequate connection to the profession?

Maintaining an adequate connection to your nursing or midwifery profession is an important requirement in meeting the professional standards and fulfilling the NMBAs recency of practice requirements.

To be able to demonstrate an adequate connection with your profession as a nurse or midwife, you will need to show how you have used your skills and knowledge as a nurse or midwife in the way you have carried out the functions of your practice role.

This connection to the profession may be measured by a range of experience and activities relevant to your profession that includes:

- the use of your skills and knowledge as a nurse or midwife in your practice
- activities related to the practice of nursing or midwifery that you have carried out
- your ability to meet relevant standards for practice
- the extent and evidence of your ongoing education or professional development relevant to the practice of nursing or midwifery, and
- evidence of your contemporary knowledge relating to the practice of nursing or midwifery.

### What does the NMBA mean by 'practice'?

Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in the profession.

The NMBAs EN, RN, nurse practitioner and midwife [Standards for practice](#) detail the expected practice standards and provide the framework for assessing your practice. You should use these documents to consider if you meet the requirements when renewing your registration each year and reflecting on your practice.

Your practice hours will be recognised as meeting the RoP registration standard if:

- you hold or have held current and valid registration with a recognised nursing or midwifery regulatory authority (either in Australia or overseas), or
- you have carried out postgraduate education leading to an award or qualification that is relevant<sup>1</sup> to the practice of nursing or midwifery.

### Clinical and non-clinical practice

The definition of practice is broad and can include both clinical practice and non-clinical practice. You can meet the recency of practice standard if you can demonstrate that you are using your skills and knowledge as a nurse or midwife in your role and if you have practised at least the minimum number of hours, as specified in the RoP registration standard.

Some examples of clinical practice roles are:

- a nurse working in a medical or surgical ward of a hospital
- a midwife working in a postnatal care unit

Some examples of non-clinical practice roles are:

- a nursing academic at a university undertaking nursing research
- a midwifery policy officer at a health department

Both clinical and non-clinical practice can be used to meet recency of practice.

### Changing context or scope of practice

As a professional, you have a responsibility to ensure you are safe and competent to practise relevant to your context (area) or scope of practice – which is what you are educated, authorised and competent to perform.

This is particularly important when you transition from non-clinical to clinical practice and/or change your scope of practice. If you have not recently undertaken clinical practice or want to change your context or scope of practice, you must take steps to ensure you have the necessary education, training skills, knowledge and competence to safely practice in a clinical role. The NMBA [Decision-making framework for nursing and midwifery](#) provides further information.

### Dual or concurrent registration

If you hold dual registration, that is as both a nurse and midwife – or concurrent registration (as an EN and RN), you need to have evidence that shows you have maintained an adequate connection with, and recent practice in **each** profession or registration type (refer **Table 2**). Any common elements of practice, where you use your skills and knowledge while registered as a both a dual or a concurrent nurse or midwife, should be determined within your context of practice using the respective EN, RN or midwife standards for practice.

If you hold registration in another regulated health profession – for example Paramedicine - you are required to have recent practice in, and connection to, both the nursing or midwifery professions, and the other regulated health profession. You must ensure you are educated, authorised and competent to perform in each profession's specific skills and knowledge, relevant to your context of practice.

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<sup>1</sup> A relevant qualification is one that is applicable to your registration type. For example, post graduate education relating to midwifery knowledge and skills would not be recognised as practice hours for nursing registration.

## Recent graduate

It is important for recent graduates to consolidate their knowledge and skills (gained in their program of study leading to registration as a nurse or midwife) in practice, in order to maintain the competence and confidence to practise safely and effectively (refer **Table 2**). A lengthy absence between the completion of a program of study and commencing practice could lead to a decline or loss in competence and confidence. Ideally, as a graduate you will aim to consolidate your knowledge and skills within a short period of completing your program of study.

If you gain registration and do not practice for a minimum of **300 hours within two years** of successfully completing your program of study, the NMBA may impose conditions on your registration to ensure you are safe and competent to practice. At registration renewal, you will be required to answer a question specific to your practice as a recent graduate.

## Deferred graduate

A 'deferred graduate' is someone who is applying for registration for the first time and their program of study leading to registration as a nurse or a midwife was completed more than two years prior to the date of their application.

If you defer your initial application for registration for more than two years after the completion of your program of study, the NMBA may decide to impose conditions on your registration to ensure you are safe and competent to practice. The assessment of your application and your individual circumstances will determine whether you will be required to demonstrate successful completion of a period of supervised practice or an [NMBA approved program of study](#).

If you are seeking initial registration 10 years or more after the completion of your program of study, you will not be eligible for general or provisional registration and you will be required to apply directly to an [NMBA approved education provider](#). Recognition of prior learning (RPL) and identification of the requisite studies, as part of an approved program of study leading to general registration, are at the discretion of the education provider.

## Nurse practitioner

As a nurse practitioner at renewal, you are required to declare annually that you have met the minimum practice requirements of the RoP registration standard, at an advanced level, that you meet and comply with the NMBA [Nurse practitioner standards for practice](#) and have direct clinical contact relevant to your endorsement (refer **Table 2**).

## Midwife or RN with an endorsement

As a midwife or an RN with an endorsement for scheduled medicines, you are required to declare annually that you have met the minimum practice requirements of the RoP registration standard and that this practice is relevant to the endorsement. (refer **Table 2**).

**Table 2: Recency of practice hour requirements**

Practitioner	Practice requirements
Recent graduate	300 hours within two years of completing their program of study leading to registration as a nurse or midwife
EN, RN or midwife	Minimum hours of practice in the previous two, three or five years
RN and midwife (Dual registration)	Minimum hours of practice in <u>each</u> profession in the previous two, three or five years
EN and RN (Concurrent registration)	Minimum hours of practice in <u>each</u> registration type in the previous two, three or five years
EN, RN and midwife	Minimum hours of practice in <u>each</u> profession/registration type in the previous two, three or five years

EN, RN, midwife and paramedic <sup>2</sup>	Minimum hours of practice for <u>each</u> profession/registration type in the previous two, three or five years, plus the Paramedicine Board of Australia requirements
Nurse practitioner endorsement <sup>3</sup>	Minimum hours of practice at an advanced level with direct clinical contact relevant to the endorsement in the previous two, three or five years
Midwife with scheduled medicine endorsement <sup>1</sup>	Minimum hours of practice relevant to the endorsement in the previous two, three or five years
RN with scheduled medicine endorsement <sup>1</sup>	Minimum hours of practice relevant to the endorsement in the previous two, three or five years

## 2) What happens when you cannot meet the requirements of the RoP registration standard?

If you cannot demonstrate an adequate connection with your profession and the minimum practice hours in your profession and/or endorsement, you will need to declare at the time of registration renewal, or on application for registration, that you do not meet the requirements of the RoP registration standard.

For example, if you:

- are a recent graduate and have not practised for a minimum of 300 hours within two years of completing your program of study leading to registration as a nurse or midwife
- are applying for registration for the first time and do not meet the definition of 'recent graduate'
- have not practised for five years or more
- have held non-practising registration for five or more years, or
- have not practised for a period of 10 years or more.

In reviewing your declaration, the NMBA will consider relevant factors to determine which, if any, re-entry to practice pathway you may be eligible for. For example, the:

- use of your skills and knowledge relevant to nursing or midwifery practice
- extent of nursing or midwifery post graduate education
- extent and evidence of continuing professional development (CPD) relevant to the practice of nursing or midwifery
- ability to meet relevant nursing or midwifery standards for practice
- experience related to CPD, paid employment, voluntary work
- length of time not practising
- reasons for re-entering the profession/s
- plan for re-entry in terms of knowledge and understanding of contemporary practice in the profession/s today, and
- indication of plans for future professional practice.

### Pathways for returning to the register

There are a number of different assessment categories if you want to return to the General Register, which are set out below.

#### 1. If you are no longer on the register and have not practised for a period of between five to 10 years

If you have not practised as a nurse or midwife for between five and 10 years and do not hold registration, you are required to lodge an application for **provisional registration**. The assessment of the application will determine whether you will be required to demonstrate successful completion of:

- a period of supervised practice approved by the NMBA (Pathway 1), or
- an NMBA approved re-entry to practice program (Pathway 2)

<sup>2</sup> Paramedicine is used as an example. The requirements apply where dual registration is held in any other regulated health profession.

<sup>3</sup> See also the NMBA [Registration standard: Continuing professional development](#) for additional requirements relating to ongoing endorsement

2. If you hold non-practising registration and have not practised for between five to 10 years and are seeking general registration as a registered nurse, enrolled nurse, or midwife

If you are a nurse or a midwife who holds non-practising registration and have not practised for between five years and 10 years and are seeking general registration, you are required to lodge an application for **general registration**. The assessment of the application will determine whether you will be required to demonstrate successful completion of:

- a period of supervised practice approved by the NMBA (Pathway 1), or
- an NMBA approved re-entry to practice program (Pathway 2)

3. If you are a nurse or midwife who holds general registration but has not practised for between five and 10 years

If you are a nurse or a midwife who holds general registration and has not practised for between five and 10 years you can contact the Australian Health Practitioner Regulation Agency (Ahpra) directly or must declare at registration renewal that you do not meet the requirements of the RoP registration standard. An assessment will determine whether you will be required to demonstrate successful completion of:

- a period of supervised practice approved by the NMBA (Pathway 1), or
- an NMBA approved re-entry to practice program (Pathway 2)

As a part of the application process, all applicants will be required to provide mapping against the relevant NMBA standards for practice. Templates for the mapping can be found [here](#).

4. If you have not practised for a period of 10 years or more

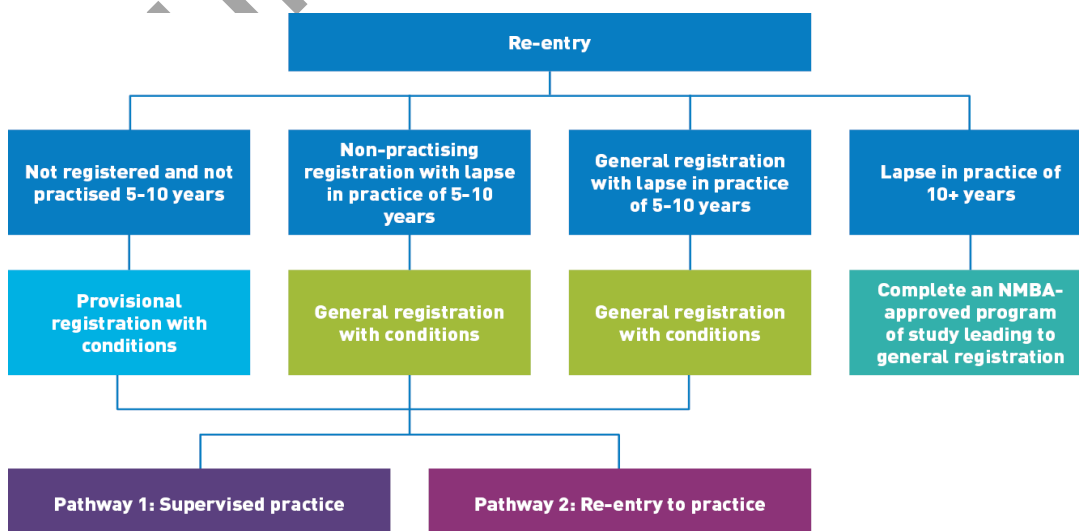
If you have not practised as a nurse or midwife for 10 years or more, you are not eligible for a period of supervised practice (Pathway 1) or an NMBA approved re-entry to practice program (Pathway 2). This is because the:

- NMBA-approved re-entry to practice programs are developed for people who have been out of practice for between five and 10 years and do not provide the level of education required to address longer gaps in practice; and
- supervised practice is designed for people who have been out of practice for shorter periods of time.

This applies to all nurses and midwives who hold general or non-practising registration and have not practised for 10 years or more and to those seeking initial or re-registration who have not practised for 10 years or more.

If you are in this category you will be required to complete an NMBA-approved program of study leading to general registration. Recognition of your prior learning (RPL) and qualifications are at the discretion of the education provider.

The following figure provides further information on pathways and assessment.





## Specific requirements for previously-registered nurses who hold a sole qualification in mental health, paediatric or disability nursing

If you were registered on the basis of a sole qualification in mental health, paediatric or disability nursing, and no longer hold registration, or have held non-practising registration, for between five and 10 years in Australia, you will have your application assessed to determine whether you will be required to demonstrate successful completion of a period of supervised practice in mental health, paediatric or disability nursing approved by the NMBA.

If you are registered with the NMBA, a notation will be applied to your registration stating: *solely qualified in the area of mental health nursing/paediatric nursing/disability nursing*. This notation will appear on [the public register](#), which is accessible from the NMBA website.

If you hold a sole qualification in mental health, paediatric or disability nursing, and have not practised as a nurse in the relevant area (mental health, paediatric or disability nursing) for 10 years or more, you will be required to complete an NMBA-approved program of study leading to general registration. Recognition of your prior learning (RPL) and qualifications are at the discretion of the education provider.

### Record keeping

You must retain records for five years as evidence that you meet the requirements of the RoP registration standard and guidelines. If your compliance with the RoP registration standard requirements is audited, or if needed by the NMBA as part of an investigation arising from a notification (complaint), you will need to provide evidence of recency of practice.

The type of evidence you provide must be verified and can include:

- a statement of service from your employer that clearly states the number of hours worked as a nurse or a midwife in the previous two, three or five years
- pay slips
- income statement for the year, and/or
- other documents showing the hours and dates that you worked.

For endorsements the requirements are:

- for nurse practitioners – evidence of recent practice at an advanced level involving direct clinical contact, and
- for midwives and RNs with an endorsement for scheduled medicines – evidence of recent practice relevant to your endorsement

When leaving a place of employment, requesting a statement of service from that employer can help your record keeping if needed for future evidence.

## Definitions

**Advanced practice** is where nurses practising at an advanced practice level incorporate professional leadership, education, research and support of systems into their practice. Their practice includes relevant expertise, critical thinking, complex decision-making, autonomous practice and is effective and safe. They work within a generalist or specialist context and they are responsible and accountable in managing people who have complex healthcare requirements.

Advanced practice in nursing is demonstrated by a level of practice and is not by a job title or level of remuneration.

Advanced practice for the purpose of the nurse practitioner endorsement requires 5,000 hours clinically-based advanced practice in the past six years.

**Clinical practice** is when the nurse or midwife is involved in providing direct clinical care or providing oversight of direct clinical care of people or is directly involved in clinical education of either pre-registration or post-registration students, including bridging programs.

**Deferred graduate** means a person who completed their program of study leading to registration as a nurse or midwife more than two years ago

**National Law** means the Health Practitioner Regulation National Law, as in force in each state and territory.

**Non-clinical practice** is when a nurse or midwife is not directly involved in providing direct clinical or oversight of direct care of people, or is not directly involved in clinical education of pre or post registration students, including those in bridging programs.

**Non-practising registration** is a registration type granted to practitioners who hold or have previously held general or specialist registration in a profession, who do not wish to practise the profession but wish to remain registered. Some practitioners choose to hold non-practising registration so that they may use a protected title for the profession.

**Nurse practitioner** is a registered nurse endorsed as a nurse practitioner by the NMBA. The nurse practitioner practises at an advanced practice level, meets and complies with the NMBA *Nurse practitioner standards for practice*, has direct clinical contact and practises within their scope under the legislatively protected title 'nurse practitioner' under the National Law.

**Practice** means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice in this context is not restricted to the provision of direct clinical care. It also includes using professional knowledge (working) in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on the safe, effective delivery of services in the profession.

**Recency of practice** means that a health practitioner has maintained an adequate connection with, and recent practice in the profession since qualifying for, or obtaining, registration. To demonstrate an adequate connection with their profession, a nurse or midwife will need to show how they have used their skills and knowledge as a nurse or midwife in the way they have carried out the functions of their practice role.

**Recent graduate** means a person who completed their program of study leading to registration as a nurse or midwife not more than two years ago.

**Re-entry to practice program** is a program of study approved by the NMBA as preparation for nurses or midwives for re-entry to the register after a lapse in practice and/or removal from the register for a period of between five to 10 years. It contains both a theoretical and a clinical experience component.

**Scope of practice** is the full spectrum of roles, functions, responsibilities, activities and decision-making capacity that individuals within that profession are educated, competent and authorised to perform. Some functions within the scope of practice of any profession may be shared with other professions or other individuals or groups.



The scope of practice of all health professions is influenced by the wider environment, the specific setting, legislation, policy, education, standards and the health needs of the population.

The scope of practice of an individual is that which the individual is educated, authorised and competent to perform.

The scope of practice of an individual nurse or midwife may be more specifically defined than the scope of practice of their profession. To practise within the full contemporary scope of practice of the profession may require individuals to update or increase their knowledge, skills or competence. Decisions about both the individual's and the profession's practice can be guided using the [Decision making frame for nursing and midwifery](#) (DMF). When making these decisions, nurses and midwives need to consider their individual and their respective profession's scope of practice

**Supervised practice** is a period of practice under supervision. It is a formal process of professional support and learning which allows a nurse or midwife (supervisee) to develop knowledge and competence, assume responsibility for their own practice and enhance public protection and safety. Supervision may be *direct* or *indirect* according to the nature of context under which the practice is being supervised. It is the responsibility of the nurse or midwife to arrange a placement that meets the approval and requirements of the NMBA for re-entry to practice, including that:

- the practice setting must give the maximum opportunity to demonstrate the full spectrum of the respective standards for practice
- the supervisor meets the minimum requirements listed in the [Supervision guidelines for nurses and midwives](#)
- the nurse or midwife will not engage with an employment agency for supervised practice, and
- the NMBA does not allow for supervision in private practice (where a nurse or midwife is working as sole practitioner, in partnership or in self-employed models or working on their own account).

#### For more information

[Registration standard: Recency of practice](#)

[Standards for practice](#)

[Decision-making framework for nursing and midwifery](#)

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#### Document control

Approved by	Nursing and Midwifery Board of Australia
Date approved	XXX
Date commenced	XXX
Date modified	XXX