Submission to the Nursing and Midwifery Board of Australia on the provision for nurses to hold both registration as an enrolled nurse and as a registered nurse concurrently

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1. Introduction

The Australian Nursing Federation (ANF) was established in 1924. The ANF is the largest professional and industrial organisation in Australia for nurses and midwives, with Branches in each State and Territory of Australia.

The core business for the ANF is the professional and industrial representation of our members and the professions of nursing and midwifery.

With a membership of over 190,000 nurses and midwives, members are employed in a wide range of enterprises in urban, rural and remote locations in both the public and private health and aged care sectors.

The ANF participates in the development of policy relating to: nursing and midwifery practice, professionalism, regulation, education, training, workforce, and socio-economic welfare; health and aged care, community services, veterans’ affairs, occupational health and safety, industrial relations, social justice, human rights, immigration, foreign affairs and law reform.

The ANF is pleased to provide comment to the Nursing and Midwifery Board of Australia (NMBA) regarding the provision for nurses to hold both registration as an enrolled nurse and as a registered nurse at the same time.

2. Public and patients

The ANF has been a strong supporter of the move to a national registration and accreditation scheme for health professions in Australia. The Scheme provides for national consistency with the overriding aim to introduce simplicity and a shared understanding of terminology across the country in relation to the regulation of health professionals. National regulation provides for safety and quality by ensuring there is nationally consistent title definition, qualification, professional standards, role and scope of practice for health professions included in the Scheme.

The ANF is aware that our members in some States have held registration as an enrolled nurse and as a registered nurse at the same time over many years without any reported instances of where the public has been placed at risk of harm or actually harmed. Despite this, the ANF is of the belief that the potential provision for nurses to hold “dual” registration of this nature may lead to role and scope of practice confusion. However, there are special circumstances whereby a nurse may need to hold both registrations as outlined in this submission.
3. The individual nurse

The potential for role and scope of practice confusion may impact the individual nurse. The underpinning education, subsequent qualification and competency standards for practice are different for the registered nurse and the enrolled nurse and therefore result in a different protected title, role and scope of practice.

The registered nurse is expected to practice independently and interdependently assuming accountability and responsibility for their own actions and delegation of care to enrolled nurses and health care workers.\(^1\)

The enrolled nurse is expected to work under the direction and supervision of the registered nurse, at all times retaining responsibility for his/her actions and remaining accountable for providing delegated nursing care.\(^2\)

These are inherently different nursing roles with differing levels of responsibility and accountability. There needs to be absolute clarity of the conditions under which a nurse is employed if they hold registration both as an enrolled nurse and a registered nurse. Holding both registrations does provide the potential for the nurse to be exploited if employed as an enrolled nurse but expected to function at the level of a registered nurse. This issue will continue to be closely monitored by the ANF. We understand that should there be an adverse clinical outcome the full scope of their nursing knowledge would be taken into account. The nurse would be judged by the NMBA or the Courts as having the level of knowledge, expertise and clinical judgment equivalent to that of a registered nurse even though they are employed as an enrolled nurse. As a consequence, they could be deemed to have been negligent in a finding relating to a critical adverse event.

Although aware of the challenges outlined above, the ANF is of the view that there may be circumstances in rural settings where a nurse holding both registrations is employed in both roles. This may be due to insufficient employment availability as a registered nurse or limited places of employment in these rural areas. Registration in both roles provides these nurses in rural settings with the ability to secure and maintain satisfying employment close to home. Being able to work as both a registered nurse and an enrolled nurse also allows these nurses to receive a reasonable income and/or continuation of work in their preferred or only facility without the need for burdensome travel.

In these special circumstances, the nurse must demonstrate a clear understanding of the differences in role and scope of practice. Evidence of recent practice in both roles is essential. Provided that an individual is able to demonstrate that they have special employment circumstances requiring registration as both an enrolled nurse and as a registered nurse, the ANF considers that “dual” registration should be permissible. In these cases application for special circumstances dual registration must be sought by the nurse not their employer and ultimately would be at the discretion of the Nursing and Midwifery Board of Australia to determine on the merits of each individual case.
It is not uncommon for enrolled nurses to undertake and complete a Bachelor of Nursing leading to registration as a registered nurse. Many students also meet the requirements and register as an enrolled nurse during the course of completing their nursing degree. There may be merit in making a provision for these individuals to continue their registration as an enrolled nurse for an interim period upon completion of the qualification and following registration as a registered nurse. The recently graduated registered nurse may have a gap of up to six months prior to being able to commence a graduate program or gaining work in a supportive environment where they are employed as a registered nurse. This would provide the graduate with the opportunity to continue to provide safe and competent nursing care as an enrolled nurse under the supervision and delegation of a registered nurse in this interim period. It would also serve to avoid the necessity for the newly graduated registered nurse to seek casual employment in this role in an often unpredictable and potentially stressful and unsupervised environment.

Such an arrangement for new graduates should be optional with each individual nurse being able to elect whether to continue registration as an enrolled nurse for the interim period e.g. up to six months or allow this registration to lapse when seeking registration as a registered nurse. Some individuals, due to unforeseen circumstances, may require an extension to the interim period of dual registration. These cases should be individually assessed by the NMBA.

4. Employers

The potential for role and scope of practice confusion also impacts the employer. The employer may not understand the different levels of responsibility and accountability for the different roles of registered and enrolled nurse.

Alternatively the employer may knowingly elect to employ a registered nurse as an enrolled nurse as a cost saving measure. As stated above, holding both registrations provides the potential for exploitation when the nurse is employed as an enrolled nurse but is expected to function at the level of a registered nurse. It is important that both the individual nurse and the employer/s are fully aware of the responsibilities of both registered and enrolled nurse roles in order to ensure employment is appropriate.

5. Recommendations

It is recommended by the ANF:

1. That registration as an enrolled nurse and a registered nurse at the same time for an unlimited period is permitted under special circumstances.

2. That in such special circumstances nurses must demonstrate that they have met recency of practice requirements as both an enrolled nurse and a registered nurse.
3. That there is an NMBA appeals process available to enable unsuccessful applicants seeking special circumstances registration as both an enrolled nurse and a registered nurse to have their applications reconsidered.

4. That provision be made for newly graduated registered nurses to continue their enrolled nurse registration for an interim period of up to six months, until such time as they can access a graduate nurse program or gain work in a supportive environment where they are employed as a registered nurse.

5. That interim registration as an enrolled nurse be optional, with each newly graduated registered nurse being given the choice as to whether or not they elect to be granted the interim period of six months continued registration as an enrolled nurse: and, there be provision for extending the interim period for newly graduated registered nurses in circumstances where this is deemed necessary.

6. In the event the NMBA grants a registered nurse a special circumstances provision to also be registered as an enrolled nurse, the annual 20 hours of CPD must be undertaken as a registered nurse; these hours would then also satisfy the enrolled nurse CPD requirements.

6. Conclusion

The Australian Nursing Federation welcomes the opportunity to provide advice to the Nursing and Midwifery Board of Australia on the issue of the potential provision for nurses to hold both registration as an enrolled nurse and as a registered nurse at the same time. The ANF, in consultation with the State and Territory Branches, has considered this proposed issue on which the NMBA is seeking input and had extensive discussion on the matter. For these reasons, the ANF supports registration as an enrolled nurse and a registered nurse at the same time for an unlimited period in special circumstances.

The ANF looks forward to continued participation in ongoing consultations with the NMBA to develop and approve codes and guidelines to provide guidance to the nurses and midwives it registers.

References
