Submission on the Review of the Mutual Recognition Agreement (MRA) and the Trans Tasman Mutual Recognition Arrangement (TTMRA)

1. Australian Nursing Council (ANC)

The ANC is a peak national nursing body concerned with the statutory regulation of nursing. Its members are the Australian state and territory nurse regulatory authorities (NRAs).

The ANC works with the nurse regulatory authorities in the development of national standards for statutory regulation of nursing which are flexible and responsive to the health care requirements of the Australian population.

The ANC is also the authority delegated by the Minister for Immigration, Multicultural and Indigenous Affairs to assess the qualifications of nurses who are educated overseas for migration purposes. This is carried out within a framework of policies consistent with the registration requirements of the nurse regulatory authorities

2. Sample of ANC Achievements that facilitate Mutual Recognition:

- The ANC develops and maintains the National Nursing Competency Standards for Registered Nurses and Enrolled Nurses. These were first adopted by all nurse regulatory authorities in Australia in 1990 and are the core competency standards which all nurses in Australia must be able to demonstrate.
- The Code of Ethics for Nurses in Australia developed under the auspices of the ANC, Royal College of Nursing and the Australian Nursing Federation.
- The Code of Professional Conduct for Nurses in Australia.
- Position Statement on Continuing Competence, which establishes two key principles for determining continuing competence endorsed by all nurse regulatory authorities.
- Position Statement on Cross Border Nursing Practice: - Waiver of Fees (attached)
- The establishment of a Collaborative Advisory Panel which is made up of representatives from Australian nurse regulatory authorities the Nursing Council of New Zealand, and which has been able to progress consistent policy across jurisdictions in a number of areas in relation to the recognition of overseas educated nurses.

- Establishment of a Memorandum of Cooperation with the Nursing Council of New Zealand.

- Providing regulatory leadership within the region through providing the secretariat for the biennial meetings on regulation for the Western Pacific and South East Asian regions.

3. Memorandum of Co-Operation – ANC/NCNZ

On 12 September 2001 in Wellington, New Zealand, a Memorandum of Co-Operation was signed that links the Australian Nursing Council and the Nursing Council of New Zealand to work closely together on nurse regulatory issues of common interest.

The Memorandum was signed in recognition of the potential benefits to be gained from a closer collaborative relationship between the two organisations in the spirit of the Trans Tasman Mutual Recognition Agreement. It confirms the closer relationship between the two countries in the development of standards for the statutory regulation of nurses; to facilitate the free exchange of professional knowledge that contributes to the development of standards; to better facilitate mutual recognition and benefit the movement of nurses and midwives between Australia and New Zealand; and to establish the agreement.

Representatives of both the Australian Nursing Council and the Nursing Council of New Zealand meet every six months to address key issues.

The Nursing Council of New Zealand is also represented on the Research and Policy Committee of the ANC and the Collaborative Advisory Panel.

4. Nursing Categories

Broadly categories of nurses are - registered nurse, registered midwife, registered mental health nurse, enrolled nurse/registered nurse division 2. Nurse Practioner is another category of nurse that has been implemented some states and New Zealand.
The following provides a breakdown or registers/rolls by state or territory.

WA	Register Division 1 Division 2 Division 3 Division 4
QLD	Register for registered nurses Roll for enrolled nurses Authorisation to practice midwifery
NSW	Register with list A and B Roll of nurses List A and List B Authorisation to practice midwifery

VIC	Register. Division 1: equivalent to a registered nurse in other states Division 2: equivalent of qualification of enrolled nurse Division 3: Psychiatric nursing Division 4: Mental Retardation Division 5: Mothercraft nursing
SA	Register - General nurses register, midwives register, mental health register Roll for enrolled nurses.
TAS	Register for registered nurses Roll for enrolled nurses
NT	Register for registered nurses Roll for enrolled nurses Authorisation to practice midwifery
ACT	Register for registered nurses – general nurse, mental health nurse, and midwife. Roll for enrolled nurses
NZ	A register consisting of 7 parts: 1 Registered comprehensive nurses 2 Registered general nurses 3 Registered general and obstetric nurses 4 Registered midwives 5 Registered obstetric nurses 6 Registered psychiatric nurses 7 Registered psychopeadic nurses

5. Matters for Consideration for the Review

5.1 Determining Equivalent Occupation

The types of registers nurse regulatory authorities operate are either single or multiple branch registers. While there has been a move toward a single register, these are not always consistent, and a multiple branch register provides for a range of categories such as registered nurse, mental health nurse and comprehensive nurse. This leads to difficulties in determining equivalence. In some cases, it may also lead to nurses being accepted for a particular category under Mutual Recognition and then reapplying in their state/country of origin under that category as a means to avoid an appropriate education process. A nurse who is registered on a single register may also seek and be granted registration in a jurisdiction with a multiple register and be licensed to practice in a field for which they have had little educational preparation or relevant experience. This has been supported by a decision of the Administrative Appeals Tribunal where a nurse registered in NSW was granted a license to practice in several different categories in the Northern Territory. This decision was also applied to a similar appeal in the ACT.

Registering a person with limited qualifications and experience allowing them to practice without restriction or supervision, puts the public at risk, and because of Mutual Recognition, potentially imposes a lowering of standards in other jurisdictions.

Nomenclature pertaining to registered nurses and enrolled nurses may differ between jurisdictions.

5.2 Recency of Practice/ Continuing Competence

A basic requirement for licensure in most jurisdictions is for a nurse to demonstrate that they have practiced within the previous five years. In addition, some jurisdictions have implemented policies requiring evidence of continuing competence. This is not a consistent requirement in each jurisdiction.

The overriding principle for a nurse to gain registration under Mutual Recognition is that the nurse holds a current license to practice in a participating jurisdiction. There is no provision for declaration in relation to competence to practice as a nurse, which is an issue in those jurisdictions, which, under their legislation, require evidence of recency of practice/continuing competence. While reference is made to the responsibilities of individual nurses and employers regarding competence to practice, some members of ANC have indicated employers have expressed concerns that nurse regulatory authorities grant a license to nurses who have not practiced for several years.

5.3 Responsibilities of nurse regulatory authorities under Legislation

Nurse regulatory authorities are responsible for the protection of the public through the regulation of nursing practice under their respective Nurses Acts. Each authority works within the parameters of its own particular legislation, and can, independently to other jurisdictions, develop standards and policies accordingly. This process may not involve the other jurisdictions.

Through the ANC and its relative committees, opportunity is provided to develop standards from a national perspective. The Collaborative Advisory Panel is a mechanism for the harmonisation of policy concerning registration, particularly in regard to nurses educated overseas, to facilitate Mutual Recognition.

However, the independent right of each jurisdiction to develop standards/policies for a specifically identified issue may result in a disharmony from a national perspective. For example, a policy implemented for the purposes of the recognition of nurses from another country, or a change to the level of language test requirements. Other jurisdictions may not have a similar policy. Under Mutual Recognition, the other jurisdictions will be required to license the nurses admitted to the register from the jurisdiction where the policies are in place. It is not a requirement to consult with other jurisdictions when considering such policy.

5.4 Implementation of Government Policy

The establishment of Mutual Recognition/Trans Tasman Mutual Recognition has had some positive benefits. It has effectively streamlined the ability of nurses to move across state and territory borders and between Australia and New Zealand.

However, the success of the implementation of the Government policy has relied upon the goodwill of the nursing profession, in this case, to resource the necessary processes for its implementation. This is evidenced by the actions taken by the ANC and nurse regulatory authorities. The policy development process involved to some extent, consultation with the profession, but implementation has been at the expense of the profession, which is generally outside the Government available resources for implementing Government policy.

It is suggested that the Commonwealth Government plan to assist with resourcing key national activity undertaken by non-Government organizations that would further the implementation of Mutual Recognition/Trans Tasman Mutual Recognition Agreement.

POSITION STATEMENT
CROSS BORDER NURSING PRACTICE: WAIVER OF FEES

Preamble

The purpose of the Australian Nursing Council is to lead a national approach with state and territory nurse regulatory authorities in evolving standards for statutory nurse regulation. The membership of the Australian Nursing Council (ANC) consists of all state and territory nurse regulatory authorities and two public members.

In order to practise, nurses must be registered or enrolled by the state or territory nurse regulatory authority in the jurisdiction where they are practicing. An issue which has been brought to the ANC's attention is the expense of registration and related fees for nurses who are involved in cross-border practice.

In a country as large as Australia, nurses may be at times required to travel across state and territory borders to provide a nursing service. This means that a nurse who is engaged by a health facility in one state or territory and who is required to cross an adjacent state or territory border in order to provide services, must be registered or enrolled in the state or territory where employed, as well as in all jurisdictions where practice takes place.

While mutual recognition legislative arrangements provide for nurses registered in one state or territory to be registered in other states and territories., the registration process requires payment of a prescribed fee in all jurisdictions.

In the interests of reducing the financial burden on those nurses who are required to register in more than one state or territory, all nurse regulatory authorities in Australia, with the exception of the Nurses Board of the Australian Capital Territory, now have the ability in certain circumstances, to consider waiving the fees, or exempt an individual, from the requirement to pay a fee.

Waiver of fees

Applications for a waiver of fees, or an exemption from paying relevant fees for initial registration and periodic renewal of a license to practise, will be considered on an individual basis by the relevant nurse regulatory authority.

The criteria applied will be based on the Nurses Act, regulations and the policies of the relevant jurisdiction.

The criteria may include but not be limited to:

1. The nurse must be currently registered in an adjacent state or territory where he/she is employed by a health facility or agency.
2. The terms of employment and geographical location require the nurse to physically cross into a second (or third) state of territory to provide a nursing service for a period of time.
3. The cross border nursing practice arrangement is only valid whilst the nurse's registration remains current in his/her home state or territory and continues in the employment that the application was made.
4. The frequency and duration of the provision of the nursing service in the second state or territory.

For more information concerning specific requirements, contact the relevant nurse regulatory authority in the state or territory where you intend to apply for a waiver or exemption of fees.

Nursing Board of Tasmania PO Box 847 SANDY BAY **TAS** 7006 Ph: (03) 6224 3991 Fax: (03) 6224 3995 Email: NBT@nursingboardtas.org.au	Nurses Board of SA PO Box 7176 Hutt Street ADELAIDE **SA** 5000 Ph: (08) 8223 9700 Fax: (08) 8223 9717 Email: registrations@nursesboard.sa.gov.au	Nurses Board of WA Locked Bag 6 EAST PERTH **WA** 6892 Ph: (08) 9421 1100 Fax: (08) 9421 1022 Email: info@nbwa.org.au
Nurses Reg Board of NSW PO Box K599 HAYMARKET **NSW** 1238 Ph: (02) 9219 0222 Fax: (02) 9281 2030 Email: nursesreg@doh.health.nsw.gov.au	Qld Nursing Council GPO Box 2928 BRISBANE **QLD** 4001 Ph: (07) 3223 5111 Fax: (07) 3223 5161 Email: registrations@qnc.qld.gov.au	Nurses Board of the ACT PO Box 976 CIVIC SQUARE **ACT** 2608 Ph: (02) 6205 1599 Fax: (02) 6205 1602
Nurses Board of Victoria PO Box 4932 MELBOURNE **VIC** 3001 Ph: (03) 8635 1200 Fax: (03) 8635 1248 Email: registration@nbv.org.au	Nursing Board of the NT GPO Box 4221 DARWIN **NT** 0801 Ph: (08) 8999 4157 Fax: (08) 8999 4196 **Email:** **healthprofessionals.ths@nt.gov.au**	

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