

Explanatory notes: Management of nurses, midwives and students with impairment

16 November 2012

Summary of the Siggins Miller report to the Nursing and Midwifery Board of Australia

Background information

In February 2012, the Australian Health Practitioner Regulation Agency (AHPRA), on behalf of the Nursing and Midwifery Board of Australia (National Board or NMBA), engaged Siggins Miller – an independent consulting group – to undertake a comparative study on services available to support nurses and midwives with impairment in Australia.

In consultation with relevant professional stakeholders as part of the process, the project aimed to provide an overview of health services supporting nurses and midwives with impairment in each jurisdiction, including the Nursing and Midwifery Health Program Victoria (NMHPV).

The NMHPV was funded initially by the Nurses Board of Victoria. When the National Registration and Accreditation Scheme (National Scheme) came into effect on 1 July 2010, funds were set aside by the Nurses Board of Victoria for the continuation of the NMHPV until 1 July 2013. The NMHPV is managed independently of the National Board.

Approach

Siggins Miller gathered information by surveying, interviewing and assessing written submissions from relevant National Board stakeholders: Chief Nurse and Midwifery Officers from state and territory health departments, the state and territory branches of the Australian Nursing Federation (ANF), Chairs of the state and territory boards of the National Board, and state and territory AHPRA offices.

Total participants: 25

Report findings

The Siggins Miller report found that:

A limited number of notifications about nurses and midwives are linked to impairment-related issues. (More information on [notifications and outcomes](#) is available on the National Board website).

There are different approaches across states and territories to managing health impairment within the nursing and midwifery workforce.

The costs associated with the management of nurse and midwife impairment are spread between different groups in different states and territories, including:

- AHPRA, on behalf of the National Board – in assessing notifications and reaching outcomes
- the nurse or midwife – in compliance with related undertakings or conditions, including medical screening, treatment or counselling, and
- employers – through Employee Assistance Programs (EAPs) or other support programs, for example additional or replacement staffing costs.

All states and territories have Employee Assistance Programs (EAPs) for nurses and midwives working in the public health sector. Due to patient confidentiality, it was not possible to quantify the number of nurses and midwives with impairment using EAPs as employees, or using public or private sector services as individuals.

The Nursing and Midwifery Health Program Victoria (NMHPV) is the only health program designed specifically for nurses and midwives with impairment in Australia. The Australian Nursing Federation (Victorian Branch) estimated that the NMHPV program represented a cost saving to the health sector of more than \$7 million, as the program minimised loss of productivity for the nurse or midwife with impairment who would otherwise take time off or work less productively.

Other states and territories had no similar Board-funded health program. The independent report found limited national support for the establishment of similar programs in other states and territories. Some survey respondents, who were primarily Victorian-based, were enthusiastic about the NMHPV, recommending that similar programs of support helped retain a safe and competent workforce. However, other respondents raised questions about the value, need and cost of such a program, which duplicate existing services such as EAPs, and other public and private health services accessible to practitioners for support and treatment of issues related to alcohol and other drugs (AOD) and mental health problems.

The Nursing and Midwifery Board of Australia’s decision

The Nursing and Midwifery Board of Australia (National Board):

- considered the core regulatory function of the National Board under the National Law¹ in relation to impairment, which is to manage practitioners when their health is impaired and their practice may place the public at risk
- took into account:
 - potential duplication of existing services
 - fairness to all enrolled nurses, registered nurses and midwives of continuing to fund a service only available in Victoria, and
 - funding implications of establishing and implementing a national health program that provides equitable services across both metropolitan and rural locations in all states and territories.
- stakeholder concerns that a national rollout of a health program (or other support health care service) for nurses and midwives may duplicate existing services and have implications for an increase in the annual registration fee paid by nurses and midwives. The National Board is entirely funded through these registration fees.

While the National Board is concerned about the wellbeing of all registered nurses and midwives, as a regulator it does not have a statutory role in primary, preventative or support health programs.

In forming a decision about future National Board funding for the NMHPV, NMBA also considered the range of existing support programs in place across jurisdictions, including EAP programs provided by large employers, and practitioners’ access to health support through public and private health sector services.

¹ Health Practitioner Regulation National Law, as in force in each state and territory (the National Law)

In this context, the National Board decided not to fund a profession-specific primary, preventative or support health program nationally or support ongoing funding of the existing NMHPV.

The National Board, however, will:

- provide an additional year of funding to the NMHPV until 30 June 2014 to support transition
- continue its focus on improving national consistency in managing notifications about nurses, midwives and students with a health impairment where there is a potential risk to patient safety, and
- continue to work with AHPRA and other National Boards to implement an education campaign about the mandatory reporting requirements of the National Law, to improve practitioner, employer and education provider understanding about mandatory reporting requirements.

AHPRA is also working with the National Boards, including the Nursing and Midwifery Board of Australia, to explore a possible cross-profession approach to external health programs that could complement the National Boards' core statutory role in relation to impairment.

For more information

- Keep up to date with regular news and updates on the National Board website www.nursingmidwiferyboard.gov.au
- Visit www.nursingmidwiferyboard.gov.au under *Contact Us* to lodge an online enquiry form
- For registration enquiries: 1300 419 495 (within Australia) +61 3 8708 9001 (overseas callers)
- For media enquiries: (03) 8708 9200