



Credentiailling for nurses and midwives

Internationally, credentiailling has been described as a central function of the regulatory system requiring “licensure, certification or authorisation by a national governmental agency”.¹ It is a term applied to “processes used to designate that an individual, programme, institution or product have met established standards,” as set by a national body.² In the Australian context, this is achieved through statutory regulation in the form of profession-specific registration.

Quality health care and the safety of the Australian public is assured through the National Registration and Accreditation Scheme, under the *Health Practitioner Regulation National Law Act 2009* (National Law). The statutory regulation of registered nurses, midwives and enrolled nurses begins with initial registration following successful completion of an approved program of study.³ Entry to practice programs require graduates to meet minimum standards for practice as set down by the Nursing and Midwifery Board of Australia (NMBA). On registering, nurses and midwives are listed on the Australian Health Practitioner Regulation Agency (AHPRA) Public Register for health practitioners. The general public and employers of nurses and midwives are thereby able to validate and satisfy themselves of the individual health practitioner’s registration status, and any associated conditions, notations or endorsements by accessing the AHPRA Public Register.

Other types of accreditation/certification/authentication processes have been offered by some professional organisations and/or are required by specific jurisdictions or employers. These procedures are often described as ‘credentiailling’. Some professional organisations promote this private process as a voluntary and self-regulatory undertaking offered to their individual members as a means of recognising that they have, at a point in time, met the particular organisation’s self-imposed requirements. Some employers or jurisdictions use this process as an additional hurdle or requirement to employment or in order to be considered for career promotion. Credentiailling by some professional organisations is used as a means of generating income.

In this circumstance, and to avoid the perception of a conflict of interest, organisations that derive an income from this service, should declare the business interest in appropriate circumstances. This should occur when influencing policy direction that would prove financially advantageous.

Private credentiailling arrangements offered by some professional organisations/employers are not recognised under the national regulatory framework, and do not provide the public with the same safeguards afforded by national registration. That is, statutory regulation provides the public with the mechanism by which they can be assured of the registration status and thus the right of an individual health practitioner to practice. Private credentiailling offers no assurance of safety and quality.

It is the position of the Australian Nursing and Midwifery Federation that:

1. The NMBA and AHPRA, established under section 23(1) of the National Law, are responsible for regulating nurses and midwives to ensure they meet the mandatory standards for practice. Professional organisation/employer credentiailling, offered as an additional validation process, is unnecessary as it is not required for a nurse or midwife to maintain their registration to practice.
2. Entry to practice for nurse practitioners, midwives with scheduled medicines endorsement, registered nurses, midwives, and enrolled nurses is validated through national minimum standards of education set down by the NMBA.



3. Accreditation of all nursing and midwifery programs of study leading to initial registration, notations/endorsement are validated using the national accreditation standards of the Australian Nursing and Midwifery Accreditation Council (ANMAC).
4. The practice of nurse practitioners, midwives with scheduled medicines endorsement, registered nurses, midwives, and enrolled nurses is validated through regulation as undertaken by the NMBA under the National Law.⁴ The National Law provides for regulation encompassing a Professional Practice Framework⁵ and protection of titles.
5. Statutory regulation of nurses and midwives provides the necessary mechanism for protecting the public and assuring quality by ensuring individuals, programs of study and education providers meet agreed standards.
6. The NMBA continuing professional development requirements for nurse practitioners, midwives with scheduled medicines endorsement, registered nurses, midwives and enrolled nurses assures the public of commitment to ongoing learning for competence to practice.
7. There is a broad range of post graduate education programs, in all contexts of practice, offered to nurses and midwives. Completion of these education programs may support advanced practice learning.
8. Endorsement on the National Register held by the NMBA and AHPRA, of a nurse or midwife having achieved a post graduate qualification, is a fair and transparent validation mechanism for the professions, the public, other health professionals and employers.
9. Separate and often expensive processes of private credentialling provided by some professional organisations should not be required or used as the validation mechanism for specific areas of advanced practice nor for post graduate qualifications.
10. There is no place in Australia for private credentialling by professional organisations/employers that leads to restrictive employment practices.
11. Our communities should not be deprived of nursing and midwifery services whereby organisations/jurisdictions other than the NMBA propose employment arrangements which are open only to individual nurses or midwives who are privately credentialled by professional organisations.
12. Professional organisations offering credentialling services to members for an additional fee, and employers who link promotional positions to the private credentialling process, should carefully consider:
 - a) their ability to protect the public within a private credentialling program;
 - b) the undermining of the National Registration and Accreditation Scheme and associated validation mechanisms for public protection;



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- c) whether they are holding out to the public that the nurse or midwife has specialist knowledge and skill, given specialist registration in nursing and midwifery, whilst available under the National Law, is not currently used by the NMBA;
- d) conflict of interest between the organisation offering the credential or certification and the ability to provide independent advocacy for the professions, given the financial benefit of private schemes;
- e) ethical organisational conduct;
- f) organisational reputation;
- g) whether they are engaging in anti-competitive behaviour; and
- h) legal and financial liability.

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References

1. International Council of Nurses (2020). *Guidelines on Advanced Practice Nursing 2020*. Available at: https://www.icn.ch/system/files/documents/2020-04/ICN_APN%20Report_EN_WEB.pdf
2. American Nurses Credentialing Center (ANCC). *Credentialing Definitions*. Available at: <https://www.nursingworld.org/education-events/faculty-resources/research-grants/styles-credentialing-research-grants/credentialing-definitions/>
3. Programs of study leading to registration and endorsement are accredited by the Australian Nursing and Midwifery Accreditation Council (ANMAC) and then approved by the Nursing and Midwifery Board of Australia (NMBA).
4. *Health Practitioner Regulation National Law Act 2009*. Available at <https://www.legislation.qld.gov.au/view/html/inforce/current/act-2009-045>
5. Nursing and Midwifery Board of Australia (2020). *Registration Standards and Professional codes & guidelines*. Available at <https://www.nursingmidwiferyboard.gov.au/>

This position statement should be read in conjunction with the ANMF Professional Practice Framework for nurses and midwives Position Statement, available at http://anmf.org.au/documents/policies/PS_Professional_practice_framework_for_nurses_and_midwives.pdf