

pdf (print only) version

Full newsletter available at:
www.nursingandmidwiferycouncil.nsw.gov.au

PRESIDENT'S MESSAGE



Welcome to the May 2016 issue of the Nursing and Midwifery Council of New South Wales newsletter. We are excited to share with you the first issue of our newsletter series launch and hope that you will take a few moments to provide your feedback in a brief survey (see our News and Events section below).

In this issue we look at continuing professional development (CPD) with a focus on improving performance, meeting registration requirements and sharing responsibility for maintaining standards.

Also, this month, we celebrated International Midwives Day (5 May) and International Nurses Day (12 May). The Council recognises and supports the delivery of safe quality health care that midwives and nurses provide in a variety of challenging situations.

Adj Prof John G Kelly AM
Council President

IN THIS ISSUE

NEWS AND EVENTS

CASE STUDY: Improving performance through CPD

CASE STUDY: Maintaining standards is everyone's responsibility

NMC UPDATE: Learn more about who we are

SPOTLIGHT ON PRACTICE

ISSUES: Why performance reviews are critical for enhancing culture

MANAGING YOUR OWN PERFORMANCE DEVELOPMENT

NEWS AND EVENTS

- **Registration deadline** on 31 May 2016: is your CPD up to date? Download the CPD log template [here](#).
- **Revised standards for practice and registration standards** for registered nurses and midwives come into effect on 1 June 2016. Review the changes and new standards [here](#).
- **Tell us what you think!** Please provide your feedback in a brief survey about the recent changes to our newsletter [here](#). Survey closes 30 June 2016.
- **Safe professional practice and the role of culture workshop:** The Council will be running a workshop on 28 July (tentative date) to explore these themes with key stakeholders. Please register your interest on our website at <http://www.hpca.nsw.gov.au/Home/News>. Places are limited.

CASE STUDY: IMPROVING PERFORMANCE THROUGH CONTINUING PROFESSIONAL DEVELOPMENT

The Nursing and Midwifery Council of New South Wales (Council) received a complaint about a midwife (RM) with over 20 years of experience, who was alleged to have provided negligent care to the complainant during a postpartum haemorrhage.

From the time of her admission to post-delivery, the complainant had a change of four midwives, had been allocated a delivery room only 15 minutes prior to the birth and did not receive an epidural, despite a number of requests.

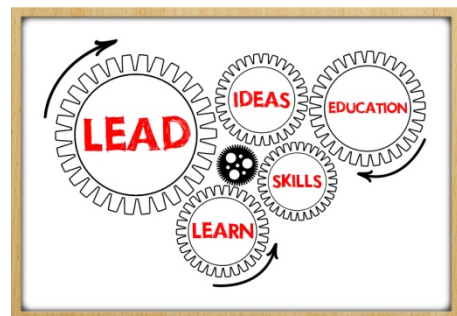
The midwife-in-charge asked the RM to help provide post-natal care to the complainant. The RM noticed that the complainant's blood loss was heavy. After performing observations, the RM documented these in the Maternity Observation Chart. The RM attempted to perform a fundal massage to expel clots but the complainant was in too much pain. The RM contacted the complainant's obstetrician at her request, who ordered a syntocinon infusion. After starting the infusion, the RM was called away to deal with an emergency, adding to the complainant's distress.

The Council referred the matter to the Council's performance interview committee (PI Committee). The RM agreed that her documentation was brief as she had been called away to attend another patient. The RM noted that she should have returned to complete the documentation retrospectively and communicated better with the complainant to explain why she had been called away.

Performance interview recommendations

The PI Committee highlighted the importance of communication with patients, which is critical to therapeutic relationships and could have helped to relieve the distress of the complainant. The PI Committee recommended that the RM do CPD courses on communication and documentation "on the run".

Prior to the performance interview the RM was asked to complete a self-reflection log and noted how reflection on her individual performance, accountability and external factors of the incident can help learning and improve safety. The RM is currently working with her MUM to develop protocols about the escalation of staffing concerns in times of increased activity and alternative patient accommodation if all delivery rooms are occupied.



Practice points

- Consider joining relevant professional nursing and interpersonal organisations to access education, support and peer interaction.
- Attend courses and conferences beyond your mandatory training to expand your skills and knowledge.

Outcome

The matter was closed with no further action as:

- The complaint was a one-off incident
- Systemic factors had partly attributed to the poor standard of care. This included staffing issues and availability of delivery rooms, which the RM was helping to improve
- The RM acknowledged the complainant's concerns and reflected on areas of improvement in her practice
- The RM was able to demonstrate sound midwifery knowledge consistent with her scope of practice and years of experience.

CPD: WHAT IS REQUIRED?

CPD is an opportunity to identify learning needs with your supervisor/manager and continuously improve performance and safety. Undertaking a specific number of CPD hours each year in an area that is relevant to your practice is a requirement to maintain registration. Importantly, each RN is responsible for his or her CPD.

CPD is a mandatory registration standard

- **Reflect** on your own practice
- **Identify** your learning needs – based on skills or knowledge which are relevant to your practice and need development or which you would like to move into
- **Plan** your CPD around your identified learning needs
- **Participate** in the required number of hours of CPD per year to continually improve
- **Apply** - learning to practice
- **Re – evaluate and reflect** on implementation
- **Maintain records** of involvement: your CPD log must be accurate and should include descriptions of the course, learning outcomes and your reflection on how to apply your learning to practice

Find out more about the new version of the continuing professional development registration standards for nurses and midwives here:

<http://www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx>

CASE STUDY: MAINTAINING STANDARDS IS EVERYONE'S RESPONSIBILITY



The Council received a mandatory notification about a hospital scrub nurse who allegedly failed to follow correct infection control procedures, particularly relating to single-use tourniquets and the use of potentially contaminated water. It was also alleged that an enrolled nurse (EN) at the hospital, with 15 years' experience as a theatre nurse, may have been aware of such issues but did nothing to address them.

During an interview with the Performance Interview Committee (PI Committee), the EN admitted to a degree of complacency in the theatre and that the scrub nurse's actions had been common practice.

Practice point

Maintaining standards involves responsibility for one's own actions but also questioning behaviour by others when policies, protocols and guidelines are not followed.

Outcome

The PI Committee had concerns regarding the EN's continuing professional development (CPD) and her knowledge of contemporary practice, including infection control. As such, the EN was counselled to:

- Be an **advocate** for her patient
- **Question** procedures and practices if she feels they are incorrect
- **Reflect** on her practice
- Take **responsibility** for her CPD
- Complete **additional activities** to write a reflection on standards and guidelines related to infection control and observe potential areas for improvement within the hospital

The EN completed the required activity, provided documentation and logged her reflections within the timeframe. At the direction of her employer, the EN and other staff also collaborated to implement new policies and procedures regarding infection control.

DOING YOUR PART TO MAINTAIN STANDARDS

Registered health practitioners have a professional and ethical obligation to protect and promote public health and a safe culture. When standards are not met, it is best to intervene early and provide feedback so harm is minimised. If you believe that a health practitioner has acted in a way that constitutes notifiable conduct, you are required to advise AHPRA or a National Board. To find out more about mandatory notifications, visit: <http://www.ahpra.gov.au/Notifications/Who-can-make-a-notification/Mandatory-notifications.aspx>

NMC UPDATE

WHAT WE DO

The Nursing and Midwifery Council of New South Wales (Council) regulates the nursing and midwifery professions by managing complaints about the health, performance and/or conduct of registered nurses or midwives or nursing/midwifery students practising in New South Wales.

In fulfilling its role, the Council seeks to:

- **Protect the public:** The primary aim of the Council is to protect the public. In some cases the Council may need to restrict a nurse's or midwife's practice where it is concerned that actual or potential harm may occur to the public.
- **Support remediation:** The Council's processes are designed to support remediation; not to punish nurses and midwives. The Council seeks to take the minimum regulatory action necessary to maintain public safety and to minimise risk.
- **Promote early intervention and prevention:** The Council promotes early intervention and prevention to identify risks or harmful behaviour so risks can be managed as early as possible and harm can be minimised.
- **Independently assess complaints:** The Council does not advocate for either the practitioner or the complainant. The Council does not award or seek damages, refunds or compensation for a complainant.



WHO WE ARE

The Council is representative of the nursing and midwifery profession and is made up of 15 members consisting of nurses and midwives, community members and a legally qualified member.

Council committees usually have at least one professional member and one community member to ensure both professional and community expectations and values are taken into account when making decisions.

You can learn more about our Council members [here](#).

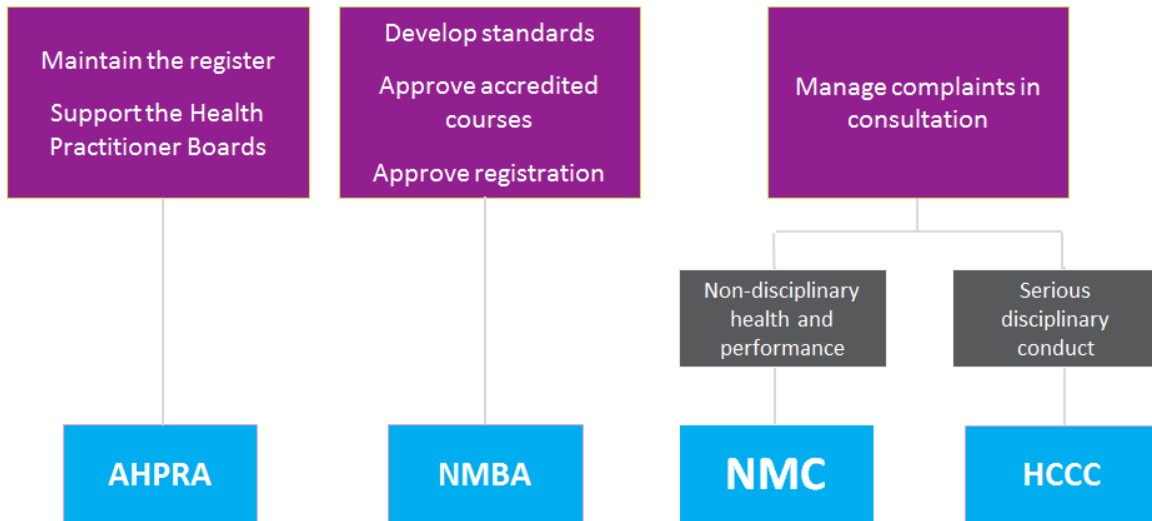
HOW DO WE FIT INTO THE NSW REGULATORY FRAMEWORK?

The Council views public safety and the regulation of nurses and midwives to be a shared responsibility, which is best achieved by collaborating with individual practitioners, professional groups, health care organisations and patients.

The Council works with a range of other regulatory bodies to fulfil its functions. These are as follows:

- Australian Health Practitioner Regulation Agency (AHPRA)
- Nursing and Midwifery Board of Australia (NMBA)
- NSW Health Care Complaints Commission (HCCC)

KEY FUNCTIONS OF THESE REGULATORY BODIES CAN BE SUMMARISED AS FOLLOWS:



SPOTLIGHT ON PRACTICE ISSUES

South Eastern Sydney Local Health District (SESLHD) has developed a structured framework to manage nurses or midwives who have been identified as having practice issues. The framework builds on the Clinical Excellence Commission's '[Clinical Supervision at the point of care](#)' report and shifts away from formal disciplinary processes to focus on remediation through education, support and feedback



Six years ago, SESLHD designed the framework in consultation with a wide range of stakeholders to address issues related to poor standards of practice supportively safely.

The Framework addresses safety from all angles – the patient, the staff member, and the organisation.

Kim Olesen, District Director Nursing and Midwifery, SESLHD

The framework initially requires an assessment of risk and actively involves the staff member throughout the process. Specific educational strategies are identified in partnership with the staff member. By adopting a transparent, person-centred approach and involving the staff member in the process, the framework aims to support the individual and provide a greater degree of ownership to achieve the best outcome. A key component of the framework is regular feedback provided by supervisors.

Regular feedback need not be restricted to those with practice issues and can benefit us all. Learning how to give and receive feedback is an important skill to develop. Regular feedback enables the individual to understand their strengths and opportunities for improvement. It also enables them to look forward, identify their learning needs and discuss continuing professional development opportunities.

The Framework has reinforced the need for a culture of learning that is underpinned by regular open and honest feedback.

Robin Girle, Workplace Capabilities Facilitator, SESLHD

The Nursing and Midwifery Council of New South Wales wishes to thank Ms Kim Olesen, District Director Nursing & Midwifery, Ms Margaret Martin, Acting Nurse Manager – Development of Practice & Workplace Capabilities and Ms Robin Girle, Workplace Capabilities Facilitator for sharing their learning and experience of implementing the SESLHD performance review framework.

MANAGING YOUR OWN PERFORMANCE DEVELOPMENT



Figure 1: Components of the Performance Development Framework

As a member of the Performance Interview Committee at the Nursing and Midwifery Council of New South Wales, Marie Clarke frequently talks to nurses and midwives who do not have a clear understanding of how to develop their performance.

The lines between annual performance reviews and formal disciplinary performance reviews to resolve unsatisfactory performance can become blurred. The [Performance Development Framework, NSW Public Sector](#) helpfully sets out clear distinct stages of the performance development cycle.

The **annual performance review** is part of an overarching performance cycle to proactively address and improve performance. Marie notes that the annual performance review should be as simple as possible and centred on your progress, career advancement and continuing professional development (CPD). Marie suggests that the discussion can focus on whether your CPD is giving you what you want.

Performance development should be a continuous cycle and not limited to one conversation each year. Performance appraisal needs to be frequent and context specific. Don't wait until this is offered. Seeking out **informal feedback** from managers as a quick catch up on a daily basis can promote learning, improve confidence and patient safety. Feedback should be specific, positive and/or constructive. It may also be useful to identify a mentor, who is open, objective and able to discuss your professional experiences.

Organisational learning is facilitated by a supportive environment that allows staff to identify issues as they arise.
Marie Clarke

Occasionally, errors occur. If an error does occur, you may need to have a **performance review discussion** to resolve any performance issues. Errors should not initially be seen as a trigger for disciplinary processes but an opportunity to learn and improve performance.

A performance review discussion can help you:

- reflect on your practice
- understand why the event occurred
- learn from the experience and
- think about how you can improve patient safety, performance and systems.

Sharing lessons learned openly can also help colleagues and your work organisation improve patient safety.

The Nursing and Midwifery Council of New South Wales wishes to thank Ms Marie Clarke for sharing her insights and years of experience as former Council member and Director of Nursing and current member of the Council's Performance Interview and Counselling Committees for this article.

What elements are important for an effective performance review?

After receiving a complaint, the Council refers a number of nurses and midwives with performance issues to Performance Interviews. The Council's focus is on patient safety so Performance Interviews are designed to:

- Gather information
- Intervene early if issues are easily addressed
- Clarify concerns and discuss options available to the nurse/midwife
- Provide advice and education
- Reinforce standards of practice

The principles behind an effective performance Interview can be adopted to get the most out of your performance reviews.

- **Engage in the conversation:** be prepared to discuss your performance openly and honestly
- **Provide** and be receptive to feedback
- **Raise** issues that prevent you from achieving your goals
- **Focus** on learning and the next steps to improve performance
- **Ask** open-ended questions
- **Notice** body language and non-verbal communication (for managers)

References: adapted from the NSW Performance Development Framework, NSW Public Sector with input from Marie Clarke