+ + + + + + + + + + +

Annual	
Report	
2015-16	

Nursing and Midwifery Council

of New South Wales





This year, the focus for the Nursing and Midwifery Council of New South Wales (Council) has been the implementation of our new Strategic Plan 2015-18.

Over the three years, the Council aims to maintain professional standards and minimise the risks of harm to patients. To reflect this, our strategic plan prioritises the following three objectives:

- effectively managing complaints
- building capability and capacity; and
- engaging and influencing the health system.

The Council commenced the year by welcoming eight new members, who joined our seven continuing members. Our new members bring a diverse range of skills, which has assisted our decision-making process in complaints management.

In 2015/16, the Council received 610 complaints, which is the same number as the year before. Approximately 55% of cases were referred to the Council for management following initial consultation with the Health Care Complaints Commission and 26% were discontinued. The Council completed 404 hearings and interview committees, of which 123 were hearings for immediate interim action to maintain the health and safety of the public.

Anecdotally the cases are becoming more complex. Increasingly, elements of health, performance and conduct are included in the same complaint. This complexity can lengthen the assessment process, as well as the monitoring and remediation period. The Council is continuing to work on a research project, which explores both complexity and decision-making to inform future strategies for the management of such complaints.

The Council has also commenced two literature reviews about the application of professional standards and facilitating cultures of safety. These will be used to guide planned surveys. Interviews have been conducted to examine stakeholders' understanding of the Council's role. The results will guide the Council's initiatives over the next two years. The Council is also working with experienced academics conducting regulatory research on mandatory reporting, practitioner performance and risk profiling.

The Council recognises that public safety is a shared responsibility and it must partner with others to fulfil its objectives. A network analysis of groups and organisations involved in patient safety and maintaining professional standards will commence in the near future. The aim is to better understand how to develop networks for sharing intelligence and coordinating key messages, strategies for improvement and planned interventions.

President's message continued

As part of its strategic plan, the Council continues to meet regularly with our partners in NSW and nationally, such as the Health Care Complaints Commission (HCCC), Nursing and Midwifery Board of Australia (NMBA), Australian Health Practitioner Regulation Agency (AHPRA), the Nursing and Midwifery Office and the NSW Nurses and Midwives Association (NSWNMA). We have also begun reaching out to other groups and organisations involved with maintaining professional standards and patient safety such as the Council of Deans, the Health Education and Training Institute and the Clinical Excellence Commission.

The Council recognises the importance of communication and has taken a lead role in working with other NSW health professional Councils to improve stakeholder understanding about our complaints management process. This year the Council, in response to feedback about communication, commenced the Plain English communication project. The project aims to address the needs of our stakeholders and to improve the timeliness, effectiveness and efficiency of our communications.

The use of a variety of communication channels is a key strategy in the Council's plan. The Council's newsletter is distributed to over 90,000 nurses and midwives. Changes have been made to our newsletter and further improvements are planned to increase the readership. The newsletter is a valuable resource as it is sent to all nurses and midwives registered in New South Wales in both private and public health services.

The Council is interested in international innovations and is kept up to date with relevant journals, articles, webinars and other resources. Council representatives have attended national or international regulatory meetings to benchmark with other regulators. We have obtained useful resources and ideas to improve our processes and have shared our ideas with fellow regulators whose feedback has been constructive. The Council's program for discussion and education about regulatory activities has continued through its well attended conference and seminar presentations.

Throughout the year we have made significant progress to implement our new strategic plan. It is necessary that our practitioners have active dialogue with us during this process to ensure a positive outcome for nurses and midwives as well as recipients of care. We resolve to continue to improve our service to the community by maximising public safety.

Im Kelly

Adj Prof John G Kelly AM President

Regulation of Nurses and Midwives in 2015/16 Overview

104,721 REGISTERED NURSES AND MIDWIVES IN NSW

2.5% more than last year in NSW27.5% of nurses and midwives in Australia

> 610 NEW COMPLAINTS RECEIVED RELATED TO

> > Conduct - 220 Performance - 243 Health - 147

595 CLOSED COMPLAINT OUTCOMES INCLUDED

8 registration cancelled/disqualified 5 surrender of registration 81 conditions on registration 3 reprimand issued 1 caution issued 3 finding but no orders 36 counselling 9 resolution/conciliation by HCCC 15 all or part referred to another body 191 no further action 82 no jurisdiction 158 discontinued 7 withdrawn 931 COMPLAINTS WERE MANAGED

321 open at start of year 610 received during the year 595 closed during the year 336 open at end of year 269 active monitoring cases at end of year

Regulation of Nurses and Midwives in NSW in 2015/16

Year in summary

As at 30 June 2016 NSW had 104,712 registered nurses and midwives representing 27.5% of the 380,208 nurses and midwives registered to practise in Australia. There was an increase of 2.5% on the 102,117 nurses and midwives registered in NSW last year.

During the year the Nursing and Midwifery Council of NSW managed 931 complaints including:

- 321 open matters at the start of the year
- 610 new complaints received during the year.

By year end 595 complaints had been closed and 336 matters remained open.

The 610 new complaints received this year were about 563 practitioners representing 0.5% of NSW registered nurses and midwives. The same number of complaints were received this year as last year. However in 2015/16 complaints were about a fewer number of practitioners due to an increase in multiple complaints about the same practitioners.

This year there were 190 mandatory notifications about 186 nurses and midwives. Mandatory notifications made up 31% of complaints received about NSW registered nurses and midwives this year.

Source of Complaint	Number	Percentage of Total Complaints Received
AHPRA	27	4.4%
Anonymous	22	3.6%
Council	17	2.8%
Education provider	18	2.9%
Employee	6	1.1%
Employer	163	26.6%
Government department	12	2.0%
Lawyer	2	0.3%
Members of the public	31	5.1%
Other health practitioners	52	8.5%
Patients	76	12.5%
Pharmaceutical services	1	0.2%
Police	3	0.5%
Relatives of patient or practitioner	105	17.2%
Self reports	35	5.7%
Treating practitioners	34	5.6%
Other	6	1.0%
TOTAL	610	100%

Complaints were received from the following sources.

Complaints received about NSW nurses and midwives related to:

- Conduct 220 complaints representing 36% of complaints received
- Performance 243 complaints representing 40% of complaints received
- Health 147 complaints representing 24% of complaints received.

One hundred and three matters received immediate action consideration and 24 matters were subject of immediate action reviews.

After Council consultations with the HCCC, 338 of the complaints received during the year were referred for Council management, that is 55% of complaints received.

Complaints management included the following assessments and hearings.

Assessments and Hearings	Number
Performance assessments	29
Performance Review Panels	12
Professional Standards Committee	5
Health assessments	164
Impaired Registrants Panels	105
Counselling/interviews	122
Tribunals	8
TOTAL	445

Outcomes*	Number
Registration cancelled or disqualification	8
Surrender of registration	5
Conditions on registration – imposed or by consent	81
Reprimand issued	3
Caution issued	1
Finding but no orders	3
Counselling – by interview	36
Resolution or conciliation by HCCC	9
All or part referred to another body	15
No further action required after further assessment	191
No jurisdiction to act	82
Discontinued following assessment by HCCC	158
Withdrawn	7
TOTAL	599

Outcomes for the 595 matters closed during the year were as follows.

* There may be more than one outcome for a matter eg reprimand and conditions on practice.

At year end 266 cases were being actively monitored including 47 conduct matters, 56 performance matters and 163 health matters.

Strategic Plan 2015 to 2018

In 2015, the Council developed its new strategic plan for the next three years. The strategic plan identifies three key goals to strengthen the Council's primary role of protecting the public. These three goals are:

- 1. effectively managing individual complaints
- 2. engaging and influencing the health system
- 3. building capability and capacity.



In the first year of the plan, the Council has invested time and resources in supporting the induction and education of eight new Council members. The Council has also undertaken research with stakeholders in order to benchmark the quality and timeliness of its processes and resources and to better assess the effectiveness of the strategic plan in 2018.

The Council continues to develop resources and conduct other research projects to build its capabilities by improving its processes and increasing its engagement with its stakeholders within the health sector. The Council is currently researching the following:

- Performance assessments to improve the management of its performance pathway
- Factors influencing its decisions to improve the quality and consistency of its decision-making processes
- Cultures of safety within the health sector to inform its future role in increasing engagement with professional standards and promoting safe practice.

This research will continue into 2016/17.

The Council has also responded to concerns about the clarity of its letters to practitioners, complainants and employers. The Council has worked with the Plain English Foundation to provide new resources and training to assist staff in this area. New letters and fact sheets continue to be implemented and the review of all letters and the development of new fact sheets will continue into 2016/17.

Council Membership

Section 41E of the Law prescribes that there are 15 members of the Nursing and Midwifery Council appointed by the Governor. On 1 July 2015, the Council had a significant turnover in membership with 8 new members joining the Council.

Members who are registered practitioners:

- Adj Professor John G Kelly AM, RN, BA (Hons), LLB, Grad Dip Leg Prac, FACN, AFAIM, MAPS, MAICD – President
- Dr Bethne Hart RN, Cert 1V TAA, Dip Clin Hypnotherapy, BA (Soc.Sci), MHPEd, PhD (UNSW), (MHRN) – Deputy President
- Ms Susan Anderson RN, BN
- Ms Maryann Curry RN, MHM (UNE), GAICD
- Ms Kate Cheney RN, RM Sexual Health (cert), B Nursing Ma Midwifery
- Ms Karen Hay EN, Adv.Dip Nursing (Perioperative Nursing), MACORN, MNSWOTA
- Ms Karyn Godier EN
- Ms Kate Adams RN, RM, BA (NSW NMA nominee)
- Ms Elisabeth Black RN, RM, BN, PGD, MNSc, Cert IV TAE FACN (ACN nominee)

Members engaged in providing programs of study:

- Professor lain Graham PHD, RN, FACN, MACMHN
- Assoc Professor Murray Fisher RN, PhD (Usyd), ITU Cert (SVPH), DipAppSc (Nursing) (CCES), BHSc (Nursing) (UTS), MHPEd (UNSW)

Legal member:

• Ms Jann Gardner BA, LLB (USyd), MBA (UON), GAICD

Community members:

- Mr Bernard Rupasinghe MLLR (USyd), GDLP (ANU), BA/LLB (ANU)
- Mr David Spruell BComm (B'ham), Fellow FINSIA, Fellow AICD
- Ms Jennifer Symons BComm, BAS (Building), BA

Attendance at Council Meetings

The Nursing and Midwifery Council met on seven occasions. Attendance at the meetings was as follows.

Member	Meetings Attended	Meetings Eligible to Attend
Ms Kate Adams	7	7
Ms Susan Anderson*	4	7
Ms Elisabeth Black*	7	7
Ms Kate Cheney*	6	7
Ms Maryann Curry	3	7
Dr Murray Fisher^	4	4
Ms Jann Gardner*	5	7
Ms Karyn Godier	6	7
Professor lain Graham	6	7
Dr Bethne Hart	5	7
Ms Karen Hay*	7	7
Adj Professor John Kelly	7	7
Mr Bernard Rupasinghe*	7	7
Mr David Spruell	6	7
Ms Jennifer Symons*	6	7

* Commenced 1 July 2015. ^ Commenced 5 August 2015.

Executive Officer

The Nursing and Midwifery Council is supported by Margaret Cooke (RN, RM), Executive Officer, Kim Bryant (RN), Deputy Executive Officer and other staff employed by the HPCA.

Committees of Council

Section 41F of the Law provides that the Council may establish committees to assist it with the exercise of its functions. Members of committees need not be Council members. The Nursing and Midwifery Council was supported by the following committees.

The Strategic Management Committee met on five occasions. The Committee provides strategic oversight of the Council's activities and makes recommendations arising from monitoring the Council's performance and progress against the strategic plan, developing the risk register, assisting in setting the Council's annual budget and considering legal issues that may arise.

The Education and Quality Committee met on three occasions. The role of the Committee is to provide input and oversight over the creation and management of Council projects, especially where expenditure is being made from the Council's Education and Research account. It also provides expert advice in relation to the Council's education and quality related strategic objectives.

The Newsletter Editorial Group met on four occasions. The role of the Committee is to assist in planning the content for the newsletter, to develop and ensure editorial standards are being met and to prepare information, topics and articles for publication.

The Notifications Committee met on 23 occasions. This Committee reviews all new complaints in consultation with the HCCC. The Notifications Committee also acts under Council delegation to deal with complaints concerning health, conduct and performance referred to the Council for management.

The Monitoring and Review Committee met on 11 occasions. The Committee is delegated to oversee and make decisions on behalf of the Council in relation to monitoring practitioners' compliance with orders and conditions on registration, including easing conditions imposed via the impairment provisions when it is safe to do so. Reviews requested under section152K or where significant amendment of health conditions is needed, are referred to an Impaired Registrants Panel.

The s152J Health Committee reviewed the recommendations of 140 Impaired Registrant Panels, including reviews. The Committee is delegated to act as the Council and impose conditions which have been recommended by the Panels and agreed to by the practitioners. The Committee does this following careful consideration of Impaired Registrants Panel reports.

This process allows for more timely decision-making in the Council's health pathway.

The Counselling Committee met on 12 occasions to counsel 25 practitioners. The role of the Committee is to counsel a nurse, midwife or student regarding professional standards, provide an opportunity for the practitioner or student to reflect on their actions and discuss strategies to improve their performance, conduct or behaviour. If necessary the Committee, on behalf of the Council, may provide corrective advice or a warning to the practitioner or student about their behaviour.

The Performance Interview Committee met on 32 occasions to interview 77 practitioners. This Committee was established this year to assist in the performance pathway. Its role is to interview practitioners to gather information about any issues which have been reported to the Council.

The Committee will determine whether performance, health or conduct issues may be ongoing and require further structured performance or health assessment. The Committee will discuss with practitioners their professional practice and make recommendations to the Council about the appropriate courses of action. If relevant, the Committee may also discuss the practitioner's compliance (or otherwise) with conditions on their registration.

The s150 Immediate Action Committee met on 36 occasions to consider the safe practice of 118 practitioners. The Committee is delegated to conduct immediate action inquiries when there are significant safety concerns related to the practice of a registered nurse, registered midwife or a registered student. The Committee may impose interim conditions on registration or temporarily suspend registration if satisfied it is necessary to do so for public safety or in the public interest.

Council members and non-council members participating in committees are listed below along with the committees they attend.

Council Members	Committees Attended
Adj Professor John Kelly, President	Notifications Committee, Education and Quality Committee, Strategic Management Committee, S150 Immediate Action Committee
Dr Bethne Hart, Deputy President	Notifications Committee (Chair), Strategic Management Committee, Counselling Committee, Performance Interview Committee, S150 Immediate Action Committee
Ms Kate Adams	Education and Quality Committee, Monitoring and Review Committee, S152J Health Committee
Ms Susan Anderson	S152J Health Committee, S150 Immediate Action Committee, Counselling Committee
Ms Elisabeth Black	Notifications Committee, S150 Immediate Action Committee
Ms Kate Cheney	Notifications Committee, Education and Quality Committee, Newsletter Editorial Group, S150 Immediate Action Committee, S152J Health Committee
Ms Maryann Curry	Notifications Committee, S150 Immediate Action Committee
Dr Murray Fisher	Notifications Committee, Education and Quality Committee, Newsletter Editorial Group, Performance Interview Committee
Ms Jann Gardner	Notifications Committee, Strategic Management Committee, S150 Immediate Action Committee
Ms Karyn Godier	Notifications Committee, Performance Interview Committee, S150 Immediate Action Committee
Professor lain Graham	Education and Quality Committee, Newsletter Editorial Group, Monitoring and Review Committee, S152J Health Committee
Ms Karen Hay	Notifications Committee, Education and Quality Committee, Performance Interview Committee, S150 Immediate Action Committee
Mr Bernard Rupasinghe	Notifications Committee, S150 Immediate Action Committee, Performance Interview Committee
Ms Jennifer Symons	Education and Quality Committee, Newsletter Editorial Group, Monitoring and Review Committee, S152J Health Committee
Mr David Spruell	Strategic Management Committee, S150 Immediate Action Committee, Performance Interview Committee

Non-Council Members	Committees Attended
Tania Andrews	Performance Interview Committee
Marie Clarke	Counselling Committee, Performance Interview Committee, S150 Immediate Action Committee
Sue Dawson	Monitoring and Review Committee
Letetia Gibbs	Performance Interview Committee
Valerie Gibson	Performance Interview Committee
Margo Gill	Counselling Committee, Performance Interview Committee, S150 Immediate Action Committee
Monica Hogan	Performance Interview Committee
Sue Kennedy	Counselling Committee, Performance Interview Committee
Nick Miles	Monitoring and Review Committee
Rebecca Roseby	Counselling Committee, Performance Interview Committee
Dee Sinclair	Performance Interview Committee
Helen Stirling	Counselling Committee, Performance Interview Committee
Frances Taylor	Performance Interview Committee
Zena Wilson	Counselling Committee, Performance Interview Committee

Regulatory Committees and Panels

Part 8 of the Law prescribes the committees and panels that support the Council in undertaking its regulatory activities. They include, Impaired Registrants Panels and Performance Review Panels.

Impaired Registrants Panel

The Council may establish Impaired Registrants Panels (IRPs) to deal with matters concerning nurses or midwives who suffer from a physical or mental impairment which affects, or is likely to affect, their capacity to practise.

An IRP is non-disciplinary and aims to assist nurses and midwives to manage their impairment while remaining in professional practice as long as this poses minimal risk to the public. The IRP's role is to inquire into and assess the matter, obtain reports and other information from any source it considers appropriate and to make recommendations to the Council.

The IRP may counsel the nurse or midwife or, on the recommendation of the IRP, the Council may provide counselling, impose conditions on registration, or suspend the registration for a period if the Council is satisfied the nurse or midwife, or student has voluntarily agreed to the conditions or suspension.

Performance Review Panel

If a performance assessment indicates that the professional performance of a nurse or midwife is unsatisfactory, the Council may decide to refer the matter to a Performance Review Panel (PRP). The role of the PRP is to review the practitioner's professional performance by examining the evidence placed before it to establish whether his/her practice meets the standard reasonably expected of a nurse or midwife of 'an equivalent level of training or experience' at the time of the review.

Where deficiencies are identified the nurse or midwife is required to undertake remediation tailored to his/her individual needs. This may entail attending courses, practising under supervision or engaging in additional continuing professional development. Conditions on practice may also be required to ensure the public is protected while the nurse or midwife is undertaking remediation.

Professional Standards Committee

Complaints which may lead to a finding of unsatisfactory conduct are usually referred to a Professional Standards Committee (PSC). A PSC takes an investigatory approach rather than a strict adversarial format. Unlike a court, a PSC is not bound to observe the strict rules governing the admissibility of evidence and can inform itself on a matter in a manner it deems appropriate within its powers.

A PSC may do one of more of the following.

- Caution or reprimand the practitioner
- Direct that conditions relating to the practitioner's practice of his/her profession be imposed on his/her registration
- Order the practitioner to seek and undergo medical or psychiatric treatment or counselling
- Order the practitioner to complete an educational course specified by a PSC
- Order that the practitioner report on his/her practice as required
- Order the practitioner to seek and take advice in relation to the management of his/her practice.

If it becomes apparent to the PSC members that the matter may warrant cancellation of the practitioner's registration, then the inquiry is discontinued and the matter referred to a Tribunal.

NSW Civil and Administrative Tribunal (NCAT)

NCAT deals with serious complaints that may lead to suspension or cancellation of registration, appeals against Council decisions regarding disciplinary matters and appeals against decisions of the National Board in relation to registration matters. Professional and community members are nominated by the Council for appointment by NCAT.

Matters may be referred to NCAT by the Council or the HCCC Director of Proceedings. Hearings are generally open to the public unless otherwise directed by NCAT.

Professional and Community Membership of Committees and Panels

Т

The Nursing and Midwifery Council was supported by Impaired Registrant Panels, Performance Review Panels, Professional Standards Committees and NCAT during the reporting period with membership as follows.

Appointed Member	Tribunals, Committees and Panels Attended
Christine Anderson	Impaired Registrants Panel
Derek Anderson	Performance Review Panel, Tribunal
Kurt Andersson-Noorgard	Impaired Registrants Panel, Tribunal, Professional Standards Committee
Tania Andrews	Impaired Registrants Panel
Elizabeth Angel	Impaired Registrants Panel
Deborah Armitage	Impaired Registrants Panel
Karen Arnold	Impaired Registrants Panel
Belinda Baker	Professional Standards Committee
Deborah Beaumont	Tribunal
David Bell	Tribunal
Catherine Berglund	Performance Review Panel, Tribunal
Anita Bizzotto	Impaired Registrants Panel, NCAT
Richelle Bond	Impaired Registrants Panel
Lucy Burns	Impaired Registrants Panel, Professional Standards Committee
Leeanne Carlin	Impaired Registrants Panel, Tribunal
Brett Clarke	Tribunal
Elizabeth Collier	Tribunal
Jane Cotter	Impaired Registrants Panel
Kathryn Crews	Impaired Registrants Panel
Amanda Currie	Impaired Registants Panel
Janette Curtis	Impaired Registrants Panel
Robert Davis	Tribunal
Sue Dawson	Impaired Registrants Panel
Michael Diamond	Impaired Registrants Panel
Janice Dilworth	Impaired Registrants Panel, Tribunal
Kathleen Dixon	Impaired Registrants Panel, Tribunal
Carole Doyle	Impaired Registrants Panel
Jennifer Evans	Impaired Registrants Panel, Performance Review Panel
Kelly-Anne Eyre	Impaired Registrants Panel, Tribunal, Professional Standards Committee

Appointed Member (continued)	Tribunals, Committees and Panels Attended (continued)
Anne Flanagan	Impaired Registrants Panel, Tribunal
Julie Flood	Impaired Registrants Panel
Mary-Anne Friend	Impaired Registrants Panel
Valerie Gibson	Impaired Registrants Panel, Tribunal, Professional Standards Committee
Annette Gray	Professional Standards Committee
Linda Gregory	Impaired Registrants Panel
Scott Hillsley	Impaired Registrants Panel
Monica Hogan	Performance Interview
Peter Hooker	Tribunal
Lynette Hopper	Impaired Registrants Panel
Julie Hughes	Professional Standards Committee
David Jackett	Tribunal
Allison Jarrett	Impaired Registrants Panel
Adam Johnston	Tribunal, Professional Standards Committee
Maria Kelly	Tribunal
Susan Kennedy	Impaired Registrants Panel, Tribunal
Maxwell Kettle	Impaired Registrants Panel
Lea Kirkwood	Impaired Registrants Panel
Jacqueline Kitschke	Tribunal
Beth Kotze	Impaired Registrants Panel
Robert Lorschy	Tribunal
James Lyon	Tribunal
Melissa Maimann	Impaired Registrants Panel
Kerry Mawson	Impaired Registrants Panel
Maureen Mcgovern	Impaired Registrants Panel
lan Mcqualter	Impaired Registrants Panel, Performance Review Panel, Professional Standards Committee
Rebekkah-Jane Middleton	Impaired Registrants Panel
Barbra Monley	Impaired Registrants Panel, Tribunal
Suellen Moore	Impaired Registrants Panel
Patricia Morey	Impaired Registrants Panel
Joanne Muller	Professional Standards Committee
Jennifer O'Baugh	Impaired Registrants Panel, Professional Standards Committee,
Rosie O'Donnell	Performance Review Panel, Performance Review Panel, Tribunal

Τ

New South Wales Health Professional Councils Annual Report 2016

Appointed Member (continued)	Tribunals, Committees and Panels Attended (continued)
Mark Paul	Professional Standards Committee
Alison Reid	Impaired Registrants Panel
Leigh Schalk	Impaired Registrants Panel, Performance Review Panel, Professional Standards Committee
Shirley Schulz-Robinson	Impaired Registrants Panel
Christine Selkirk	Impaired Registrants Panel, Performance Review Panel, Tribunal, Professional Standards Committee
Karen Sherwood	Impaired Registrants Panel, Professional Standards Committee
Deirdre Sinclair	Impaired Registrants Panel, Performance Review Panel,
Sheree Smiltnieks	Impaired Registrants Panel, Performance Review Panel
Babette Smith	Professional Standards Committee
Helen Stirling	Impaired Registrants Panel
Frances Taylor	Performance Review Panel
Saw Toh	Impaired Registrants Panel
Gerda Tolhurst	Impaired Registrants Panel, Performance Review Panel, Tribunal, Professional Standards Committee
Anne Walsh	Tribunal
Ronald Wilson	Impaired Registrants Panel
Zena Wilson	Impaired Registrants Panel
Choong-Siew Yong	Impaired Registrants Panel

Meetings and Conferences

The Nursing and Midwifery Council was represented at the following meetings and conferences during the reporting period.

Meetings and conferences	Attendance
Council Presidents' Forum	Adj Professor John Kelly (President) Dr Bethne Hart (Deputy President)
HPCA Audit and Risk Committee	Mr David Spruell (Council member) Ms Maryann Curry (Council member)
Sydney University - 21 July 2015 Presentation: Managing Notifications - a shared responsibility.	Kim Bryant (Deputy Executive Officer)
Shalom Aged Care - 8 August 2015 Presentation: The role of the Council and shared responsibility for the management patient safety.	Margaret Cooke (Executive Officer)
AHPRA panel members workshop – online program for panel members	Margaret Cooke (Executive Officer) and Melinda Weir (Project and Policy Officer)
Day Surgery Nurses Association Conference - 29 August 2015 Role of the Council – a shared responsibility.	Kim Bryant (Deputy Executive Officer)
Meeting with the Acting Chief Nursing and Midwifery Officer and Local Health District Directors of Nursing - 18 September 2015 Presentation: NMC strategic plan and the performance pathway.	Margaret Cooke (Executive Officer)
Performance Pathway and Performance Assessor Workshop – 30 September 2015 To develop knowledge and skills in relation to the Council's performance pathway and issues in relation to performance assessment in clinical settings.	Local Health District Nursing and Midwifery Educators: Sally Sutherland Fraser and Menna Davis NMC staff: Margaret Cooke (Executive Officer) Kim Bryant (Deputy Executive Officer) Melinda Weir (Policy and Project Advisor) Elizabeth Bailey (Policy and Project Advisor)
Assessment Symposium and Panel discussion - 30 September 2015 Presentation by Professor Nair: Work based assessment. Presentation by Margaret Cooke (Executive Officer): Management of performance cases by the Council. Ian McQualter (Professional Member on Performance Review Committees) and Menna Davis (Nurse Educator and Performance Assessor) also participated on the discussion panel.	A broad range of Council stakeholders participated in the Symposium

Meetings and conferences (continued)	Attendance (continued)
Operating Theatres Association - 31 October 2015 Role of the Council – a shared responsibility.	Melinda Weir (Policy & Project Advisor)
Shalom Aged Care - 12 November 2015 Presentation: The role of the Council and shared responsibility for the management patient safety.	Margaret Cooke (Executive Officer)
 NMBA Conference November 2015 The objectives of the conference were to: further strengthen partnerships, alignment and consistency use data to improve risk based decision making embed the regulatory principles to support robust and consistent decision making consistency in the management of health impairment, and identify future challenges for nursing and midwifery regulation. The following papers were presented by NMC staff and Counicl members: When and why new graduate nurses get into trouble – NSW experience (Kim Bryant, Dr Bethne Hart) Trends in Notifications – Mental Health (Margaret Cooke). 	NMC Council Members: Dr Bethne Hart (Deputy President) Ms Kate Cheney Ms Maryann Curry Mr David Spruell Ms Karen Hay Ms Susan Anderson Professor lain Graham Ms Kate Adams Ms Kate Adams Ms Katryn Godier NMC Staff: Margaret Cooke (Executive Officer) Kim Bryant (Deputy Executive Officer) Melinda Weir (Policy and Project Advisor) Elizabeth Bailey (Policy and Project Advisor) Annmaree Nicholls (Professional Officer)
NMBA Workshop and Consultation - 10 February 2016 Codes of conduct for nurses and the Codes of conduct for Midwives.	NMC Council Members: Dr Bethne Hart (Deputy President) Ms Kate Cheney
Meeting with the Council of Deans - 16 February 2016 Objectives: Outline the Council's processes for the management of complaints about students, discuss mandatory reporting.	Council of Deans NSW : Paul Race (Avondale College) Angela Brown (University of Wollongong) Amanda Johnson (Australian Catholic University) Danielle Latham (Western Sydney University) Iain Graham (Southern Cross University) Donna Walters (Sydney University) NMC Staff: Margaret Cooke (Executive Officer) Kim Bryant (Deputy Executive Officer) Carly Barbuto (Communications Officer) Annmaree Nicholls (Professional Officer)
NMBA stakeholder Forum - 24 February 2016	NMBA: Lynette Cusack (Chair NMBA) Tanya Vogt (Executive Officer NMBA) NMC Council Members: Adj Professor John Kelly (President) Dr Bethne Hart (Deputy President) NMC Staff: Margaret Cooke (Executive Officer)

Meetings and conferences (continued)	Attendance (continued)
Meeting with South Eastern Sydney Local Health District - 15 March 2016 To discuss their performance review framework which is used when performance concerns are identified about a registered practitioner.	ESLHD: Ms Kim Olesen (District Director Nursing & Midwifery) Ms Margaret Martin (Acting Nurse Manager – Development of Practice & Workplace Capabilities) Ms Robin Girle (Workplace Capabilities Facilitator) NMC Staff: Margaret Cooke (Executive Officer) Robyn Weller (Professional Officer) Melinda Weir (Policy and Project Advisor)
Meeting with the Acting Chief Nursing and Midwifery officer and Local Health District Directors of Nursing - 29 April 2016 Presentation: Update on the performance pathway.	Margaret Cooke (Executive Officer)
Dubbo Base Hospital – 09 May 2016 Royal Prince Alfred Hospital - 10 May 2016 Joint presentation with the Nursing and Midwifery Board of Australia. Professional Standards and how they are used by the Council in the assessment of Notifications.	Margaret Cooke (Executive Officer)
Meeting with the Nurses and Midwives Association NSW - 25 May 2016 Review of the law, management of health performance and conduct cases.	NMA NSW: Kate Adams (Manager Professional Services) Matt Byrne (Legal Officer) Katherine Doust (Legal Officer) Laura Toose (Legal Officer) Stephanie Le (Para legal) NMC Staff: Margaret Cooke (Executive Officer) Kim Bryant (Deputy Executive Officer) Annmaree Nicholls (Professional Officer) Melinda Weir (Policy and Project Advisor)
Meeting with AHPRA NSW – 30 May 2016 Management and transfer of cases to the Council.	AHPRA: Catherine Smith Peter Freeman NMC Staff: Margaret Cooke (Executive Officer)
Meeting with Health Education and Training Institute – 30 May 2016 Access to learning modules by practitioners who have had complaints.	HETI: Bernard Deady Farhoud Salimi Lynda Mary Wood NMW/HPCA staff: Margaret Cooke (Executive Officer) Melinda Weir (Policy and Project Advisor) Anne Deans (HPCA Manager Corporate Governance)

Meetings and conferences (continued)	Attendance (continued)
NMBA Workshop and Consultation – 7 to 8 June 2016 Codes of conduct for nurses and the Codes of conduct for Midwives.	NMC Council Members: Dr Bethne Hart (Deputy President) Ms Katchen Cheney NMC Staff: Margaret Cooke (Executive Officer)
Central Coast Local Health District Nurse Managers Workshop - 09 June 2016 Presentation: Role of the Council and supervision a shared responsibility.	Margaret Cooke (Executive Officer) Elizabeth Bailey (Policy and Project Advisor)
Meeting Clinical Excellence Commission - 16 June 2016	CEC: Carrie Marr NMC Staff: Margaret Cooke (Executive Officer) Elizabeth Bailey (Policy and Project Advisor) Catherine Turner (Policy and Project Advisor)
NSW Enrolled Nurse Forum - 17 June 2016 Shared responsibilities	Margaret Cooke (Executive Officer)
Drug and Alcohol Clinical Services Hunter New England Local Health District - 21 June 2016 Presentation: What Councils do and The Law.	Annmaree Nicholls (Professional Officer) Carly Barbuto (Communications Officer)
Meeting with Health Education and Training Institute, eHealth and Health Share - 21 July 2016 Access to learning modules by practitioners who have had complaints.	Helen Mastorides Michael Tjiputra Amrish Kumar Jaymie Knight NMC Staff: Melinda Weir (Policy and Project Advisor) HPCA: Rachelle Wallace (Administration Manager)
Meeting with the Chair and Executive officer of the Nursing and Midwifery Board of Australia - 16 September 2016 Update on the NMBA and Council projects.	NMBA: Lynette Cusack (Chair NMBA) Tanya Vogt (Executive Officer NMBA) NMC Council Members: Adj Prof John Kelly (President) NMC Staff: Margaret Cooke (Executive Officer)
Meeting with AHPRA staff – Codes of Conduct	AHPRA: Petrina Halloran Saz Newbery NMC Staff: Margaret Cooke (Executive Officer)

Overseas Travel

Overseas travel during the reporting period included attendance by the Council President at the World Health Professional Regulation Conference in Geneva held from 18-19 May 2016. The Conference brought together 125 professionals and administrators who deal with the regulation of health professionals in their respective jurisdictions. The Conference was organised by the World Health Professions Alliance which has as its members the International Council of Nurses, International Pharmaceutical Federation, World Confederation of Physical Therapy and the World Medical Association. The Conference chose three themes as a focus for its sessions:

- 1. Challenges facing health professional regulation
- 2. Lessons from the evolution of competence based approaches to regulatory functions
- Contrasting regulatory models to promote best practices in regulatory governance and performance.

Conclusions from the conference included the following.

- Workforce shortages continue to be a global challenge. Practice settings in many countries are pressed to deliver services in a competent manner, often by staff that are not prepared and reviewed with sufficient certainty. This occurs in circumstances of reduced absolute numbers of carers required to deliver safe levels of care.
- Pressures to maximise the numbers of health professionals within the workforce create an
 ongoing strain between the needs of government to meet workforce numbers and regulators
 (on behalf of governments and communities) to oversee the provision of safe levels of care.
 This is particularly challenging in respect to the assessment of internationally qualified health
 professionals and particularly taking into account the relevant language standards for a
 jurisdiction, for example in the European Union.
- The challenge for Australia is that the government pendulum can swing from light touch regulation with minimum intervention and restrictions, which is more market driven and innovative, to concerns that the regulatory force is insufficient and greater restrictions and accreditation is required. Finding the balance for safe care and the regulatory processes that are effective and provide the least restrictions must be informed by regulatory research.

Council Communications

The Council website is the principal medium used for communicating information to nurses and midwives, employers, educational institutions, students and the community. The website is updated regularly and includes links to other key bodies in the National Registration and Accreditation Scheme.

The Council continues to produce three electronic newsletters each year, which are distributed to nurses and midwives with a principal place of practice in NSW. The newsletters provide:

- updates on Council events and key dates for the nursing and midwifery profession
- case studies to explore key practice issues
- details about Council processes, including information on how and when to make complaints.

Further information is available at www.nursingandmidwiferycouncil.nsw.gov.au.

The Council plans to review and improve its website in the next financial year.

Other Council Activities

Council members and staff have improved their engagement with various stakeholders and have been asked to speak at numerous events and contribute to policy development with the National Board and AHPRA.

The Council continues to hold focus groups and educational seminars for stakeholders. The Council held a forum for nursing and midwifery educators about performance assessments ahead of an evening seminar in September 2015. The seminar was attended by a wide range of stakeholders, on 'what makes a good performance assessment' and provided challenging ideas about best practice methodologies.

Remuneration

Remuneration for members of the Council is as follows:

President	\$2,336 per annum
Deputy President and Members	\$1,752 per annum

In addition, Council members receive sitting fees for immediate action proceedings and attendance at committee meetings and other regulatory activities if held on a day other than the Council meeting. Council members are reimbursed for expenses incurred when travelling on official business at Council direction.

Members of panels and tribunals also receive remuneration and reimbursement of expenses.

Financial Management

The Nursing and Midwifery Council's accounts performance as reported in the Financial Statements was as follows.

Accounts Performance 2015/16	\$
Revenue	7,906,471
Operating expenditure	6,453,649
Gain/(loss) on disposal	3,203
Net result	1,456,025
Net cash reserves (cash and cash equivalents minus current liabilities)	5,857,603

* Included in the net cash reserves is Education and Research bank account balance of \$486,305.

The Nursing and Midwifery Council's budget for the period 1 July 2016 to 30 June 2017 is as follows.

Budget 2016/17	\$
Revenue	7,604,315
Operating expenditure	8,698,464
Net result	(1,094,149)

Full financial statements are presented in Part 3 of this report 'Financial Statements for NSW Health Professional Councils'.