SUBMISSION TO THE PUBLIC CONSULTATION ON THE DRAFT NATIONAL NURSING AND MIDWIFERY DIGITAL HEALTH CAPABILITY FRAMEWORK

2 APRIL 2020

Australian
Nursing &
Midwifery
Federation

PREAMBLE

The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of more than 280,000 nurses, midwives and carers across the country.

Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.

Our strong and growing membership and integrated role as both a professional and industrial organisation provide us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.

Through our work with members we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.

INTRODUCTION

The ANMF welcomes the opportunity to provide feedback to the Draft National Nursing and Midwifery Digital Health Capabilities Framework (the framework).

Digital technology is transforming and improving healthcare outcomes in Australia and is an integral part of the delivery of efficient and effective health care. As the largest professional cohort of registered health practitioners in Australia, nurses and midwives play a vital role in digital health. They have embraced and incorporated the use of digital health information management and technology into care delivery and are now the largest users and enablers in influencing any change to the digital health platform.

Ongoing evolution of digital health information systems will improve the availability and quality of health information. Thus technical competence is now a fundamental element of nursing and midwifery practice.[1]

The National Digital Health Strategy, developed by the Australian Digital Health Agency, outlines clear objectives for the health workforce, to be achieved by 2022.[2] These objectives require the health workforce to be confident and efficient in using digital technology and to understand the benefits of digital health.

The ANMF is a long-standing supporter for progressing the digital health environment in Australia. We recognise the capacity for digital technology to transform and streamline health, maternity and aged care and the impact it has already had in improving health outcomes.

The ANMF understands the importance of the nursing and midwifery workforce being engaged, experienced and proficient at managing digital health in their care delivery on a day to day basis. However, our members identify there is still much work to be done in order for connected digital health systems to better enable them to safely deliver care. Some of the issues our members have raised include:

- Digital health information systems, implementation and processes are not uniform or consistent across the entire range of settings in which nurses and midwives work, impeding their capacity to deliver effective and efficient care;

- There is insufficient allocation of resources to facilitate nurses and midwives to properly perform their duties, in particular when the nurse or midwife is working remotely from the health or aged care facility;

- A lack of involvement of nurses and midwives in the planning, implementation and evaluation of any change to digital health information management systems;

- There are inadequate resources allocated for the appointment of nurse and/or midwife informaticians who have the appropriate skills to manage the change process associated with the introduction of clinical digital health information systems for nursing and midwifery;

- An appropriate interface between nursing, midwifery and other health and aged care facility information systems to enhance continuity of care, reduce duplication of data input, maximise the use of data, and ensure the quality and integrity of data is lacking; [3] and

- There is a lack of recognition and inclusion of consistent nursing and midwifery standardised language, such as the International Classification of Nursing Practice, which provides a framework for sharing data about nursing and midwifery practice enabling comparisons across settings.

It is essential that these issues are adequately addressed to maximise the potential benefits of digital health. The ANMF understands that addressing these matters are outside the remit of this project, nonetheless they need to be strongly considered for the development of the digital framework for nurses and midwives.

The objective of the framework is to *define the knowledge, skills and attitudes required for professional practice in the digital health era.* [4] Health care environments' use of digital technology is changing at a steady pace and the ANMF is supportive of the framework being used as a continuing professional development tool. The framework needs to assist nurses and midwives to understand their current level of digital capability and where they may need or want to progress. The ANMF is therefore supportive of the framework's statement that it *is intended to enable and inform and is not intended to be adopted as a professional standard.*

Further, it is essential that any digital health framework acknowledges the variability nurses and midwives currently experience in gaining access to digital health technologies. There are ANMF members who have used only digital technology in their work, others who've used a mixture of digital and non-digital technologies and many who still use minimal digital technologies in delivering care. This variability occurs as health services work through adopting and adapting to new digital health technologies. The majority of nurses' and midwives' digital capability levels are dependent on their employer's digital readiness and willingness to provide opportunity to enable them to access digital health. They cannot develop their digital capability if they are unable to access tools to deliver care. The ANMF therefore supports the draft framework's comment that n*urses and midwives have varying levels of digital literacy and access to digital technologies.*

Section A: Demographic Information

Where did you find out about this survey?

✓   ANMF

I am responding to this survey on behalf of:

✓   An Organisation

Section A: My Organisation Details

Name of Organisation *(optional)*

Australian Nursing and Midwifery Federation

Which of the following best describes your organisation's main workplace setting?

✓   Other, Please specify: Professional and Industrial Organisation.

Which of the following best describes your organisation's main location?

☐   Metropolitan

☐   Rural

☐   Remote

✓   Other: Please specify: ANMF members work across all geographical locations

What is state or country of your main workplace setting?

☐   Australian Capital Territory

☐   New South Wales

☐   Northern Territory

☐   Queensland

☐   South Australia

☐   Tasmania

☐   Victoria

☐   Western Australia

☐   National organisation

✓   Other: Please specify: ANMF members work across all states and territories

Digital Health Awareness

The following question is to gain some understanding of your current awareness of digital health.

Which of the following statements best describes your organisation's current digital health capability?

✓ My organisation is moving towards integrating digital health into many aspects of the way we do business and has some awareness of the needs of employees in relation to digital health readiness.

Section A: My Individual Details

What is your professional/educational background?

☐ Clinical – Nursing

☐ Clinical – Midwifery

☐ Student – Nursing

☐ Student – Midwifery

☐ Non-clinical - clinical support, research, education, etc.

✓ Other: Please specify: ANMF members work across all clinical and non-clinical settings

Professional Job Role – please select the one which best describes your current role or predominant experience

✓ Other: Please specify: Federal Secretary – Registered nurse

Which of the following best describes your organisation's main workplace setting?

✓ Other (please specify) :ANMF members work across all health settings

Which of the following best describes your organisation's main location?

✓ Other (please specify) : National organisation

What is the state or country of your main workplace setting?

✓ Other (please specify) : National organisation

Section B: Feedback on the 5 Domains

The draft framework is made up of 5 domains of knowledge:

- **Domain 1 – Digital Professionalism: Professional standards are maintained in the digital environment.**
- **Domain 2 – Leadership and Advocacy: Digital health leadership and advocacy supported by clear policy.**
- **Domain 3 – Data and Information Quality: Data quality must be present.**
- **Domain 4 – Information-enabled Care: Care must be supported by rigorous data analysis and critical appraisal.**
- **Domain 5 – Technology: Technology needs to be understood and used appropriately.**

We are seeking your feedback on these 5 Domains and how they represent the digital health capabilities for nursing and midwifery practice.

Please select your response to the following statements about the draft framework.

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
The five domains as presented in the draft framework are easily understood.	✓	☐	☐	☐	☐
The five domains will help nurses and midwives understand the key digital health areas in their practice.	✓	☐	☐	☐	☐
The five domains are comprehensive and capture the key digital health capabilities for nurses and midwives.	☐	✓	☐	☐	☐
It is clear how the draft framework complements other existing professional frameworks.	✓	☐	☐	☐	☐

Please provide a few comments that explain your answers to the above statements.

The comprehensive evidence-based framework of the five domains provides a simple way to describe complex, interrelated concepts for nurses and midwives managing digital health in their roles.

Figure 1 (p.3) of the consultation paper provides an important visual presentation of person-centred care being core to the role of nurses and midwives in digital health. The outer circle of the diagram also provides important connections with the five domains, that being, the workplace setting, role and professional standards.

As mentioned earlier in this response, the ANMF supports the framework being used as a continuing professional development tool, which may complement other existing professional frameworks. It should not be used as a professional standard, nor should it be used by an employer as a punitive measure. The framework needs to be used to enable nurses and midwives to complete a professional self-assessment of their digital capability and to reflect on where further development could occur.

Section C: Feedback on the Sub-Domains (Domain 1 to 2)

Please select your response to each of the following statements about the sub-domains in the draft framework.

Domain 1 - Digital Professionalism: *Professional standards are maintained in the digital environment.*

The sub-domains are clear and make sense:

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
Sub-domain 1.1 **Professional Development** - Nurses and midwives use digital tools to achieve and maintain professional development requirements.	☐	✓	☐	☐	☐
Sub-domain 1.2 **Procedural Knowledge** - Nurses and midwives use of digital tools in healthcare aligns with procedural, policy, legal and ethical requirements.	☐	✓	☐	☐	☐
Sub-domain 1.3 **Digital Identity** - Nurses and midwives use digital tools to develop and maintain their online identity and reputation.	☐	✓	☐	☐	☐

Please provide a few comments that explain your answers to the above statements.

Professional standards are maintained in the digital environment

The term *'traditional'* used in the sentence to describe digital professionalism should be deleted. Professional standards such as the Nursing and Midwifery Board of Australia's standards for practice and the code of conduct are not considered 'traditional'. They are the current requirements. Nurses and midwives using digital health need to maintain these standards within all areas of their practice.

Sub-domain 1.1 Professional Development

The third point of this section refers to the Australian Health Practitioner Regulation Agency registration standards. This reference to AHPRA is incorrect and needs to be replaced with the **Nursing and Midwifery Board of Australia's** registration standards.

Sub-domain 1.2 Procedural Knowledge

The fourth dot point in this sub-domain uses the word '*issues*' which should be replaced with 'inequity'. This statement should now read:

*Recognised and acts upon cultural, ethical and socioeconomicial ~~issues~~ **inequity** related to access to, and use of, health information.*

Sub-domain 1.3 Digital Identity

The ANMF notes that a nurse or midwife has a digital footprint in relation to their professional life by using digital technology as part of their work requirements. It is important that they present themselves in a way that is consistent with the relevant NMBA standards in this context as is required in all areas of practice. Further, some ANMF members' roles require them to use social media tools in their professional role to communicate with people for whom they are providing care. Again, these nurses and midwives need to ensure they comply with the relevant NMBA standards.

The line can become blurred however, when nurses and midwives are using technology such as social media in their personal time. The NMBA standards more generally apply to nurses' and midwives' practice or to behaviour that will impact their practice. Considering this, a nurse's or midwife's digital footprint out of work should not impact their professional life. Professional issues arise when the nurse or midwife, using their personal digital/social media accounts, state that they are registered while promoting opinions that maybe inconsistent with current evidence or public health policy. For example. the NMBA released a *Position statement on nurses, midwives and vaccination* in October 2016, outlining their concerns relating to a number of nurses and midwives promoting anti-vaccination statements[5] and reminded nurses and midwives about their obligations under the National Law, particularly the *Code of conduct*[6] and the *Guidelines for advertising regulated health services.*[7] Some nurses and midwives navigate this space easily and others find it challenging.

Considering the previous commentary, the ANMF supports the following two statements included in the consultation paper:

- *Understands the benefits and risks of different ways of presenting oneself online, both professionally and personally, and*
- *Understands that online posts can stay in the public domain and contribute to an individual's digital footprint.*

The ANMF does not however support the fourth statement in this section which states:

- *Uses digital footprint to showcase skills, education and professional experience.*

As highlighted earlier nurses and midwives need to consider the benefits and risks of presenting themselves online. Further, they need to consider their role and how presenting themselves online would personally affect them. Having a statement in the framework that suggests nurses and midwives are required to have a digital footprint to showcase their skills, education and professional experience if they are to be self-assessed as proficient is incorrect as it doesn't enable informed choice. This statement should be deleted.

Domain 2 – Leadership and Advocacy: Digital health leadership and advocacy supported by clear policy.

The sub-domains are clear and make sense:

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
Sub-domain 2.1 **Patient Digital Health Advocacy** - Nurses and midwives advocate for and educate patients/consumers in relation to how their information is accessed and used.	✔	☐	☐	☐	☐
Sub-domain 2.2 **Leadership Within Organisation** - Nurses and midwives are visible and active players in digital health decision making within their organisations.	✔	☐	☐	☐	☐
Sub-domain 2.3 **Digital Leadership in Nursing and Midwifery Professions** - Nurses and midwives provide active leadership to ensure the professions have input into national digital health decisions.	✔	☐	☐	☐	☐

Please provide a few comments that explain your answers to the above statements.

The ANMF do not have anything to add to this section at this time.

Section C: Feedback on the Sub-Domains (Domain 3 to 4)

Please select your response to each of the following statements about the sub-domains in the draft framework.

Domain 3 - Data and Information Quality: Data quality must be present.

The sub-domains are clear and make sense:

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
Sub-domain 3.1 **Data Capture** - Nurses and midwives play a crucial role in the capture of complete, timely and accurate data.	✓	☐	☐	☐	☐
Sub-domain 3.2 **Data Management** - Nurses and midwives play a pivotal role in the processes of ensuring the accessibility, reliability, and timeliness of data within healthcare environments.	☐	✓	☐	☐	☐
Sub-domain 3.3 **Data Lifecycle** - Nurses and midwives are able to recognise that data have different uses or usefulness at various points within healthcare.	✓	☐	☐	☐	☐

Please provide a few comments that explain your answers to the above statements.

3.2 Data Management

In the first point under this section, the term *basic* needs to be deleted from the statement. This deletion will enable the statement to be relevant to all capability levels of the framework. The statement should now read as follows: *understands informatics and digital health terminology.*

Domain 4 – Information-enabled Care: **Care must be supported by rigorous data analysis and critical appraisal.**

The sub-domains are clear and make sense:

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
Sub-domain 4.1 **Data Sharing** - Nurses and midwives appropriately use and share digital data with other healthcare professionals.	✓	☐	☐	☐	☐
Sub-domain 4.2 **Information Creation and Use** - Nurses and midwives use data from a wide range of sources to create information for themselves and other healthcare providers and users to implement, support and evaluate care.	✓	☐	☐	☐	☐
Sub-domain 4.3 **Extending Practice** - Nurses and midwives use information to develop, extend and support evidence based care in critical decision making.	✓	☐	☐	☐	☐

Please provide a few comments that explain your answers to the above statements.

The ANMF do not have anything to add to this section at this time.

Section C: Feedback on the Sub-Domains (Domain 5)

Please select your response to each of the following statements about the sub-domains in the draft framework.

Domain 5 – Technology: Technology needs to be understood and used appropriately.

The sub-domains are clear and make sense:

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
Sub-domain 5.1 **Available/Appropriate Technologies** - Nurses and midwives are able to identify and recommend appropriate digital technologies for their environment and use these where available.	✓	☐	☐	☐	☐
Sub-domain 5.2 **Information Systems Governance** - Nurses and midwives are able to implement in practice policy and procedures that govern information system use in their workplace.	✓	☐	☐	☐	☐
Sub-domain 5.3 **Problem Solving** - Nurses and midwives are able to use digital technologies to support problem solving in practice.	✓	☐	☐	☐	☐

Please provide a few comments that explain your answers to the above statements.

The ANMF does not have anything to add to this section at this time.

Section D: Feedback on the Capability Statements

Formative level – **This level reflects nurses and midwives who are becoming aware of the move toward digital health and the implications for practice.**

Intermediate level – **This level reflects nurses and midwives who are developing increased confidence, knowledge, skill and capacity in the use of digital health in their practice.**

Proficient level – **This level reflects nurses and midwives who are assuming leadership in the use and championing of digital health within both practice and the broader nursing/midwifery profession.**

Please select your response to each of the following statements about the capability levels.

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
The separation of capabilities into the three levels of formative, intermediate and proficient makes sense.	✓	☐	☐	☐	☐
The **Formative level** best reflects nurses and midwives who are becoming aware of the move toward digital health and the implications for practice.	☐	✓	☐	☐	☐
The **Intermediate level** best reflects nurses and midwives who are developing increased confidence, knowledge, skill and capacity in the use of digital health in their practice.	✓	☐	☐	☐	☐
The **Proficient level** best reflects nurses and midwives who are assuming leadership in the use and championing of digital health within both practice and the broader nursing/midwifery profession.	✓	☐	☐	☐	☐

Please provide a few comments that explain your answers to the above statements.

The ANMF supports the three levels of capability for the framework and considers that it is important for nurses and midwives to be able to recognise where they are placed in each of the domains. It is also important to note that nurses and midwives may move between levels depending upon their workplace, for example a nurse may identify his/herself as proficient at one health service, but only intermediate at another. This could be due to the level of access to digital technology or digital systems being different between health services.

Formative level – This level reflects nurses and midwives who are becoming aware of the move toward digital health and the implications for practice.

The ANMF suggests that the wording in this statement is amended as this level should describe nurses and midwives who are starting to use and understand digital health and its impact on practice not just that they are becoming aware of the move toward digital health.

The new wording should be as follows:

Formative level – This level reflects nurses and midwives who are beginning **to use and understand digital health and how it impacts** practice.

Capability Statements

The table at the end of the draft framework document (page 19 to 32) contains capability statements for each sub-domain and which depict the anticipated growth of knowledge, skills and abilities in each capability area. If you have feedback on any of those statements please provide them below.

Section E: Use and value of the Framework to Nurses and Midwives

The framework could be used as a resource to guide nurses and midwives, employers and educators in their workforce and professional development planning regarding digital health capabilities. It is therefore important to gather your feedback as to the potential use and value of the framework to the nursing and midwifery workforce.

Please select your response to each of the following statements about the draft framework:

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree	Unsure
The framework has the potential to be useful to nurses and midwives.	☐	✔	☐	☐	☐	☐
The framework is useful in a range of specialised roles and different settings.	☐	✔	☐	☐	☐	☐
The framework is useful for individuals to self-assess their digital health capabilities.	☐	✔	☐	☐	☐	☐
The framework is useful for employers to identify individual capability of nurses and midwives.	☐	✔	☐	☐	☐	☐
The framework provides clarity that will allow me to assess my level of digital health capability at different points in my career.	☐	✔	☐	☐	☐	☐
The framework would add value to digital health training in my workplace.	☐	✔	☐	☐	☐	☐
The framework is useful for health services to identify organisation-wide capability.	☐	✔	☐	☐	☐	☐

Please share your suggestions on how the draft framework could be improved.

The ANMF suggests that an important addition to the framework would be a set of resources or tools that will enable nurses and midwives to better understand the content of the framework. The resources could include simple explanations of some of the technical language used in the framework such as, digital lifecycle, digital health terminology or informatics. If a nurse or midwife is at the formative capability level of the framework, they will not necessarily have a clear understanding of these terms.

Further, it would be useful for exemplars to be provided showing how different nurses and midwives use the framework. This could include case studies of nurses and midwives showing their scope of practice, access to digital health and their self-evaluation against the framework.

What concerns do you have, if any, about the draft framework?

Implementation

To enable this framework to be useful to nurses and midwives it will need to be implemented effectively. This may involve the following:

- A communication campaign to make nurses and midwives aware of the framework;
- A communication campaign for health services to promote the framework to nurses and midwives;
- Easily accessible education and resources for nurses and midwives to assist with using the tool
- Evaluation and feedback

It is important to note, effective implementation of the framework will only be achieved if there is sufficient funding allocated to increasing awareness and education about the framework and ongoing engagement of all key stakeholders.

Thank you!

[1]Australian Nursing and Midwifery Accreditation Council position statement Health informatics and health technology –an explanatory note (2014)

[2] National Digital Health Strategy (2017). Available at https://conversation.digitalhealth.gov.au/sites/default/files/adha-strategy-doc-2ndaug_0_1.pdf

[3] Australian Nursing and Midwifery Federation (2018) Digital health.
http://anmf.org.au/documents/policies/P_Digital_Health.pdf

[4] Australia's Digital Health Community (2020) Draft National Nursing and Midwifery Digital Health Capabilities Framework, HISA, Melbourne.

[5] NMBA (2016) Position statement on nurses, midwives and vaccination https://www.nursingmidwiferyboard.gov.au/codes-guidelines-statements/position-statements/vaccination.aspx

[6] NMBA Code of conduct https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx

[7] NMBA Guidelines: Mandatory notifications about registered health practitioners
https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Policies.aspx