

Hospital and Health Boards (Nursing and Midwifery Workload Management Standard) Notice 2026

Consultation Paper

May 2026

Purpose

The purpose of this consultation paper is to seek stakeholder feedback on the proposed Hospital and Health Boards (Nursing and Midwifery Workload Management Standard) Notice 2026 (2026 Notice) and the Nursing and Midwifery Workload Management Standard (2026 Standard).

Queensland Health is reviewing and remaking the *Hospital and Health Boards (Nursing and Midwifery Workload Management Standard) Notice 2016* (2016 Notice), which notifies the Nursing and Midwifery Workload Management Standard (2016 Standard), as it is due to expire on 1 September 2026. **No policy changes are proposed as part of the remake.**

This document is for **consultation purposes only** and does not represent Queensland Government policy.

Please provide feedback on the proposed 2026 Standard by **5pm 10 June 2026**.

Your views are valuable and may be referred to in material provided to Government in considering this proposal. Your feedback may be referred to in public documents such as the explanatory notes. If you do not wish for this to occur, please indicate this in your submission.

If you have any questions or require further information about the 2026 Notice or the 2026 Standard, please email your queries to the email address below.

Feedback can be provided via email to legislationconsultation@health.qld.gov.au

Proposed 2026 Notice

Queensland Health is proposing to remake the 2016 Notice and the 2016 Standard. There are **no proposed policy changes** from the 2016 Standard. **Minor changes** are proposed in the 2026 Standard that are **technical in nature**. This will ensure the 2026 Standard remains current and will **improve readability and clarity**.

Expiry of the 2016 Notice

The 2016 Standard was made and notified in the 2016 Notice on 1 July 2016 pursuant to section 138E of the *Hospital and Health Boards Act 2011 (Act)*.

Under section 54 of the *Statutory Instruments Act 1992*, subordinate legislation automatically expires 10 years after commencement. This staged expiry provides for the review and remaking of subordinate legislation, ensuring that it remains current, relevant and in line with modern drafting standards. The 2016 Notice, as subordinate legislation, will expire on 1 September 2026.

2026 Notice and 2026 Standard

Remaking the 2016 Standard ensures existing legislative mechanisms related to minimum nurse-to-patient and midwife-to-patient ratios are maintained. Continuation of the workload matters contained in the 2016 Standard will codify how Hospital and Health Services manage nursing and midwifery resource supply and demand in prescribed wards, including how a Hospital and Health Service:

- calculates its nursing and midwifery human resource requirements;
- develops and implements strategies to manage nursing and midwifery resource supply and demand; and
- evaluates the performance of its nursing and midwifery staff.

A notice to notify the matters contained in the standard also continues to be needed to make the standard for the purpose of section 138E of the Act and to ensure there is a legislative basis for how a Hospital and Health Service undertakes workload management in prescribed wards.

On that basis, it is necessary that the 2016 Standard be remade and notified. **No policy changes are proposed as part of the remake.**

Minor changes from the 2016 Standard are technical in nature and ensure that the 2026 Standard aligns with the current version of the **Business Planning Framework (BPF)**. The current version of the BPF, developed collaboratively by the department, Hospital and Health Services and the Queensland Nurses and Midwives' Union, was published in 2021 and was most recently updated in 2024. The changes also ensure that the 2026 Standard reflects modern drafting standards, improving readability and clarity. The 2026 Standard will be notified by the proposed 2026 Notice.

The 2026 Standard will:

- maintain the legislative basis for application of industrially mandated workload management across prescribed wards in Hospital and Health Services;
- retain a clear, transparent framework for managing nursing and midwifery resources in prescribed wards;
- uphold safe patient-care standards; and
- provide legal certainty for continued use of the BPF methodology across Queensland Health facilities.

Proposed amendments to the 2016 Standard

In the 2026 Standard, the following technical and/or minor amendments are proposed to be made to improve readability and clarity and to reflect minor updates to the BPF:

Reference	2016 Standard	Proposed 2026 Standard	Rationale
Preface & 1.3	BPF is the Business planning framework: a tool for nursing and midwifery workload	BPF is the Business planning framework: <u>the methodology</u> for nursing and	Reflects current title of the BPF.

Definitions	management.	midwifery workload management.	
1.3 Definitions	HHS senior/executive nursing and midwifery position is the single point accountable for the professional leadership and management of nursing and/or midwifery services at the HHS, facility and division levels, such as the HHS Executive Director of Nursing and Midwifery, the Director of Nursing and Midwifery or the Nursing and Midwifery Director.	HHS senior/executive nursing and midwifery position is the single point accountable for the professional leadership and management of nursing and/or midwifery services at the HHS, facility and division levels, such as the HHS Executive Director of Nursing and Midwifery, the Director of Nursing and/or Midwifery or the Nursing and/or Midwifery Director.	Recognises separate senior midwifery roles.
Various	Queensland Nurses Union	Queensland Nurses <u>and Midwives</u> ' Union	Reflects the change in name of the organisation.
1.4 Formulae	Total annual productive hours = average hours per unit of activity multiplied by the total number of activities per year.	Total annual productive hours = <u>total number of direct care hours plus the total number of indirect hours required to deliver the service.</u>	Reflects the amendment to the definition in the current BPF (page 33).
1.4 Formulae	Non-productive hours = hours that are over and above the direct and indirect hours and include nursing and midwifery industrial entitlements.	Non-productive hours = <u>those hours where a nurse or midwife is paid for entitlements or conditions of employment such as sick leave, annual leave, and maternity leave, which do not involve direct or indirect hours.</u>	Reflects the amendment to the definition in the current BPF (page 71).
2.2.1 Purpose	This will ensure the effective and efficient management of resources, workloads and the provision of quality health care.	This will ensure the effective and efficient management of resources, <u>safe</u> workloads and the provision of quality health care.	Reflects BPF 6 th Principle 2 (page 3)
2.3.1 Purpose	The purpose of nursing and midwifery resource allocation is to achieve a balance between service demand and supply as per the agreed service profile, ensuring the effective and efficient management of resources, workloads and the provision of quality health care.	The purpose of nursing and midwifery resource allocation is to achieve a balance between service demand and supply as per the agreed service profile, ensuring the effective and efficient management of resources, <u>safe</u> workloads and the provision of quality health care.	Reflects BPF 6 th Principle 2 (page 3)
2.5 Escalation Stage 2	If the workload concern is not resolved at the service level at stage 1, it may be escalated for discussion between the nurse or midwife, union representative and nursing and midwifery executive team (that is, Nursing Director or higher, depending on the nursing executive structure of the facility).	If the workload concern is not resolved at the service level at stage 1, it may be escalated for discussion between the nurse or midwife, union representative and nursing and midwifery executive team (that is, <u>Nurse Grade 9 or above</u> depending on the nursing <u>and/or</u> <u>midwifery</u> executive structure of the facility).	Reflects clause 39.3(d)(i) of the Award.

Background

The Act legislates **minimum nurse-to-patient ratios** and **midwife-to-patient ratios**. The *Hospital and Health Boards Regulation 2023* sets out the specific ratios and wards in Hospital and Health Services that the legislated ratios apply to.

In addition to the legislated ratios, the Act at section 138E allows the chief executive of Queensland Health, the Director-General, to make a **standard about nursing and midwifery workload management**, including how a health service should calculate its nursing or midwifery human resource requirements. The Minister for Health and Ambulance Services notifies the making of the standard and the Minister's notice is subordinate legislation.

The 2016 Standard, notified in the 2016 Notice pursuant to section 138E of the Act, has been in effect since 2016 and is based on the BPF methodology for nursing and midwifery workload management.

The BPF methodology is the industrially mandated tool for managing nursing and midwifery resources and workload management. The 2016 Standard should be also read in conjunction with industrial instruments covering nurses and midwives employed by Queensland Health.