Draft National Nursing Workforce Strategy

Contents

| Introduction | 1 |
|---|----|
| Policy context and related strategies | 2 |
| Architecture of the National Nursing Workforce Strategy | 4 |
| Priority 1: Value | 5 |
| Priority 2: Plan | 6 |
| Priority 3: Design | 8 |
| Priority 4: Deliver | 10 |
| Implementation and measuring success | 12 |
| Supporting information | 13 |
| Glossary | 15 |
| Abbreviations and acronyms | 17 |
| References | 18 |

Introduction

This is Australia's first National Nursing Workforce Strategy. The strategy establishes priorities for enhancing the nursing workforce, aiming to bolster the delivery of health and aged care to all Australian communities. It offers a comprehensive framework to foster collaboration and drive action among stakeholders in shaping the future of workforce planning, investment and reform.

Strategy development

The strategy is developed from a significant evidence base, draws from best practice and recognises the uniqueness of the Australian context. This includes the importance of building the Aboriginal and Torres Strait Islander nursing workforce and enabling the whole nursing workforce to meet the health and cultural needs of Aboriginal and Torres Strait Islander peoples and other vulnerable groups.

Who is the strategy for?

The strategy encompasses the breadth of nursing designations and includes nursing students, Assistants in Nursing (AIN – however named), Enrolled Nurses (EN), Registered Nurses (RN) and Nurse Practitioners (NP). It applies to nurses in both clinical and non-clinical roles. Midwives as a separate and defined profession are not included in the strategy's scope. However, it is recognised many nurses have dual registration as midwives and paramedics, so their perspective on nursing issues and the impact of the strategy on them has been considered.

The strategy is written for the whole nursing profession, to apply to all specialties and practice settings. Nurses working in specialty areas are encouraged to read the strategy through this lens to understand and apply it to their context.

Responsibility for implementation

Implementing the strategy is shared by governments, employers, educators, regulators and the nursing profession. Collaboration will ensure the nursing workforce remains at the forefront of delivering health and aged care and services for all Australian communities.

The nursing workforce in Australia

Australia's health and aged care system is one of the best in the world, providing safe and affordable health care. It is collaboratively managed by all levels of government – federal, state, territory and local. The nursing workforce is vital to the system. It represents more than 40% of the healthcare workforce nationally and is the single largest professional group in Australia.

Nurses deliver exceptional, quality care and services across all health and aged care settings, and in communities across Australia. Nurses have the highest consumer contact rates of any health profession within acute care, residential aged care and in remote settings. They fulfil a crucial role in public health initiatives, preventing disease, and promoting community

health and are a highly trusted health profession. Nurses also have pivotal roles in research, academia, teaching, regulation and policy and exert significant influence at the system level.

Nurses deliver exceptional, quality care and services across all health and aged care settings, and in communities across Australia. Nurses have the highest consumer contact rates of any health profession within acute care, residential aged care and in remote settings. They fulfil a crucial role in public health initiatives, preventing disease, and promoting community health and are a highly trusted health profession. Nurses also have pivotal roles in research, academia, teaching, regulation and policy, and exert significant influence at the system level.

Valuing the nursing profession

The health and aged care system is facing challenges from a range of factors. These include an ageing population, increasingly complex and chronic diseases, geographically dispersed population, the impacts of climate change and advancements in technology. These challenges have a significant impact on demand for the nursing workforce. In addition, the COVID-19 pandemic placed additional stress on the nursing workforce both highlighting and exacerbating the issues the profession faces. A national strategic approach will empower the profession to address these challenges and build on opportunities to prepare and position the profession for the future of healthcare.

The value of nurses is broader than the direct health care they provide to people. Investment in nurses leads to improved health and reduced hospitalisation times. More broadly, it provides economic benefits through employment opportunities and improved population health, which lead to increased productivity and economic growth. I

Nurses are essential drivers of innovation and improvement. Through their involvement in research, education and policy development, nurses help create, disseminate and translate new knowledge, best practices and standards of care to drive continuous improvement within the health care sector. Nurses are collaborators; they engage and connect with people, communities, organisations and multidisciplinary teams to promote health and wellbeing. The societal and economic impact of nursing is profoundly significant and as we advance into the future, the value of nurses will become even greater.

Policy context and related strategies

Australia's health and aged care system is complex, with nursing workforce accountabilities split between various stakeholders. The nature of federated government means decision-making is distributed and reflects the different priorities of the Australian Government and individual state, territory and local governments.

Integrating workforce planning with overarching health system reforms and related policy changes across jurisdictions represents a critical challenge. The National Nursing Workforce Strategy acknowledges the diversity of the nursing workforce and its operation across a range of environments.

The strategy has not been developed in isolation – it considers state and territory and international strategies and aligns with other relevant reforms and strategies that affect the nursing profession, including social, education, economic and employment policies.

Related policy areas include:

- nursing and health workforce planning:
 - extensive workforce planning and policy development under way at the state and territory level
 - broader related Commonwealth reviews and reforms including Unleashing the Potential of our Health Workforce - Scope of Practice Review², implementing the Nurse Practitioner Workforce Plan³ and recommendations from the Independent Review of Overseas Health Practitioner Regulatory Settings⁴
- specific health area strategies such as mental health and chronic disease
- disability, aged care, climate change and education policies
- strategies in areas related to the social determinants of health including housing, cost of living and childcare
- digital, technology and data strategies
- strategies specifically related to Aboriginal and Torres Strait Islander peoples
- rural and remote area workforce development strategies.

The strategy also considers key international documents such as the World Health Organization's Global Strategic Directors for Nursing and Midwifery (2021-2025)⁵ and reports from the International Council of Nurses⁶.

Nursing Supply and Demand Study

The strategy was informed by the Nursing Supply and Demand Study – 2023-2035⁷. This report includes results from the nursing model which has been developed to provide a single, consistent, and integrated evidence base for use in local, state and national workforce and service planning. The model starts from a point of balance in 2022 and predicts what could happen if nothing is done to address supply of, and demand for, the nursing workforce. The national projections found that while both supply and demand of the workforce are estimated to increase during the projection period, supply is not expected to keep pace with demand.

Baseline projections at a national level and across all sectors show:

- An undersupply of 70,707 full-time equivalent (FTE) nurses by 2035 with around 79,473 nurses needed to fill the gap.
- Demand is estimated to increase from 334,873 FTE in 2023 to 493,282 FTE in 2035.
- Supply is estimated to increase from 324,989 FTE in 2023 to 422,575 FTE in 2035.

Projections assume supply meets demand in the base year of 2022.

Architecture of the National Nursing Workforce Strategy

Vision

The nursing workforce is valued for its vital contribution to the health and wellbeing of all Australians and is empowered to innovate and excel in dynamic and diverse environments.

Outcomes

In meeting the vision, the following outcomes will be achieved:

- Sufficient supply and distribution of nurses to meet the diverse health needs of the Australian community
- Nursing roles enable the workforce to work to optimum scope of practice and improve access to and experience of person-centred care
- Improved retention of the nursing workforce
- Positive practice environments which foster diversity, cultural safety and wellbeing.
- Nursing management and leadership engaged in effective decision-making and policy at all levels, in all contexts and valued for its contribution
- Aboriginal and Torres Strait Islander population parity achieved within the nursing workforce
- Career and education infrastructure enable nurses to progress their careers and lead and participate in research and innovation in the way they choose.

Priorities

The strategy centres on four priorities which will drive achievement of the vision and outcomes. The priorities are:

- 1. Value
- 2. Plan
- 3. Design
- 4. Deliver

The strategy recognises there are linkages between the priorities and associated actions. Each priority is outlined in detail in the following sections, with no preference for order.

Priority 1: Value

Priority 1 focuses on the need to uplift the value and perception of nurses and nursing from within the profession and from a public perspective.

Leadership

Nurses provide leadership in a variety of ways as an inherent part of their role. Nurses collaborate with other health professionals as part of multidisciplinary teams resulting in improved outcomes. Leadership in nursing cultivates relationships and healthy, respectful work environments.

| Action | |
|--------|--|
| 1.1 | Invest in nurse leadership. |
| 1.2 | Grow Aboriginal and Torres Strait Islander nurse leadership. |

Cultural safety and diversity

Australia is vibrant, diverse and multicultural. However, too many individuals and communities in Australia experience prejudice, discrimination and racism on a regular basis⁸. Racism in nursing is an issue which must be addressed and ultimately removed. Redefining the identity of nursing will create an environment in which Aboriginal and Torres Strait Islander people and nurses of Culturally and Linguistically Diverse (CALD) heritage feel valued and can see themselves as nursing leaders. Facilitating culturally safe nursing education and practice will help ensure safer health care for consumers.

| Action | |
|--------|---|
| 1.3 | Adopt anti- racism initiatives in nursing. |
| | |
| 1.4 | Support internationally qualified nurses to transition into Australia's |
| | health and aged care system. |
| | |

Identity of nursing

Nurses in Australia generally have a positive perception of themselves, their profession, and the work they undertake. They take pride in their chosen career and are aware of the critical role they have in healthcare delivery. However, many nurses have negative perceptions of their role. Workload and stress are often high on the list of issues and burnout is a common concern. There is a perceived lack of recognition despite their crucial role; they feel undervalued and underappreciated. Negative perceptions are also impacted by conditions out of their control, such as staffing shortages, increased workloads, irregular shifts impacting on work-life balance and the physical and emotional demands of

nursing⁹Redefining the identify of nursing in a modern, contemporary context will include defining the critical role and functions of nursing, deepening professional partnerships and greater acknowledgement of the value of nursing.

| Action | |
|--------|------------------------------------|
| 1.5 | Modernise the identity of nursing. |
| | |

What does success look like?

- Nurses feel safe and valued
- Retention rates improve
- The nursing profession is represented by diverse and skilled nursing management and leadership influencing decision-making and policy at all levels and in all contexts
- An established Aboriginal and Torres Strait Islander leadership program identifies and develops Aboriginal and Torres Strait Islander nursing leaders
- All stakeholders collectively and persistently drive the elevation of the nursing profession
- The nursing profession leads the removal of racism from the health and aged care system.

Priority 2: Plan

Priority 2 focuses on workforce planning, education and regulation as pivotal to meeting the health and aged care needs of the Australian community and drive change.

Workforce planning

Workforce planning requires an evidence-based and coordinated approach to align with the overall goals of the health and aged care system. It supports delivery of person-centred health care, improves access to care, enhances the quality of services and ensures financial sustainability. It involves understanding and actioning the supply of the nursing workforce to meet immediate needs as well as anticipating future changes in healthcare demand. It accounts for system reforms, service delivery models and the potential impact of external factors such as future pandemics and political or economic shifts.

| Action | |
|--------|--|
| 2.1 | Implement nationally coordinated nursing workforce data, modelling and planning. |
| 2.2 | Implement strategies that enhance workforce mobility and flexibility. |

Aboriginal and Torres Strait Islander nurses

Aboriginal and Torres Strait Islander nurses are key to improving health outcomes for Aboriginal and Torres Strait Islander people across Australia's health and aged care system.

Co-designed, culturally safe, tailored, flexible and non-standard nurse education and career pathways with deep community reach and connection promoting inclusive growth and employment in communities is needed for Aboriginal and Torres Strait Islander people to become nurses.

| Action | |
|--------|---|
| 2.3 | Grow the Aboriginal and Torres Strait Islander nursing workforce. |
| | |

Nursing education

Nursing education must be evidence-based and fit-for-purpose to ensure that pre and post registration students are receiving high-quality education. Students should be supported to access, and safely and successfully complete, their education in a way that meets their needs and supports their wellbeing.

| Action | |
|--------|--|
| 2.4 | Investigate and implement the most contemporary structure of pre- registration education. |
| 2.5 | Facilitate students to access and complete nursing education. |
| 2.6 | Adapt student employment models for all health and aged care settings. |

Regulation

Regulation maintains high standards of quality and safety in nursing education and professional practice. Regulation must be contemporary, comprehensive and transparent, to provide public safety and accountability and inform policy development, direction and reform.

| Action | |
|--------|--|
| 2.7 | Increase transparency and timeliness of regulatory processes and outcomes. |
| 2.8 | Develop and implement a nationally consistent accreditation process for post graduate nursing education. |

What does success look like?

- Nursing supply and distribution is aligned with community needs and diversity
- Governments collaborate on nursing workforce issues and develop solutions using robust data and evidence
- Aboriginal and Torres Strait Islander people have equal representation and opportunities in the nursing workforce, and their communities and organisations have access to relevant and reliable data to inform their health decisions
- Nurses can easily move between settings, services and states and territories
- Nursing students have flexible and supportive undergraduate working opportunities that enhance their skills and confidence
- Regulatory processes and outcomes are timely and visible to support quality and safety in nursing education and professional practice
- Post graduate nursing qualifications are accredited and recognised, contributing to career progression and satisfaction.

Priority 3: Design

Priority 3 focuses on designing the nursing profession to ensure it meets the needs of the community.

Emerging technologies

Nurses lead innovation to meet the changing health needs of the community. Technological advancements are driving changes in how and where care is delivered as well as providing new opportunities for research and education. Technology is a resource that will enhance, not replace, the essential human elements of nursing care and relationships. The nursing workforce must leverage these technologies effectively to enhance care and adapt as models of care, services and systems evolve. Nurses co-designing new initiatives will improve usability and effectiveness.

| Action | |
|--------|--|
| 3.1 | Prepare and engage the nursing workforce to drive the innovation and use of emerging technologies. |

Innovative models of care

A system that supports research, development and the implementation of new solutions in nursing is essential to effectively meet the needs of the Australian community. Innovative models of care can have considerable benefits including system sustainability, improved consumer satisfaction, enhanced quality of life and better health outcomes. One of the key enablers of this is funding approaches which provide flexibility and focus on quality.

| Action | |
|--------|---|
| 3.2 | Grow nurse leadership and involvement in the design and delivery of |
| | innovative models of care. |
| 3.3 | Empower Aboriginal and Torres Strait Islander nursing communities to |
| | design workforce initiatives that suit local conditions and community |
| | situations. |
| 3.4 | Create and embed funding models that drive evolution and enhancement |
| | of nursing practice. |

Optimum scope of practice

As models of care evolve there will be changes to current roles and career pathways. Supporting Australia's nursing workforce to use their full skills and competencies is critical in enhancing job satisfaction and wellbeing as well as supporting more efficient and effective care.

| Action | |
|--------|---|
| 3.5 | Enable nurses to work to their optimum scope of practice in all settings. |

Climate ready healthcare

People are already experiencing the impacts of climate change on their health and wellbeing. Nurses, being at the forefront of the health system, can promote climate-ready healthcare and drive environmentally sustainable healthcare practices that meet current health needs without impacting future generations' health.

| Action | |
|--------|---|
| 3.6 | Mobilise the nursing workforce to lead and contribute to a sustainable and climate-resilient health and aged care system. |

What does success look like?

- The nursing workforce leads and engages with, and in, research, innovation and the use of digital technologies.
- Nurses co-design, initiate and deliver innovative models of care that suit local conditions and communities enhancing consumer access and experience of care.
- Funding models adequately help nurses to design and implement models of care to meet consumer need.
- Nurses contribute to care delivery and teams safely and effectively by working to their optimal scope of practice.
- The nursing workforce leads and supports sustainable and climate-resilient health and aged care.

Priority 4: Deliver

Priority 4 focuses on what is required to enable Australia to grow, attract, recruit and retain the best possible people to the nursing profession. This is critical to the future growth of the profession and underpins how our population will be cared for today and into the future.

Retention

Retaining dedicated, diverse and high performing nurses in all health and aged care settings is key to the ongoing sustainability of the nursing workforce. Valuing flexibility and supporting healthy work-life balance is vital. Development of national nursing frameworks encompassing career development, transition to practice and professional development will be important to achieve this priority. These frameworks will also embed positive practice environment standards that ensure positive, safe, healthy, and inclusive workplaces. Supporting nurses to work to their optimum scope of practice will also drive improved retention. Extensive consultation with nurses as part of the development of the National Nursing Workforce Strategy underlined these as key areas of importance to ensure retention of the nursing workforce.

| Action | |
|--------|---|
| 4.1 | Develop a nationally consistent framework for transition to practice. |
| 4.2 | Develop a national professional development framework. |
| 4.3 | Adopt positive practice environment standards in all settings. |

Attract and recruit

Nursing in Australia has been an attractive career choice for many decades. Nurses are leaders and key decision-makers in health care. They influence, manage and institute change and deliver exceptional care in all circumstances. The profession must capitalise on these strong capabilities to attract a wide variety of people into the profession irrespective of their background, gender, stage of life or career. Nurses need to be enabled to move between roles and settings.

Nurse-led research leads to improved consumer and population outcomes, and health system outcomes and costs. ¹⁰ Nurses must have greater opportunities to pursue research. Like other health care professions, there needs to be stronger links between the health and aged care system and the university sector.

| Action | |
|--------|--|
| 4.4 | Develop a national career framework. |
| | |
| 4.5 | Build and grow nurse clinical-academic/research career pathways. |
| | |

Rural and remote workforce

Rural and remote nursing provides a range of opportunities, including exposure to a diverse range of clinical experiences, greater autonomy and the opportunity to build strong relationships with the community. While the nursing profession is the best distributed health workforce in comparison to other professions, more nurses are needed in rural and remote areas. Development of best practice strategies and programs to overcome the specific issues of attracting and retaining nurses in rural and remote communities will contribute to a more attractive career package offering for the potential and current nursing workforce.

| Action | |
|--------|---|
| 4.6 | Develop a dedicated rural and remote recruitment and retention strategy |
| | (inclusive of students). |
| | |

What does success look like?

- National frameworks which support and enable consistent transition to practice, career and professional development for nurses.
- National nursing workforce able to easily access opportunities to grow and succeed in clinical, academic and research pathways.
- A sustainable nursing workforce that consistently attracts and retains a diverse and high performing group of health professionals.
- Education providers and workplaces are culturally safe places for nurses and demonstrate commitment to student and worker wellbeing.
- Increased recruitment and retention of nurses in rural and regional communities.

Implementation and measuring success

Implementation

The actions in this strategy will need to be implemented in close collaboration with stakeholders, including all levels of government, peak bodies, the profession and education and training bodies.

An implementation plan and will be developed to complement the strategy, by setting out what will be achieved, by who and when. It will help facilitate evidence-based health policy for the future.

Monitoring and evaluation

A monitoring and evaluation framework will be established to measure the success of the strategy. The framework will allow the governance body overseeing the implementation of the strategy to effectively monitor its progress.

The framework will promote accountability across organisations and inform remedial strategies if the actions in the strategy are not being successfully implemented or having the desired effect. It will outline the methods and time periods at which data will be collected, collated and analysed. Conclusions about the success of the strategy can then be drawn and disseminated for wider learning among stakeholders.

Governance

A governance body will be established to ensure effective oversight of the strategy's implementation, including monitoring and evaluation of the outcomes.

Working together

Achieving the vision and outcomes of this strategy will require collaboration. The most effective and sustainable change will come about through collective will and action, and an ongoing commitment to progress. While action must be driven and owned by the sector, collaboration will be key in successfully and comprehensively implementing the initiatives in this strategy.

Governments, peak bodies and education bodies will support and lead this work, in close collaboration with other implementation partners, including all organisations that affect the nursing workforce, operating at local, state, territory and national levels. Depending on the priority and action, partners may work in direct collaboration or in parallel. This active participation and engagement will help to improve the systems in which nurses operate to make positive changes in their professional lives.

Supporting information

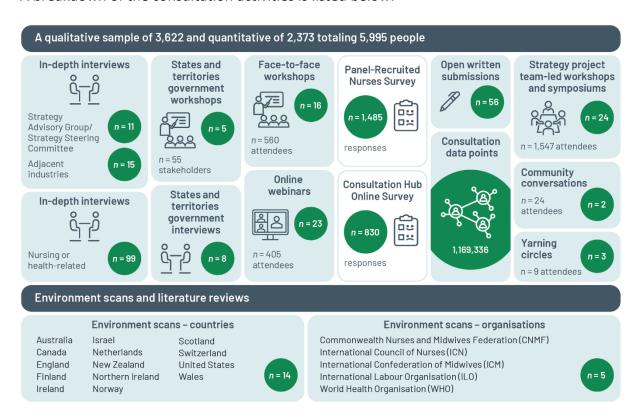
How was the draft strategy developed?

The draft strategy has been informed by extensive consultation and research and its development has been guided by governance committees.

Consultation and research

Extensive consultation was undertaken to understand current challenges facing the nursing workforce in Australia, what is working well and innovative solutions for the future. Stage one consultation included a range of virtual and in-person channels including webinars, workshops, yarning circles, video and written submissions, and surveys. A total of 5,995 stakeholders across the country participated and 1,169,336 data points were gathered. Additionally, 19 environmental scans and literature reviews were undertaken.

A breakdown of the consultation activities is listed below.



The outcomes from consultation as well as the evidence gathered through national and international environmental scans and literature reviews are summarised in the Nursing Workforce Strategy – Stage One Consultation Summary Report.

Key findings

The findings from the public consultation are grouped into 13 key themes (listed in no particular order):

- 1. Planning for future workforce needs can be improved
- 2. Perceptions about what nurses do are often outdated

- 3. Continuing to recruit nurses is critical
- 4. Retaining nurses is as important as attracting new ones
- 5. Education and training can be improved
- 6. Support during clinical placements needs to be bolstered
- 7. Clear career progression is important for recruitment and retention
- 8. Nurses' roles and skills need to be optimised in line with changing community needs
- 9. Supporting nurse leaders is important for positive workplaces
- 10. Digital technologies will change the skills required of nurses
- 11. Nurses in rural and remote areas face added challenges
- 12. First Nations nurses face particular issues
- 13. Supporting a diverse nursing workforce is important

Strategy Governance

A robust governance structure was developed to provide advice and strategic direction on the development of the strategy, as outlined in the table below.

| Group | Membership | Accountabilities | | |
|--------------------------------------|---|--|--|--|
| Commonwealth-State | | | | |
| Health Ministers Meeting (HMM) | Australian Government Minister for Health and Aged Care and state and territory government ministers responsible for health portfolios | Endorsement of strategyDetermining governance arrangements | | |
| Health Chief Executives Forum (HCEF) | Chief executive officers from each Australian government health department | Consideration of strategy | | |
| Health Workforce Taskforce (HWT) | Officers from the Commonwealth, and all state and territory jurisdictions | Oversight of project | | |
| Strategy Steering Committee (SSC) | Chief Nursing and Midwifery Officer/Chief Nursing Officer from the Commonwealth and each Australian state and territory, as well as several specialists with expertise outside of nursing | Guiding the process towards a strategy that best meets the needs of the community, profession and service delivery providers | | |
| Project Management Group | Commonwealth CNMO and Victorian CNMO; officers from the Australian Government Department of Health and Aged Care; Safer Care Victoria and Victorian Department of Health | Day-to-day operations of strategy development, including consultation and drafting | | |
| Other stakeholders / Non-Gove | ernment | | | |
| Strategy Advisory Group (SAG) | Co-Chairs: Commonwealth CNMO and Victorian CNMO; membership includes representatives from key stakeholder organisations with expertise in the nursing profession and nursing services | Providing advice to the SSC on key aspects of the nursing profession and nursing services | | |

Glossary

| Term | Definition | | |
|-------------------------|--|--|--|
| Australian Health | The Australian Health Practitioner Regulation Agency (Ahpra) | | |
| Practitioner Regulation | works with <u>15 national boards</u> to help protect the public by | | |
| Agency | regulating Australia's registered health practitioners. Together, | | |
| | their primary role is to protect the public and set standards | | |
| | and policies that all registered health practitioners must meet. | | |
| | Each board has a <u>health profession agreement</u> with Ahpra that | | |
| | sets out fees, budget and the services provided by Ahpra. | | |
| Co-design | Co-design is a process to combine lived experience and | | |
| | professional expertise to identify and create an outcome or | | |
| | product. | | |
| Models of care | Model of care refers to the way in which a health service is | | |
| | delivered. It may refer to the process of care as well as which | | |
| | health care professionals or skills are required. | | |
| | Treater care protections of annual and required. | | |
| Nursing and Midwifery | The Nursing and Midwifery Board of Australia (NMBA) carries | | |
| Board of Australia | out the regulatory functions set out in the Health Practitioner | | |
| | Regulation National Law (the National Law), with one of its key | | |
| | roles being to protect the public. The functions of the Nursing | | |
| | and Midwifery Board of Australia include: | | |
| | , | | |
| | registering nursing and midwifery practitioners and | | |
| | students | | |
| | developing standards, codes and guidelines for the | | |
| | nursing and midwifery profession | | |
| | handling notifications, complaints, investigations and | | |
| | disciplinary hearings | | |
| | assessing overseas trained practitioners who wish to | | |
| | practise in Australia, and | | |
| | approving accreditation standards and accredited | | |
| | courses of study. | | |
| | , and the second | | |
| Positive practice | A positive practice environment is one where nurses can | | |
| environment | achieve their full potential in an environment that also delivers | | |
| | high-quality patient care. | | |
| Pre-registration | Includes education and training undertaken prior to becoming | | |
| education | a registered nurse. | | |
| | | | |
| | All applicants for nursing and/or midwifery registration must | | |
| | meet a range of requirements to become eligible for | | |
| | registration. Registration standards define the requirements | | |
| | that applicants for registration or renewal of registration need | | |
| | to meet to be registered. | | |
| | | | |

| Term | Definition | |
|-------------------|---|--|
| | All applicants for registration (excludes student registration) must meet the requirements of the following mandatory registration standards: | |
| | Registration standard: Criminal history Registration standard: English language skills Registration standard: Continuing professional development | |
| | Registration standard: Professional indemnity insurance arrangements | |
| | Registration standard: Recency of practice For more information see the <u>NMBA's registration standards</u>. | |
| Professional | Formal partnerships between organisations to support the | |
| partnerships | outcomes sought with agreed joint decision-making roles and responsibilities | |
| Scope of practice | The range of activities a professional can undertake. The scope of practice of individual practitioners is influenced by the settings in which they practise. This includes the health needs of people, the level of competence and confidence of the nurse and the policy requirements of the service provider. As the nurse gains new skills and knowledge, their individual scope of practice changes | |

Abbreviations and acronyms

| Abbreviation/acronym | | |
|----------------------|--|--|
| ACCHS | Aboriginal Community Controlled Health Services | |
| Ahpra | Australian Health Practitioner Regulation Agency | |
| AIN | Assistant in Nursing | |
| CALD | Culturally and Linguistically Diverse | |
| EN | Enrolled Nurse | |
| National Law | Health Practitioner Regulation National Law Act 2009 | |
| NMBA | Nursing and Midwifery Board of Australia | |
| NP | Nurse Practitioner | |
| RN | Registered Nurse | |
| Strategy | National Nursing Workforce Strategy | |

References

¹ International Council of Nurses (ICN) (2024) International Nurses Day 2024, The economic value of care, International Council of Nurses, accessed 1 August 2024.

² Department of Health and Aged Care (2024) Unleashing the Potential of our Health Workforce – Scope of Practice Review, Department of Health and Aged Care, accessed 14 August 2024.

³ Department of Health and Aged Care (2024) Nurse Practitioner Workforce Plan, Department of Health and Aged Care, accessed 14 August 2024.

⁴ Department of Health and Aged Care (2024) *Independent review of health practitioner regulatory settings*, Department of Health and Aged Care, accessed 14 August 2024.

⁵ World Health Organization (WHO) (2021) The WHO Global Strategic Directions for Nursing and Midwifery (2021-2025), World Health Organization, accessed 14 August 2024.

⁶ International Council of Nurses (ICN) (2024) Publications and reports, International Council of Nurses, accessed 14 August 2024.

⁷ Department of Health and Aged Care (2024) *Nursing Supply and Demand Study 2023-2035*, Department of Health and Ageing, accessed 14 August 2024.

⁸ Australian Human Rights Commission (2012) National Anti-Racism Strategy July 2012, Australian Human Rights Commission, accessed 15 August 2024.

⁹ Day G, Minichiello V and Madison J (2007) 'Self-reported perceptions of Registered Nurses working in Australian hospitals', Journal of Nursing Management, 15, 403–413, doi:10.1111/j.1365-2834.2007.00681.x ¹⁰ Eckert M, Rickard C M, Forsythe D, Baird K, Finn J, Gilkison A, Gray R, Homer C S, Middleton S, Neville S, Whitehead L, Sharplin G R and Keogh S (2022) 'Harnessing the nursing and midwifery workforce to boost Australia's clinical research impact', The Medical Journal of Australia, 217(10), 514-516,