

Regional NSW feedback - composite from a few nurses including experienced, and new graduates (BNurs and DipNurs).

- BNurs needs to be **face-to-face for at least the first year**. Removing this requirement is seen as detrimental by a recent graduate as she learnt more in the first year face-to-face than subsequent years when enrolled online and attending res schools.
- **Clinical placements need to be appropriate** for learning objectives:
 - o Need to be suitable for the clinical competencies that need to be signed off on
 - o Regional students will benefit from accessing clinical placements at larger health services including Sydney (this option was stopped a few years ago due to lack of availability)
 - o Monitor the placements students have previously had when assigning placements. Eg. students often had multiple placements to the same type facility/ward and miss out on others including the basics of general medical/surgical nursing.
- **More clinical placements** need to be available (especially for regional Unis/TAFEs):
 - o Nursing cohorts in 2018 and 2019 (BNurs and DipNurs) in this regional centre have been **unable to complete by published course completion date** as there had not been enough placements for students. Delayed registration /enrolment by >3 months, affecting ability to commence new grad employment or apply for EN transition to practice positions. Significant costs to individual in lost income and to employers when new staff are unable to commence on time. Potential to halt career if lose new grad placement outright.
- **NSW Health scholarships (ENs)**. Fantastic initiative but difficulties with TAFE and NSW Health being able to deliver within program guidelines places recipients at risk of not being able to benefit from scholarship. Consider:
 - o Providing formal letter (document) to recipients of NSW Health scholarship. An email from the TAFE offering scholarship without backing it up with an official letter confirming scholarship has been formalised makes it difficult for recipients to evidence it when seeking jobs with NSW Health.
 - o Provisions for the scholarship recipient to keep their scholarship and be eligible for fee reimbursement when the TAFE is unable to provide the course in the stipulated period (or extend the max. time period to commence to address this issue). Eg. 18 month DipNurs course with significant extension due to inability to find placements for students to complete mandatory 10 weeks, combined with Christmas New Year TAFE shut down and LHD recruitment hiatus, early year delays at AHPRA in processing enrolment and the significant time delays in recruitment currently routine to NSW Health (takes many months from advertisement, interview, to commencement), means recipients are not likely to commence within 2 years of the scholarship being awarded/course commencing as per scholarship rules. This is outside of the scholarship recipient's control. There are significant costs to individuals who are unable to get their course fees reimbursed or benefit from recruitment opportunities. It also harms reputation of the scholarship program when it becomes apparent that TAFE/NSW Health cannot provide the program in line with their own stipulations.
 - o Commence recruitment to transition to practice programs (EENS) whilst Dip Nurs candidates are still students (similar to RN new grad recruitment in 3rd year). New grad ENs currently have to wait until they are enrolled before applying for work, unnecessarily delaying their employment as ENs.
- **Address early career bottlenecks:**
 - o Enhance programs for new grads to gain first job. There is a shortage of experienced nurses yet there are many new graduate RN / ENs who desperately seek employment but cannot break into their first job to gain experience.
- **Observation:**
 - o Many rural new graduates (RN and EN) work as AINs (or equivalent) whilst students, or progress from AIN to EN or AIN/EN to RN. A number comment that they would not have been prepared

for the RN / EN workforce without combining the experience they gained from their paid nursing positions with their student experience.

- **Streamline nursing pathways:**

- EN's (DipNurs) receive 1 year advanced standing for BNurs. Great initiative.
- BNurs candidates have little opportunities to step out of their course with a qualification / career pathway recognising partial completion. This is particularly problematic for students who have a misadventure or family/carer responsibilities who would like to continue in nursing either now or in the future. Significant loss to individuals, but also to small rural hospitals/MPS who will benefit from locals being able to continue in or enter the nursing workforce in some capacity now or in future

Eg. One regional university used to have an option to depart BNurs at end of 2nd year with a DipNurs (EN). No longer available. One nurse said she needed to leave after completing all 1st and 2nd year subjects and placements and was advised she would leave with nothing. TAFE said she would have to apply in detail for advanced standing against all the learning objectives for each DipNurs (EEN) subject and would likely still have a number of subjects to complete and would have to do all 10 weeks of EEN clinical placements (none of the 14 weeks completed to-date in BNurs program could be counted). She would also have to pay the entire DipNurs fee. There turned out to be more work involved in transitioning to the Dip Nurs (EN) than finishing the BNurs (RN), something she wasn't in a position to do or she would have completed the BNurs without delay. She was advised that if she then enrolled with AHPRA as an EEN she would only be eligible for 1 year advanced standing if she came back to BNurs (regardless if she was able to return to BNurs studies within the time frame of original enrolment rules) and would have to redo (and pay again) all the 2nd year subjects. She also worked part-time as an AIN with NSW Health under the provision that she was a current 2nd or 3rd year nursing student and therefore would no longer be eligible to work as an AIN. She was advised she wasn't eligible for any advanced standing in the TAFE AIN Cert either and would need to complete it from the beginning if she wanted to be employable as an AIN. There are a number of reasons students have to take unexpected breaks in their studies, there needs to be pathways for them to do that. Consider the antidiscrimination legislation/regulation/policy and the responsibilities to those with parent and carer responsibilities. Nursing needs to look at having pathways that work both ways – transitioning from AIN to EN to RN and beyond and stepping out points eg. in the BNurs program.

- Proposal:
 - Completion of all requirements of 1st year BNurs and be eligible for a Cert IV AIN (or equivalent). Complete a 2 week transition to AIN clinical placement to ensure understand professional boundaries of an AIN (addition to any placements completed as a student RN - student AINs only do 2 weeks in their course)
 - Completion of the first three semesters/trimesters (50%) BNurs and be eligible for a DipNurse (EEN). When 10 or more weeks of BNurs placements have been completed, bridging clinical placement of 2 weeks to be undertaken to ensure students understand professional boundaries of EEN. (ENs do 10 weeks of placement in their course). Additional 1 week placement if medication competencies were not completed at time of withdrawal from BNurs, also consider single medication online unit if equivalent not completed at time withdrawal from BNurs. ** If this is not possible, perhaps consider 50% of BNurs as equivalent of EN and 2 years for EEN.