EDUCATING THE NURSE OF THE FUTURE – INDEPENDENT REVIEW OF NURSING EDUCATION CONSULTATION

The Australian College of Nursing's (ACN) submission to the Department of Health



Educating the Nurse of the Future - Independent Review of Nursing Education Consultation

General Comments

Although Australia continues to exhibit a high standard of nursing and nursing education in comparison to the rest of the world, there are important international innovations that demand our attention if we wish to remain competitive. There is potential to expand the functions and responsibilities of nurse practitioners, particularly considering the advances made in the United States.

There are conflicting views and opinions between academia and industry on new graduates being prepared for practice and being "job ready". Australian Undergraduate programs are predominantly three years and it is purported they lack the practical component necessary to prepare nurses for the realities of work. It is proposed that a four-year undergraduate degree with substantive practical requirement in the final year would assist new graduate nurses in assimilating into the workplace and align our system with leading international standards.

The nursing profession also faces a crisis of male underrepresentation, like female underrepresentation experienced among the STEM fields. Correcting misinformation via public awareness campaigns is necessary to address nursing stereotypes and entrenched cultural assumptions regarding gender roles.

In the context of predictions of future shortages of nurses, retaining new graduate nurses in the nursing workforce is essential to ensure sufficient nurses in the future¹. A study² found that nursing education or work preparation impacts expectation of leaving the job through its effect on job satisfaction. Thus, improving work preparation has a positive effect on job satisfaction and retention.

Digital innovation globally has changed the Australian healthcare landscape. Health care systems are transforming not only in the way information is accessed, communicated and used by clinicians but also how care is delivered. As nurses make up the largest number of healthcare professionals in Australia, it is pivotal that our future nurses understand the importance of digital health and have the capability to apply to their area of nursing practice.

By progressing the professional and practical aspects of nursing the Australian nurse of the future will be a leader in transforming health care delivery.

General Concerns

ACN has been asked by the membership and key stakeholders to put forward a request for an independent peer review of the final draft of the submission prior to the report being submitted to the Minister.

¹ Kenny P, Reeve R, Hall J, 2015, 'Satisfaction with nursing education, job satisfaction, and work intentions of new graduate nurses', Nurse Education Today, 2015, vol 36, pp 230-235, doi: http://dx.doi.org/10.1016/j.nedt.2015.10.023



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ACN has received over 150 responses from Fellows and Members from academia and industry expressing concern about the review process and the comments below are examples of the feedback received from our membership. Concerns include but are not limited to:

- Inconsistency of who and how meetings were managed.
- Inconsistency of open forums.
- Lack of consistent processes.
- The formula or agenda at the consultation forums was altered depending on the audience and this has created concern amongst the profession.
- Some forums had questions and online voting, whilst others did not.
- Different groups have been asked different questions and the feedback has been that this may be used to guide an outcome that is not reflective of what the profession is wanting.
 - For example, at the Brisbane forum, participants were asked to vote on a national end of course exam. Members present have expressed concerns that this was not part of the Terms of Reference, and that the facilitator was walking around encouraging people to vote.

The effectiveness of current educational preparation of and articulation between enrolled and registered nurses (EN and RN) and nurse practitioners (NP) in meeting the needs of health service delivery

Degree duration and practical training

ACN members have expressed concerns that some graduates are not prepared for the realities of nursing practice³. Increasing the nursing undergraduate program to a four-year degree offers a robust solution, transitioning from a theoretical three years, to a four-year degree with clinical focus⁴. The fourth year would provide that additional year of practical experience in all settings where care is delivered. This will enable students to consolidate their knowledge and skills in an equitable manner, learning through clinical practicums that monitor and evaluate their progress⁵. Ideally, this additional year would include a research component, so the students can contribute to the environments and contexts in which they are practicing. This is particularly important for RNs, who are required to lead well from their first day onwards and are expected by peers to hit the ground running.

Other health professional undergraduate programs such as occupational therapy and social work are of four-year duration each with a greater portion of allocated practical hours. All other clinical degrees registered with Australian Health Practitioner Regulation Agency (AHPRA) are four years or more to complete, leaving nursing education institutions challenged to meet accreditation expectations with student and industry requirements. The implementation of a fourth practical year should coincide with the governance of a standardised national curriculum, overseen by the Australian Nursing and Midwifery Accreditation Council (ANMAC).

Many Fellows and Members raised concerns that the time taken to develop and review an undergraduate curriculum and gain ANMAC accreditation is "past-focused", whereas the education required for the future needs flexibility, agility and the ability to be "future-focused".

Many ACN members are concerned with the present imbalance between learning in the classroom/online versus the clinical practice setting.

- Whilst appreciative of their tutors' expertise and experience, they felt this was underutilised in a clinical setting.
- Greater frequency in clinical participation (e.g. weekly) would enable more consistency and collaboration with industry professionals.
- More hands-on learning to enhance the student experience and developing stronger relationships within clinical settings. It will also have a flow on effect on early career nurses to continue to remain in a career in nursing as they would be much better prepared for the challenging and demanding environment experienced throughout their careers.

⁵ Milton-Wildey K, Kenny P, Parmenter G, Hall J, 2013, 'Educational preparation for clinical nursing: The satisfaction of students and new graduates from two Australian universities', Nurse Education Today, vol 34, pp 648 – 654, doi: http://dx.doi.org/10.1016/j.nedt.2013.07.004



³ Missen K, McKenna L, Beauchamp A, 2016, 'Registered nurses' perceptions of new nursing graduates' clinical competence: A systematic integrative review', Nursing and Health Sciences, vol 18, pp 143-153.

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- If more practical training is part of a four-year undergraduate curriculum, in all settings where health care is provided, education providers will have greater opportunity to allocate students into suitable diverse settings.
- With competing demands for limited supply of clinical placements, further innovation and
 opportunity is necessary. University numbers could also be capped to ensure students have
 access to quality placements. Otherwise, universities remain in competition with one
 another, leading to the uptake of less effective placements just to 'make up hours'.
- Clinical facilitators and educators are vital on all shifts, to support inter-professional learning, and this will have the positive flow on effect of creating more career pathway positions for nurses.

Specialisation

ACN received strong consensus feedback from membership that there should be no specialisation in the undergraduate curriculum. There should be opportunity for exposure and experience in specialist areas of practice, so the undergraduate curriculum is reflective of the many settings nurses will work. However, specialist practice should remain postgraduate and at the discretion of the RN after they have had time to transition to practice.

Scope of practice

The scope of practice for all nursing classifications is clearly defined by the Nursing and Midwifery Board of Australia (NMBA)⁶.

EN Training and Transition Issues

EN's are extremely beneficial to the workforce of the health care system. Members strongly believe that ENs are well-prepared and meet the clinical needs of industry. It is believed that up to 50 per cent transition to a RN qualification. When transitioning from EN to RN, we have been informed from EN members that there are challenges in transitioning:

- Lack of foundational skills usually taught to RNs in their first year
 - Including writing, research, and communication.
 - Academic writing skills.

Advanced Practice Nursing

ACN Fellows and Members strongly support specialisation at the postgraduate level. Career pathways, including Advanced Practice Nursing (APN), require national profiling to highlight the importance of clinical expertise and excellence. Currently there are approximately 1800 NPs in Australia, whereas there are 26,000 APNs throughout Australia ready to be mobilised to practice to their full scope and significantly contribute to improved patient care and population health of all communities including rural and remote.

⁶ NMBA 2017, 'Professional Standards', Nursing and Midwifery Board, < https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx>



Nurse Practitioners

In Australia, Nurse Practitioners (NPs) are underutilised. There are either limited employment opportunities or they are not allowed to practice to their full scope of practice. NPs have considerably more autonomy in the United States than Australia, and the practice contexts are limited predominately to the acute care environment. In the United States, NPs are front line health practitioners providing care that GPs are still providing in Australia. Anecdotally, US graduates have a greater understanding of anatomy, physiology and pharmacology.

Unregulated Health Care Worker

Members raised concern about personal care assistants, that is, the unregulated health care worker (UHWC) undertaking duties which are within the scope of the Enrolled and or Registered Nurse. UHCWs do not have the theoretical knowledge or practical skills and should be regulated as per ACN White Paper, Regulation of the Unregulated Health Care Worker.

The Digital Future

The importance of understanding nursing informatics, the role of clinical analysts and data analytics is imperative but not able to compete with an already abundant and competitive undergraduate curriculum.

There are constantly changing clinical environments with point of care solutions, digital platforms, and artificial intelligence that will impact on the transition to practice. For these reasons, an extended undergraduate degree, of four years or more, would give time for undergraduates to understand, use and navigate the digital landscape before becoming registered. Because of the contract arrangements with large multinational companies like Cerner, universities are not always able to access the systems that their students will be using in clinical practice.

Recommendations

- That a National Peer Review Group (NPRG) be established with representation from key stakeholders to consider and comment on the report before it is submitted to the Minister as the Final Report
- 2. ACN could facilitate this NPRG.
- 3. Four-year (minimum) nursing undergraduate degree with a standardised practical component in the final year in line with international best practice.
- 4. Improved articulation and mapping of ENs transitioning to higher education RNs.
- 5. Increase in clinical practice hours for undergraduate nurses to consolidate and link theory to practice, and in line with all other AHPRA regulated clinical degrees.
- Increase clinical lab practice hours and student assessment to provide a safe and accurate standard of nursing care, including simulated, experiential inter-professional learning.
- 7. Personal care assistants should be regulated as per ACN White Paper *Regulation of the Unregulated health Care Worker*.
- 8. Specialisation should only occur as postgraduate qualifications.
- 9. Undergraduate curriculum should remain generalist in training with opportunity to gain exposure to all settings where health care is delivered.
- 10. Expanded functions and responsibilities of NPs to work to their full scope of practice.
- 11. Acknowledgement of the APN and national consistency for APN to work to full scope of practice

Factors that affect the choice of nursing as an occupation, including for men

ACN is committed to increasing male participation in the nursing workforce. Broader societal issues, that is, what it means to be a 'man' and the reinforcement of negative cultural stereotypes affect the choice of nursing as an occupation. Just as there are traditional but false dichotomies of role and purpose between doctors and nurses, a similar distinction exists between male and female nurses. Efforts by ACN and others to highlight the professional nature of nursing has been vital to gaining ground in the correction of professional stereotypes.

Caring and Gender

'Caring' is not a gender-dependent category. Such thoughts devalue the notion that males cannot care, which is not true in disposition or practice. How men are understood by Australian culture seems to begin at a young age, where stereotyping is displayed at school and in the home, via role-modelling, schooling and media exposure. Men can feel like they are placed in gender and sexuality-themed stereotypes, and therefore, male nurses can be subject to bullying or viewed as feminine due to their career choice.

Increasing the number of male nurses

In recent years, public resources have been allocated to various awareness campaigns, encouraging increased female participation in conventionally 'male' jobs, e.g. construction, trades, defence, police and STEM fields. Nursing would benefit from a similarly targeted strategy to encourage male participation, seeking to dissolve these prejudicial attitudes.

It is critically important to disprove the myth that connects nursing to softness, effeminacy or unprofessionalism. The truth to the contrary must be emphasised, that contemporary nursing requires resilience, intelligence and technical skill. The tone of any campaign or advertisement should focus on the art and science of nursing practice highlighting critical decision making and clinical judgement skills that nurses use in practice.

Nursing and Gender Roles

There are countries throughout the world where there is gender inequality in the nursing profession. Domestic cultural stereotyping plays a significant role in career choice, as perceptions of the value or gender of a profession, are different depending on culture and so these will need to be addressed to prepare the workforce for the future.

Salary

The assumption that nurses are paid poorly, compared with other career options, is still a prominent view amongst society and dissuades people from seriously considering nursing. The median starting salary for graduate nurses should be promoted and benchmarked against the starting salary for all graduates. This information should be marketed in all promotional material.

Personal and career aspirations

Personal and career aspirations have been cited as two major factors which affect the choice of nursing as a career option. It is important, therefore, to show the environments in which nurses work but also the potential career pathways in clinical, education, management and research roles.

Recommendations

- 12. Develop awareness campaigns which promote nursing as a career option for males.
- 13. Develop awareness campaigns which promote the diversity of nursing as a career highlighting clinical, research, education and management pathways.
- 14. Benchmark the starting salary of a nurse graduate against the starting salary of all graduates.

The role and appropriateness of transition to practice programs however named

It was evident in the responses ACN received from members that there are concerns with the status and stigma of transition to practice programs (TtPPs). Of concern to ACN members was the accessibility for all new graduate nurses to TtPPs. The perception is that the number of nurses graduating exceeds the available support transition program places offered by public and private institutions in Australia.

ACN members raised concern that new graduate nurses who don't gain access to a TtPP are perceived as not being good enough and this can have a detrimental effect on their confidence and career progression. Where support transition program are in place for graduating nurses, ACN members have identified several problems with their design and implementation:

- Only the 'cream of the crop' are placed into transition programs, leaving the remaining graduates always behind their peers.
- They are designed differently across the states and territories, creating inconsistency.
- There is a program bias in favour of the acute care sector and hospitals, which assumes nurses don't wish to work in primary health, community or aged care settings as new graduate nurses.
- Mandatory education requirements can be cumbersome for nurses who must travel long distances to attend programs.
- Many health services take a 'one-size-fits-all' approach in the design and application of their programs, which is having a discouraging effect on graduates including mature aged or nursing as a second career graduates.
- New graduates occasionally miss out on programs due to limited places on offer.
- Limited rotation schedules, weakening graduate exposure to varied clinical settings.

TtPPs should be available and positively promoted and marketed in all settings including:

- Primary and Community Health Care
- Mental Health
- Acute Care Settings
- Sub-Acute and Rehabilitation Care Settings
- Drug and Alcohol
- Aged Care
- Remote and Rural settings

New graduate and early career attrition rates suggest that nurse education and support transition programs are not preparing nurses for their transition to practice⁷. New graduate members report they are expected to have the skills and knowledge of more seasoned, experienced colleagues. This has led to a 'sink or swim' culture, and a loss of confidence among highly qualified nurse graduates⁸. It has been reported from members that first year graduate nurses are rostered into leadership

⁸ Milton-Wildey K, Kenny P, Parmenter G, Hall J, 2013,' Educational preparation for clinical nursing: The satisfaction of students and new graduates from two Australian universities', Nurse Education Today, vol 34, pp 648 – 654, doi: http://dx.doi.org/10.1016/j.nedt.2013.07.004



⁷ Missen K, McKenna L, Beauchamp A, 2016, 'Registered nurses' perceptions of new nursing graduates' clinical competence: A systematic integrative review', Nursing and Health Sciences, vol 18, pp 143-153.

positions within a unit or aged care facility, compromising safety for all concerned. New nurses can find themselves with a full patient allocation by the second week of their employment.

TtPPs need to support students so that the integration of theory to practice is maximised in the health care settings. ACN members identified when there are competing resource requirements their clinical support resource can be removed. Clinical support for new graduates should be quarantined to ensure they assimilate quickly to the workplace. A diverse skill-mix in the clinical practice setting with longer clinical practicums in the undergraduate program could support RN graduates who are expected to lead and delegate care whilst consolidating their own skills9.

The fourth year of a nursing degree should focus on a monitored clinical development component, to ensure RNs are safe to practice and can 'hit the ground running' in accordance with current industry expectations and could therefore be the TtPP.

Accreditation Regulation

There is currently no regulatory requirement for TtPPs. Programs vary in accordance with the requirements and policies of each State or Territory, and the support transition program is designed by the employing organisation.

The industry would benefit from national minimum standards for transition programs, whilst still allowing flexibility to tailor programs towards local needs.

Mental Health Support

ACN members report a high incidence of mental health issues among recently qualified graduate nurses, impairing the delivery of patient care. Wellness programs including counselling and psychological care, along with formalised clinical supervision programs would contribute to a more supported transition experience for newly graduated and early career nurses.

Mentor Training

ACN members report the central importance of mentors in their development and knowledge as a new nurse. Building strong relationships at an early stage of a nursing career creates solidarity of purpose in the workplace, decreasing incidences of bullying, fractured relationships, as well as assists in reducing the attrition rate of new and early career graduates. Organisations such as ACN and education providers could provide this funded mentoring service.

Recommendations

- 15. TtPPs should be available to all nurses in all practice settings
- 16. TtPPs should include a wellness program

⁹ Missen K, McKenna L, Beauchamp A, 2016, 'Registered nurses' perceptions of new nursing graduates' clinical competence: A systematic integrative review', Nursing and Health Sciences, vol 18, pp 143-153.



The competitiveness and attractiveness of Australian nursing qualifications across international contexts

Attractiveness and Competitiveness

In 2018, the Australian Tertiary Admission Ranking (ATAR) for a Bachelor of Nursing at Australian Universities ranged from the mid-60s to mid-80s and if a double-degree was being studied, the ATAR rose to the mid 90s¹⁰. This variation may impact on the quality of the curriculum, student and graduate capability and capacity, an overreliance on international students, as well as impact on regional graduates.

The QS World University Rankings commenced collating nursing school rankings in 2016¹¹. In 2018, Australia had eight nursing schools ranked in the top fifty nursing schools globally and three in the top twenty¹². This highlights that Australian Bachelor of nursing programs are comparable and competitive in the international market.

The Australian undergraduate programs remain attractive to international students as it improves their employability and earning potential. Nurses trained in Australia recognise they have a highly portable qualification, which is in demand worldwide.

Requirements for registration in other countries

Australian nurses can however face difficulty when seeking registration in the USA, UK and other countries. ACN members have encountered hardship in transferring their qualification to the USA particularly as standards differ in each state. ACN members have highlighted difficulties in registering in the UK as there are four areas of practice for registration, and the number of clinical hours undertaken in some nursing degrees has not been deemed as adequate. ACN members have stated the registration process in some instances took 12 months to finalise. This issue could be explored by the Nursing and Midwifery Board of Australia (NMBA) and discussed with international regulatory counterparts to improve registration processes globally, and ensure there are minimal impediments to creating a global mobile nursing workforce.

Recommendations

17. NMBA to discuss with International regulatory counterparts issues impacting on registration process experienced by Australian qualified nurses in obtaining registration in other countries.

¹²QS World University Rankings 2018 https://www.topuniversities.com/university-rankings-articles/university-subject-rankings/top-nursing-schools-2018



¹⁰ My Health Career 2018, 'ATAR for nursing – your guide to every university nursing course in Australia 2018', https://www.myhealthcareer.com.au/nursing/nursing-course-atar-2018/

¹¹ QS World University Rankings 2016 by subject, https://www.topuniversities.com/university-rankings/university-subject-rankings/2016/nursing

ACN's Recommendations for the Independent Review of Nursing Education:

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