To: Professor Schwartz
Date: 25th June 2019

Review of Nursing Education: *Educating the Nurse of the Future*

Dear Professor Schwartz and Review Committee Members,

We welcome the opportunity to comment on the future of nursing education in Australia.

Nursing @ Melbourne

For over two decades, The University of Melbourne has offered a wide range of award courses in postgraduate nursing. Our programs are delivered through the Department of Nursing (Melbourne School of Health Sciences) and for Primary Care via the Department of General Practice (Melbourne Medical School).

- All course offerings at The University of Melbourne **align with our research foci.** Graduate Research pathways are available via **Master of Philosophy and Doctor of Philosophy**.

- **A distinguishing feature of our coursework programs is that all share a unified philosophy of care that is person-centred, evidence-based and reflexive**.

- At all levels of program delivery **blended learning approaches incorporate work-integrated learning and work-based assessment** thereby ensuring articulation of theory to practice and enhancing work readiness of our graduates.

Courses and pathways to a career in nursing

The first graduate entry Master of Nursing (GEM-N) course in Australia was established at The University of Melbourne in 2008. Developed under *The Melbourne Model* this is a 2-year full time award available to graduates from both STEM and HASS Bachelor degrees seeking a career in nursing.

In specialty practice our Graduate Certificate awards offer Registered Nurses a wide range of specialty options including: cancer nursing, critical care, emergency nursing, rural critical care, paediatrics, paediatric intensive care, palliative care, primary care, neonatal intensive care, transfusion practice, renal, cardio-respiratory.

In the **specialty of mental health,** we deliver a 18-month Graduate Diploma in Mental Health Nursing.

In terms of advanced practice, we have developed both a **Master of Advanced Nursing Practice and Master of Advanced Nursing Practice (Nurse Practitioner)**. These programs are available to Registered Nurses with specialist qualifications who usually study part time.

In addition to coursework, nurses may undertake graduate research degrees by completing a Master of Philosophy or a Doctor of Philosophy. In just over two decades of Nursing @ Melbourne we have graduated over 80 research students. Many our graduates hold both academic and clinical appointments. In these roles they lead university-based programs, develop and evaluate evidence-based policy and conduct nurse-led health services research. **In reviewing the national educational preparation of nurses it would be remiss to ignore the critical leadership role these nurses play in educating the future nursing workforce, participating in evidence-based policy development and initiate and evaluating innovative models of care.**

Pathways are designed to support development of a career path in nursing from entry to practice through to advanced practice (Figure 1).

Figure 1. Pathways

2 years (entry to practice)

0 years (Graduate year)

5 years
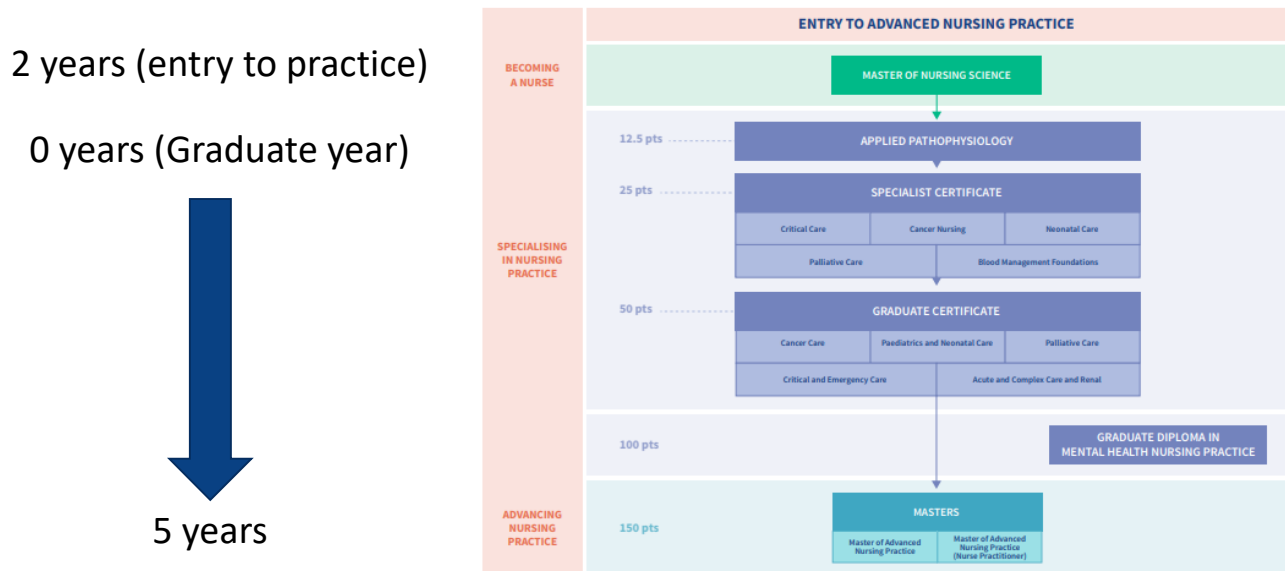
Educational preparation of and articulation between registered nurses and nurse practitioners in meeting the needs of health service delivery

Critical to the success of our courses is a clear pathway offered to Registered Nurses from entry to practice through specialization to advanced practice. This is presented as a 0-5 year trajectory across which a nurse obtains an entry to practice award, undertakes specialization and can move into advanced practice roles while in paid employment. **The model is flexible in that a nurse may transition at their own pace balancing work, study and family commitments while building and sustaining a career in the profession.**

Another factor contributing to the success of our programs are the partnerships we have established with health services to ensure that workforce needs are met. In specialty programs and the Master of Advanced Nursing Practice (Nurse Practitioner) courses, **industry-based sponsorship is an entry requirement**. This is considered essential to the delivery of a **robust work-integrated curricula** and are outlined in formal agreements between the university and health services. This approach has resulted contributed to significant growth in our specialty and advanced practice programs.

In terms of health service needs, we have experienced **a significant decline in the number of students applying for the Graduate Certificate in Primary Care. This trend is particularly concerning given the move to increasing health policy focus on preventative health care establishment of community-based models of care**.

We consider the barriers to a career in primary care nursing in Australia as largely structural, and related to
- industrial constraints and opportunities for career progression to Advanced Practice – those who choose a career in primary care nursing will not have same employment conditions as public sector nurses, most are paid considerably less. In addition, few incentives exist for GP practices to support advanced practice roles.
- lack of opportunities for nursing students to be exposed to primary care settings during their entry to practice degree, due in part, to poor availability of Registered Nurses to supervise and assess student on placements. Thus, career aspirations are shaped by acute care environments.

The role and appropriateness of transition to practice programs
We note, and are concerned about the high degree of variability in transition to practice programs and the development of a range of health service-based programs that aim to provide foundational skills and knowledge in specialisation. This health service driven approach suggests that there is a significant gap between graduate skills and knowledge that are required to enter specialization. Students undertaking transition to specialty programs receive no recognition for their learning in these programs beyond the organization in which they work and typically cannot gain advanced standing for transition short courses due to lack of a suitable framework to evaluate quality of syllabus and assessments undertaken. In our courses we note that many nurses entering our specialist programs from other universities lack foundational knowledge in bioscience which would suggest that sufficient attention to bioscience in undergraduate curriculum is lacking.

Roles of the education and health sectors in the education of the nursing workforce
Clinical placement and management represent a burgeoning cost to universities and health care providers. The University of Melbourne in collaboration with the University of Wollongong, Western Sydney University and Central Queensland University with substantial support from the Australian and New Zealand Council of Deans of Nursing and Midwifery are currently undertaking a project to document the benefits and burdens of clinical placements to health care organisations, education providers patients and communities. A key outcome of this project will include recommendations for a core work integrated curriculum focused on meeting the needs of students as learners while adding value to health services and to direct patient care.

Educational preparation required for nurses to meet future health, aged care and disability needs of the Australian community including clinical training
In addition to the issues raised in regard to primary care nursing, another area of concern in terms of workforce shortages is in the specialisation of mental health. Here there are specific challenges to sufficient preparation of workforce, both in terms of quality and numbers, to meet workforce demands. In specialty practice, the market (under supply) of specialist mental health nurses drives a situation many regularly work beyond their scope of practice. Current regulation provides no direction regarding nurses working within their scope of practice in specialist mental health nursing settings.

Mechanisms for both attracting people to a career in nursing and encouraging diversity more broadly
The MNSc program has traditionally attracted individuals seeking to transition from their existing career to nursing. These graduates bring with them the diversity of lived experiences and commitment of an adult learner to the profession of nursing. This diversity is further enriched in students arriving from different cultural and socioeconomic backgrounds, which is needed to meet the needs of the existing social fabric in Australia.

The MNSc degree is delivered in an intense six-week block of theory and simulation classes followed by three (first year) or four (second year) weeks of full time clinical practice in either metropolitan, regional or rural settings. Whilst equipping students with graduate nursing skills, the program is strongly grounded in bioscience and focused on developing graduate attributes of critical thinkers equipped with advanced beginner research skills. Specifically, in addition to the 800 clinical hours, the graduates simultaneously undertake a clinically-related research project and through this learn about asking clinically relevant research questions, develop suitable research methodology, which they then use to execute the research project in an ethical manner.

From the start, these graduates are trained to be problem-solvers and fostered to use evidence to make clinical decisions, attributes needed for nursing leaders of the future. Once employed these graduates use their critical thinking and research skills to improve practice, develop research projects and actively participate in improving healthcare services, clinical practice and patient outcomes. This means that there is a potential to disseminate these skills to the area of graduate's employment thus up-skilling the existing workforce. Health information technology is increasingly embedded in the program, including electronic health records and tele-health. Capacity to problem-solve primes the graduates to be more adaptive to any changes in healthcare demands.

Graduates of the MNSci are highly valued by the industry, which is reflected in the employment rate that has been above 93% in 2016 and 2017 and in 2018 that employment rate was 98%. Many have also returned to become an integral part of the MNSc teaching team thus keeping the team dynamic and contemporary in practice.

Summary

To conclude, we consider the following points represent the most urgent priorities for government in re-shaping nurse education to serve future generations of Australians.

1. **Address the lack of regulation and standards in mental health nursing curricula** (entry to practice and specialist nursing courses)
2. **Address the lack of exposure to primary care and community-based nursing in entry to practice curriculum.**
3. Establish a **nationally consistent pathway that aligns coursework offerings in the profession to career progression** (entry to practice through to **advanced practice).**
4. **Establish standards** for industry-based transition programs.
5. **Promote work-integrated curriculum development** that strengthens educational and health industry partnership.
6. Support and **promote GEM-N programs as a mechanism to increase diversity** in nursing.

We thank the committee for taking the time to consider our submission and look forward to hearing the recommendations arising from this important review.

Kind regards

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