The effectiveness of current educational preparation of and articulation between EN and RN and nurse practitioners in meeting the health service delivery

- Vocational education training package is written poorly for the Diploma of Nursing. It is written in individual and singular style of units of competence and there isn’t a building of knowledge and understanding (it’s all course by course teaching not layer by layer of learning and the development of critical thinking and problem solving).
- Since the advent of new standards in VOC training (ASQA) there is overkill in assessments, it is not central to appropriate learning (the Diploma is being treated like a certificate 3 (ASQA) in learning when this is not appropriate particularly for nursing, there should be a building of skills and knowledge and the development of critical thinking). It seems like the training package has been cobbled together at the very last minute and no collaboration of nursing education has been brought it. ie: I believe when we were asked to feedback about the new training package submissions went in but not accepted as the feedback never was taken in to account.
- There is a big divide and gap between EN training and RN curriculum, Universities are not interested in VOC training and very clear they will only give little recognition in the Vocational training course. It also appears they do not believe that the EN student is well trained. (There is a poor pathway for students to enter and exit the program with a Diploma or go on to a Degree or Masters).
- It is incredibly difficult to map back a student who has completed half a RN degree to the EN diploma (many curriculums and different ways of learning) yet the EN Diploma has an Australia wide training package.
- Many skills are taught in VOC training for EN and it can be viewed as the student being ready for the EN role in either aged care or acute care but it seems also there is a flavour of training that is pitched to the NDIS which is not effective in picking up ENS. (many of the documents used in writing the EN Diploma of Nursing are from the Eastern states not the whole of Australia)
- Very poor consultation was in the writing of HLT54115 and not able to accept feedback in a timely manner (skills council was not listening to feedback no action taken).
- Make the pathway seamless (one stop shop with all Universities and TAFE collaborating). Cert 3 in Individual support to Diploma in Nursing to Degree in Nursing to Masters of Nursing (practitioner, education, managerial) to PHD.

The respective roles of education and health sector in the education of nursing workforce

- The lines are clouding now between the standards of nursing EN /RN, many standards are similar and there is no real distinction except some scope of practice and some authority/responsibility.
- Many ENs are working without contact with RNS and or Nurse practitioner (many ENS in GP practice are working without understanding of scope of RN/GP).
- Lack of generalist support either RN or EN in post qualifications, or make the 4th Year RN a supported role in a workplace without registration ie pre-registration to work, so skill development can be under supervision.
- Lack of support for regional programs and for student on placement in regional areas.
- Interstate universities encroaching on placements in SA (health and aged care are happy to take the RN student over the EN student so will take RNs from any universities not only SA).

Regional needs and circumstances

- Training in the regional areas of SA is limited and becoming more limited due Placement should be earmarked for regional students so they can access these areas. Too many hubs ins SA with too many Universities vying for placement UNISA, Charles Darwin, Universities of Adelaide and Flinders Deakin CQU and some Edith Cowan are present so the EN is at the bottom of the list for
placement but the lack of placements for EN due to these many University have first priority. (Private RTOS pay for placement and now students will be a disadvantage to have to pay for placement and pay for accommodation as Diploma is VET not University the wage later does not equate for high cost of studying.

- Aging and lack of facilities and infrastructure is common in regional areas, RNS and ENs are not well supported in areas such a learning to work in these areas. Not only for emergencies, but working in areas such as lack of infrastructure and allied health and Mental health home care, Care of dementia patients at home. There needs to be adjunct to post training to encourage the flow to regional health and post University training.
- There is still a reluctance to have EN Diploma of nursing administer medications and mange medication in some Health services and Aged care this means the industry does not understand the education of the EN.
- There is a wonderful program called cadet ship for ENs in SA (Country health and the collaboration with TAFESA) which has been a great success for 20 years developing EN to RNs More cadetships need to occur.
- TAFE System being run down there is lack of money to run a program that has good laboratories and skills development yet universities have many more facilities and infra structure for these commodities.

Happy to assist in any way as I think it is time the pathway to nursing is reviewed.

Regards

Ali James

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