

RECOMMENDATIONS

Chapter 1

Recommendation 1: That standard nomenclature be adopted throughout Australia to describe level of nurse and their qualifications, and including unregulated nursing and personal care assistants.

Chapter 2

Recommendation 2: That the Commonwealth Department of Immigration and Multicultural and Indigenous Affairs streamline visa arrangements and simplify the process of recognising overseas qualifications for nurses wishing to migrate to Australia on a permanent or temporary basis, and to publicise the capacity to extend and to change visa arrangements.

Recommendation 3: The Committee recommends that the Minister for Health and Ageing undertake an urgent national review of the charges and practices of nursing agencies, including their impact on costs to public and private providers of health services and their impact on the shortage of nurses in Australia.

Recommendation 4: The Committee recommends that the Australian Competition and Consumer Commission conduct a review of the practices of nursing agencies in the healthcare sector.

Recommendation 5: That the Commonwealth in cooperation with the States and Territories facilitate and expedite the development of a national nursing workforce planning strategy.

Recommendation 6: That the Commonwealth provide the Australian Institute of Health and Welfare with the resources required to establish a consistent, national approach to current data collection on the nursing workforce in Australia.

Recommendation 7: That research be undertaken to examine the relationship between health care needs, nursing workforce skill mix and patient outcomes in various general and specialist areas of care, with a view to providing “best practice” guidelines for allocating staff and for reviewing quality of care and awarding accreditation to institutions.

Recommendation 8: That the Commonwealth, as a matter of urgency, establish the position of Chief Nursing Officer within the Department of Health and Ageing.

Recommendation 9: That national registration be implemented for registered and enrolled nurses.

Chapter 3

Recommendation 10: That the current university-based system for the undergraduate education of Registered Nurses be continued.

Recommendation 11: That the Commonwealth, in conjunction with the States and universities, implement improved mechanisms to determine the supply and demand for nursing places at universities and in determining how these targets are set.

Recommendation 12: That the Commonwealth Government provide funding for additional undergraduate nursing places to universities offering nurse education courses to meet the workforce requirements set by the States.

Recommendation 13: That, while maintaining a balance between theoretical and practical training, undergraduate courses be structured to provide for more clinical exposure in the early years of the course and that clinical placements be of longer duration.

Recommendation 14: That hospitals and other healthcare agencies be encouraged to provide part-time paid employment for student nurses from the second year of undergraduate courses.

Recommendation 15: That universities, as far as practicable, operate their clinical education programs across the entire year.

Recommendation 16: That undergraduate courses provide additional theory and clinical experience in mental health, aged care and cross-cultural nursing.

Recommendation 17: That the Commonwealth Government provide specific funding to support the clinical education component of undergraduate nursing courses; and that this funding provide that the clinical teacher/student be maintained at a ratio of 1:4.

Recommendation 18: That the Commonwealth and State Governments provide additional targeted scholarships for undergraduate nursing students based on merit directed at students from economically and socially disadvantaged backgrounds, NESB and ATSI backgrounds, and from rural and regional areas.

Recommendation 19: That the Commonwealth Government provide general scholarships for undergraduate nursing students based on merit.

Recommendation 20: That formal mentoring and preceptorship programs be developed nationally, with enhanced training and the payment of allowances for nurses chosen to become preceptors.

Recommendation 21: That graduate nurse programs be available for all nursing graduates and that these programs:

- concentrate on skills consolidation through a structured program to enable professional development;
- be provided with appropriate supervision and support; and
- be jointly funded by Commonwealth and State Governments.

Recommendation 22: That formal articulation arrangements and recognition of prior learning between enrolled nurse courses and registered nurse courses be

universities and enrolled nurse education providers be further developed nationally.

Recommendation 23: That formal articulation arrangements and recognition of prior learning be developed between Certificate III courses for unregulated healthcare workers and enrolled nurse courses, and between courses for ATSI health workers and enrolled nurse courses.

Recommendation 24: That the Australian Nursing Council, in conjunction with key stakeholders, including State regulatory bodies, the universities, professional nursing bodies and nursing unions, develop a national curriculum framework or guidelines for undergraduate nursing courses to ensure greater consistency in the interpretation of the ANCI competencies.

Chapter 4

Recommendation 25: That the Australian Nursing Council, in consultation with major stakeholders, develop a national framework for the education of enrolled nurses in relation to course structure, duration and content.

Recommendation 26: That State and Territory Governments develop nationally consistent legislation in relation to the administration of medications by Enrolled Nurses.

Recommendation 27: That the Australian Nursing Council, in conjunction with key stakeholders such as state regulatory bodies, professional nursing bodies, universities and unions, develop a national curriculum framework or guidelines for midwifery courses.

Recommendation 28: That nurses be informed of their continuing education support and options, and encouraged to undertake continuing education courses.

Recommendation 29: That State nurse regulatory bodies examine the feasibility of introducing the requirement of continuing education and professional development as a condition for continuing registration.

Recommendation 30: That research be undertaken into the costs of providing paid study leave entitlements for nurses.

Recommendation 31: That paid study leave arrangements for nurses be negotiated by the Australian Nursing Federation and employers.

Recommendation 32: That the Commonwealth Government provide additional HECS places in postgraduate nursing courses currently attracting fees, especially in areas of national skills shortage.

Recommendation 33: That the Commonwealth and State Governments provide additional postgraduate scholarships in specialist areas, including midwifery.

Recommendation 34: That Commonwealth and State Governments promote and support the development and introduction of Nurse Practitioners across Australia as a viable component of healthcare services.

Recommendation 35: That the Royal College of Nursing and the NSW College of Nursing, in conjunction with the Commonwealth Department of Health and Ageing, the States and key stakeholders, develop a framework for nationally consistent standards and competencies for Nurse Practitioners.

Recommendation 36: That the Royal College of Nursing and the NSW College of Nursing, in conjunction with the Department of Health and Ageing and other key stakeholders, such as nurse regulatory bodies, examine the feasibility of establishing a national approach to the credentialing of Advanced Practice Nurses.

Recommendation 37: That State and Territory nursing regulatory authorities develop a framework for the regulation of unregulated healthcare workers.

Recommendation 38: That the relevant State and Territory legislation be amended to provide that unregulated healthcare workers not be permitted to administer medications.

Recommendation 39: That the standard minimum level of training required for unregulated workers before they can be employed in healthcare facilities be equivalent to Level III of the Australian Qualifications Framework (Certificate Level III).

Recommendation 40: That universities continue to promote and develop IT in undergraduate nursing courses, in particular the training needs of mature aged undergraduates.

Recommendation 41: That in-service training in IT skills be widely developed and promoted for graduate nurses.

Recommendation 42: That the Commonwealth Government, through the National Health and Medical Research Council, increase funding for nursing research as a matter of priority.

Recommendation 43: That the research funding provided by the Department of Education, Science and Training to universities be increased to facilitate additional university-based nursing research.

Chapter 5

Recommendation 44: That partnership arrangements be further developed between the public and private health sectors and universities and the vocational education sectors to facilitate the clinical education and training of nurses.

Recommendation 45: That partnerships be developed between universities to facilitate the sharing of resources and expertise; and facilitate undergraduate student clinical placements in a range of metropolitan and regional clinical settings.

Recommendation 46: That improved partnership arrangements be established between the universities and the health sector in relation to curriculum development, including the appointment of clinicians to university curriculum committees.

Recommendation 47: That the Commonwealth provide funding for the establishment of more joint appointments between universities and health services.

Recommendation 48: That the Commonwealth provide funding for the establishment of additional clinical chairs of nursing.

Chapter 6

Recommendation 49: That the Commonwealth Government support the proposal by the Royal College of Nursing to conduct a pilot project in Australia on the Magnet Hospital Recognition Program.

Recommendation 50: That the Commonwealth and States fund regular, sustained campaigns conducted on a nationally coordinated basis to promote the status and positive image of nursing.

Recommendation 51: That a national nursing recruitment strategy be developed by the Commonwealth in consultation with the States and relevant nursing and employer bodies, with recruitment targets established through national workforce planning.

Recommendation 52: That any recruitment strategy and marketing campaigns specifically include encouragement for more males to adopt nursing as a career.

Recommendation 53: That the current career structure be reviewed and revised to provide career pathways that include continued clinical practice, enhanced opportunities for postgraduate study and accelerated pathways through which nurses can move to an advanced practitioner status. The career structure needs to recognise the skills obtained through postgraduate study and remunerate them accordingly.

Recommendation 54: That governments and professional nursing bodies provide detailed information to nurses on career pathways.

Recommendation 55: That the Commonwealth and States encourage providers of health care services to promote multidisciplinary team approaches to patient care which recognise all members of the team as valued and valuable.

Recommendation 56: That experienced, skilled and educated nurses be recognised and rewarded, both financially and through promotional opportunity, for the work they perform in decision making and the management and coordination of patient care across the continuum of care.

Recommendation 57: That the Commonwealth and States encourage providers of health care services to support nursing leadership by integrating nurses into the organisational hierarchy through their appointment to and meaningful participation in management; and by promoting nurse involvement in decision-making relating to nursing practice and clinical patient care.

Recommendation 58: That the Commonwealth and States ensure that nursing leaders are provided with the necessary in-service training and development to support them in their constantly evolving roles.

Recommendation 59: That the Commonwealth and States fund re-entry and refresher programs in all States and Territories, including the employment and payment of salaries for nurses undertaking such programs.

Recommendation 60: That there be greater coordination of re-entry and refresher programs provided through hospitals and tertiary institutions and of the content of these programs.

Recommendation 61: That the following ‘family friendly’ practices be advocated by all levels of government as best practice for all providers of health care services and nurse employers:

- That flexible rostering be introduced or where appropriate developed further, together with the encouragement of greater use of part-time and job-share options.
- That paid maternity and paternity leave be available to all nurses.
- That adequate, affordable, quality childcare be provided over extended hours at the workplace, or through other forms of direct childcare assistance such as the procurement of places at nearby childcare centres.
- That adequate facilities to meet breastfeeding requirements be provided in the workplace.
- That work practices be established to encourage experienced older nurses to remain in the profession.

Recommendation 62: That governments ensure that providers of health care services guarantee that education and other support measures for managing and responding appropriately to aggressive and violent behaviour are available to, and routinely provided for, nurses as continuing education in the workplace.

Recommendation 63: That the Commonwealth introduce a national reporting system for violence and aggression toward nurses and other health workers in order to understand the factors which give rise to violent incidents, the extent of the problem, and to inform the development of strategies to prevent future violent incidents involving nurses and other health workers.

Recommendation 64: That the National Occupational Health and Safety Commission urgently develop model uniform OH&S legislation and regulations for the Commonwealth, States and Territories relating to the use of safe needle technologies in Australian hospitals and other health workplaces, and work cooperatively with the States and Territories to improve associated safety education and training programs for health care workers.

Recommendation 65: That governments ensure that all nurse education curricula include occupational health and safety theory and practice covering aggression management training, use of safety equipment and devices, manual handling training, and competency assessment.

Recommendation 66: That the following ‘occupational health and safety’ practices be advocated by all levels of government as best practice for all providers of health care services and nurse employers:

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- That all health and aged care facilities provide nurses with access to peer support, appropriate counselling, post-incident defusing and debriefing, and grievance handling.
 - That providers of health care services support their nursing staff in the prosecution of violent offenders.
 - That providers of health care services be required to ensure that nurses do not work alone in areas of high risk or where the level of risk is unknown. Where this is not possible, personal duress alarms or similar communications devices should be provided for personnel.
 - That staff car parking should be accessible, well secured and well lit for access at all hours. In recurring problem areas, dedicated 24-hour a day security presence should be provided.
 - That sufficient funding be available to ensure that hospital equipment, including safe lifting devices, are up to date, readily available for staff use and regularly maintained.
 - That research be commissioned into the long-term effects of exposure to glutaraldehyde and that a process be put in place to eliminate the use of glutaraldehyde in health and aged care sectors.
 - That alternative equipment be provided for those who are allergic to latex, with a view to eventually replacing the use of latex products by health care workers.

Recommendation 67: That governments ensure that all managers in health services receive training in:

- Management styles that promote leadership and consultation;
- Management skills to include conflict resolution and grievance management, improved human resource management, understanding industrial relations and awards, and information technology skills; and
- Occupational health and safety responsibilities and risk management.

Chapter 7

Recommendation 68: That the Commonwealth review the level of documentation required under the RCS tool to relieve the paperwork burden on aged care nurses.

Recommendation 69: That the outcomes of reviews and research be used to establish appropriate benchmarks for resources and skills mix in aged care nursing so as to support improved care for residents, workforce management, organisational outcomes and best practice and that Commonwealth funding guidelines be reviewed in light of this research.

Recommendation 70: That universities review the content and quality of clinical placements and experiences of students in aged care in their undergraduate courses and that clinical placements include a range of aged care settings.

Recommendation 71: That universities review and develop postgraduate programs and courses, including the provision of courses by distance education, appropriate for the aged care sector.

Recommendation 72: That the Commonwealth fund the expansion of re-entry/refresher programs specifically targeted at aged care nurses.

Recommendation 73: That the Commonwealth provide additional funding to implement wage parity between aged care and acute care nurses in each State and Territory.

Recommendation 74: That strategies be implemented to improve the image of aged care nursing.

Recommendation 75: That the Commonwealth take measures to reduce occupational injuries to nurses working in aged care, including the introduction of 'no lift' programs across the aged care sector in conjunction with the provision of up to date safe lifting devices that are readily available for staff use and are regularly maintained.

Chapter 8

Recommendation 76: That the Commonwealth fund scholarships for psychiatric/mental health nursing for graduate year students wanting to specialise in the area, and for already qualified nurses wishing to undertake a mental health nursing course.

Recommendation 77: That a targeted campaign be undertaken to improve the status and image of psychiatric/mental health nursing.

Recommendation 78: That funding be provided for the development of advanced practice courses in mental health nursing.

Recommendation 79: The Commonwealth provide additional funds to universities to extend clinical education in rural and remote regional hospitals.

Recommendation 80: That the Commonwealth increase the amount of funding of rural and remote nursing programs, including scholarship programs, in line with funding of medical programs.

Recommendation 81: That the Commonwealth and States provide funding for nursing relief programs such as 'circuit nurse' programs in rural and remote Australia.

Recommendation 82: That all rural and remote area health services with the assistance of State governments offer additional incentives to nursing staff through employment packages including accommodation assistance, additional recreation and professional development leave, and appointment and transfer expenses to encourage nurse recruitment.

Recommendation 83: That the Commonwealth increase the number of scholarships for Aboriginal and Torres Strait Islander nursing students and health workers to increase their numbers and upgrade their qualifications.

Recommendation 84: The strategies for the Aboriginal and Torres Strait Islander nursing workforce proposed in the Health Workforce National Strategic Framework be implemented as a matter of urgency.

Recommendation 85: That the Commonwealth while examining medical insurance issues also consider the issue of professional indemnity insurance for nurses, including midwives and allied health workers.

