



Australian College of Nursing

SPECIAL COMMISSION OF INQUIRY INTO HEALTHCARE FUNDING

THE AUSTRALIAN COLLEGE OF NURSING RESPONSE TO NSW
GOVERNMENT (OCTOBER 2023)

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Acknowledgement

The Australian College of Nursing (ACN) is the professional body for the nursing profession in Australia. ACN advocates, develops policy, and provides education to advance the status, recognition, and respect for nurses. ACN supports a number of initiatives in health care that align with its values for health equality for all.

Executive summary

The Australian College of Nursing (ACN) would like to thank the NSW Government for the opportunity to provide feedback on the **Special Commission of Inquiry into Healthcare Funding**.

ACN welcomes the opportunity to contribute to the NSW Government Special Commission of Inquiry into Healthcare Funding. ACN supports a holistic review of the funding of health services in NSW, including strategies to address escalating costs, limit wastage and identify areas of improvement in financial management. ACN is optimistic that the Inquiry will identify opportunities to deliver higher quality, timely, and more accessible patient-centered care.

The nursing workforce is the largest group of registered health professionals in Australia, with approximately 440,110 nurses registered in 2023. In NSW, there are 114,269 nurses currently registered with the Nursing and Midwifery Board (26 % of all registered nurses in Australia).¹ According to data from the Department of Health, the number of employed nurses and midwives in New South Wales (NSW) increased by 20.5% from 2010 to 2019, from 82,211 to 99,078.² This is a compound annual growth rate of 2.1%. It is worth noting that there are 3,631 non-practicing nurses listed with the Nursing and Midwifery Board.³

The nursing workforce plays a vital role in providing safe, quality and patient-centred care across various settings and specialties. Nurses are at the forefront of healthcare delivery, innovation, and research. They are also key contributors to health system sustainability and efficiency. Nurses are cost-effective in terms of impact on patient outcomes because they provide high-quality care that can prevent complications, reduce hospitalizations, and improve health behaviours.⁴ Investing in nursing improves clinical outcomes without significantly altering the cost.⁵ The evidence indicates that increasing the number of registered nurses can lead to improved outcomes and potentially lower net costs.⁶

¹ [Nursing and Midwifery Board of Australia - Statistics \(nursingmidwiferyboard.gov.au\)](https://nursingmidwiferyboard.gov.au)

² [factsheet-nrmw-2019.pdf \(health.gov.au\)](https://health.gov.au/factsheet-nrmw-2019.pdf)

³ [Nursing and Midwifery Board of Australia - Statistics \(nursingmidwiferyboard.gov.au\)](https://nursingmidwiferyboard.gov.au)

⁴ Committee on the Future of Nursing 2020–2030; The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity. Washington (DC): National Academies Press (US); 2021 May 11. 4,

⁵ Lasater, K. B., McHugh, M. D., Rosenbaum, P. R., Aiken, L. H., Smith, H. L., Reiter, J. G., Niknam, B. A., Hill, A. S., Hochman, L. L., Jain, S., & Silber, J. H. (2021). Evaluating the Costs and Outcomes of Hospital Nursing Resources: a Matched Cohort Study of Patients with Common Medical Conditions. *Journal of general internal medicine*, 36(1), 84–91. <https://doi.org/10.1007/s11606-020-06151-z>

⁶ Griffiths, P., Saville, C., Ball, J., Dall'Ora, C., Meredith, P., Turner, L., & Jones, J. (2023). Costs and cost-effectiveness of improved nurse staffing levels and skill mix in acute hospitals: A systematic review. *International journal of nursing studies*, 147, 104601. <https://doi.org/10.1016/j.ijnurstu.2023.104601>

ACN recognises the challenges and opportunities that the Inquiry presents for the nursing profession and is committed to providing evidence-based and expert advice to inform the Inquiry's recommendations. ACN acknowledges that the NSW Government now has reforms for implementing safe staffing levels, which aims to retain experienced healthcare staff and attract a future workforce. ACN strongly believes that person-centred care is a critical component of a functional healthcare system⁷. As the largest healthcare profession in Australia,⁸ nurses have a unique insight into not only the care experience of people in Australia but also the healthcare workforce. ACN continues to advocate for equitable access to health care for all members of the Australian community.

This paper explores the challenges and opportunities for the nursing workforce by examining the unique demands at each stage of a nurse's career. Broader impacts of the image of nursing and scope of practice are discussed to highlight the need for a state-wide approach to recognize the value of nursing to the health care sector and the Australian public.

⁷ Australian College of Nursing (ACN). (2019). *Person-Centred Care*, ACN, Canberra.

⁸ Australian Institute of Health and Welfare (AIHW). (2022). *Health Workforce*, AIHW, Australian Government.

Summary of recommendations

ACN recommends the NSW Government:

- Provide financial support for nursing students while on clinical placement.
- Fund specialised transition-to-practice programs in areas such as Primary Health, Aged Care and Mental Health.
- Provide a range of scholarships for post-graduate studies in nursing.
- Develop and implement a statewide mentoring program for nurses.
- Develop an education and training framework for nurses and midwives that supports and funds their annual requirement of continuous practice development.
- Support Local Health Districts to establish a pathway and support nurses to advance their leadership skills throughout their career.
- Fund the development and implementation of a Transition to Retirement Program for Nurses.
- Review the rulings related to the aged pension and increase the limit of secondary income for high-need professions such as nursing.
- In collaboration with other states and territories, invest in a media campaign that promotes the positive contribution nurses make, to improve the image of nursing.
- Explore block funding opportunities to support the stability of health care services.

Special Commission of Inquiry into Healthcare Funding

Introduction

In line with the Terms of Reference for this Inquiry, this paper will address how the NSW Government can most effectively support the safe delivery of high-quality patient-centered care by investing in the nursing workforce. This paper will identify key challenges currently facing the nursing workforce and offer practical solutions.

The Nursing Lifespan

This section highlights the challenges and opportunities for the nursing profession by examining the career lifespan of a nurse and addresses sections A, D, F and G of the Terms of Reference.

1. Undergraduate nurse training

High attrition rates

Australia, in common with many countries globally is facing a nursing shortage. It is predicted that by 2025, nationally the overall nursing shortage will reach approximately 110,000.⁹

AHPRA reports that thousands of nursing students graduate annually, with a yearly attrition rate of approximately 17%. Australia has a 10% to 40% dropout rate for nursing students.¹⁰ Nursing students face high stress levels, affecting their health and potentially leading to attrition. Socio-demographic factors influence perceived stress and coping strategies.¹¹

Low ATAR score requirement

In 2021, 54,841 NSW students received an ATAR, compared to 57,061 in 2017¹². The ATAR score for nursing is lowering nationally, and although this may encourage student enrolments into a Bachelor of Nursing program it is important to note the impact this might have on the nursing profession in the future. In 2018, the ATAR cut-off in the majority Australian university based in NSW was 84.25, it had

⁹ Crettenden, I. F., McCarty, M. V., Fenech, B. J., Heywood, T., Taitz, M. C., & Tudman, S. (2014). How evidence-based workforce planning in Australia is informing policy development in the retention and distribution of the health workforce. *Human Resources for Health*, 12(1), 7. <https://doi.org/10.1186/1478-4491-12-7>

¹⁰ Liu, X. L., Wang, T., Bressington, D., Nic Giolla Easpaig, B., Wikander, L., & Tan, J. Y. (2023). Factors Influencing Retention among Regional, Rural and Remote Undergraduate Nursing Students in Australia: A Systematic Review of Current Research Evidence. *International Journal of Environmental Research and Public Health*, 20(5), 3983.

¹¹ Asturias, N., Andrew, S., Boardman, G., & Kerr, D. (2021). The influence of socio-demographic factors on stress and coping strategies among undergraduate nursing students. *Nurse education today*, 99, 104780.

¹² [AsP ATAR Results \(nsw.gov.au\)](https://www.nsw.gov.au/education/ATAR)

fallen by 12.25 per to 72 in 2023.¹³ This reduction is reflected in many NSW universities as well as nationally.

The COVID-19 pandemic is expected to significantly impact Australia's student pass rate, due to unprecedented disruptions in their study routines.¹⁴ During this period, ensuring graduate readiness became more complex due to limited in-person teaching and clinical experiences, despite improvements in modifications.

Financial demand of clinical placements

Undergraduate nursing students are required to complete a minimum of 800 hours of clinical placement to successfully register as a nurse in Australia.¹⁵ Nationally, clinical placements are unpaid. Amid a cost-of-living crisis, clinical placements are putting an increased financial strain on many students impacting their overall health. According to a study undertaken in 2022, as many as 65% of students were unable to work while completing clinical placement, with 79% reporting financial hardship and 62% impacting health and wellbeing,¹⁶ also contributing to the high attrition rate. Although clinical placements are defined as vocational placements under the Fair Work Act,¹⁷ with the current and foreseeable nursing shortage in Australia, this needs to be reviewed. In many European countries, including Switzerland, nursing students are paid a small amount to study and undertake their placements. This monetary value increases as student's level of training increases.¹⁸

During the COVID-19 pandemic, a lot of students studying nursing, allied health, and medicine voiced financial concerns due to the loss of their regular jobs and income. Changes in clinical placements can put students under unexpected financial strain. Some students were ultimately precluded from completing their intended rural or remote placement due to these circumstances.¹⁹ The COVID-19 pandemic significantly disrupted nursing education worldwide, causing shutdowns and reduced clinical learning hours, affecting new nurses' transition to professional practice, and affecting their education.²⁰

In Victoria, an undergraduate student of nursing or midwifery can be employed while they study. This employment arrangement is known as a Registered Undergraduate Student of Nursing (RUSON) or a

¹³ Course. (n.d.). University of Technology Sydney. Retrieved 18 October 2023, from <https://www.uts.edu.au/study/find-a-course/bachelor-nursing>

¹⁴ Department of Education (2021). Selected Higher Education Statistics – 2021 Student data. <https://www.education.gov.au/higher-education-statistics/student-data/selected-higher-education-statistics-2021-student-data>

¹⁵ ANMAC (2020). Updated ANMAC communication to education providers 1 September 2020. ANMAC Communiqué. 1 September 2020. https://www.anmac.org.au/sites/default/files/documents/professional_experience_placement_during_covid_19_pandemic_-_update.pdf

¹⁶ Usher, K., Fagan, A., Brown, J. A., Mather, C., Marlow, A., Power, T., ... & Lea, J. (2022). The financial challenges for Australian nursing students attending placement-based work-integrated learning. *Collegian*, 29(2), 154-160.

¹⁷ Vocational placements. (n.d.). [Vocational placements \(fairwork.gov.au\)](https://www.fairwork.gov.au/vocational-placements)

¹⁸ Hoffman, N., & Schwartz, R. (2015). Gold Standard: The Swiss Vocational Education and Training System. International Comparative Study of Vocational Education Systems. *National Center on Education and the Economy*.

¹⁹ Jessup, B., Hoang, H., Podubinski, T., Obamiro, K., Bourke, L., Hellwege, B., Jatrana, S., Heaney, S., Farthing, A., Sheepway, L., & Rasiyah, R. (2022). 'I can't go, I can't afford it': Financial concern amongst health students undertaking rural and remote placements during COVID-19. *Australian Journal of Rural Health*, 30(2), 238-251. <https://doi.org/10.1111/ajr.12855>

²⁰ Powers, K., Pate, K., Montegrigo, J., & Pagel, J. (2022). Faculty Perceptions of the Impact of the COVID-19 Pandemic on New Graduate Nurses' Transition to Practice: A Qualitative Study. *Journal of Professional Nursing*, 43, 33-41.

Registered Undergraduate Student of Midwifery (RUSOM). The COVID-19 pandemic has expanded the range of practice for RUSONs and RUSOMs, and these positions are now widely acknowledged in Victorian public health systems.²¹

ACN members of the Emerging Nurses Leaders Program reported that The University of Sydney to fund some nursing rural placements, but not all universities offer this opportunity.²² Positive student rural professional experience placements can be a powerful tool for addressing the lack of qualified workers in rural healthcare institutions. Supervisors who can mentor students, expose them to various situations, start learning and teaching activities, and give timely and appropriate feedback are essential elements for successful student placements. Because of the significant differences between rural and urban practice environments, effective placements with the assistance of host organisations, supervisors, and students are required to guarantee that everyone involved has a positive placement experience.²³

Need for experienced clinical facilitators

Clinical supervision approaches from different eras are used in Australian nursing courses. The clinical facilitator model is a popular method.²⁴ It is known that the role of the clinical facilitator is essential and valuable. Nursing students must learn how to practice safely and acquire interpersonal skills to connect with patients, families, and coworkers. Clinical facilitators play a key role in enhancing these skills.²⁵ Preceptorships are pre-arranged and time limited. Preceptors help new recruits gain confidence and clinical competence, while mentors guide professional and personal development and socialize new graduates.

Recommendation

- **Provide financial support for nursing students while on clinical placement.**

²¹ Victoria Government. (2023). Undergraduate student employment programs.

<https://www.health.vic.gov.au/nursing-and-midwifery/undergraduate-student-employment>

²² UTS (2019). Nursing student experiences rural placement. <https://www.sydney.edu.au/medicine-health/news-and-events/2019/08/19/going-rural-nursing-placement-in-orange.html>

²³ Coe, S., Marlow, A., & Mather, C. (2020). Whole of Community Facilitators: An Exemplar for Supporting Rural Health Workforce Recruitment through Students' Professional Experience Placements. *International Journal of Environmental Research and Public Health*, 18(14), 7675. <https://doi.org/10.3390/ijerph18147675>

²⁴ Jayasekara, R., Smith, C., Hall, C., Rankin, E., Smith, M., Visvanathan, V., & Friebe, T. R. (2018). The effectiveness of clinical education models for undergraduate nursing programs: A systematic review. *Nurse education in practice*, 29, 116-126.

²⁵ Ryan, C., & McAllister, M. (2019). The experiences of clinical facilitators working with nursing students in Australia: An interpretive description. *Collegian*, 26(2), 281-287. <https://doi.org/10.1016/j.colegn.2018.07.005>

2. New graduate programs

High nursing turnover rates affects healthcare organisations and patient safety. A nurses' first years' experiences significantly influence future career decisions. Nurses starting their professional careers should practice both theoretical and practical skills, receive regular support, and have opportunities to reflect on their experiences.²⁶

Nursing graduate programs are supportive programs designed to assist new graduate nurses to transition into the nursing workforce. To be eligible for these programs, students must meet the following criteria: complete university one year prior to starting the program, meet the requirements of registration with AHPRA, and be an Australian citizen or hold a visa that allows full-time employment. Many of these positions are full-time however, it is dependent upon the organisation, and it is up to the discretion of the applicant to negotiate the terms of employment. Within NSW, there are limited new graduate programs offered outside of the hospital setting. Australia is currently experiencing a surplus and corresponding lack of employment for new graduates. The number of graduate programs offered is determined by the health service. We need to re-examine an alternative to the 'traditional hospital based' graduate program and consider a move to a more primary healthcare focus.

As the Australian government has recognised the need to shift focus from hospital-based services to primary health care, it is important graduate opportunities reflect this change.²⁷ Recent data from the Department of Health and Ageing (2023) shows that primary healthcare nurses comprise 26.2 % of the total nursing workforce, therefore we need to examine ways to support this workforce.²⁸ Currently, there is collaboration between the Department of Health and Ageing and the Australian Primary Health Care Nurses Association in offering a transition-to-practice program.²⁹ Primary health care nurses work across a diverse number of clinical settings including general practice, community settings, non-government organisation and residential care settings. The eligibility to this program is limited to those who are already working in primary health and have recently graduated or experienced nurses seeking additional support. This program is fundamental in addressing the increased need for health services in primary health through ensuring graduate nurses are familiar with the scope of primary health nursing practice.³⁰ Although there are government-funded programs, the uptake for these programs for new graduate nurses are limited, rather they are undertaken by experienced nurses. Despite this, there

²⁶ Johansson, A., Berglund, M., & Kjellsdotter, A. (2021). Clinical Nursing Introduction Program for new graduate nurses in Sweden: study protocol for a prospective longitudinal cohort study. *BMJ open*, *11*(2), e042385.

²⁷ Gordon, C. J., Aggar, C., Williams, A. M., Walker, L., Willcock, S. M., & Bloomfield, J. (2014). A transition program to primary health care for new graduate nurses: A strategy towards building a sustainable primary health care nurse workforce? *BMC Nursing*, *13*(1), 34. <https://doi.org/10.1186/s12912-014-0034-x>

²⁸ Cox, R., Robinson, T., Rossiter, R., Collison, L., & Hills, D. (2023). Nurses Transitioning to Primary Health Care in Australia: A Practice Improvement Initiative. *SAGE Open Nursing*, *9*, 23779608231165695. <https://doi.org/10.1177/23779608231165695>

²⁹ Care, A. G. D. of H., and A. (2023, June 2). *Strengthening the role of the nursing workforce* [Text]. Australian Government Department of Health and Aged Care; Australian Government Department of Health and Aged Care. <https://www.health.gov.au/our-work/strengthening-the-role-of-the-nursing-workforce>

³⁰ Murray-Parahi, P., DiGiacomo, M., Jackson, D., Phillips, J., & Davidson, P. M. (2020). Primary health care content in Australian undergraduate nursing curricula. *Collegian*, *27*(3), 271–280. <https://doi.org/10.1016/j.colegn.2019.08.008>

remains a shortfall in the primary healthcare workforce.³¹ Currently primary health nurses are an ageing workforce, where the majority of nurses working in general practice are aged over 40 years (81.3%), with an alarming 40.8% of these nurses, aged between 50-59 years.³² These programs need to focus on evidence-based practice to ensure they successfully address the increased burden of chronic disease, ageing population, and rising cost of living.

Alongside the new graduate nurse program, it is imperative to address the need for mentorship programs. Mentorship programs in nursing help novice nurses to navigate the dynamic and often overwhelming transition into experienced practitioners. Mentorship improves problem-solving, professional communication, teamwork, quality, and safety in nursing, impacting academic and practice settings. It fosters new partnerships and may improve patient outcomes when initiated in academia.³³

Leadership programs empower nurses to influence and shape the health care environment and outcomes for patients and communities. Currently, the ACN offers a fully funded leadership program (Emerging Nurse Leaders Program) to address this issue. This program has successfully been running for 10 years and has assisted over 252 nurses to become more confident leaders within the nursing profession. It is however a competitive award program with a maximum intake of 50 participants in a cohort. Given the success of these programs, we are recommending that these programs be made available to all nurses throughout their career.

Mentoring programs appear to have successfully transitioned newly graduated nurses, with experienced supervising nurses providing support and integrating them into daily practice, ensuring smooth transition and success. Understanding nursing mentorship's impact on nurse transition and retention amid burnout is crucial for improving safety and workforce outcomes.

Recommendation

- **Fund specialised transition-to-practice programs in areas such as Primary Health, Aged Care and Mental Health.**

³¹ Peters, K., Halcomb, E. J., & McInnes, S. (2013). Clinical placements in general practice: Relationships between practice nurses and tertiary institutions. *Nurse Education in Practice*, 13(3), 186–191. <https://doi.org/10.1016/j.nepr.2012.09.007>

³² AML Alliance (2012). General Practice Nurse National Survey Report

³³ Gularte-Rinaldo, J., Baumgardner, R., Tilton, T., & Brailoff, V. (2023). Mentorship ReSPeCT Study: A Nurse Mentorship Program's Impact on Transition to Practice and Decision to Remain in Nursing for Newly Graduated Nurses. *Nurse Leader*, 21(2), 262-267.

3. Post graduate programs

The Australian healthcare and social assistance industry are the largest employer, with demand for nurse unit managers expected to grow by 23.1% in 2026.³⁴

Postgraduate education has led to significant improvements in knowledge and skills among nurses and nurse managers, particularly in higher-order skills like problem-solving and critical thinking.

Postgraduate education enhances nurses' roles, enabling them to provide bedside care and influence healthcare policy, advancing in leadership roles, utilize the latest evidence, enabling them to achieve senior positions where their experiences and opinions are considered.³⁵

Research on postgraduate nurses' learning needs in rural and regional contexts is still underway. The National Rural and Remote Nursing Generalist Framework in Australia empowers rural nurses to practice with greater autonomy, requiring close collaboration with colleagues and communities. Rural and regional nurses need proper critical care nursing training to effectively perform their duties. Specialist critical care nurses in rural and regional settings face unique challenges, and students may require specialized preparation for these environments.³⁶

Investing in post graduate programs can enhance specialized skills and retain the workforce in the long term.

Recommendation

- **Provide a range of scholarships for post-graduate studies in nursing.**

³⁴ *Why you should do a postgraduate nursing course*. Federation University Online. (2023, August 29). <https://online.federation.edu.au/why-postgraduate-nursing-course/#:~:text=Long%2Dterm%20career%20gains&text=This%20makes%20it%20easier%20for,lack%20further%20qualifications%20or%20training>. However,

³⁵ Abu-Qamar, M. E. Z., Vafeas, C., Ewens, B., Ghosh, M., & Sundin, D. (2020). Postgraduate nurse education and the implications for nurse and patient outcomes: A systematic review. *Nurse education today*, 92, 104489.

³⁶ Beasleigh, S., Bish, M., & Mahoney, A. (2023). The learning needs and clinical requirements of post graduate critical care nursing students in rural and regional contexts: A scoping review. *Australian Critical Care*. <https://doi.org/10.1016/j.aucc.2023.06.001>

4. Mid-Career Nurses

Staff satisfaction is significantly influenced by a person's perception of support, with lack of support often leading to nurses leaving their roles.³⁷ A report indicates that in some organizations, 60-75% of nurses leave the workforce prematurely.³⁸ Effective support for nurses involves mentoring and ongoing education.

The aftermath of the COVID-19 pandemic has left significant and long-term chaos in the healthcare industry. According to a survey by the Australian Primary Health Care Nurses Association (APNA), more than a quarter of nurses in the industry (28.73%) expect to quit their jobs within the next two to five years. 78.8% of survey participants reported feeling burned out.³⁹ Midwives felt their ability to provide quality maternity care was constrained by a fragmented medicalised system that did not work for the women in their care or themselves. A study showed that almost half of (42.8%, n = 443/1037) the midwives had considered leaving the profession in the preceding six months.⁴⁰

A study conducted in a hospital setting in NSW provided an example of the advantages of taking into account the opinions of nurses who were working in hospitals during the pandemic. The study's participants were able to highlight the good work experiences they had when the pandemic was going on. Additionally, they highlighted the significance of organisational leadership and the prompt release of open pandemic plans. These include chances to investigate other care and employment options. A thorough understanding of the experiences nurses and midwives have in the workplace may help with better planning and targeted assistance at the individual, organisational, and policy levels.⁴¹

Following a review of ten articles, it was discovered that factors like health status and work environment exhaustion, depersonalisation, occupational injuries, intent to stay, job satisfaction, and peer support all played a significant role in registered nurses' turnover. Hospital factors like hospital size, location, and unionisation also played a role.⁴²

Mentorship can help nurses develop workforce capacity to lead and contribute to policy agendas at the local, national, and worldwide levels. Mentorship programmes can help nurses find their voice, increase their confidence and capacity to lead, and so build the strategic leaders of the future.⁴³ Health services

³⁷ Jochim, V., & Rosengren, K. (2022). Nursing preceptorship, a supportive and reflective approach for promoting a healthy working environment: a multi-methods design. *Nordic Journal of Nursing Research*, 42(3), 147-157.

³⁸ Ziebert, C., Klingbeil, C., Schmitt, C. A., Stonek, A. V., Totka, J. P., Stelter, A., & Schiffman, R. F. (2016). Lessons learned: newly hired nurses' perspectives on transition into practice. *Journal for Nurses in Professional Development*, 32(5), E1-E8.

³⁹ Anastasia Tsirtsakis. A quarter of the primary care nurse workforce could soon quit, survey shows. newsGP 17 February 2022 <https://www1.racgp.org.au/newsgp/professional/a-quarter-of-the-primary-care-nurse-workforce-coul>

⁴⁰ Harvie, K., Sidebotham, M., & Fenwick, J. (2019). Australian midwives' intentions to leave the profession and the reasons why. *Women and Birth*, 32(6), e584-e593. <https://doi.org/10.1016/j.wombi.2019.01.001>

⁴¹ Whiteing, N., Massey, D., Rafferty, R., Penman, O., Samios, C., Bowen, K., Stephens, A., & Aggar, C. (2023). Australian nurses' and midwives' perceptions of their workplace environment during the COVID-19 pandemic. *Collegian*, 30(1), 39-46. <https://doi.org/10.1016/j.colegn.2022.06.007>

⁴² Bae, S. H. (2023). Comprehensive assessment of factors contributing to the actual turnover of newly licensed registered nurses working in acute care hospitals: a systematic review. *BMC nursing*, 22(1), 1-19.

⁴³ Rosser, E. A., Edwards, S., Cho Kwan, R. Y., Ito, M., Potter, D. R., Hodges, K. T., & Buckner, E. (2023). The Global Leadership Mentoring Community: An evaluation of its impact on nursing leadership. *International Nursing Review*, 70(3), 279-285. <https://doi.org/10.1111/inr.12860>

need to encourage mid-career nurses to engage in mentoring, pursue additional education in their specialty area or explore new specialties to enhance their knowledge and career prospects.

Recommendations

- **Develop and implement a statewide mentoring program for nurses.**
- **Develop an education and training framework for nurses and midwives that supports and funds their annual requirement of continuous practice development.**

5. Nursing leadership – building capability

Every health service has a responsibility to invest in nursing leadership. Some of the benefits of effective nursing leadership are:

- Improvements in the quality and safety of patient care by fostering a culture of excellence, innovation, and collaboration among nurses and other health care professionals.
- Enhancing the satisfaction and retention of nurses by providing them with opportunities for professional development, recognition, and empowerment.
- Contributing to the advancement of nursing knowledge and practice by supporting research, education, and evidence-based practice.
- Influencing health care policy and legislation by advocating for the needs and interests of nurses and patients.
- Responding to the challenges and opportunities of the changing health care environment by adapting to new technologies, models of care, and population needs.^{44 45 46}

Strong leadership abilities are necessary for nurses at all levels to improve the standard of care and patient safety. In contrast, policy makers, other healthcare professionals, and the general public may find it simpler to stereotype nurses as *'functional doers'*—those who follow orders—as opposed to *'thoughtful strategists'* who make well-informed decisions and whose independent actions are supported by training, research, and experience.⁴⁷

Nurse leaders must adapt to changing healthcare challenges, and the Australian College of Nursing has developed a Nurse Executive Capability Framework to guide their development. This national standard sets the standard for nurse executives, ensuring they can effectively address social, political, and economic challenges.⁴⁸

The Australian College of Nursing Institute of Leadership supports nurses at all career stages to extend their leadership skills and confidence. In 2023, the Australian College of Nursing launched the Nursing Unit Manager Leadership Program. Clinical nurses transitioning to nursing unit managers face challenges in hybrid management, balancing professional and managerial responsibilities. The Nursing Unit Manager Leadership Program aims to enhance nursing management capabilities, focusing on their ability to lead and manage units in both current and emerging environments, benefiting staff, community, and care recipients.

Other leadership courses offered by the Australian College of Nursing include:

- **The Emerging Nurse Leader Program** supports current and future nurse leaders, from undergraduate nursing students to enrolled and registered nurses in their sixth year of nursing practice, to kickstart their leadership careers by providing access to mentoring, career coaching, professional development webinars and leadership workshops.

⁴⁴ [Leadership in Nursing: Qualities & Why It Matters | ANA \(nursingworld.org\)](#)

⁴⁵ McKenna, J & Jeske D, (2021) Ethical leadership and decision authority effects on nurses' engagement, exhaustion, and turnover intention," *Journal of Advanced Nursing*, vol. 77, no. 1, pp. 198–206

⁴⁶ Dempsey, C & Assi, J (2018) The impact of nurse engagement on quality, safety, and the experience of care: what nurse leaders should know," *Nursing Administration Quarterly*, vol. 42, no. 3, pp. 278–283

⁴⁷ Fitzpatrick, J. J. (2010). The future of nursing: Leading change, advancing health. *Nursing Education Perspectives*, 31(6), 347-348.

⁴⁸ [Nurse-Executive-Capability-Framework.pdf \(acn.edu.au\)](#)

- **The Nurse Director Leadership Program** develops nurses who have more than six years of professional experience and have worked in leadership roles within the health or aged care system.
- **The Nurse Executive Leadership Program** will develop those in, or those aspiring to, nurse executive roles to meet the capabilities of ACN's [Nurse Executive Capability Framework](#).

Recommendation

- **Local Health Districts establish a pathway and support nurses to advance their leadership skills throughout their career.**

6. Transition to retirement

There are currently 154,002 nurses aged 50 years and over registered with the Australian Nursing and Midwifery Board; this represents 35% of all general practicing nurses.⁴⁹ In NSW, the average age of a registered nurse is 42.9 years.⁵⁰ Having an aging nursing workforce poses several challenges for the healthcare system. Some of the challenges include:

- **Physical difficulties:** older nurses may experience mobility impairment, back pain, or other health issues that affect their ability to perform manual tasks such as lifting patients, moving equipment, or standing for long periods.
- **Tiredness and fatigue:** older nurses may feel more tired and fatigued due to heavier and more complex patient loads, long shifts, or night work. This may impair their concentration, decision-making, or safety.
- **Treatment difference:** older nurses may face discrimination, stereotyping, or marginalisation from their younger colleagues, managers, or employers. They may be perceived as less competent, less adaptable, or less willing to learn new skills or technologies.
- **Lack of respect and opportunities:** older nurses may feel undervalued, unappreciated, or overlooked for recognition, promotion, or education opportunities. They may also lack support, feedback, or mentoring from their peers or leaders.
- **Workforce shortage:** older nurses may retire earlier than expected due to the above challenges or personal reasons. This may create a gap in the supply of skilled and experienced workers in the aged care sector, which is already facing a growing demand due to the aging population.^{51 52}

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These challenges require effective strategies from the individual, organisational, and policy levels to support older nurses to continue working to their full potential and contribute to the health care system. Some of the strategies are:

- **Physical adjustments:** Providing ergonomic equipment, flexible work arrangements, reduced workloads, or modified duties for older nurses to accommodate their physical needs and preferences.
- **Wellness programs:** Offering wellness programs, health checks, counselling services, or stress management interventions for older nurses to enhance their physical and mental well-being.
- **Diversity and inclusion:** Promoting a culture of diversity and inclusion in the workplace that respects and values the contributions of older nurses. Providing training, education, or awareness campaigns to address ageism and discrimination among staff and managers.

⁴⁹ [Nursing and Midwifery Board of Australia - Statistics \(nursingmidwiferyboard.gov.au\)](https://nursingmidwiferyboard.gov.au/Statistics)

⁵⁰ [Summary Statistics, Nursing and Midwifery Professions \(health.gov.au\)](https://www.health.gov.au/summary-statistics/nursing-and-midwifery-professions)

⁵¹ Denton, J., Evans, D., & Xu, Q. (2021). Being an older nurse or midwife in the healthcare workplace—A qualitative descriptive study. *Journal of Advanced Nursing*, 77(11), 4500-4510.

⁵² Matters, E. (2019). Healthy ageing in the nursing workforce. *The Hive* <https://www.acn.edu.au/the-hive-2019/healthy-ageing-nursing-workforce>

⁵³ Denton, J., Evans, D., & Xu, Q. (2021). Being an older nurse or midwife in the healthcare workplace—A qualitative descriptive study. *Journal of Advanced Nursing*, 77(11), 4500-4510.

- **Recognition and reward:** Recognising and rewarding older nurses for their expertise, experience, and loyalty. Providing career development opportunities, leadership roles, or mentoring programs for older nurses and midwives to enhance their skills and confidence.
- **Retention and recruitment:** Encouraging older nurses to stay in the workforce longer by offering incentives, benefits, or support. Attracting younger people to the profession by improving the image, conditions, and prospects of nursing.^{54 55}

Phased retirement options for nurses, allowing gradual reduction in work hours while maintaining benefits, could support the adjustment process. Consideration should be given to developing a transition to retirement program for nurses, similar to the one offered to Australian Defence Force Members. The program for nurses would cover topics such as identity, mental health, wellbeing, moving forward with purpose, leaving a legacy, connecting, and giving back. A program of this type would support nurses in their final years and may encourage them to stay in the workforce longer.

In an effort to entice newly retired nurses back into the workforce, a review of rulings related to the aged pension is suggested. An increase in the limit of secondary income for high need professions such as nursing would help increase and support the nursing workforce.

Recommendations

- Fund the development and implementation of a Transition to Retirement Program for Nurses
- Review the rulings related to the aged pension and increase the limit of secondary income for high-need professions such as nursing

⁵⁴ Denton, J., Evans, D., & Xu, Q. (2021). Older nurses and midwives in the workplace: A scoping review. *Collegian*, 28(2), 222-229.

⁵⁵ <https://agedcare.royalcommission.gov.au/system/files/2020-06/RCD.9999.0256.0017.pdf>

Realising the value of the nursing workforce

This section addresses items A and F in the Terms of Reference

1. Improving the image of nursing

Attracting people to choose nursing as a career is dependent on broad community understanding of the opportunities that exist within the nursing profession. There is a need to educate the community on the depth and breadth of roles through which nurses contribute to society in all settings from acute tertiary hospitals to rural and remote settings where they often work as sole practitioners. The image of nursing is influenced by many factors, such as the social, economic, political, and cultural context of the profession. The image of nursing has suffered over the past few years, reflected in fewer undergraduate nursing student enrolments and high attrition rates. Some contributing factors include:

2. The **lack of representation** of nursing. Nurses may not have enough voice and visibility in the health system and the media. They may not be involved in decision-making processes that affect their practice and profession, such as policy development, and funding allocation. They may also not be portrayed accurately or positively in the media, such as in news stories, documentaries, or fictional shows. A study by the University of Wollongong in 2018 found that nurses were underrepresented and stereotyped in Australian television dramas.⁵⁶ This may affect the public awareness and appreciation of the role and contribution of nurses to health care.
3. The **community perception** of nursing impacts uptake. The historical stereotypes of nurses as carers rather than professionals with a broad scope of practice deters many people. COVID-19 heightened the positive perceptions of nursing, but also highlighted gaps in inadequate compensation, occupational safety, and work-life balance. Nearly one in four people researched information about healthcare careers since the COVID-19 pandemic began.⁵⁷
4. The **gender gap** in nursing. Nursing is a female-dominated profession, which may affect its status and recognition in society. According to the Nursing and Midwifery Board, currently, 88% of practicing nurses are female.⁵⁸ This may create stereotypes and biases about the role and value of nurses, especially in male-dominated fields.
5. The **workload and stress** of nursing. Nurses face many challenges and demands in their work, such as long hours, heavy workload, staff shortages, occupational violence, and burnout. These factors may affect their physical and mental health, as well as their job satisfaction and retention. A survey by the Australian Nursing and Midwifery Federation in 2020 found that 29% of nurses reported high levels of psychological distress, and 56% reported moderate levels.⁵⁹ These issues may also affect the public perception of nursing as a rewarding and respected career. According to a report commissioned by the NSW Nurses and Midwives' Association, 15 per cent of nurses and midwives in New South Wales had reported symptoms of PTSD, and

⁵⁶ Williams, K., Westera, A. B., Fildes, D. L., Salamonson, Y., Halcomb, E. J., & Thompson, C. J. (2019). Topic 2: Nursing as a career choice.

⁵⁷ [Survey: Influence of COVID on Perceptions of Nursing | NurseJournal.org](https://www.nursejournal.org/survey-influence-of-covid-on-perceptions-of-nursing)

⁵⁸ [Nursing and Midwifery Board of Australia - Statistics \(nursingmidwiferyboard.gov.au\)](https://www.nursingmidwiferyboard.gov.au/statistics)

⁵⁹ Carestaff Nursing Service (2022). How has nursing evolved over the last 50 years? An inside look at what is to come. <https://www.carestaffnursing.com.au/how-has-nursing-evolved-over-the-last-50-years-an-inside-look-at-whats-to-come>

almost 60 per cent of them planned to leave their job in the next five years.⁶⁰ The 2021 report, found that work overload, lack of support, low pay, shift changes, and understaffing were some of the significant factors that contributed to stress and burnout. The report also identified early-career nurses and midwives as the most vulnerable group, as they were expected to work extra hours and outside their area of expertise.

6. The threat of **occupational violence** can create a negative image of nursing as a dangerous and stressful profession, which may discourage people from pursuing a career in nursing.⁶¹ Occupational violence can affect the recruitment and retention of nurses, as they may experience low morale, job dissatisfaction, and intention to leave due to the lack of safety and support in their work environment.⁶² Occupational violence can also impact the quality of education and training of nurses, as they may face difficulties in learning and developing their skills in a hostile and violent setting.⁶³ This may reduce their confidence and competence as future nurses.

These are some reasons why the image of nursing has suffered over the past few years and may deter some people from pursuing a career in nursing. Therefore, it is essential to improve the image of nursing among the public and policymakers, as well as among the nurses themselves. A positive and realistic image of nursing can enhance the quality of care, the recruitment and retention of nurses, and the advancement of the profession. Priority needs to be given to rebuilding and improving the image of nursing, such as promoting education and research, giving recognition, celebrating achievements, and engaging with the public and the media.

Recommendation

- In collaboration with other states and territories, invest in a media campaign that promotes the positive contribution nurses make, to improve the image of nursing.

⁶⁰ Adelson, P., Fish, J., Peters, M., Corsini, N., Sharplin, G., & Eckert, M. (2021). COVID-19 and workforce wellbeing: A survey of the Australian nursing, midwifery, and care worker workforce. *A report prepared for the Australian Nursing and Midwifery Federation*. Adelaide, SA: University of South Australia.

⁶¹ Australian College of Nursing (ACN). 2021, 'Occupational Violence Against Nurses – Position Statement', ACN, Canberra. © ACN 2021

⁶² Nursing, A., & Federation, M. (2018). Prevention of occupational violence and aggression in the workplace. *Australian Nursing and Midwifery Federation*.

⁶³ Deans, C. (2004). Nurses and occupational violence: the role of organisational support in moderating professional competence. *Australian Journal of Advanced Nursing, The, 22(2)*, 14-18.

2. Scope of Practice

Supporting full scope of practice will lead to better consumer outcomes through effective multidisciplinary care models that best use each discipline's skills, experience, and knowledge. Nurses working to full scope can provide holistic, safe, effective care in many settings. The inquiry outcomes should inform new and innovative models of care in the future to address the current and future workforce challenges.

There needs to be recognition of the importance of ensuring that training and education frameworks support health professionals to work to their full scope confidently. This will require a significant investment in training and education, particularly for nurses who currently are not able to access the same benefits as their medical colleagues to support their ongoing training and education needs. This will also support a more seamless and less steep (in terms of learning curve) transition from Registered Nurse to Nurse Practitioner over time if nurses are able to access more opportunities for skills acquisition over time.

Working to full scope of practice is not possible without investment in strong leadership that is supportive of full-scope practice and able to utilise existing regulatory and policy frameworks to make full-scope practice the norm. There needs to be a focus on redesign rather than substitution, and the regulatory frameworks must support the portability of scope between jurisdictions and services.

Funding Models

This section addresses item E in the Terms of Reference

Block funding

Block funding is a method of funding health services for which activity-based funding is not applicable due to low volumes, the absence of 'economies of scale' or the inability to satisfy the technical requirements of activity-based funding.⁶⁴ Block funding in health care provides stability and certainty for health service providers, especially for small rural and regional hospitals that have less predictable and variable demand for services.⁶⁵ It supports teaching, training and research in public hospitals, and public health programs that are essential for improving the quality and safety of health care. Block funding allows for flexibility and innovation in service delivery, as health service providers can tailor their services to the specific needs and preferences of their communities. It also reduces the administrative burden and complexity of reporting and monitoring activity-based funding, which can be costly and time-consuming.⁶⁶

Recommendation

- Explore block funding opportunities to support the stability of health care services.

About ACN

The Australian College of Nursing (ACN) is the national voice of the nursing profession focused on policy, advocacy, and education to advance the status, recognition and respect for nurses. We are committed to our intent of 'Shaping Health, Advancing Nursing' to enhance the health care of all Australians.

Our membership, events and higher education services allow nurses at all levels to stay informed, connected and inspired. We are excited to lead change and create a strong, collective voice for our profession by bringing together thousands of extraordinary nurses from across the country. ACN is also the Australian member of the International Council of Nurses headquartered in Geneva in collaboration with the Australian Nursing and Midwifery Federation (ANMF).

⁶⁴ [Glossary - Australian Institute of Health and Welfare \(aihw.gov.au\)](https://www.aihw.gov.au/glossary)

⁶⁵ [Funding Types | National Health Funding Body \(publichospitalfunding.gov.au\)](https://www.publichospitalfunding.gov.au/funding-types)

⁶⁶ [Funding policy \(health.vic.gov.au\)](https://www.health.vic.gov.au/funding-policy)