



Australian
Private Hospitals
Association



Independent Review of Nurse Education: Educating the Nurse of the Future

11 July 2019

Australian Private Hospitals Association ABN 82 008 623 809

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Introduction

The nursing professions play a central role in the delivery of care in the private hospital and day hospital sector. The private hospital sector provides a diverse range of career opportunity for registered and enrolled nurses and midwives to work at their full scope of practice. While government data show there is an generally adequate supply of registered and enrolled nurses in most parts of Australia, these data do not reflect the difficulties experienced by private hospitals in recruiting experienced nurses to specialised roles including perioperative nursing, mental health and midwifery.

Skilled migration and strategies aimed at retaining experienced nurses have been critical to meeting service requirements and retaining the capacity to mentor and train students and early career nurses. However, skilled migration is an expensive option for employers and subject to significant regulatory constraints. Retention initiatives cannot forestall indefinitely the ageing of the current workforce. While the number of nursing graduates entering the workforce is at record levels, these graduates cannot move immediately into specialised roles requiring an appropriate level of experience. They need a period of induction and appropriate supervision in the early stages of their career. The proposed Nursing Strategy needs to address all of these issues urgently.

The private sector both employs and contributes to training of a large number of nurses, and this review is a valuable opportunity to ensure nurse training will be sustainable and appropriate for the Australian healthcare sector into the future.

In 2016–17 (most recent year for which data is available), private hospitals employed 38,296 full-time equivalent (FTE) nurses (more than 32,000 registered nurses, and 6,000 FTE enrolled nurses) (ABS 2018).

In 2017, the Australian Private Hospitals Association (APHA) and Catholic Health Australia (CHA) published a report on training in the private sector, which estimated the private sector spent \$16.5 million in formal training programs for nurse graduates, which translated into more than 1,400 graduate nursing positions (APHA/CHA 2017). The chapter on nurse training has been included as an appendix to this submission.

This submission addresses the terms of reference of the nursing review, and also highlights some of the recommendations made in the APHA/CHA report, entitled [Education and training in the private hospital sector](#).

The private hospital sector would like to see:

- a greater consistency in the quality and practical experience level of nursing graduates. The APHA advocates for the development of a standard list of skills an employer should be able to expect from a nursing or midwifery graduate upon commencement.
- more action by governments working with employers to promote awareness of the rewarding nature of nursing as a career and the diversity of career options availability.

- policy settings that meet current and future skill shortages through flexible training and retraining pathways and the judicious use of skilled migration.

Response to individual terms of reference

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

Educational preparation

One of the main issues frequently highlighted by the private sector is the concern nursing graduates vary significantly in their practical experience on graduation and some are not 'work ready'.

The private sector has been advocating for the development of a standard list of skills an employer should be able to expect from a nursing or midwifery graduate upon commencement.

Essentially, the private hospital sector advocates for a development of a list of 'core skills' or 'core competencies' any graduate nurse should have upon graduation. Such a list might differ between enrolled and registered nursing and potentially midwifery, however, the private hospital sector should have input into what should be included on this list.

In 2017, the joint APHA/CHA report on education and training in the private sector made the following recommendation:

Recommendation 7: All stakeholders work together to establish agreed and defined expectations of work-readiness for medical, nursing and allied health graduates seeking entry to internships and graduate positions in either the public or private hospital sector (APHA/CHA 2017:49).

Articulation between enrolled and registered nurses

Even though the roles and scope of practice differ between the professions, enrolled nursing has at times been regarded as a 'stepping stone' towards registered nursing.

In 2017, APHA ran a survey of both students and enrolled nurses looking into attraction and retention in enrolled nursing to understand shortages experienced in the private sector (APHA publication forthcoming). Whilst the articulation between enrolled and registered nursing was not specifically examined, the survey results highlighted:

- Two in three student respondents (65%) entered enrolled nursing to later become a registered nurse
- One of the barriers preventing enrolled nurses from becoming registered nurses is the expense involved in completing the required qualifications

- It was also noted enrolled nursing was preferred by some due to the 'hands-on' mode of learning, and less academic-style evaluation.

These results suggest while enrolled nursing is frequently seen by students as an attractive and affordable pathway towards becoming a registered nurse, it is important applicants have access to:

- a good understanding of potential career pathways, roles and opportunities
- the difference between enrolled and registered nursing
- the costs involved in completing training requirements.

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

APHA research has found nurses choose nursing as a profession because it is viewed as a rewarding career and because they like helping people. This held true across gender.

The 2017 survey specifically asked what attracted people into nursing as an occupation. Overall, nearly three in four (71%, n=859) respondents pursued a career in nursing because it is rewarding. The five most commonly selected motivations for pursuing a career in nursing were:

- Rewarding career (71%)
- Like helping people (69%)
- Opportunities for career advancement (36%)
- Opportunities for professional development (33%)
- Working hours (13%).

This suggests the predominant appeal of nursing is because it is a rewarding career, and it is a great career option for people who like helping others (APHA forthcoming).

Whilst the report did not specifically look at the attraction to nursing for men, when looking at male respondents only (9.1% of respondents), these findings were even more strongly amplified. The five most commonly selected responses for male respondents were:

- Rewarding career (80%)
- Like helping people (71%)
- Opportunities for professional development (38%)
- Opportunities for career advancement (36%)
- Working in areas where I have expertise (21%) (APHA unpublished data)

The survey also invited respondents to comment on aspects of working as an enrolled nurse they thought could be improved to attract and/or retain more enrolled nurses. The responses indicate that attraction and retention could be increased by the following initiatives:

- Improve advertising and raising awareness this career exists, and can be a pathway to registered nursing.

- Promote awareness of enrolled nurses' scope of practice - typically enrolled nurses are more likely to work to their full scope of practice in the private sector than in public.
- Ensure nurses feel valued and respected.
- Provide opportunities for enrolled nurses to specialise within specific areas (APHA forthcoming).

The role and appropriateness of transition to practice programs however named

Private hospitals appreciate the need for an induction process for all new staff and especially for new graduates. Whilst it is acceptable for a graduate to still require training even after becoming employed, some minimum of clinical, team- and work-based knowledge should be given from any new graduate.

One of the biggest challenges faced today by employers is the fact graduates with the same level of qualification enter the workplace with very different levels of practical skill and competency. This means some graduates are at a severe disadvantage. It also means supervisors must invest additional time and resources in bringing diverse groups of graduates up to the same basic starting point.

Induction programs

The private sector recognises its role in providing induction programs for new graduates. Having a core set of skills, however, makes it possible to presume a certain level of knowledge in a graduate irrespective of graduating institution and will allow employers to manage their induction programs more easily and more efficiently.

Simulation training

The private sector agrees some competencies can be achieved through simulated learning, and the 2017 APHA/CHA report advocates for better use of existing simulation facilities:

Recommendation 8: Governments examine access to and use of simulation facilities across the public and private hospital sectors and across the university and vocational education and training sectors to identify how best to maximise their use (APHA/CHA 2017:49).

Simulation training is valuable for both undergraduate training and continuing professional development; however, private hospitals have a hard time accessing these facilities even when the original intent of government funding was to establish facilities available to all partners.

Other transition to practice issues

Whilst focus is on graduates transitioning to employment as well as transitioning from one type of nursing to another, there are other avenues of 'transitions' worth considering by the nursing review.

Pathways for people trained in unregistered professions to transition into nursing, mature aged entrants to nursing and people trained overseas should be established, to encourage uptake of nursing as a profession.

Furthermore, encouraging retention of existing nurses through increased flexibility in their career options should also be considered. This should include both pathways to transitioning between other health sectors and acute care, and allowing development of specialised skills for nurses within acute care.

The competitiveness and attractiveness of Australian nursing qualifications across international contexts

Australian nursing qualifications are well-regarded internationally, however, the competitiveness and attractiveness of nursing qualifications in Australia are hampered by the lack of opportunities for international students to remain in Australia after their studies are finished.

It is also important skilled and experienced nurses who gained their initial qualifications overseas should have an efficient and affordable pathway to registration in Australia even if their initial qualifications were diploma level rather than degree level qualifications.

The private sector is reliant on the skilled migration system to allow for overseas-trained health professionals to come to Australia. Whilst there is currently no shortage in graduate nurses, the private sector is experiencing shortages in specialised nursing areas such as midwifery, perioperative nursing and mental health. The current skilled migration system makes it difficult, costly and time-consuming to recruit these professionals from overseas. The skilled migration system does not take into account it would be clinically irresponsible to hire fresh graduates in highly specialised areas.

The skilled migration laws currently in place makes it difficult for employers to hire international talent, and many students who would like to stay after the completion of their studies cannot.

Private hospitals in Australia

The private hospital sector makes a significant contribution to health care in Australia, providing a large number of services and taking the pressure off the already stretched public hospital system.

The private hospital sector treats:

- 4.5 million hospitalisations a year.

In 2017–18 it delivered:

- 60% of all surgery
- 71% of eye procedures
- Almost half of all heart procedures
- 74% of procedures on the brain, spine and nerves.

Australian private hospitals by the numbers (2016–17):

- Almost half (49%) of all Australian hospitals are private
- 657 private hospitals made up of:
 - 300 overnight hospitals
 - 357 day hospitals
- That amounts to: 34,339 beds and chairs (31,029 in overnight hospitals and 3,310 in free-standing day surgeries)
- Employs more than 69,000 full-time equivalent staff.

The Australian Private Hospitals Association

The Australian Private Hospitals Association (APHA) is the peak industry body representing the private hospital and day surgery sector. About 70% of overnight hospitals and half of all day surgeries in Australia are APHA members.

References

APHA/CHA (2017). Education and training in the private hospital sector. Available online at: http://www.apha.org.au/wp-content/uploads/2017/05/APHA_WorkforceReport_FINAL_May17.pdf

APHA forthcoming. Report on the 2017 enrolled nursing survey. To be published on our website later in 2019.

Nursing and midwifery training

Private hospitals have a long history of providing training opportunities for nurses and midwives. In addition to providing clinical placements for students, they provide employment-based training for graduates, nurses seeking to enter or re-enter the profession, as well as postgraduate and internationally qualified nurses.

Enrolled nurses and assistants in nursing are crucial members of the nursing workforce in the private hospital sector. They enter their professions through vocational education and training programs either involving clinical placements (previously discussed) or traineeships where the trainee combines formal study with supervised employment.

Upon graduation from a recognised university or vocational education and training program, enrolled and registered nurses, and midwives, qualify for registration, but important aspects of their professional development remain. With this point in mind, many public and private hospitals have created graduate programs designed to ensure new graduates receive support, mentoring and guidance as they embark on their careers.

Nurses who do not qualify for registration in Australia or whose registration has lapsed must undertake formal programs prior to practising as either enrolled or registered nurses. These programs are subject to strict accreditation requirements, and only a few of these are available in the private hospital sector.

These employment-based training opportunities are summarised in the following diagram:

		Pre-registration	Post-registration	Re-entry
Registered professions	Registered nurses and midwives	Programs for internationally qualified registered and enrolled nurses	Graduate placements for registered and enrolled nurses	Accredited programs for nurses whose registration has lapsed
	Enrolled nurses	Traineeships for enrolled nurses		
Non-registered professions	Assistants in nursing	and assistants in nursing		

In 2014–15, the most common type of formal training for nurses employed in the private sector was graduate placements. For the 68 hospitals reporting both staffing and training data in the survey, it was estimated 2% of nursing positions (FTE) were allocated to training. At the same time, there was significant variation between individual hospitals, reflecting their staffing profiles and strategic priorities.

Enrolled nurse training – Mater Hospital Brisbane

Mater Education is a nationally accredited, hospital-based independent Registered Training Organisation developing and delivering courses in a world-class clinical simulation facility.

The Mater Diploma of Nursing Program offers an opportunity to gain a Diploma of Nursing (Enrolled-Division 2 nursing).

Mater Education develops and delivers its own course material. Students learn contemporary best practice from clinical nursing experts and have the opportunity to gain hands-on experience across Mater's hospitals. The course is integrated and delivered onsite within Mater's South Brisbane campus.

Students can choose electives including emergency, mothers and babies, paediatric, diabetes anaesthetics, perioperative and palliative care. After 18 months full-time study (or three years part-time) graduates are eligible for national registrations as enrolled nurses. More than 230 students have graduated from Mater Education's Diploma of Nursing since 2010.

Graduate nursing programs

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Graduate nursing programs account for a large cost to private hospitals. In 2014–15, actual reported expenditure on graduate nurses was \$9.3 million (n=74). Estimated expenditure on graduate nursing programs for the private sector was between \$15.5 and \$16.5 million. In terms of volume and investment, graduate nursing programs are the most important nurse training programs for private hospitals. These include programs for registered nurses, enrolled nurses and midwives, often implemented as part of recruitment strategies or to establish a point of difference in attracting employees.

The size of these programs is usually matched to workforce demands. The cost of training graduate nurses is far less than the cost of providing medical internships and junior registrar positions where salary costs are included, because graduate nurses and midwives are not supernumerary positions. However, because recruitment of graduate nurses is matched to service demands, the number of places provided is liable to fluctuate year on year.

“Due to a lack of nursing vacancies [we] stopped offering a graduate nurse program some years ago since we could not justify the cost of the graduate program when we had no vacant positions to keep the nurses we had invested in. With the lack of graduate nurse positions available, [we] could offer a graduate program if the cost of the nurse was funded externally.”

[PRIVATE ACUTE GROUP B HOSPITAL – INNER REGIONAL]

Survey results suggest most of these programs are found in larger acute hospitals. They are found in only about a third of private acute group D hospitals, a little over half of all private acute psychiatric hospitals and a little under two-thirds of all private rehabilitation hospitals. Graduate programs are uncommon in other acute private hospitals and day hospitals (Table 9).

¹¹ Projected number of nursing graduates by HWA.

Table 9: Total estimated graduate nurse program positions (FTE) by hospital peer group

HOSPITAL PEER GROUP	NURSE GRADUATE (FTE)	PROPORTION OF TOTAL (%)
Private acute group A hospitals	550.0	39.0
Private acute group B hospitals	440.0	31.2
Private acute group C hospitals	260.0	18.4
Private acute group D hospitals	60.0	4.3
Private acute psychiatric hospitals	30.0	2.1
Private rehabilitation hospitals	40.0	2.8
Day hospitals	10.0	0.7
Other	20.0	1.4
Total	1,410.0	100.0

Source: APHA/CHA education and training survey 2014–15.

The total estimated number of places available in 2014–15 was small compared with the estimated 13,568 enrolled and registered nurses graduating in 2014 from Australian universities and VET programs (HWA 2014:72). Nevertheless, the private sector plays an essential role in enabling nursing graduates to enter the workforce.

Entry and re-entry programs

Survey respondents reported relatively few positions for entry and re-entry programs for registered nurses (15.6 FTE) (n=5). An additional two hospitals reported positions for registered nurses with international qualifications.¹² Due to the small number of responses, these data were not extrapolated to a sector-wide estimate.

Only a limited number of private hospitals were able to offer entry and re-entry programs for nurses, because they were required to meet external accreditation requirements.

The Australian Health Practitioner Regulation Agency website lists two private hospital sector organisations as providers of accredited re-entry programs for registered nurses:

- ▶ Hollywood Private Hospital, Ramsay Health Care Australia Pty Ltd
- ▶ San College of Education, within Adventist HealthCare Ltd.

Pathways for specialisation

Once registered, some nurses choose to undertake postgraduate studies to gain additional expertise in an area of specialisation. Some of these areas of specialisation, although not formally demarcated for professional registration purposes, are highly sought after in the private hospital sector. As a result, there were some examples reported where private hospitals provided support for nurses undertaking such programs. There were also instances where hospitals partnered with universities to provide programs leading to formal qualifications. Survey responses were not sufficient to estimate the extent of these activities across the sector.

¹² FTE not publishable due to small number of responses.

Mental health graduate nurse program

Perth Clinic's mental health graduate nurse program is improving patient care and outcomes and changing attitudes in the nursing workforce about choosing a mental health nursing career.

Perth Clinic, a 100-bed independent psychiatric hospital, has developed the Graduate Certificate of Clinical Nursing program in conjunction with Notre Dame University.

The course has promoted a culture of inclusion, openness and respect for patients. It has also helped maintain high calibre staff who are knowledgeable and well-equipped to provide a range of high quality treatment options. The hospital has also experienced low staff turnover, contributing to capacity across the workforce.

"The positive impact on patient care resulting from a dedicated and committed workforce cannot be underestimated and is seen in patient outcome data," said Perth Clinic Chief Executive Officer Moira Munro.

Expanding opportunities

The projected nursing shortage (HWA 2014) can only be met by a coordinated range of strategies. These include maximising the attraction and retention of new entrants and enhancing the skills of the existing workforce to participate effectively in new, more efficient models of care.

"There is a huge number of graduates but nowhere near enough graduate programs. There needs to be a significant increase in the amount of funding that goes towards these graduate programs. The graduates really need these structured supportive programs to flourish as highly skilled competent practitioners. It is becoming increasingly apparent that there is a very clear difference between clinicians who have been through a graduate program and those who have not."

[PRIVATE ACUTE GROUP A HOSPITAL – METROPOLITAN]

At the same time, as increasing efficiencies continue to be demanded of private hospitals, it is difficult to justify creation of supernumerary positions for new graduates. Many nursing roles in the private hospital sector require a level of skill and experience beyond the capabilities of new graduates. As the nursing workforce continues to age, balancing the need to recruit new graduates and to fill vacancies for higher-level roles will be an ongoing challenge.

Summary

While graduate nursing programs and training positions for nurses more generally are recognised as important, investment is driven by service requirements. For entry and re-entry programs, provision is limited by accreditation requirements.

There is both scope and interest within the private hospital sector to expand formal training for nursing graduates. However, development of training opportunities beyond immediate service delivery requirements necessitates external funding and a review of accreditation requirements.

Recommendation 3

Governments increase funding for supernumerary nursing and midwifery graduate positions at both registered and enrolled levels in the private hospital sector.