

# Consultation and research summary report

Building the evidence base for a National Nursing Workforce Strategy



Funded by the Australian Government Department of Health and Aged Care







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### **Contents**

INTRODUCTION	04		
What is this project about?	04		
What have we done so far?			
Who have we spoken to?			
What have we researched?	04		
WHAT WE DID AND HOW WE DID IT	05		
WHAT WE FOUND THROUGH CONSULTATION	06		
1. Planning for future workforce needs could be improved	06		
2. Perceptions about what nurses do are often outdated	06		
3. Continuing to recruit nurses is critical	07		
4. Retaining nurses is as important as attracting new ones	08		
5. Education and training can be improved	09		
6. Support during clinical placements needs to be bolstered	09		
7. Clear career progression is important for recruitment and retention	10		
8. Nurses' roles and skills need to be optimised in line with changing			
community needs			
9. Supporting nurse leaders is important for positive workplaces			
10. Digital technologies will change the skills required of nurses			
11. Nurses in rural and remote areas face added challenges			
12. First Nations nurses face particular issues			
13. Supporting a diverse nursing workforce is important	13		
WHAT WE HEARD ABOUT THE NURSE OF THE FUTURE	14		
WHAT WE FOUND THROUGH RESEARCH	15		
Nursing workforce sustainability is a global challenge	15		
Workplace conditions and changing demographics are			
pressure-points for nurses	15		
Nurses will need to be supported through technological changes	15		
Nurse workforce planning needs to support the broader health system	15		
CONCLUDING COMMENTS	16		
What's next?	16		
APPENDIX: METHODOLOGY	17		
Qualitative consultation	18		
Quantitative consultation	19		
Environmental scans and literature reviews	19		

### Introduction

### What is this project about?

The Australian and Victorian governments, in collaboration with all states and territories and the nursing profession, are developing Australia's first National Nursing Workforce Strategy (Strategy).

The Strategy will set out clear and ambitious directions for the long-term to ensure the nursing workforce is equipped, enabled and supported to deliver person centred, evidence based, compassionate and culturally safe care that meets the current and future health and aged care needs of the Australian population.

The Strategy is being developed in two stages. This report summarises the outcomes of Stage 1, which focused on building the evidence base for the Strategy through public consultation and research. A nursing supply and demand study is also being completed as part of Stage 1 and will be reported on separately. Stage 2 will take this evidence base and develop the draft Strategy. The draft Strategy will be released for public consultation before refinement and finalisation for approval by all health ministers.

### What have we done so far?

In September 2023, the Strategy project team from the Australian Government Department of Health and Aged Care, Safer Care Victoria and the Victorian Department of Health set out to gather as much information as possible to inform the Strategy. The team wanted to understand the current challenges facing nursing in Australia, what is working well, and what ideas people have for the future. This involved extensive consultation and research with the Australian community as well as global research to understand the challenges facing nursing workforces in jurisdictions similar to Australia and the ongoing efforts to address those challenges.

### Who have we spoken to?

Almost 6,000 people shared their ideas, doing so in a variety of ways. They took part in face-to-face and online meetings and interviews. They filled out surveys, recorded videos and wrote to the Strategy project team. We heard from current and former nurses; nursing students; health system managers; representatives from state, territory and the Commonwealth governments; unions and organisations that support people who work in the health system; and from nursing education providers.

We spoke to experts and researchers both in Australia and overseas who have studied the mechanics of different workforces, including nursing, to help understand how to make the most of Australia's nursing workforce. We also consulted with health consumers in a series of community conversations focusing on what those with experience of the health system need from their time in care.

We spoke to First Nations people, people from other cultural backgrounds, people with a recent experience of the health system and to young people considering a career in nursing.

### What have we researched?

We also explored what other countries are doing to support their nursing workforces. This included environmental scans of 14 countries and 5 international organisations (general information and articles about international issues in nursing) as well as conducting a literature review (academic studies that have been undertaken, with published results). Together, these offered a broad understanding of approaches taken by governments and health organisations all over the world.

We thank all those who took part in this consultation. Participants were willing to share their ideas, all with a genuine care for the future of nursing in Australia. The conversations were constructive and inspiring. Stakeholders paused to deeply consider what is working well and what could be done better. We appreciate everyone who gave their time to help us understand their views.



### What we did and how we did it

The diagram below summarises the different ways we gathered information, how many people we spoke to, and the countries and organisations we explored:

#### A qualitative sample of 3,622 and quantitative of 2,373 totaling 5,995 people In-depth interviews States and Face-to-face Open written Strategy project Panel-Recruited territories workshops submissions team-led workshops **Nurses Survey** government and symposiums workshops n = 56n = 16 ت 🗆 Strategy n = 1,485 n = 24 n = 11 Advisory Group/ Strategy Steering n = 560Consultation n = 1,547 attendees Committee responses attendees data points n = 55Adjacent n = 15 stakeholders Community industries Online conversations **Consultation Hub** webinars States and **Online Survey** In-depth interviews n = 24territories attendees government <u>--</u> interviews n = 830 Yarning

Environment scans and literature reviews				
Environment scans – countries			Environment scans - organisations	
Australia Canada England Finland Ireland	Israel Netherlands New Zealand Northern Ireland Norway	Scotland Switzerland United States Wales	Commonwealth Nurses and Midwives Federation (CNMF) International Council of Nurses (ICN) International Confederation of Midwives (ICM) International Labour Organisation (ILO) World Health Organisation (WHO)	

responses

n = 405

attendees



Nursing or

health-related

05

circles

n = 9 attendees

### What we found through consultation

The findings from the public consultation are grouped into 13 key themes, described below.

## 1. Planning for future workforce needs could be improved

- Different rules and ways of doing things in each state and territory highlight the need for a national strategy. Many state and territory government nursing experts agree there is a need for a national strategy. They want changes to the areas that are the biggest blockers in planning a national nursing workforce. Blockers include lack of consistency in recognising qualifications, in training and in technology use across organisations and states and territories.
- Limited nursing workforce data. There is a need for better data on the numbers of nurses working across the whole workforce. Without this, it is difficult to plan for and train the right numbers of nurses in the areas of most need.
- · The ways nurses are funded across the health system can mean the value of nurses is not fully recognised. The way governments work out how to 'fund' different types of nurses in healthcare settings in Australia is complex. Funding typically focuses on the quantity of activities nurses undertake rather than the quality of care or the positive health outcomes they achieve. This also means nurses' working conditions can vary widely across Australia. Many stakeholders told us that while they realise this was not the intention, this can mean that the important work nurses undertake is not always fairly valued. People we spoke to also felt there is not enough funding for nursing education and professional development, and there were barriers to following through on innovative ideas on the different roles nurses could take on.
- Competing work choices for nurses. Nurses in different areas in the health and aged care system (e.g., acute care, disability or aged care sectors) can be managed and paid differently, making some areas more (or less) appealing than others. This inconsistency can have far-reaching effects on where nurses choose to work.

## 2. Perceptions about what nurses do are often outdated

- People trust nurses. Community surveys consistently show that the general public believe, on the whole, that nurses are compassionate, trustworthy and dedicated. Nurses are often the first point of contact in a healthcare setting and the last health professional people interact with before discharge. This highlights the important and lasting impact nurses have in caring for people.
- Some views of the nursing profession are outdated. There is high interest in nursing as a career, but many people also have outdated beliefs about what the role of a modern nurse really looks like. Some think it is still a 'female' job and that the primary role of nurses is to assist doctors. The community often underappreciate that nurses today perform sophisticated tasks and work in many different areas of the health system, not just in hospitals.
- The community understands the difficulties nurses face, and this can affect interest in nursing as a career. Particularly since the COVID-19 pandemic, many in the community understand nursing to be a 'busy' profession, often hearing stories of nurses being overworked, underpaid and suffering burnout. This can make the idea of nursing as a career less appealing for some.



### 3. Continuing to recruit nurses is critical

Continuing to bring nurses into the health system is vitally important. This came through clearly in all the data we gathered – from the stakeholders and community members we spoke to in Australia and overseas, and in the environmental scans and published literature.

- Workforce shortages are global. Nursing workforce shortages have been noted globally as an issue for decades, but the strain of the COVID-19 pandemic has intensified these shortages and the resulting pressure on nurses.
- Nurses enjoy many aspects of their roles, while also noting some common issues.

### Key positives of nursing

- A strong sense of pride
- Great job and career opportunities
- The intrinsic desire to help others and make a tangible difference in people's lives
- Personal fulfillment
- Professional autonomy and growth
- The **intellectual challenge** and continuous learning that nursing provides
- The ever-changing nature of nursing

### Key challenges of nursing

- Nurses often grapple with the stereotype of being 'angels' or 'handmaidens'.
- Nurses note that the public perception of nurses focuses on the traditional acute care setting, with little regard to, or awareness of, the breadth of nursing careers.
- Nurses believe the reputation of the profession has been tarnished post COVID-19 and that the community perceives nurses to be stressed, burnt out, overworked and underpaid.



But also...

### 4. Retaining nurses is as important as attracting new ones

Participants were clear that efforts to retain nurses must be a priority of a national strategy. They noted that recruitment will always be important, but poor retention, in particular the loss of skilled and senior nurses from the system, is an urgent issue.

Stakeholders agree that many of the issues affecting retention are connected and inter-related. No single factor is to blame.

#### Nurses value:

- Camaraderie, teamwork and collaboration:
   The pressures faced throughout the COVID-19 pandemic cemented an invaluable bond for many.
   Nurses feel a strong sense of loyalty to each other and the nursing profession.
- Efforts to improve conditions for nurses: Nurses note that there have been many initiatives to support their wellbeing and work conditions. Although more needs to be done, examples such as developing a national strategy suggest that the issues are gaining recognition among governments.

'It is the most satisfying work that you can ever do. You'll always know that it's meaningful. You're making a difference to somebody else's life ... in multiple peoples' lives.'

Nurse academic



The nurses who are most satisfied with their role are those who believe they have enough **authority and feel empowered** to perform their duties well. But they raise significant concerns:

- Workload management, staff shortages and a lack
  of operational support: Managing workload was said
  to be the biggest issue facing nurses. Constantly
  high workloads interfere on the time nurses have for
  patient care and their own professional development
  leading to stress and burnout.
- Staffing levels: Despite nurse-to-patient ratios, many nurses and others we spoke to believe workloads and staffing are at unsafe levels.
- Administrative burden: The many administrative tasks that nurses must perform means less time with people needing care.
- Poor work-life balance: A lack of work flexibility
  provided to nurses can lead to poor work-life balance
  and burnout. This is resulting in many experienced
  nurses leaving the profession.



<sup>\*</sup> All survey results are from Panel-Recruited Nurse Survey of n = 1,485 conducted from 1 November to 15 December 2023.



## 5. Education and training can be improved

Participants agree that education and training can positively influence the attraction and retention of nurses. They believe the current approach is robust and comprehensive, but improvements could be made that focus on:

- new and different pathways to enter the profession, which will increase the overall number of nurses
- improving the experiences for student nurses so they continue on their career journeys
- standardising and regulating training programs for assistants in nursing
- making training and standards nationally consistent so it is easier for people to move between states and territories and have their qualifications recognised.

Participants were also clear that opportunities for nurse-led research and innovation are important. This will help develop better connections between universities, nursing academics and nurses working in all care settings. Suggestions included more nurse-led models of care, more joint academic-clinical roles and better career pathways for nurse researchers.

## 6. Support during clinical placements needs to be bolstered

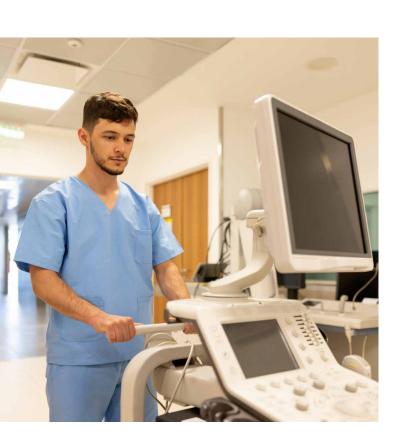
Nursing students face significant financial and logistical challenges when completing their placements – a mandatory part of their education. While many we heard from agree that the clinical placement approach to on-the-job training is effective in providing hands-on learning, there are concerns that not all newly graduated nurses have the required skills, mindset and competencies to start their jobs confidently and effectively.

Many participants highlighted the following:

- The structure of clinical placements is inflexible and unrealistic, making it difficult (and, in some cases, unsafe) for many students to complete.
- The experiences of students during placement can be negative, with some reporting a poor workplace culture and a lack of acceptance from their colleagues during training.
- More comprehensive training could better prepare students for the tasks they will undertake in their nursing career.

'We have students who are sleeping in cars because they can't afford to drive to and from placement. We have students here that are homeless.'

**Education provider** 





of nurses had to make **substantial sacrifices** to fulfil professional practice requirements.



of nurses felt they had the necessary **practical skills** when starting their first professional role.



of nurses feel they had **sufficient opportunities to develop their professional practice** in a
healthcare setting pre-registration.

### 7. Clear career progression is important for recruitment and retention

'To date, the only regulated and supported education career pathway is the Nurse Practitioner pathway'.

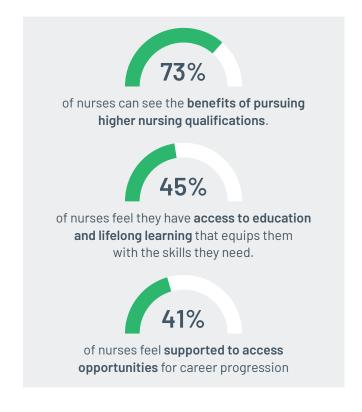
Council of Deans of Nursing and Midwifery

The potential for genuine career progression presents a significant opportunity to attract and retain nurses. Participants agree nursing offers many different pathways through their career, but some challenges also contribute to workforce strain and shortages, including the following:

- A lack of clear and consistent pathways across the country means nurses don't always understand what they can do to progress in their roles.
- The benefits of progressing to more senior roles are not always clear.
- Undertaking further qualifications can be expensive, dissuading many nurses from wanting to progress.
- Work colleagues may not always accept and support nurses who want to progress.

'For progression post [qualifications], you've got to do a postgrad or a master's, and that takes a lot of money. And what's the payoff really?'

**VET/EN** education sector





## 8. Nurses' roles and skills need to be optimised in line with changing community needs

The common health issues facing Australians have changed, owing mostly to the ageing population. People are living longer, but doing so with chronic conditions (heart disease, diabetes, cancer). Many experts argue that nurses' scopes of practice could be optimised to ensure nurses can continue to meet changing community needs. Participants also agree that nurses could be doing more and different tasks to better align with their scope of practice to ensure the health system is more efficient.

Participants noted that optimising nurses' scopes of practice and ensuring a better mix of roles and skills would ensure individual nurses are performing the right tasks within broader teams. An optimised nursing scope of practice also has the potential to improve job satisfaction for nurses, supporting both the community and the health system overall.

A government scope of practice review (Unleashing the Potential of our Health Workforce) is currently underway. Many of the issues participants talked about in our consultations have also been identified in the review.

The consultation into the Strategy was undertaken concurrently with the Unleashing the Potential of our Health Workforce – Scope of Practice Review. This independent review focuses on health professionals who currently provide or have the potential to provide primary care. It explores the benefits, risks and barriers associated with health practitioners working to their full scope of practice. *Unleashing the Potential of our Health Workforce* identifies five key themes, outlined in Issues Paper 1 (published 23 January 2024). A series of options for reform are proposed in Issues Paper 2 (published 16 April 2024).

## 9. Supporting nurse leaders is important for positive workplaces

Participants see that much has been done since the COVID-19 pandemic to better support nurse wellbeing and to provide safe, positive and inclusive workplaces. Many also praised efforts to offer opportunities for nurses to develop the leadership skills needed to support more positive workplace cultures.

The research found that although 50% of nurses have trust in their leaders, there is still work needed to build more positive and safer workplaces. Nurses note that more support is needed to help nurse leaders drive these positive changes. We heard that:

- Nurses experience a sense of camaraderie and collaboration with their peers.
- Poor workplace culture and safety can have a negative impact on the nursing experience.
- Building the capacity of nurse leaders at all levels is a priority.

'We all know that if you get to burn out, it's too late, you can't do anything about it, but identifying early those sorts of elements of moral distress and compassion fatigue that every single one of us feels is important'.

Advanced practice nurse

'Strong leadership within the nursing workforce is vital to ensure a high-quality, sustainable and effective healthcare system.'

**Australian College of Nursing** 



of nurses trust workplace leadership.



## 10. Digital technologies will change the skills required of nurses

Digital tools and technologies will continue to have a bigger role in nursing, offering a chance to greatly improve care and communication. The need for technological change is well recognised, but there are concerns about application and potential impacts on nursing, including increasing administrative burden.

Participants were generally enthusiastic about the future role of technology in nursing. But they noted the key challenges that must be overcome before adopting new tools. These include:

- addressing the lack of standardisation in nursing technology and terminology
- more education, training and leadership in applying digital tools and technologies.

Stakeholders also noted the importance of involving nurses in developing and implementing any new technology.

There aren't enough clinicians with digital literacy. There is that mistrust; [they] want to see it all in one piece of paper. But until we train more [it won't change], and that's why I think it's got to be in an undergraduate degree. It's like seatbelts. Until the next generation ... nothing's going to change that much.'

Nurse clinician



## 11. Nurses in rural and remote areas face added challenges

Participants recognise the critical need to address the uneven geographical distribution of the nursing workforce, particularly in regional, rural and remote areas. Several initiatives have attempted to attract and retain nurses in these locations, but to date these have achieved mixed results.

- The challenges facing nurses in regional, rural and remote areas mirror those in metropolitan areas but are significantly magnified. Participants spoke of a pressing need for a strategy to address these specific challenges.
- Awareness of the advantages of nursing careers outside cities is low. More focus is needed to communicate the benefits of practising in rural and remote communities.

'The provision of funding for scholarships, grants and financial incentives specifically targeted at students pursuing nursing education in rural and remote areas should be considered.'

Office of the National Rural Health Commissioner



of nurses believe that the current nursing workforce is **not able to address the needs of regional, rural and remote communities**.



## 12. First Nations nurses face particular issues

The First Nations nursing workforce faces many of the same challenges as the broader sector, but these challenges are exacerbated by a wide range of issues including entrenched discrimination and racism. First Nations participants stressed that a national strategy presents an important opportunity to address these entrenched challenges. They also see a national strategy as an opportunity to better meet the health needs of First Nations people.

### Particular issues include:

- addressing under-representation of First Nations nurses
- ensuring better cultural safety in education and practice settings
- removing educational barriers for First Nations nurses
- embedding more First Nations people in nurse education roles
- dedicated efforts focusing on First Nations nursing workforce development needs
- growing and strengthening First Nations nursing leadership.

I have spent a lot of time working rurally, and I had a feeling that there is an undercurrent of racism and unconscious bias, I saw First Nations nurses being treated differently to others.'

Rural and remote webinar participant



## 13. Supporting a diverse nursing workforce is important

Participants support inclusion and diversity of the nursing workforce and the importance of the workforce reflecting the cultural and linguistic diversity of the broader Australian community. This means that nurses from culturally and linguistically diverse (CALD) backgrounds, as well as internationally qualified nurses (IQNs) and students, need to be better supported to fully participate in the nursing workforce.

Although nurses from CALD backgrounds appear to be somewhat (more) positive about their nursing experience than non-CALD nurses, the consultation highlighted a number of barriers facing CALD nurses:

- Language barriers and a lack of cultural training can limit the potential of these nurses.
- Limitations in recognising prior learning can affect the ability of IQNs to take part in the nursing workforce.
- There is a need for specific support and professional development for Australia's CALD nurses.
- Discrimination, racism and occupational violence is affecting the working life of these nurses.

'A lack of cultural awareness can impact negatively on both the child and family but also on the nurse providing care. Greater emphasis on cultural competence for both First Nations and Culturally and Linguistically Diverse communities needs to be provided both during undergraduate nursing education but also once in the workforce. Cultural competence in nursing leaders is also critical.'

WCHA Women's and Children's Healthcare Australasia



of CALD nurses say they currently **enjoy their role** compared with 69% of non-CALD nurses.



of CALD nurses say they have **experienced racism**.

### What we heard about the nurse of the future

As part of developing the Strategy it is important to imagine the roles and skills that will be required of nurses in the future. We had discussions with futurists, stakeholders and experts from other industries to understand how the workforce might differ in future from its current form. While experts noted that no-one can accurately predict the future, they agree that the nursing practice of tomorrow will:

- Use data to respond to clinical, operational and strategic issues. While data has always been available, the ability to synthesise vast amounts of information and use this information to guide nursing practice will be a key skill set in the future.
- Experience rapid advances in technology.

  It is difficult to predict the many ways digital transformation will affect the future practice of nursing. But the use of artificial intelligence (AI) in prevention, diagnosis, monitoring, communication and overall healthcare delivery is expected to be profound. The role of nursing informatics, already a distinct specialty, will become more common and more integrated. So will robotics, as already seen in aged care in countries such as Japan.
- Build on the already trusted role of nurses. While it may be possible to automate caregiving, it is not possible to automate caring. It is likely that the nursing profession will continue to hold their highly human, personalised and trusted role in a way that other health professionals cannot. Participants suggested that bringing data use and technology to the fore will further strengthen nurses' ability to deliver person-centred care.
- Reflect greater scope of practice in nursing. Many
  experts consider there will be a range of new and
  different types and levels of roles (e.g. assisted by
  AI), and nursing practice will continue to broaden.
  Interprofessional collaboration will continue to
  increase, where nurses will act as full partners with
  other health professionals. Collaborative teamwork
  will enhance care and system efficiency.
- Have an even greater focus on holistic care.
   A holistic approach to care, considering the physical, emotional and social aspects of a person's needs, will become even more important in guiding nursing practice. Nurses will be central to addressing a person's overall wellbeing, especially preventative, community-based and rehabilitation care needs driven by the ageing population.



14

### What we found through research

The environmental scans and literature review conducted across a range of countries and international organisations (see Appendix) highlight that many of the issues facing Australia's nursing workforce are also experienced globally. Key findings are summarised below.

## Nursing workforce sustainability is a global challenge

Nursing workforce sustainability features strongly in the international literature, particularly in the context of an over-reliance on overseas-trained nurses. This is, in some cases, despite the host country producing a high number of graduates itself. The scans pointed to a misalignment between the number of nurses graduating from educational institutions and the needs of the local health system. The scans also noted a number of common challenges that affect the recruitment and retention of nurses.

## Workplace conditions and changing demographics are pressure-points for nurses

The literature reports that challenging workplace conditions can drive nurses to leave the profession, leading to workforce shortages. Workforce demographics such as the ageing workforce, gender imbalances and a lack of cultural diversity add to workforce planning challenges. These challenges are linked to broader issues of workplace culture including the need for more inclusive, supportive and flexible working environments that can adapt to the diverse needs of the workforce. The literature also acknowledges the ongoing and long-term impact of the COVID-19 pandemic on nurses and health systems.<sup>1</sup>

## Nurses will need to be supported through technological changes

The scans highlighted the impact of technology and digital transformation on healthcare delivery and the nursing workforce. Equally, there is a pressing need to ensure the workforce is equipped with the necessary skills and training to leverage these technologies effectively. This will enhance care while opening new pathways for professional development and specialisation for nurses.

Demand for nurses means demands on nurses ... If policy makers give proper attention to the impact of their decisions on individual nurses, then retention and future supply will improve. Focus only at the system level, ignore the impact on nurses, and nurse retention will worsen.

Sustain and retain in 2022 and beyond, International Council of Nurses

## Nurse workforce planning needs to support the broader health system

The environmental scans highlighted the importance of ensuring nurse workforce planning supports broader health system goals such as improving access to care, enhancing the quality of services and ensuring financial sustainability. This involves addressing immediate staffing requirements as well as anticipating future changes such as shifts in care needs, new service delivery models and the potential impact of political or economic changes.

The scans suggest that to address these challenges a focus on a range of areas is needed including:

- targeted recruitment and retention of nurses
- · investment in education and training
- support for workforce diversity and inclusion
- · adapting to new technologies
- · integrated planning.

<sup>1</sup> Buchan, J., Catton, H., Shaffer, F. (2022). Sustain and retain in 2022 and beyond: the global nursing workforce and the COVID-19 pandemic. International Council of Nurses. https://www.icn.ch/sites/default/files/2023-04/Sustain%20and%20Retain%20in%202022%20and%20 Beyond-%20The%20global%20nursing%20workforce%20and%20the%20COVID-19%20pandemic.pdf (intlnursemigration.org)



### **Concluding comments**

This summary report reflects the voices of many – almost 6,000 stakeholders from Australia and around the world – highlighting a wide range of perspectives from all sections of the nursing workforce.

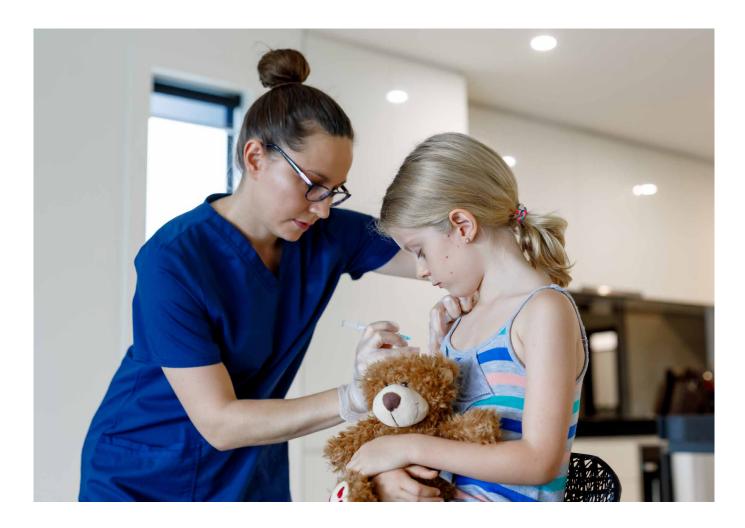
It brings together a collection of data from Australia and around the world to present initiatives, programs and ideas that could be considered in building a resilient and sustainable nursing workforce of the future.

The widespread consultation and research undertaken for this project provides clear and comprehensive evidence to support development of Australia's first National Nursing Workforce Strategy.

### What's next?

Stage 2 will use the evidence base developed in Stage 1 to inform the draft Strategy. The draft Strategy will be released for public consultation before refinement and finalisation for approval by all health ministers.

Stage 2 will also see the development of an implementation plan and a monitoring and evaluation plan. These will be finalised once the Strategy is approved.



### **Appendix: Methodology**

The consultations were guided by a discussion paper that addressed 3 overarching questions:

- · What is working well?
- What is not working well?
- What solutions could address these challenges?

These overarching questions were tailored to each consultation format and explored key themes including:

- how workforce challenges influence the nursing workforce
- community expectations and perceptions of nursing and how nursing practice could adapt to meet expectations while delivering quality care
- how nursing education, training and career pathways could evolve to meet changing healthcare needs and technological advancements
- how nursing can best use evolving healthcare delivery models including digital innovation and technology
- how workplace culture, values and ethical frameworks influence nursing practice and the changing scope of nursing roles within future health systems.

The consultation was carried out through a collaborative, co-designed approach with the Strategy project team. The consultation included a mix of qualitative and quantitative formats.



### **Oualitative consultation**

- Strategy Advisory Group (SAG) and Strategy Steering Committee (SSC) consultation: The SAG and SSC members were consulted through regular meetings. In addition, *n* = 11 industry leaders, experts and key stakeholders sourced from these groups provided extra input through in-depth interviews.
- State and territory government consultation: In addition to consultation through the SSC meetings, state and territory governments provided input to the consultation program through n = 5 online or face-to-face workshops and n = 8 in-depth interviews. State and territory government stakeholders from policy, strategy, workforce planning and recruitment took part.
- Strategy consultation program including:
  - Place-based workshops: n = 16 × 3-hour face-to-face workshops were conducted in capital and regional cities across the country.
     Workshops were publicly advertised with an open invitation and were attended by stakeholders including service providers, state and territory governments, peak bodies, education providers, regulatory bodies and nurses from a range of disciplines.
  - Cohort-specific online webinars:  $n = 23 \times 90$ -minute online webinars were hosted for likeminded cohorts across Australia. The webinars included breakout rooms with up to 12 participants in each to allow for in-depth discussions about the nursing workforce. The webinar sessions often ran in the evenings to ensure maximum engagement, with more than 400 attendees across all the sessions.
  - Cohort-specific in-depth interviews: n = 99 in-depth interviews (between 45 and 60 minutes) were conducted with people from across the full range of relevant cohorts and from industry bodies, health care and government.

- Written submissions: n = 56 written submissions were received via the Australian Government Department of Health and Aged Care Consultation Hub.
- Vox pops: n = 3 'vox pop' video uploads were received via the Australian Government Department of Health and Aged Care Consultation Hub.
- Adjacent sector and futurist in-depth interviews: n = 15 interviews were also carried out to understand what actions are being undertaken to create sustainable workforces in other sectors. The adjacent industries included emergency services (e.g. policing, paramedicine), futurists, defence, corrections and education.
- Strategy team-led stakeholder engagement: In addition to consultation conducted by Whereto, the project team facilitated *n* = 24 discussions and forums with key stakeholder groups including:
  - n = 8 conference workshops with 550 attendees
  - n = 4 Chief Nursing and Midwifery Officer symposiums with 446 attendees.
- Yarning circles: Working with National Aboriginal Community Controlled Health Organisation and the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives, the project team conducted n = 3 yarning circles with n = 9 attendees in total.
- Community conversations: In collaboration with Consumers Health Forum the project team conducted *n* = 2 community conversations with *n* = 24 attendees.



### **Ouantitative consultation**

- Panel-Recruited Nurse Survey: A primarily quantitative survey was conducted with n = 1,485 practising nurses recruited from accredited market research panels.
  - This survey was open from 1 November to 15 December 2023 and focused on nurses' experiences, levels of satisfaction and pain points in their day-to-day work.
  - The survey sample was compared with the population of nurses using publicly available health workforce data and found to be broadly representative.
- Consultation Hub Survey: A short primarily quantitative survey was published on the Australian Government Department of Health and Aged Care's Consultation Hub and was completed by n = 830 stakeholders.
  - This survey was open from 1 November until 20 December 2023 and focused on issues facing the nursing workforce and potential solutions.
  - Respondents were given the option of completing the survey on behalf of the organisation for which they work, or on behalf of themselves only.

### **Environmental scans** and literature reviews

In addition to the consultation program, a series of environmental scans and literature reviews were undertaken:

- Country environmental scans: *n* = 14 scans of selected countries and organisations including grey and academic literature to explore workforce strategies, policies and initiatives.
- Academic literature review: Academic literature review of selected themes.
- · Country scans

AustraliaCanadaEnglandNew ZealandNorthern IrelandNorway

Finland
Ireland
Israel
Not way
Scotland
Switzerland
United States

- Netherlands - Wales

### Organisations

The scans also included the available information published by or about the work of 5 organisations. These organisations were chosen because they have interests in the nursing workforce globally and produce valuable advocacy and research work. Much of this work is relevant to the evidence base needed to inform the Australian Strategy. The organisations were:

- Commonwealth Nurses and Midwives
   Federation (CNMF)
   https://www.commonwealthnurses.org
- International Council of Nurses (ICN) https://www.icn.ch
- International Confederation of Midwives (ICM) https://internationalmidwives.org
- International Labour Organization (ILO) https://www.ilo.org
- World Health Organization (WHO) https://www.who.int.



