



Australian Government

Australian Government response to the independent review of nursing education

Educating the Nurse of the Future



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Educating the Nurse of the Future*

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Acronyms

Ahpra – Australian Health Practitioner Regulation Agency

ANMAC- Australian Nursing and Midwifery Accreditation Council

ASR – Accreditation Systems Review Final Report, Australia’s Health Workforce: strengthening the education foundation

CATSINaM – Congress of Aboriginal and Torres Strait Islander Nurses and Midwives

COVID-19 – Novel Coronavirus 19

EN – Enrolled nurse

HDR – Higher degree by research

HEP – Higher education providers

HEPPP – Higher Education Participation and Partnerships Program

HWA – Health Workforce Australia

IQN – Internationally Qualified Nurse

KPI – Key performance indicator

MBS – Medicare Benefits Scheme

NNMEAN – National Nursing and Midwifery Education Advisory Network

NMBA – Nursing and Midwifery Board of Australia

NP – Nurse practitioner

RN – Registered nurse

RTO – Registered training organisation

RTP – Research Training Program

SES – socioeconomic status

TEQSA – Tertiary Education Quality & Standards Agency

TTP – Transition to practice

VET – Vocational education and training

WIP – Workforce Incentive Program



Message

There are approximately 395,000 nurses registered in Australia and every day they are saving and improving lives. In all settings, across metropolitan, regional, rural and remote areas nurses are working to achieve quality, safe health outcomes for all Australians.

The Australian Government values the work of nurses and is committed to making sure the highly qualified and skilled nursing workforce is available to those who need it. Australians also recognise the outstanding work of Australia's nurses and demonstrates this by consistently voting nurses as the most trusted profession. And we have seen ample evidence of the nursing profession's commitment to the Australian community during recent times when nurses have stepped forward to do their bit in helping to manage the COVID-19 pandemic. The COVID-19 pandemic has challenged us all but no more so than our world class health professionals on the frontline and behind the scenes who have risen to the challenge magnificently.

Significant changes have occurred in health care, higher education, and demographics since nursing education was last examined in 2002. These changes highlight the importance of ensuring Australia's largest single health profession, comprising of more than 40 per cent of Australia's health workforce, is adequately equipped to meet the needs of our future health system. In December 2018, the Minister for Regional Services announced the appointment of Emeritus Professor Steven Schwartz AM to conduct an independent review of nursing education. This review is part of the Morrison Government's \$550 million Stronger Rural Health Strategy, which is building a sustainable, high-quality health workforce across Australia.

The Government welcomes the report of the independent review of nursing education - Educating the Nurse of the Future and thanks Professor Schwartz for his work in leading the review, which will have a positive impact on nursing education and the health care needs of all Australians now and into the future.

The review found there is much that is good about nursing education in Australia and makes recommendations for improvements to enhance the quality of nursing education. The report is a

significant opportunity for the nursing profession, together with the higher education sector and the health sector more broadly to develop a considered view of what needs to be done to ensure a skilled and sustainable nursing workforce able to fully realise its potential in the delivery of health care to Australians into the future.

As the review relates to nursing education, the majority of recommendations relate to areas which are not within the Australian Government's direct responsibility. However, the Government will facilitate consideration of the recommendations by continuing to support the National Nursing and Midwifery Education Advisory Network, chaired by the Commonwealth Chief Nursing and Midwifery Officer, and including the Nursing and Midwifery Board of Australia and the Australian Nursing and Midwifery Accreditation Council.

The recommendations will also be considered in the development of Australia's first National Nursing Strategy. The National Nursing Strategy will provide national guidance and direction for the profession and health system to ensure the nursing profession meets the health needs of the Australian community. It will set out a vision for nursing in Australia for the next ten years.

There is much work underway in examining the changing role that nurses play in our health system, including the Royal Commissions into Aged Care and Disability, and Australia's Long Term National Health Plan. Alongside these are also recent reviews into accreditation and governance of Ahpra and National Health Practitioner Boards that have examined the skills and qualifications required of nurses as registered health practitioners. My Department will be looking at recommendations from all of these reviews in conjunction to provide a holistic, contemporary solution.

I thank and acknowledge Australia's extraordinary nurses for their ongoing commitment and dedication to deliver exceptional frontline health care.

Minister Hunt



Background

In December 2018, the Minister for Regional Services announced the appointment of Emeritus Professor Steven Schwartz AM to conduct an independent review of nursing education.

Terms of Reference for the review examined:

- The effectiveness of the current educational preparation of, and articulation between, enrolled and registered nurses and nurse practitioners in meeting the needs of health service delivery;
- The respective roles of the education and health sectors in education of the nursing workforce;
- Regional needs and circumstances; and
- National and international trends.

Professor Schwartz was assisted in his work by the Office of the Chief Nursing and Midwifery Officer, Australian Government Department of Health. Expert advice was provided by the National Nursing and Midwifery Education Advisory Network (NNMEAN). The NNMEAN was established in 2015, to provide high level strategic advice to Health Ministers utilising an evidence based approach to the planning and coordination of education, employment and immigration for nurses and midwives in Australia. Membership of the NNMEAN is based on a cross section of professionals with knowledge, experience and influence in the areas of workforce, education, policy and employment. For the purpose of this review, the NNMEAN also co-opted expertise from the Australian Government Department of Education, Skills and Employment.

The primary source of information for the review was stakeholder feedback. Consultations were conducted in regional, remote and metropolitan areas around Australia over an eight month period from March until August 2019. Approximately 1,100 nurses, students, employers, academics, consumers, policy makers and other health professionals attended 25 face to face consultations. 63 written submissions were received and 481 survey responses were submitted. Additional targeted meetings were held with key stakeholders including the Nursing and Midwifery Board of Australia (NMBA), Australian Nursing and Midwifery Accreditation Council (ANMAC), Australian Chief Nursing and Midwifery Officers, Tertiary Education Quality & Standards Agency (TEQSA), Council of Deans Nursing and Midwifery (Australia & New Zealand) and the Australian Health Practitioner Regulation Agency (Ahpra).

The Department of Health also commissioned four literature reviews to reflect the issues outlined in the Terms of Reference for the review. The Centre for Health Development and School of Nursing, University of Wollongong, completed the series of literature reviews which were used to help inform the public consultation and stakeholder engagement that underpinned the review. The reviews present a summary and analysis of national and international literature on the following topics:

- fitness for purpose, work readiness and transition to practice;
- nursing as a career choice;
- clinical skill development; and
- future directions in health care delivery.

The review also considered the outcomes of relevant work including the Aged Care Workforce Strategy Taskforce.

Professor Schwartz's report includes 26 recommendations for the educational preparation required for nurses to meet the future health, aged care, and disability needs of Australians.

The Department of Health led the coordination of this response to the report with information from the Department of Education, Skills and Employment. The Department of Health and the Department of Education, Skills and Employment are committed to working in a complementary and coordinated way with key stakeholders – in particular, the nursing profession, to explore cross-sectoral approaches to preparing nurses for the increasing role they will play into the future, as a vital part of Australia's health workforce.

The majority of the recommendations in the report are outside the direct responsibilities of the Commonwealth Department of Health or Commonwealth Department of Education, Skills and Employment. Many are directed to the nursing profession, in particular the NMBA and ANMAC to implement. Both Departments will, however, work closely with the NMBA, ANMAC through the offices of the NNMEAN and through work with the states and territories and Ahpra to implement the reform directions that are supported in this document. All reforms will require formal discussion with relevant stakeholders.

There is also intersection between a number of the recommendations in this review and those in the independent Accreditation Systems Review Final Report, *Australia's Health Workforce: strengthening the education foundation* (ASR)¹, the ongoing work through the Royal Commission into Aged Care Quality and Safety and the development of the Primary Health Care 10-Year Plan. These reforms may have implications for the implementation of recommendations from this review. This will necessitate a prioritisation of implementation which may then make subsequent recommendations redundant.

The Government has considered the 26 recommendations made in the report and responses follow on each recommendation. The Government supports recommendation 9 and 26, supports in principle recommendation 23, and notes recommendations 1-8, 10-22, and 24-25.

Protecting the public

Unregulated health workers

RECOMMENDATION 1

To protect the public, assistants in nursing (whatever their job title) should have mandated education, English language, and probity requirements, which are accredited, assessed and enforced by a robust quality-assurance regime.

Australian Government response

The Government supports the need for a safe and appropriately educated and skilled health workforce, although it is not clear whether the costs of this recommendation to individual nursing assistants and the impacts on these workers would outweigh the additional safety benefits for the community.

The Government notes that further regulation of this workforce would require the agreement of all states and territories that currently regulate assistants in nursing and personal care workers under the *National Code of Conduct for Health Care Workers* (in those states and territories that have passed appropriate legislation).

The Government notes that this recommendation is broadly aligned with Recommendations 77 (national registration scheme) and 78 (mandatory minimum qualification for personal care workers) of the final report of the Royal Commission into Aged Care Quality and Safety (Royal Commission)². While the Royal Commission's recommendation to establish a national registration scheme for the personal care workforce has been accepted in principle, the Government has decided to proceed with a regulatory model that aligns worker regulation across the care and support sectors.

Specifically, the Government has agreed to establish a single enforceable care and support sector code of conduct (Code) across the aged care, veterans' care and disability support sectors for implementation by 1 July 2022. The Aged Care Quality and Safety Commission will be given powers to enforce the Code against aged care workers. The Government will also deliver a nationally-consistent centralised pre-employment screening check with a register

¹ Available at <https://www.coaghealthcouncil.gov.au/Portals/0/ASReview%20FINAL%20Report.pdf>

² Available at <https://agedcare.royalcommission.gov.au/publications/final-report>

of cleared and excluded workers, in the aged and veterans' care sectors, commencing 1 July 2022.

The Review of the Aged Care Quality Standards will consider appropriate regulatory levers to require aged care providers to ensure staff are appropriately trained. The Government is also supporting the attainment of qualifications by supporting an additional 33,800 vocational education and training places for new and existing aged care workers.

The Government will soon be receiving recommendations from the Royal Commission into Disability that may also consider standards in this area.

Language, literacy and numeracy

RECOMMENDATION 2

The NMBA (in association with Ahpra and other professional boards) should commission research comparing the validity of various English language proficiency tests for assessing nurses' language skills in a work environment. This research should form the evidence-base for choosing and implementing an appropriate test for registration purposes.

Australian Government response

The Government supports in-principle that registered nurses have the language, literacy and numeracy skills required to perform their role in a safe and professional way.

The Government notes that the NMBA endorses four approved English language proficiency tests for the purposes of meeting English language registration standard. These are the same tests endorsed by other National Boards, including the Medical Board of Australia. These tests have been validated by research and international experience.

The Government notes that all registration standards are regularly reviewed to ensure they are fit for purpose and achieve their objectives under the National Law. Should a standard be found to no longer be fit for purpose, the Government can, through the Ministerial Council, require the NMBA to review and update the standard as required.

Noted is the intersection of this recommendation and **recommendations 4, 6, 10 and 11**.

RECOMMENDATION 3

ANMAC should amend the evidence guide used for accreditation to include a mandatory report on the credentials and number of qualified English language experts employed to assist students in applying their English language skills at work and evidence that these experts are available to students who need assistance.

Australian Government response

The Government notes that the ANMAC Accreditation Standards require education providers to have current registration with TEQSA as an Australian university. TEQSA has requirements for universities to provide teaching and learning support in literacy and numeracy, which can assist students to apply their English language skills and evidence to their area of study.

The Government notes that TEQSA is a national quality assurance and regulatory agency, independent of Government. Their role is to protect student interests and the reputation of Australia's higher education sector through a proportionate, risk-reflective approach to quality assurance that supports diversity, innovation and excellence. The Government undertakes to raise the recommendation with TEQSA for consideration and review.

The Government also notes that ANMAC undertakes checks relating to support provided for students as part of the accreditation process, including literacy, numeracy, disability and pastoral care, and that the recent changes to the ELS Registration and Accreditation Standards may also partially address this recommendation.

RECOMMENDATION 4

NMBA should require all candidates for registration to undergo an independent assessment to demonstrate they have the literacy and numeracy skills required to practise safely.

Australian Government response

The Government supports the need for students to have the requisite literacy and numeracy skills to practice safely, but believes there needs to be considerable flexibility in how this is assessed. Completion of secondary or tertiary education in Australia can be considered to provide most, if not all, of the literacy and numeracy skills required.

The Government notes the recently revised NMBA English language skills registration standard requires all nurses applying for initial registration to be able to demonstrate to the Board that their competency in speaking and communicating in English is sufficient to practise nursing and/or midwifery. The required competency is the completion of at least five years of continuous education in order to meet all the elements of the standard, including speaking, listening, reading and writing.

The Government notes that all registration standards are regularly reviewed to ensure they are fit for purpose and achieve their objectives under the National Law. Should a standard be found to no longer be fit for purpose, the Government can, through the Ministerial Council, require the NMBA to review and update the standard as required.

Noted is the intersection of this recommendation and **recommendations 2, 6, 10 and 11**.

Transparency

RECOMMENDATION 5

To improve the quality of nursing education across the country, ANMAC should make accreditation and monitoring reports public. It should point out areas of poor practice and disseminate information about effective teaching techniques and initiatives. In a commitment to transparency, ANMAC should create a publicly accessible database, containing comparative information about all accredited nursing courses.

Australian Government response

The Government supports performance and financial reporting on accreditation functions and other published accreditation activity data being available to the public.

The Government, through the Ministerial Council recently endorsed the recommendations of the ASR, which include the publication of monitoring reports from accreditation councils. The Government also endorsed a similar recommendation (recommendation 4) in the *Independent Review of the National Registration and Accreditation Scheme for health professions* (Governance Review) report.

The Government undertakes to work with jurisdictions, the newly formed independent accreditation committee (who will be tasked with providing advice on accreditation) and Ahpra to align implementation of recommendations from the ASR, the Governance Review and this report.



Reality shock: are graduate nurses ready for work?

What can we expect from a
graduate nurse?

RECOMMENDATION 6

NMBA practice standards should specify the core knowledge, skills, and procedural competence newly registered ENs and RNs require to function in any workplace setting.

Australian Government response

The Government notes that the NMBA has recently moved away from competencies in favour of standards for practice, which was conducted through an extensive process of consultation with the profession and the public, to balance the need of graduates with the risk of a tick box approach to the assessment of nursing skills.

These changes may have addressed some or all of this recommendation.

The Government also notes that a similar recommendation is reflected in recommendation 10 of the ASR, which recommends that the National Boards develop profession-specific and common competency standards.

The Government will work with jurisdictions, the independent accreditation committee and the NMBA to align the implementation of this recommendation with recommendation 10 of the ASR.

Noted is the intersection of this recommendation and **recommendations 2, 4, 10 and 11**.

Reducing reality shock

Assuring the quality of professional
experience placements

RECOMMENDATION 7

To ensure quality and equity, NMBA and ANMAC should consider implementing an accreditation system for clinical placements. Only practice hours spent in accredited placements should count toward meeting clinical practice hour requirements.

Australian Government response

The Government recognises that quality clinical placements are critical to the development of nursing students.

The Government notes that ANMAC Accreditation Standards contain strong expectations that Higher Education Providers (HEP) ensure provision of quality clinical placements relevant to learning outcomes. The Government undertakes to raise with ANMAC increased monitoring of compliance with these expectations, including conducting random audits.

The Government also notes that recommendation 12 of the ASR proposes reform to clinical placements. The role of the newly formed independent accreditation committee will include providing advice to support good practice on diverse clinical placements and evidence-based technological advances, ensuring that the profession, community, sector and education providers all have a voice. This recommendation could be implemented (in part) as part of the work plan of the newly formed committee.

The Government undertakes to work with jurisdictions, the independent accreditation committee, the NMBA and ANMAC to align the implementation of this recommendation with recommendation 12 of the ASR.

RECOMMENDATION 8

Given rising clinical placement charges and the cost of accrediting professional placements (see Recommendation 7), the Department of Education should review the costs and funding of undergraduate nursing education to ensure it is adequate to provide high-quality theoretical and clinical education.

Australian Government response

The Government notes the recommendation and makes the following observations.

The Department of Education, Skills and Employment has engaged Deloitte Access Economics to undertake a study of transparency in higher education expenditure on teaching and scholarship at Australian universities, examining what universities spend on teaching different disciplines. The report found that bachelor level nursing received more than sufficient funding to meet the costs of teaching these courses across the sector.

From 2021, the Government's Job-ready Graduates package of reforms to higher education (the package) funding set new Commonwealth and student contribution amounts, with total funding for disciplines more closely aligned with the average cost of delivering courses, as reported in the Deloitte study. As a result of the package, students studying units of nursing will pay lower student contributions of \$3,950 in 2021 which is a reduction from \$6,684 in 2020. Additionally the Australian Government provides Commonwealth Grant Scheme funding for nursing courses of study to support nursing clinical placements.

RECOMMENDATION 9

The Department of Health should review the Rural Health Multidisciplinary Training Program guidelines to ensure that nursing education gains the benefits of longer regional placements, interdisciplinary training, and travel subsidies.

Australian Government response

The Government supports the recommendation. The Government notes the Rural Health Multidisciplinary Training Program has recently been evaluated, and feedback from this review (Recommendation 9) was provided to the program evaluators.

A copy of the final evaluation report was provided to the NNMEAN and is available at health.gov.au.

How many placement hours are sufficient?

RECOMMENDATION 10

To ensure that all nurses are adequately prepared, ANMAC and the NMBA should increase the minimum number of placement hours required for the Bachelor of Nursing degree to 1,000 hours. ANMAC/NMBA should also increase the minimum number of placement hours required for EN diplomas and graduate-entry master's degree programs proportionately.

Australian Government response

The Government notes this recommendation and that current Australian clinical placement hours are not consistent with international requirements for nursing registration.

The Government supports quality clinical placements relevant to learning outcomes, and that HEP should consider innovative approaches to support student access to quality clinical placement hours as an alternative to increasing the quantity of hours.

The Government supports NMMEAN raising this issue with the Commonwealth Department of Education, Skills and Employment.

Noted is the intersection of this recommendation and **recommendations 2, 4, 6 and 11**.

Independent pre-registration examinations

RECOMMENDATION 11

The outcomes-based cognitive and behavioural assessments that will be used to determine whether internationally educated nurses are safe to practise in Australia should be used to serve the same purpose for domestic graduates.

Australian Government response

The Government notes that currently, only internationally qualified nurses (IQN) who do not possess qualifications that hold equivalence as deemed by the NMBA, are required to undertake a multi-choice questionnaire and objective structured clinical exam. Such assessments are not normally required prior to registration of Australian graduates in other registered health professions. The new IQN assessments commenced in 2020 and are yet to be evaluated.

The Government notes that all registration standards, including assessment of IQNs, are regularly reviewed to ensure they are fit for purpose and achieve their objectives under the National Law. Should a standard be found to no longer be fit for purpose, the Government can, through the Ministerial Council, require the NMBA to review and update the standard as required.

Noted is the intersection of this recommendation and **recommendations 2, 4, 6 and 10**.

Extending the bachelor of nursing degree: adding years vs articulation

RECOMMENDATION 12

As registered nurses (RN) take on increasing responsibility for complex care, it is likely that three years of higher education will be insufficient to prepare the nurse of the future. Working with NMBA, ANMAC, the Commonwealth education department, and other stakeholders, HEPs should explore ways to extend nursing education, including the option of nesting an associate degree in a four-year bachelor's degree.

Australian Government response

The Government notes the recommendation and makes the following observations.

RN qualifications are currently delivered in the higher education system (minimum of Bachelor of Nursing), while Enrolled Nurse (EN) qualifications are delivered in the vocational education and training (VET) system (Diploma of Nursing).

The Australian Qualifications Framework (AQF) allows education providers to design nested qualifications, which provide for different qualifications to be issued at defined exit points within an overall qualification. The Higher Education Standards Panel (HESP), in its 2017 report *Improving retention, completion and success in higher education* recommended that institutions should increasingly offer nested courses, which are appropriate and compliant with the AQF, to give students a greater range of exit options with meaningful qualifications. With careful design and appropriate articulation agreements, this could include the possibility of integrated Diploma and Bachelor of Nursing pathways that combine delivery across the VET and higher education systems.

While an Associate Degree in Health Sciences, or similar qualification, could potentially be nested within a Bachelor of Nursing degree, this would not currently enable a graduate to enter the nursing profession without further study. If it were proposed that a nested associate degree would lead to an EN qualification, the Australian Government would need to engage with state and territory

governments to examine the financial implications for the Commonwealth, of creating an additional higher education nursing qualification and the potential impact on registered training organisations (RTO) of any shift in enrolments.

Australian universities are autonomous institutions and have the flexibility to determine their student admission policies, course requirements and procedures for each degree course they offer. This includes determining course content and duration. Under the NRAS, however, nursing qualifications must be accredited by the appropriate accreditation body, in this case ANMAC.

It is noted the need for this recommendation should be considered after the implementation of **recommendations 4, 6, 7 and 10** as the implementation of these may impact on the need (or not) for changes in program length. Also noted is the overlap with **recommendation 15**.

Standards for transition to practice programs

RECOMMENDATION 13

NMBA and ANMAC should establish a national web-based transition-to-practice (TTP). The TTP should be flexible enough to be tailored to the individual needs and circumstances of different workplaces. Completing this TTP should be a requirement for all nurses in their first year.

Australian Government response

The Government notes this recommendation and acknowledge the importance of quality TTPs.

The Government has funded the establishment of an aged care transition to practice program. The program will guide new nurses in their first year of clinical practice through mentorship, professional development and specialist clinical training.

The Government notes that TTPs have been developed by state governments, private health networks, and CATSINaM to address the individual needs of the workplace and the profession.

The Government supports NMMEAN engaging with TTP providers to encourage evaluation of their TTPs to ensure they are achieving their objectives.

Breaking down the barriers

Raising the esteem of nursing

RECOMMENDATION 14

The Commonwealth Department of Health should fund a national campaign designed to attract under-represented groups to nursing. NNMEAN should oversee the campaign and ensure that key stakeholders are engaged in its development and conduct.

Australian Government response

The Government notes that ANMAC requires education providers to promote equity and diversity in enrolment, assessment and progression policies. ANMAC also requires that under-represented groups in the nursing profession, especially those from culturally, socially and linguistically diverse backgrounds, are encouraged to apply for nursing programs.

The Government also notes the responsibility for widening participation in the nursing profession by under-represented groups should not sit solely with education providers.

The Government will explore opportunities to widen participation of under-represented groups within emerging strategies that target the nursing workforce.

Using articulation to widen participation

RECOMMENDATION 15

HEPs should develop robust articulation arrangements from VET credentials to degrees. Exit points should allow students to work while continuing their studies. HEPs should also consider creating EN associate degrees to facilitate a smooth transition between EN and RN qualifications.

Australian Government response

The Government notes this recommendation.

The Government understands that EN courses are vocationally based and offered through Registered Training Organisations (this includes the VET arm of some dual-sector universities). Under the AQF Qualifications Pathways Policy, all organisations issuing AQF qualifications are responsible for negotiating agreements to provide students with entry into or credit towards other AQF qualifications, as discussed above at Recommendation 12.

A recent review of the AQF recommended revising the framework to better recognise and encourage broader credit recognition, both within and between sectors. The Government has accepted the aims of the recommendations and will work with states and territories and TEQSA to create better pathways through tertiary education in a revised AQF.

Whether it would be possible to adequately prepare a student for entry to the profession as an EN through completion of an associate degree would be a matter for the NMBA and ANMAC to determine, in consultation with HEP. However, as noted at Recommendation 12, this would potentially see a shift in enrolments from competency-based VET Diploma courses to the higher education system and would be a significant change, particularly for any RTOs that may lose enrolments. The Australian Government would need to engage with state and territory governments to examine the financial implications for the Commonwealth of creating an additional higher education nursing qualification and the potential impact on registered training organisations (RTO) of any shift in enrolments.

Widening Indigenous participation

RECOMMENDATION 16

HEPs should consider forming consortia to develop recruiting, transition, and preparedness programs specifically designed to attract Indigenous students to nursing and to support them in making the transition to tertiary education.

Australian Government response

The Government notes this recommendation and makes the following observations.

The Government notes the Department of Health has funded the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM) since 1997 to attract Aboriginal and Torres Strait Islander peoples into nursing courses.

The Government also notes the current Accreditation standards support the recruitment, retention and support of indigenous students into nursing programs and that ANMAC works collaboratively with CATSINaM on the standards.

The Government's *Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-23* (Health Plan) commits to supporting and growing the workforce including nurses to meet current and future Aboriginal and Torres Strait Islander health needs.

Similarly, the *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031* closely aligns with the Health Plan to support priority reforms and targets outlined in the 2020 National Agreement on Closing the Gap, including encouraging more Aboriginal and Torres Strait Islander health practitioners.

The Government notes that the Higher Education Participation and Partnerships Program (HEPPP) plays a vital role in enabling participation, retention and completion in higher education. The HEPPP provides funding to assist universities to improve access and support for Indigenous students, and students from low socioeconomic status (SES), regional and remote backgrounds.

The Government notes the Indigenous Student Support Program (ISSP) provides \$71 million annually to 40 universities to support the participation and graduation of Aboriginal and Torres Strait Islander students in higher education. Universities use the funding to provide targeted support services, including scholarships, tutorial assistance, mentoring, providing safe cultural spaces and other personal support services. The flexibility of the ISSP assists universities to tailor their services to match student needs.

Trends affecting nursing education

The ageing population and the burden of disease

RECOMMENDATION 17

Nurses should be prepared by their academic work and clinical placements to enter the workforce in a range of practice environments. ANMAC's accreditation standards should encourage the re-orientation of nursing education toward primary care, which may require an easing of restrictions on who can oversee nursing education.

Australian Government response

The Government supports the increased role of nurses in primary care.

The Government notes that the current EN and RN Accreditation Standards stipulate clinical placements must be in a variety of settings and capture requirements of a foundation in primary care. Similarly, the RN Accreditation Standards released in 2019 allow supervision by other health professionals, which further enables clinical placements in primary care.

The Government supports NMMEAN working with ANMAC to explore ways to encourage more clinical placements to become available to nurses in primary care settings.

This recommendation will also be impacted by **recommendations 6 and 7**.

Increasing incidence and prevalence of mental health problems

RECOMMENDATION 18

Mental health is a national priority area; it should also be a priority area for educational institutions preparing nurses for practice. ANMAC has added “content related to mental health” to its proposed RN accreditation standards. The EN and NP accreditation standards should be amended to contain a similar requirement. To ensure that all nurses are adequately prepared, the accreditation standards should be specific about the core areas of mental health that must be covered and the required learning outcomes.

Australian Government response

The Government notes that the ANMAC RN Accreditation Standards were updated in 2019 and now require “*integrated knowledge of regional, national and global health priorities including mental health and care of the older person*” rather than require ‘content related to mental health’. These changes may have addressed some or all of this recommendation.

The Government also notes the EN Accreditation Standards incorporate the Diploma of Nursing National Training Package. Teaching and learning relating to mental health is already a core unit of study in the training package.

The Government supports NNMEAN reviewing the Accreditation standards to identify if further work is required to meet this recommendation.

The Government notes that all accreditation standards are regularly reviewed to ensure they are fit for purpose and achieve their objectives under the National Law. Should a standard be found to no longer be fit for purpose, the Government can, through the Ministerial Council, require ANMAC to review and update the standard as required.

It is noted that implementation of **recommendations 6 and 7** may also support this issue.

The complexity of patient care and the need for inter-disciplinary teams

RECOMMENDATION 19

ANMAC's accreditation standards require inter-professional learning to be “embedded in the curriculum.” The EN accreditation standards should contain the same requirement. In both cases, the accreditation standards should include specific learning outcomes and assessments. AHPRA should consider establishing a national centre for interprofessional practice to guide the development of interprofessional education and collaborative practice.

Australian Government response

The Government acknowledges that inter-professional learning for all health professionals will become increasingly important in the delivery of health care into the future.

The Government notes that there is an established inter-professional working group within the Health Professions Accreditation Collaborative Forum and that ANMAC is a member.

The Government notes that recommendation 4 of the ASR relates to cross-profession policies and guidelines being developed by the newly formed independent accreditation committee.

The Government undertakes to work with jurisdictions, the independent accreditation committee, ANMAC and Ahpra to align implementation of recommendations from the ASR and this report.

Explosive growth in technology

RECOMMENDATION 20

ANMAC's RN accreditation standards for health informatics and digital health technologies should specify learning outcomes and the level of expertise required. The EN accreditation standards should contain similar specifications.

Australian Government response

The Government notes that the Digital Health Agency, in conjunction with the Australasian Institute of Digital Health has developed the National Nursing and Midwifery Digital Health Capability Framework. The Framework is a resource to guide individuals, employers and educators in their workforce and professional development planning. This Framework recognises the unique digital health capabilities of nurses and midwives, outlining the core skills, knowledge and behaviours required for contemporary professional practice.

Development of the Framework was undertaken in collaboration with the Australian College of Nursing, the Australian College of Midwives, the Australian Nursing and Midwifery Federation, CATSINaM, ANMAC, NMBA, the Australian Primary Health Care Nurses Association, the Digital Health Cooperative Research Centre and the Queensland Chief Nursing and Midwifery Officer, along with other key stakeholders from across the nursing and midwifery sectors. The framework was published in October 2020 and is available from digitalhealth.gov.au. The framework may address some or all of this recommendation.

The Government supports NNMEAN reviewing the accreditation standards to identify if further work is required to implement this recommendation.

The Government notes that all accreditation standards are regularly reviewed to ensure they are fit for purpose and achieve their objectives under the National Law. Should a standard be found to no longer be fit for purpose, the Government can, through the Ministerial Council, require ANMAC to review and update the standard as required.

It is also noted that the implementation of **recommendations 6 and 7** may address this issue.

Preparing for the future

RECOMMENDATION 21

In the process of specifying the core knowledge, skills, and procedural competence newly registered ENs and RNs need to function in any workplace setting (see Recommendation 6), NMBA should use national and local health priorities as a guide.

Australian Government response

The Government notes that the ANMAC RN Accreditation Standards were updated in 2019 and the changes may have addressed some or all of this recommendation.

The Government supports NNMEAN reviewing the Accreditation Standards to identify if further work is required to meet this recommendation.

The Government notes that all accreditation standards are regularly reviewed to ensure they are fit for purpose and achieve their objectives under the National Law. Should a standard be found to no longer be fit for purpose, the Government can, through the Ministerial Council, require ANMAC to review and update the standard as required.

How many nurses do we need?

RECOMMENDATION 22

In partnership with states and territories, the Commonwealth Department of Health should initiate an ongoing assessment of replacement, recruitment, and retention rates for generalist and specialist nurses across the country.

Australian Government response

The Government supports in principle this recommendation and undertakes to work with jurisdictions to broaden current areas of nursing workforce surveillance to ensure greater access to more current data that will help inform future workforce development.

Online course delivery and simulated learning

RECOMMENDATION 23

The Commonwealth Department of Health should sponsor research aimed at determining the ideal mix of online and face-to-face teaching as well as how best to integrate simulation and clinical placements.

Australian Government response

Commonwealth research funding is available through competitive processes such as the Medical Research Future Fund and the National Health and Medical Research Council.

The Government notes that Health Workforce Australia (HWA) developed the Simulated Learning Environments program as part of its Clinical Training Reform agenda, providing a significant investment of over \$115 million in funding from June 2010 to December 2014.

The Government understands that large, well-resourced projects (randomised controlled trials) have been conducted for the professions of Occupational Therapy and Speech Pathology. These projects were managed by the Department of Health, following the closure of HWA. The projects involved substituting a number of traditional clinical placement hours with simulated learning. The Department would be able to provide contacts from the funded organisations that managed the Occupational Therapy and Speech Pathology projects to researchers, to enable sharing of the experiences of these professions during and after the projects. This may lead to a replication of these projects in nursing by Universities, noting ANMAC and the NMBA would need to be involved.

Nurse practitioners, specialists and academics

Back to the future

RECOMMENDATION 24

In line with national health priorities, Nurse Practitioner education should be oriented toward primary care, particularly in the regions. Advanced practice requirements should be revised to encourage the formation of the broad skills required in primary practice. Expertise should be demonstrated by independent assessments. Access to the Medicare Benefits Schedule for NP services should be reviewed.

Australian Government response

The Government notes that the Cost Benefit Analysis of Nurse Practitioner (NP) Models of Care commissioned by the Department of Health demonstrates that there could be significant cost savings to the health system and improved access for Australians if there is an expansion of NP roles in primary care, particularly in rural and regional Australia.

The Workforce Incentive Program (WIP) includes the addition of NPs as eligible health professionals under the WIP-Practice Stream. The WIP-Practice Stream provides financial incentives to support general practices to engage nurses (including NPs), Aboriginal and Torres Strait Islander Health Practitioners and Health Workers and eligible allied health professionals.

It is noted that the first part of this recommendation needs to be considered following the implementation of **recommendation 6 and 7**, which should address the first two points.

It is also noted that the Government is considering the recommendations from the review of the Medicare Benefits Scheme (MBS). There was a specific NP Reference Group providing advice on how improvements can be made to better support the growth and integration of NPs into Australia's health system. The Government will work with the profession once the outcomes of the MBS Taskforce review are known.

The Government also notes that the NMBA will ensure the foundation of this recommendation is included in the current review of NP standards for practice and that this flows on to the NP Accreditation Standards review planned for 2021.

The Government notes that all registration standards are regularly reviewed to ensure they are fit for purpose and achieve their objectives under the National Law. Should a standard be found to no longer be fit for purpose, the Government can, through the Ministerial Council, require NMBA to review and update the standard as required.

RECOMMENDATION 25

Government and HEPs should increase their support for doctoral studies in nursing, especially for members of minority groups.

Australian Government response

The Government notes the recommendation and provides the following observations.

The Government's research block grants, established under the *Higher Education Support Act 2003*, provide block funding to eligible Australian HEP for research and research training under the Research Training Program (RTP), and the Research Support Program.

The RTP is providing \$1.0646 billion in 2021 to Australian universities to support higher degree by research students. The RTP funds scholarships for the tuition fees, stipends to support students' general living costs and allowances for ancillary costs of Higher Degree by Research (HDR) studies.

The awarding of RTP scholarships to HDR students is merit-based, and HEP are responsible for managing the RTP application, selection and offer processes. The *Commonwealth Scholarship Guidelines (Research) 2017* provide the legislative basis for the provision of funding to this program.

HEPs are required to publish information about processes, policies and conditions relating to their RTP Scholarship Policies. This provides transparency for all students seeking support to undertake HDR studies.

The Government allocates RTP funding to eligible institutions on the basis of 25 per cent from Australian competitive grant research income, 25 per cent from industry and other research income, and 50 per cent from HDR completions. A higher weighting is applied for Indigenous student completions, to reward universities for supporting Indigenous students to complete their HDR studies.

Implementation of recommendations

RECOMMENDATION 26

The National Nursing and Midwifery Education Advisory Network (NNMEAN) should be given responsibility for monitoring the realisation of this review's recommendations. The Government should consider commissioning a follow-up review after four years, with the aim of assessing the progress in implementing the recommendations contained in this report.

Australian Government response

The Government supports the recommendation that NNMEAN be given responsibility for monitoring implementation of the recommendations of this review and will consider further work should implementation of the recommendations not be completed.



