

Health Workforce Scholarship Programme – APNA submission

15 September 2015

The Australian Primary Health Care Nurses Association (APNA) welcomes the opportunity to contribute to the Health Workforce Scholarship Programme (HWSP) consultation. We are providing this submission on behalf of our membership, Australian primary health care nurses.

APNA Submission

The HWSP Stakeholder Consultation Document invites organisations to provide views on areas of particular workforce shortages and how they should be addressed through scholarships. As the peak professional body for nurses working in primary health care, APNA's submission focusses on the Australian nursing workforce and in particular nurses working in primary health care. APNA's submission is set out below.

APNA also wishes to note that it is well positioned to be the administering body for the HWSP. If awarded this programme of work, APNA would efficiently and effectively assess applications based on the relevant criteria.

1. Background

Workforce shortages

There is projected to be a substantial shortage of nurses in Australia, and this shortage will be most acutely felt in the primary health care sector.¹

Health Workforce Australia's report 'Australia's Future Health Workforce – Nurses' (*AFHW – Nurses*) from December 2014 contains workforce planning projections showing a projected shortfall of approximately 85,000 nurses in Australia by 2025, and 123,000 nurses by 2030 under current settings.

AFHW – Nurses categorises nurses into the following sectors:

- acute care
- aged care
- critical care and emergency
- mental health
- other nursing.

¹ Health Workforce Australia 'Australia's Future Health Workforce – Nurses' (*AFHW – Nurses*) - December 2014

The 'other nursing' category includes primary health care nurses, such as nurses that work in general practice settings. Modelling conducted for this category shows that, under the comparison scenario, the projected undersupply of nurses across this sector in 2025 will be 27,000. In 2030 this shortfall is projected to be 38,000 (an 88% gap), the largest shortfall of any nursing sector and 31% of total undersupply across all nursing sectors. This projected shortfall will have significant implications for Australia's primary health care system, which is already struggling to cope with the exponential growth in patients with chronic and complex disease.

Primary health care nurses are also employed in the aged care and mental health nursing sectors. *AFHW – Nurses* shows projected shortfalls of 13,000 aged care nurses (a 26% gap) and 11,500 mental health nurses (a 61% gap) by 2030.

AFHW – Nurses reports separately on the primary health care sector, although workforce supply modelling of this sector was not conducted (instead it was included in the 'other nursing' sector modelling).

AFHW – Nurses notes that workforce demand across all sectors of nursing is likely to increase due to an ageing population with more chronic disease and multi-morbidity, combined with rising costs of technology/treatments and increasing consumer expectations. For the 'other nursing' sector, factors contributing to the undersupply are high exit rates and low numbers of workforce entrants.

Primary health care nurses are highly skilled in the management of chronic and complex disease, but there is a real need to increase and/or optimise these nurses' scope of practice to ensure they are able to undertake this role as effectively and efficiently as possible.

Re-entry to practice

Nurses who have had a break from nursing and are seeking to re-enter the profession are required to either undertake an approved programme of study or undergo a period of supervised practice. For nurses who are required to undertake a programme of study (for example, if they have not practiced for ten or more years), the current cost of a Return to Register (RTR) course for nurses run through the Australian College of Nursing (ACN) is \$11,000, with other providers charging similar amounts. The course takes around ten weeks to complete.

Nurses who have left the profession, and may consequently be on a reduced household income, are likely to find it difficult to fund the cost of a re-entry programme; this operates as a significant barrier to nurses re-joining the nursing workforce. These nurses may have substantial nursing experience and as a result of their non-participation, the workforce faces a significant loss of experience and industry knowledge. Making better use of these [highly trained] nurses is one way to counter projected workforce shortages.

2. Types of courses that warrant scholarships

a) Undergraduate scholarships

The nursing workforce is an ageing demographic and this trend is amplified in the area of primary healthcare nursing. *AFHW – Nurses* reports that of the Registered Nurses working in primary healthcare, the majority (65%) were 45 years of age or older.

In order to ensure a sufficient number of nurses are available to deal with the increasing demands of Australia's ageing population it is vital that measures are taken to encourage more undergraduates to enter the nursing profession. Scholarships are an essential tool to encourage this recruitment.

b) Re-entry to practice scholarships

Scholarships to enable re-entry to practice for nurses, particularly primary health care nurses, will mean the profession is less likely to lose out on the opportunity to tap into this pool of experienced workers. A scholarship programme focussing on re-entry to practice will also mean more nurses available to work in rural, regional and remote Australia.

c) Transition to practice scholarships

Given the projected shortfall in primary health care nurses, it is important that nurses who are transitioning to primary health care from other nursing sectors are adequately supported. Scholarships should be available for nurses to undertake transition to practice education.

d) Continuing Professional Development (CPD) scholarships

APNA conducted an online survey of primary health care nurses at the start of 2014. In this survey respondents were asked to answer a series of 32 questions relating to CPD. There were a total of 832 respondents to the survey, representing more than ten separate areas of primary healthcare.

The results of the survey showed that the vast majority (90.5%) of respondents paid for their CPD themselves, although just under half of respondents also received some financial assistance from their employer. Most respondents (85.5%) reported that cost was a barrier to professional development (with accessibility and leave from employment being other significant barriers).

Nurses who maintain and develop their skills through CPD are more engaged with their work and are more likely to have a positive outlook on their future career; they are therefore more likely to remain in the workforce. A programme of CPD scholarships would help to address the most significant barrier to nurses undertaking professional development, and would therefore assist in countering workforce shortages.

The costs of undertaking CPD are highest for nurses working in rural, regional and remote areas of Australia. APNA has also identified a number of specific barriers for the rural, regional and remote nursing workforce, including time away from family, costs of travel/accommodation and poor or unreliable internet access. The provision of specific scholarships for nurses in rural, regional and remote areas to undertake CPD is likely to boost retention of these nurses.

Nurses that upskill are well placed to act as mentors and preceptors to nurses new to the profession, and can have a significant impact on recruitment and retention rates. Scholarships for programmes that use a mentorship or preceptorship model can help nurses develop the requisite skills and experience. Examples of such programmes include La Trobe University's 'World of Wounds' wound care management course and a number of Australian Nurse Immuniser courses.

Ideally scholarships would be offered to undertake CPD covering a range of clinical and non-clinical topics, with the opportunity to network with other nurses during this education and using content which has been developed by nurse leaders in the field. The online and face-to-face education services provided by APNA are a good example of CPD that meets these criteria.

e) Scholarships to attend nursing/healthcare conferences

Conference attendance offers considerable benefits for nurses, including:

- the opportunity to network and connect with colleagues; networking is a powerful tool to overcoming professional isolation and has been shown to impact upon workforce retention
- exposure to evidence based, quality clinical education
- a pathway for nurses to broaden their scope and raise quality and foster professional satisfaction; the nature of primary health care nursing demands that nurses have deep content knowledge, coupled with a broad skill set in order to effectively respond to all presentations in their clinical setting.

Nurses frequently cite costs (attendance, travel and accommodation) as a barrier to conference attendance. This is particularly the case with nurses based in rural, regional and remote areas of Australia. The use of scholarships can help to address these barriers.

3. Appropriate payment amounts and expected outcomes for scholarships

Payment amounts

Appropriate payment amounts for different nursing scholarships vary according to the activity being funded. As a general guide, costs for activities referred to above are as follows:

- costs for undertaking an online learning module range from \$200 to \$500
- costs for attending a one day CPD course range from \$150 to \$500
- costs for attending specialised skills course (e.g. Pap smear Provider and Nurse Immuniser) range from \$500 to \$2,800.
- costs for attending a re-entry to practice programme are approximately \$11,000
- costs for attending a conference range from around \$500 to more than \$3,000 (with travel and accommodation costs).

Outcomes

An overall expected outcome of the HWSP is an increase in nurses, particularly primary health care nurses and nurses based in rural, regional and remote areas of Australia.

Specific expected outcomes include the following:

- undergraduate scholarships: an increase in recruitment to the nursing profession
- re-entry to practice scholarships: an increase in nurses re-entering the profession
- transition to practice scholarships: an increase in nurses transitioning to the primary health care nursing sector
- Continuing Professional Development (CPD) scholarships: an increase in nurses undertaking CPD
- scholarships to attend nursing/healthcare conferences: an increase in nurses attending nursing/healthcare conferences.

4. Criteria to be taken into account when awarding scholarships

Some of the relevant criteria to be taken into account when awarding scholarships are as follows:

- Rurality
- Aboriginal and Torres Strait Islander background
- years of experience
- career objectives
- clinical area of interest
- how the recipient will apply knowledge/experience/skills gained through the scholarship programme and what the expected impact will be on their work/population group.

About APNA

Australian Primary Health Care Nurses Association (APNA) is the peak professional body for nurses working in primary health care. APNA champions the role of primary health care nurses; to advance professional recognition, ensure workforce sustainability, nurture leadership in health, and optimise the role of nurses in patient-centred care.

APNA is bold, vibrant and future-focused. We reflect the views of our membership and the broader profession by bringing together nurses from across Australia to represent, advocate, promote and celebrate the achievements of nurses in primary health care.

Nurses in primary health care contribute to a healthy Australia through innovative, informed and dynamic care.

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