### **Innovation in Education: Transition for Enrolled Nurses**

### Non Refereed Article

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### **Absrtact**

This paper discusses an initiative for qualified Enrolled Nurses, particularly those in rural Western Australia, to complete an educational transition to Registered Nurse. The discussion outlines one innovative model involving a partnership between educational institutions to address the needs of this student group. The course was developed in response to an extension of a curriculum review of the Bachelor of Science (Nursing) in 1999. The key to the success of the program, and what makes it differ from other distance education courses for Enrolled Nurses upgrading their qualifications to Registered Nurse is the role and commitment of the mentors in the Satellite Learning Centres around the State who form this important partnership. The promotion of student support mechanisms through the Centres has been a positive aspect of the course, as this vulnerable group of

students often struggle to complete tertiary studies. The additional pressures of family responsibilities and work commitments, making study a difficult option, compound this. However, the challenge for universities is to continue to provide Enrolled Nurses with an opportunity to embark on tertiary study programs that are accessible, flexible, and innovative, particularly for those students in rural Australia.

## Introduction

Nursing education requires innovation to address the learning needs of a diverse client population and to address issues that are facing the nursing profession today. Education providers must look beyond traditional models of course delivery and initiate a range of possible partnerships to address these needs. This paper discusses an initiative for qualified Enrolled Nurses to complete an educational transition to Registered Nurse. The article outlines one innovative model, involving a partnership between educational institutions, to address the needs of this student group.

# **Background**

### Curriculum Review

The completion of a comprehensive curriculum review and redevelopment of the Bachelor of Science, Nursing (Pre-registration) during 1998 and its implementation throughout 1999-2001, has been a significant achievement for the School of Nursing and Midwifery (Downie, Horner, Horgan, Radloff & Roberts, 1999). The School succeeded in developing an undergraduate curriculum based on a philosophy of streamlined content, integration of units, student focused, evidence based and with nursing practice the central focal point of the curriculum. The course maintained its three and a half year program which was seen as a strength of the curriculum.

During 1999, the School of Nursing and Midwifery further examined the new curriculum in respect of other student cohorts, in this case, those students who had previously completed a TAFE Associate Diploma, or a hospital Certificate and were registered as an Enrolled Nurse in Western Australia. The review commenced in January and was completed by March 31, 1999.

The curriculum review undertaken in 1999 was extensive and involved consultation with nurses from industry and from within the university. Focus groups were held to explore the key issues for Enrolled Nurses in relation to the potential opportunity for them to enter an undergraduate degree program resulting in Registered Nurse registration. Several key issues were uncovered in the review that were later addressed in the development of an Enrolled Nurse pathway.

The issue of granting advanced standing in university courses was a topic of considerable debate within industry, TAFE and Universities. There was some resentment among Enrolled Nurses that their nursing experience, in some cases many years, did not appear to be valued or recognised by Universities. Certainly, at Curtin University advanced standing was granted only to those Enrolled Nurses with an Associate Diploma qualification and hospital-based nurses were disadvantaged in this regard.

It was noted also in the review that Enrolled Nurses continued to be employed in significant numbers, particularly in rural areas of Western Australia, however, career pathways and opportunities for further study were very limited for them. This situation had become even more critical with the increasing nursing workforce shortage. In some areas employers indicated that positions for Enrolled Nurses would decrease in the future because of the high cost of employing them. Proposed changes to the TAFE Associate Diploma for Enrolled Nurses in WA, with the outcome that the course be re-classified as a Certificate IV course, also caused concern regarding the role of the Enrolled Nurse and the potential impact on the nursing workforce shortage.

Many Enrolled Nurses expressed the desire to enter a Bachelor of Science, Nursing (Preregistration) but stressed their preference to study part-time and by distance. This was particularly relevant for those in rural areas who stated the need for more flexible delivery modes. Enrolled Nurses working outside metropolitan Perth were recognised as disadvantaged in terms of geographical isolation and educational and professional isolation, with few opportunities to complete tertiary studies either part-time or by distance methods.

# Enrolled Nurse Workforce Data

Examination of the Enrolled Nurse workforce information in Australia indicated a serious shortage of both registered and enrolled nurses (AIHW, 1999). Although the data within this report was from the 1996 survey, the situation can be projected forward. National nursing labour force data relevant to this paper are outlined below.

- Of the 55,000 Enrolled Nurses enumerated in this report, 84.3% were employed in nursing, 4.9% were looking for work in nursing and 8.9% were not looking for work in nursing.
- Of those working in nursing, 93% were working as clinicians. Within this group, 37.4% were working in gerontology or geriatric nursing, 33.6% in medical and surgical nursing areas.
- The public sector employs 68.3% of Enrolled Nurses although this varies across States. Of these, 58% work in acute and psychiatric hospitals and a further 23% work in nursing homes. In the private sector, 43% work in nursing homes and 25% work in acute and psychiatric hospitals, and 10% work in private medical clinics.
- There is a continuing decline in full-time equivalent (FTE) nurse employment per 100,000 population throughout Australia, with significant difference between States and Territories. This means that, on average, patient numbers per FTE nurse have been increasing.
- The average age of employed Enrolled Nurses in 1996 was 38.6 years.
- The proportion of Enrolled Nurses in the nursing workforce fell from 24% in 1989 to 20% in 1996.
- The number of persons in nursing support occupations increased significantly (by 27%) from 16,706 in 1991 to 25,941 in 1996.

These factors, together with the issues highlighted in the review, illuminated the problems faced by Enrolled Nurses, particularly those living in rural and remote

locations. It was evident therefore that a program to address the needs of this cohort be specifically designed. It was agreed that a four semester full-time (equivalent) distance education course pathway be developed, specifically for Enrolled Nurses, with considerable clinical experience, for transition to Registered Nurse. The program, organised in conjunction with selected partners throughout Western Australia, was particularly for rural based Enrolled Nurses; with opportunities also made available for metropolitan-based students. The curriculum framework and course structure is the Bachelor of Science (Nursing) and therefore articulates with other courses in the School.

# The Enrolled Nurse to Registered Nurse Transition Key Principles

The Bachelor of Science (Nursing) (Enrolled Nurses) was developed with four key principles guiding the implementation of the course. These were:

- 1. Recognition of prior learning
- 2. Rural satellite learning centres
- 3. Compulsory 10 x day Foundation course
- 4. Flexible delivery of units distance mode

The course initiative recognised that many potential students have multiple responsibilities including those related to their employment. Enrolled nurses work parttime, often supporting families, and are not able to study full-time. Their responsibilities at work and the overall work load was recognised as likely to impact on their energy to commit to study and because many potential students live in rural areas they do not have ready access to the university and its facilities. Hence, the course incorporated all of these factors into the development with special consideration of how they might impact this cohort.

# Recognition of prior learning - advanced standing

Prior to the new pathway, Enrolled Nurses with a TAFE Associated Diploma were awarded advanced standing of six of the eight first year units. Enrolled Nurses with a hospital certificate were assessed individually for advanced standing but little advanced standing was usually granted. The new course for Enrolled Nurses allowed students to demonstrate appropriate knowledge and skills from previous education and clinical experience. The advanced standing of Semesters One, Two and Three (modified) in recognition of their prior learning and considerable clinical experience was seen as appropriate. The selection criteria and a comprehensive application process that included demonstration of clinical competence through documentation and interview helped to determine the Enrolled Nurses level of knowledge and experience.

# Rural Satellite Learning Centres

The second key principle to guide the development of the course was the formulation of contractual partnerships with six satellite learning centres across rural Western Australia. These centres included TAFE Colleges in Bunbury, Albany and Geraldton, Curtin campuses at Kalgoorlie and Esperance and the hospital in Port Hedland. The role of the centres was to provide learning resources such as library access, computing facilities and a regular meeting place for students. The contractual arrangement between the university

and the industry partners involved an agreed remuneration to the centres in return for the provision of student services and the assignment of a mentor and adviser for the Enrolled Nurses undertaking the course in each area.

The role of the mentor is to liaise with the course co-ordinator and unit controllers at the Curtin main campus and to report on course or student issues. They are encouraged to convene regular fortnightly or monthly tutorials with students for face-to-face contact. One of the main roles of the mentor is to maintain contact with students in the region through e-mail or telephone and to facilitate group support. The role of the group in support of each other is an important feature of the model. Mentors are engaged in negotiating clinical placements for students and to assess clinical competence as necessary. For rural students, clinical experience is negotiated to minimise travel away from home, however, travel away from home, or to the metropolitan area, may be necessary to secure the appropriate clinical experience. For part time students, continuing to work as Enrolled Nurses during their course, clinical experience must be obtained in an area other than that in which they work as an Enrolled Nurse in order to minimise the potential for conflict between the two roles. To integrate the role of the mentor into the program, the designated adviser was involved in the recruitment and selection of students and encouraged to attend and contribute to the Foundation workshop.

An additional aspect of the support offered in the model was the appointment of a Senior Lecturer to co-ordinate the transition of the Enrolled Nurse to Registered Nurse program. The role of this staff member was to co-ordinate course delivery within the School of Nursing and Midwifery and to manage student recruitment, selection and administration. Regular contact with staff at satellite learning centres is a key priority in order to monitor student progress and report to the Director of Undergraduate Studies on course and student matters. It is envisaged that the co-ordinator will also visit satellite learning centres at least once a year to maintain close contact and enhance communication.

## Foundation Workshop

As a new initiative, the School of Nursing and Midwifery recognised that this cohort of students would not only benefit from close monitoring and extra support but that this was strategic to ensure the success of the students. This was commenced with the content and strategies of the *Foundation Workshop* and maintained during the course through the student's link to the staff mentor and each other.

The initial goal of the ten-day, compulsory workshop was to identify the individual learning needs of the Enrolled Nurses because their experience and knowledge was both varied and diverse. This was achieved by giving the students the opportunity to demonstrate their clinical competence and prior learning during the workshop, a component of the course encouraged by the Nurse Board of W.A; the registering authority. The course sought also to establish the foundations for future learning and assisted the students to develop learning strategies and processes that would be of benefit to them throughout their ensuing studies. For example, time management and study skills were included in the workshop content. Another important component of the workshop was to establish the academic expectations and literacy requirements of a university

degree program, an aspect of great concern to the students as they entered university for the first time. Students also expressed their anxiety in the workshop about the differentiation between the role of the Enrolled Nurse and the transition to Registered Nurse. This was an area that required students to discuss effective learning strategies to cope with this issue and in reality proved difficult because students were often used as an 'extra pair of hands' rather than encouraged to meet their learning objectives when placed in the clinical setting. Overall the Foundation workshop enabled students to establish contacts and develop support networks that are invaluable in ensuring that they have encouragement and collegial support as they progress through their studies.

## Flexible Delivery

A range of teaching and learning methods were identified for inclusion in the course with an emphasis on interactive learning and encouragement for the development of self-direction and responsibility. This was particularly relevant as units were developed for flexible delivery. This also encouraged the use of a range of teaching styles and strategies to support creativity in teaching. Examples of the variety of teaching and learning strategies used for distance education have included:

- learning log (the student will compile a log or record of their clinical learning over the entire course which will act as a resource for reflection as well as a comprehensive record of their competence)
- web-based learning;
- interactive small group learning through tutorials, seminars and laboratories;
- self-directed learning through the application of theory to case studies;
- clinical preceptorship by practitioners in industry settings.

## **Features of the students**

The first cohort of Enrolled Nurses entered the course in July 2000 and there were 43 students in total. Four students were from Port Hedland, six from Geraldton, five students from Curtin Kalgoorlie and three from Esperance, five students from Bunbury, five students from the Albany region and 15 from the Perth metropolitan area. With their informed consent, students were surveyed in the Foundation workshop to profile their demographic characteristics and gather baseline data for later comparison. The aim is to follow the progress of students during their degree program to determine factors associated with those students who are successful.

The findings of the questionnaire were analysed using the Statistical Package for Social Sciences (version 10) and descriptive statistics calculated. Of the sample 39 Enrolled Nurses were women and four were men. Ninety five percent were Caucasian, 2.5% Aboriginal and 2.5% Asian. The average age of participants was 37 years (23 - 52 yrs) with 67% from rural centres and 33% from the metropolitan area. Most of the students were married (79%), 21% single/divorced and 63% had dependents. All participants continued to work in nursing and undertake part-time studies with commitments from 14 - 40 hours per week (M = 34 hours). Their desire to continue to work part-time and undertake only part-time studies was based on their financial and family responsibilities.

Forty four percent of students were qualified as Enrolled Nurses through the hospital system and 43% held a TAFE Associate Diploma. Others (13%) held a previous degree or had undertaken previous tertiary studies.

As expected the students had significant work and family responsibilities but overall they were very motivated and enthusiastic, with those who applied for the course having previously undertaken numerous continuing education and professional development activities. It was clear in the interview process that both rural and metropolitan Enrolled Nurses were key members of the workforce in their respective workplaces. All applicants were experienced nurses, working at an advanced level of practice for their qualifications. The interview process was a humbling experience because so many of the nurses were dedicated and committed to the profession of nursing with a firm resolve to upgrade their qualifications and provide more specialised nursing care in their local communities.

## **Critical Success factors**

The second intake of students entered the course in July 2001 and similarly there was great demand for the program from both metropolitan and rural Enrolled Nurses, with 46 students commencing. Overall, the students have positively evaluated the course to date with several critical factors highlighting the success of the program. The students acknowledge the importance of the flexible delivery of units with student attrition about 10% - 15%, a rate lower than for other cohorts in pre-registration courses. In addition, the Foundation course has been positively evaluated by both groups of students, who have recognised the need for an introduction to university requirements and academic literacy standards. Many Enrolled Nurses continue to express the desire to enter a Bachelor of Science, Nursing (Pre-registration) but stress their preference to study part-time and by distance, utilising more flexible modes of delivery. The key to the program, however, and what makes it differ from other distance education courses for Enrolled Nurses upgrading their qualifications to Registered Nurse is the role and commitment of the mentors in the Satellite Learning Centres around the State. The resources and facilities provided by the Centres together with the support offered by facilitation of the group has meant ongoing and positive support for the students. The promotion of these student support mechanisms has been crucial to the success of the program, as this vulnerable group of students often struggle to complete tertiary study programs. The additional pressures of family responsibilities and work commitments, making study a difficult option, compound this. However, the challenge for universities is to continue to provide Enrolled Nurses with an opportunity to embark on tertiary study programs that are accessible, flexible, and innovative, particularly for those students in rural Australia.

### Conclusion

Educational opportunities of the kind described in this paper continue to be particularly relevant for those Enrolled Nurses who work outside the metropolitan area. They have been recognised as disadvantaged in terms of geographical isolation and educational and professional isolation, with few opportunities to complete tertiary studies either part-time or by distance methods. Further, the global shortage of registered nurses is placing pressure on all areas of the health industry, but again, rural areas are feeling added pressure to find sufficient registered nurses to meet industry needs. Any course that facilitates study with minimal disruption the working life, must be encouraged.

Pressures, such as changes in funding for Universities and increasing competition between Universities, demand innovative approaches to the delivery of nursing education courses. Courses need to access their population in a variety of ways, capitalising on opportunities to expand beyond the traditional boundaries of the university campus. Partnerships such as those achieved within this course are an excellent example of this. As has been noted previously, the goodwill and enthusiasm of both potential students and rural partners for this initiative has been significant.

It is hoped that this initiative may encourage others to look beyond traditional models of course delivery as

well as different potential populations of students. This experience has encouraged the School of Nursing and Midwifery to explore other similar models and it is clear that the model is also transferable to other disciplines seeking new career pathways.

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