Nursing education: enrolled nurse

In Australia there are two categories of nurse regulated to practice: the registered nurse and the enrolled nurse. An enrolled nurse is a person with appropriate educational preparation and compliance for practice and has acquired the requisite qualification to be an enrolled nurse with the Nursing and Midwifery Board of Australia (NMBA). The enrolled nurse provides nursing care, working under the direction and supervision of the registered nurse.¹

It is the policy of the Australian Nursing and Midwifery Federation that:

1. All nursing care must be provided by appropriately educated, qualified and regulated nurses.

2. Education for enrolled nurses must prepare students to meet the Nursing and Midwifery Board of Australia’s (NMBA) Enrolled Nurse Standards for Practice ² to function as a safe beginning level enrolled nurse in a variety of health and aged care settings.

3. Enrolled nurse education is provided at the Diploma and Advanced Diploma level of the Australian Qualification Framework (AQF) in accordance with the National Health Training Package.

4. Entry to practice education for enrolled nurses must be at diploma level. ³

5. Education for enrolled nurses must be consistent with their scope of practice and the NMBA Enrolled Nurse Standards for Practice.

5.1 Enrolled nurses work under the direction and supervision of registered nurses. That supervision may be direct or indirect according to the nature of the work delegated. The registered nurse is responsible for delegating appropriately to the enrolled nurse within the framework of the enrolled nurses’ knowledge, skill, education and experience and the context of the nursing care to be provided. At all times, the enrolled nurse remains accountable for their own actions and is responsible to the registered nurse for all delegated functions.

5.2 The scope of practice for enrolled nurses is determined by the:

- extent of educational preparation;
- clinical competence of the enrolled nurse;
- acuity of the person requiring nursing care;
- type of clinical judgement required; and
- legislation in the State or Territory in which the enrolled nurse practices, in relation to Drugs and Poisons Legislation.
6. There must be sufficient places in the vocational education sector in all States and Territories to meet the community’s needs for an enrolled nurse workforce now and into the future.

7. Education programs should be structured as a combination of theory and clinical experience which meets ANMAC Accreditation Standards and is approved by the NMBA; and, be available through a variety of course delivery modes including part time study and distance education to provide equitable and optimal access for students.

8. Formal articulation and recognition of prior learning arrangements should be developed and implemented between Vocational Education and Training (VET) Certificate III and Certificate IV courses for assistants in nursing and other unlicensed workers (however titled) and the Diploma of Nursing leading to registration as an enrolled nurse.

9. The development of core curriculum elements across VET sector programs must not compromise the philosophy and integrity of nursing.

10. Enrolled nurse education programs should adopt a lifespan approach and include the application of nursing practice and knowledge at an appropriate level across various clinical areas where enrolled nurses are employed.

11. Employment or non-employment during the education course (for example, pre-service education, education while employed, or traineeships) should be negotiated at an individual State or Territory level in consultation with all relevant industry parties including: employers, unions, education providers, the NMBA and enrolled nurse representatives. Those not employed and in traineeships must remain supernumerary during any periods of ‘off the job’ clinical experience.

12. Clinical placements for Diploma of Nursing students require active and positive collaboration between the health and aged care and education sectors, and sufficient resources to assist education providers and facilities in which clinical nursing education occurs, to deliver a quality learning experience. Formal mechanisms to support this dialogue and interaction between health and aged care and education sectors should continue to be developed and strengthened.

13. Educational curricula for enrolled nurses should include Aboriginal and Torres Strait Islander peoples’ health, culture, history and the social determinants of health.

14. Bonding to a particular employer or agency on completion of studies as a condition for the awarding of scholarships to enrolled nurses, is not supported.

15. Transition to practice programs should be:
   - available in all health and aged care settings which employ enrolled nurses;
   - available for enrolled nurses in metropolitan, rural and remote settings, in both public and private sectors; and
   - funded by governments at all levels through relevant public, private, community and aged care settings.
16. Comprehensive orientation, the provision of preceptors and mentors and access to continuing professional development, must be available to support enrolled nurses to make the transition from education to practice.

17. Continuing professional development and ongoing education programs should be available in all States and Territories to facilitate career development for the enrolled nurse.

endorsed August 2004
reviewed and re-endorsed May 2007
reviewed and re-endorsed May 2010
reviewed and re-endorsed November 2013

References

2. Ibid