



## Nursing education: enrolled nurse

In Australia there are two categories of nurse who hold registration with the Nursing and Midwifery Board of Australia (NMBA): the registered nurse and the enrolled nurse. An enrolled nurse is a person who has successfully completed an education program of study accredited by the Australian Nursing and Midwifery Accreditation Council (ANMAC) and approved by the NMBA. The enrolled nurse provides nursing care, working under the direction, delegation and supervision of the registered nurse.<sup>1</sup>

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

1. All nursing care must be provided by nurses who are registered with the NMBA.
2. Education for enrolled nurses must prepare students to meet the NMBA *Enrolled Nurse Standards for practice*<sup>2</sup> to function as a safe and competent enrolled nurse in a range of health and aged care settings.
3. Enrolled nurse education be provided at the Diploma level of the Australian Qualification Framework (AQF) in accordance with the National Health Training Package.
4. Education for enrolled nurses must be consistent the NMBA *Enrolled nurse standards for practice*.
  - 4.1 Enrolled nurses work under the direction, delegation 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.<sup>3</sup>
  - 4.2 The scope of practice for enrolled nurses is determined by the:
    - a) extent of educational preparation;
    - b) clinical competence of the enrolled nurse;
    - c) type of clinical judgement required;
    - d) legislation in the state or territory in which the enrolled nurse practices;<sup>4</sup> and
    - e) facility policies and procedures.
5. 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.
6. Education programs should be structured as a combination of theory and clinical experience and meet the ANMAC *Enrolled Nurse Accreditation Standards*. Education programs should be available through a variety of course delivery modes including part time study and distance education, to provide equitable and optimal access for students.



ANMF Policy

7. All education providers must have their program accredited by ANMAC and approved by the NMBA, to ensure their program leads to registration with the NMBA as an enrolled nurse.
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 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 and, the NMBA. 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. There must be 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. A culturally safe nursing workforce is vital to ensure culturally safe services that meet the needs of Aboriginal and Torres Strait Islander peoples.
14. Educational curricula for enrolled nurses should address the provision of culturally sensitive care to people from culturally and linguistically diverse (CALD) communities to deliver nursing care that is culturally appropriate.
15. 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.

\*The term assistant in nursing also refers to care workers (however titled)



16. Transition to practice programs should be:
  - a) available in all health and aged care settings which employ enrolled nurses;
  - b) available for enrolled nurses in metropolitan, rural and remote settings, in both public and private sectors;
  - c) funded by governments through relevant public, private, community and aged care settings; and
  - d) underpinned by a positive organisational culture which values learning. This is demonstrated by: strong clinical leadership; a non-punitive systems-based approach to human error; timely access to designated registered nurse clinical educators and preceptors; realistic expectations of new graduates; the allocation of reasonable and manageable workloads; structured learning opportunities; a formal orientation; mandatory education and training; supernumerary time; and study days.<sup>5</sup>
17. 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.
18. Continuing professional development and ongoing education programs should be available in all states and territories to facilitate career development for the enrolled nurse.
19. Enrolled nurses who do not meet the NMBA *Registration Standard: Recency of practice*<sup>6</sup> should have access to affordable re-entry to practice programs accredited by ANMAC and approved by NMBA.

*Endorsed August 2004*  
*Reviewed and re-endorsed May 2007*  
*Reviewed and re-endorsed May 2010*  
*Reviewed and re-endorsed November 2013*  
*Reviewed and re-endorsed May 2016*  
*Reviewed and re-endorsed May 2019*

#### References

1. Nursing and Midwifery Board of Australia. 2016. *Enrolled Nurse Standards for Practice*. Available at <http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx>
2. Ibid
3. Nursing and Midwifery Board of Australia. 2013. *A national framework for the development of decision-making tools for nursing and midwifery practice*. Melbourne. NMBA. Available at: <https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Frameworks.aspx>
4. Ibid
5. Victorian Government Department of Health. Nursing and Midwifery Graduates. Available at <https://www2.health.vic.gov.au/health-workforce/nursing-and-midwifery/nursing-and-midwifery-graduates>
6. Nursing and Midwifery Board of Australia. 2016. *Registration standard: Recency of practice*. Available at <https://www.nursingmidwiferyboard.gov.au/Registration-Standards/Recency-of-practice.aspx>