I am concerned that in the draft recommendation 11.3 the Enrolled Nurse workforce has again been ignored. I am a teacher in the Diploma of Nursing and currently sit on the Department of Health and Human Services Victoria Nursing and Midwifery Planning Advisory Group – Mental Health Nurse Sub-group; the Health and Community Services Union RPN Industrial Advisory Group; and am Chairperson for the Australian College of Mental Health Nurses Education and Accreditation Committee. In all of these forums we are discussing and working towards Enrolled Nurses being supported and recognised professionally and financially as a mental health nurse.

The Nurses in Victoria: A Supply and Demand Analysis 2003-04 to 2011-12 report identified that by 2011-2012 there would be an imbalance between supply and demand in relation to qualified mental health nurses. This is now something we have seen come into fruition. It also noted that depending on capping of additional hours the shortfall of full time employment (FTE) would be between 328 to 1454 qualified nurses in Victoria. One suggestion back then to reduce these issues was to increase the use of enrolled nurses in all sectors of nursing, including mental health. This is still an area that has had limited support in making it a reality for enrolled nurses. One research paper around mental health nursing transition programs for enrolled nurses highlighted the scarcity of information around training needs, pathways and support for enrolled nurses to transition from the Diploma of Nursing into the mental health workforce. (Quinn.C and Ryan. J, 2016, p15).

The Australia’s future health workforce – Nurses (2014) report identified that there is a changing nursing workforce which includes aging, retirement, and part-time work requests. These all have an impact on nursing recruitment and retention, opening up possibilities for enrolled nurses to work in a range of areas and receive the appropriate professional development pathways to achieve this. It also noted that enrolled nurse student numbers have increased by over one-third between 2009-2012, with no indication that a decrease was likely in the future. Workforce planning was highlighted as the key area to address future health workforce requirements and this included looking at changes to nurse’s skill mix. This in turn would require professional development support for specialist areas, such as mental health. The Australia’s future health workforce –Nurses (2014) report also identified that in 2012 only 15% of nurses working in mental health were enrolled nurses. This demographic also had an older age profile which means they could potentially seek part-time or retirement options; therefore workforce planning for nurses working in mental health is required.

A key finding from the Australia’s future health workforce –Nurses (2014) report found there was a lack of organised decision making between tertiary education institutions, governments, employers plus the profession itself. Coordinated national workforce planning, development and implementation is therefore critical to ensure Australia trains, educates, and develops sufficient numbers of nurses to maintain steady education capacity growth and strong employment opportunities which meet future health needs.

Despite research and evidenced based data there still seems to be a misunderstanding amongst Government policy makers, professionals, professional bodies, organisations, and the community about what an enrolled nurse can do and can aim for in their nursing career. What we are seeing now is for an enrolled nurse to be considered a professional in specialist fields they must do their Bachelor of Nursing to achieve this. I find this interesting considering the Victorian Government included the Diploma of Nursing as part of the Free TAFE for lots of Jobs initiative and how this increased prospective student inquiries. These inquiries have highlighted that there are many who wish to become an Enrolled Nurse and not necessarily progress to a Registered Nurse. So it is again surprising that future professional development pathways, other than a Bachelor of Nursing, for Enrolled Nurses have not been considered. One also needs to ask why there continues to be such a focus on registered nurse opportunities and associated pathways, yet limited for enrolled nurses. As highlighted in government reports the onus is on all involved; government, peak bodies, unions and healthcare services to improve our healthcare workforce, and I feel that enrolled nurses are a key qualified resource that currently is underutilized.

Australian Government Department of Health (2014) The Australia’s Future Health Workforce – Nurses Detailed report. <http://www.health.gov.au/internet/main/publishing.nsf/content/34AA7E6FDB8C16AACA257D9500112F25/$File/AFHW%20-%20Nurses%20detailed%20report.pdf> (Accessed: December 1st 2019).

The *Nurses in Victoria: A Supply and Demand Analysis 2003-04 to 2011-12* report (2004) <https://www2.health.vic.gov.au/about/publications/researchandreports/Nurses-in-Victoria---A-supply-and-demand-analysis-2003-04-to-2011-12> (Accessed: December 1st 2019)

Quinn, C. and Ryan. J. (2016) ‘A mental health nursing transition program for enrolled nurses at forensic mental health hospital*’ Australian Journal of Advanced Nursing 34 (3)p.15*

Victorian Government Free TAFE for lots of jobs <https://www.vic.gov.au/free-tafe> (Accessed: December 1st 2019)