Message from the Chair

November 2005

It has been two years since State, Territory and Australian Government Ministers for Education and Health announced the establishment of a National Nursing and Nursing Education Taskforce (N³ET). Since that time, N³ET has progressed and monitored many of the recommendations of the National Review of Nursing Education (2002) Our Duty of Care report.

Much has been accomplished in this time and more will be done before the Taskforce winds up with its final report in 2006.

2005 has been a time of action with N³ET being one of many drivers of change. In the last year, new Alliances have been formed and there is a keen interest in the nursing and midwifery community to bring about positive change from within.

Since November 2003, the Taskforce has been busy implementing its work plan. Progress to date is tracking according to timelines and budget. The Taskforce is committed to working closely with a number of key stakeholders in undertaking its work. The Australia and New Zealand Council of Chief Nurses (ANZ CCN), the Council of Deans of Nursing and Midwifery-Australian and New Zealand (CODNM ANZ), the Australian Nursing/Midwifery Council and the Nurse/Midwifery Regulatory Authorities are all leading key projects associated with Recommendations 4, 5, & 12. The Taskforce is of the view that collaboration is critical to achieve quality outcomes. The outcomes will be far richer as a consequence of the involvement of key stakeholders and will leave a legacy of collaborative networks after the life of the Taskforce.

At this point, N³ET is reviewing its work with particular reference to midwives. Since the National Review of Nursing Education (2002) Our Duty of Care report, the environment has changed. Most significantly, the professional and political environments and the growing focus on recognising midwifery as distinct from nursing. Many of the recommendations from Our Duty of Care remain inclusive of issues for nurses and midwives, in others there has been an effort to identify the issues specific to midwifery. In addition to the Our Duty of Care recommendations, N³ET has been referred recommendations from The Midwifery Workforce in Australia 2002-2012 (2002). In proceeding to address these and other recommendations, it is important for stakeholders to engage to represent a wide range of views.
As work progresses, the Taskforce is delighted at the support and encouragement received from not only the nursing profession but from outside as well. In AHMAC’s submission to the productivity commission, N³ET was acknowledged as:

"an important collaborative mechanism for progressing the development of a national perspective and policy in relation to nursing/midwifery issues".

Commitment of many stakeholders is required to support the Taskforce’s work and to move towards greater national consistency. The support involves stakeholders making critical decisions to take action and to dedicate resources to the implementation of a national framework. This involves significantly challenging the way things have been done, moving boundaries and making efforts to get past the uncomfortable aspects of change. Health workforce reform is a reality, the challenge remains for health professionals to use foresight to re-think the boundaries of their practice and to recognise and concede overlap. Building flexible and integrated teams and a sustainable health workforce cannot be accomplished in professional or jurisdictional isolation.

The pace of reform in the current environment compels nurses and midwives to be engaged with the work. The Productivity Commission and Industrial Relations and Education Reform and the Taskforce are a few of the drivers of the current climate of change. Through the Taskforce’s work, nurses and midwives have an opportunity make a valuable contribution to the future health workforce.

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