# National Nursing & Nursing Education Taskforce (N<sup>3</sup>ET)

# Communication Strategy Overview

# **April 2004**

### $N^3ET$

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#### NATIONAL NURSING & NURSING EDUCATION TASKFORCE (N<sup>3</sup>ET)

# Message from the Chair

In November 2003, State/Territory and Australian Government Ministers for Education and Health announced the establishment of a National Nursing and Nursing Education Taskforce (N³ET). The Taskforce was set up to implement recommendations of the National Review of Nursing Education - *Our Duty of Care* report.

This is a wonderful opportunity for Nursing in Australia and the Taskforce is regarded as a key vehicle to drive a national reform agenda in nursing. In addition to *Our Duty of Care*, the Taskforce is now also responsible for a number of the recommendations from the recent AHMAC reports, *The Critical Care Workforce in Australia 2001-2011* (2002) and *The Midwifery Workforce in Australia 2002-2012* (2002).

#### A Communication Strategy:

Building on the approach of *Our Duty of Care*, the Taskforce is committed to ensuring that its work is well communicated and understood by the wide variety of stakeholders in the health and education sectors<sup>1</sup> nationally. To effectively implement the recommendations, the Taskforce will require the support and collaboration of a number of healthcare, education and nursing organisations throughout Australia and they in turn, need to be well informed about the Taskforce processes and direction of works.

To ensure that all stakeholders can readily access information and updates on the progress of the implementation of the many recommendations, a detailed Communication Strategy has been developed. The following document is a brief overview of that Strategy and provides an outline of the aims of the Strategy, the Taskforce's initial stakeholder review and the main methods the Taskforce will use to connect with the many interested parties.

As project plans specific recommendations are developed, the stakeholders will be reviewed to ensure that key stakeholders for that body of work are identified, consulted and kept informed of the implementation.

**Belinda Moyes** 

Chair

**National Nursing & Nursing Education Taskforce** 

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April 2004

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<sup>&</sup>lt;sup>1</sup> For the purpose of this document, the education sector will refer to both the education and training sectors inclusively unless specified otherwise.

# NATIONAL NURSING & NURSING EDUCATION TASKFORCE (N<sup>3</sup>ET)

#### Introduction

This document identifies ways in which planned, positive and targeted communication can assist with achieving effective communication to key stakeholders (Appendix 1) which include the public, community services, healthcare industry, education sector and all nurses about the N³ET and the ways in which the recommendations will be implemented.

To be successful, the N<sup>3</sup>ET communication strategy needs to ensure that the stakeholders are aware of:

- The purpose, processes and timeframes of the N<sup>3</sup>ET
- The desired outcomes
- How they can be involved

# Key Purpose of the N<sup>3</sup>ET Taskforce

The N³ET Taskforce is committed to building an enhanced and sustainable healthcare system through the promotion of professional visibility and pride, quality education and regulation to nationally consistent standards and capacity in practice, education and research for all nurses.

# Objectives of the N<sup>3</sup>ET Communication Strategy

- To ensure consistent, accurate and timely communication with the public, community services, health care industry, education sector and all nurses.
- To ensure active engagement and ownership by the stakeholders in the implementation of recommendations affecting them.
- To develop a well targeted communication strategy that is positive and effectively engages and addresses the diverse needs of the stakeholder hase
- To promote the work of the Taskforce.
- To ensure the Government is informed of the progress of the mandate.

#### **Timeframes**

The timeframe for the N<sup>3</sup>ET is two years ending December 2005. This Communication Strategy applies only to the period of the N<sup>3</sup>ET.

**Register of Stakeholders** - will be maintained that will have details of organisations, as well as individuals. Organisations will be asked to nominate a key contact person for the Taskforce. Registration as a stakeholder will be possible via the Taskforce website.

#### **Target Audiences**

#### **Internal Target Audiences External Target Audiences** Australian Health Ministers Council **Professional Bodies** (AHMC) **Industry Groups** Bodies/organisations Ministerial Council on Education, implementing Employment, Training and Youth recommendations Affairs (MCEETYA) **Employer Groups** Australian National Training Authority Education Providers - Ministerial Council (ANTA MINCO) Australian Health Workforce Officials Auxiliary Groups Committee (AHWOC) Australian Education Systems Officials Committee (AESOC)

#### Main Communication Methods/Tools

#### Internal

- Formal reporting documents
- o Work plans
- Progress Reports
- Meetings as advised
- o Final Reports

#### **External**

- E-Bulletins (after each Taskforce meeting every 6 weeks)
- Newsletters (quarterly)
- Internet Website (www.nnnet.com.au)
- o Media releases
- o Articles (good news stories) in community and professional press
- o Morning or drive time radio
- o Consultation meetings with individuals/groups
- o Online consultation
- o Written correspondence

**Nursing Education and Workforce Forums** are to be set up in all States and Territories (Recommendation 3) to address local and regional nursing education and workforce issues and to assist with the implementation of the recommendations of *Our Duty Of Care*. Details will be provided on the N3ET Website when available.

### **Endeavour**

- Profession visibility and pride
- Quality Education to nationally consistent standards
- Capacity building in practice, education and research
   Ownership and participation in the objectives and the work of the Taskforce

# INTERNAL

Target Audience	Key Messages	Communication Methods	Who to action/By when
<ul> <li>Australian Health Ministers Council (AHMC)</li> <li>Ministerial Council on Education, Employment, Training and Youth Affairs (MCEETYA)</li> <li>Australian National Training Authority – Ministerial Council (ANTA MINCO)</li> <li>Australian Health Workforce Officials Committee (AHWOC)</li> <li>Australian Education Systems Officials Committee (AESOC)</li> </ul>	<ul> <li>High Impact Activities</li> <li>Progress</li> <li>Achievement</li> <li>Timeliness</li> </ul>	<ul> <li>Formal reporting documents</li> <li>Progress reports</li> <li>Work plans</li> <li>Meetings as advised</li> <li>Final reports</li> </ul>	Chair, Taskforce

#### **EXTERNAL**

Target Audience	Key Messages	Communication Methods	Who to action/By when
<ul> <li>Professional Bodies</li> <li>Industry Groups</li> <li>Bodies/organisations implementing recommendations</li> <li>Employer Groups</li> <li>Education Providers</li> </ul>	<ul> <li>Ownership and participation in the objectives and the work of the taskforce by nursing and education sectors is central to achieving positive outcomes.</li> <li>Professional visibility and pride</li> <li>Quality education to nationally consistent standards</li> <li>Capacity building in practice, education and research.</li> </ul>	<ul> <li>E-Bulletins (after each Taskforce meeting – every 6 weeks)</li> <li>Internet Website</li> <li>Media releases</li> <li>Articles (good news stories) in community &amp; professional press</li> <li>Morning or drive time radio</li> <li>Consultation meetings with individuals/groups</li> <li>Online consultation</li> <li>Written correspondence</li> </ul>	<ul> <li>National Nursing and Nursing Education Taskforce</li> <li>N³ET Secretariat</li> </ul>
<ul><li>Public</li><li>Auxiliary Groups</li></ul>	<ul> <li>Raising awareness about the complexity of nursing as a profession in today's health care environment.</li> <li>Standards of education and regulation</li> <li>Innovations in nursing practice</li> </ul>	<ul> <li>Media releases</li> <li>Articles (good news stories) in community &amp; professional press</li> <li>Morning or drive time radio</li> <li>Media</li> <li>Written Correspondence</li> </ul>	<ul> <li>National Nursing and Nursing Education Taskforce</li> <li>N³ET Secretariat</li> </ul>

NOTE: The initial stakeholder analysis has been conducted from the perspective of the overall scope of the National Review of Nursing Education recommendations and therefore provides a high level analysis. As the recommendations are addressed, the relativity of stakeholders will change. A key step in the development of individual project plans for specific recommendations will be a review of stakeholders to ensure the **key** stakeholders for that body of work are identified

Appendix 1 - Key Stakeholders -As of April 2004. This list is not exhaustive and will be modified throughout the life of the Taskforce

Mandated Bodies/Orga Reports implementing		Employer Groups	Education/Training Groups	Public
AHMC MCEETYA AHWOC AESOC ANTA MINCO  AUSTRALIA & Territor Education Deparation Box Australian Nurs (ANC)  Council of Dean Nursing and Mic (Australia & Net)	rtments  National Nursing Organisations (NNO)  Australian College of Midwives Inc (ACMI)  College of Nursing Australia (CONA)  National Enrolled Nurses Association (NENA)  Royal College of Nursing Australia (RCNA)	Government Association (ALGA)  Origin Healthcare Group Catholic Health Australia Uniting Care Australia (UCA)  Baptist Care Australia Department of Veteran Affairs State & Territory Health Departments State & Territory Education Departments Local Government	Australian Vice-Chancellor's Committee (AVCC) Department of Education, Science & Training (DEST) Universities Vocational Education & Training (VET) - Registered Training Authorities [public (eg, TAFEs) / private] TAFE Directors Australia National Centre for Vocational Education Research (NCVER) Community Services and Health Industry Skills Council (CSHISC) Australian National Training Authorities (ANTA)	Consumers of Healthcare Health Care Auxiliary Groups Consumers Health Forum of Australia General Public

Note: The Communication Strategy builds on existing networks such as alliances, to disseminate information to member organisations; so individual organisations are not necessarily listed separately. Organisations/bodies are listed once but may have functions that cross the groupings used above.