



**LEGISLATIVE ASSEMBLY**  
FOR THE AUSTRALIAN CAPITAL TERRITORY

---

STANDING COMMITTEE ON HEALTH AND COMMUNITY WELLBEING  
Mr Johnathan Davis (Chair), Mr James Milligan MLA (Deputy Chair),  
Mr Michael Petterson MLA

## Submission Cover Sheet

### Inquiry into Recovery Plan for Nursing and Midwifery Workers

**Submission Number: 10**

**Date Authorised for Publication: 14 February 2023**

To whom it may concern,

### *Job satisfaction and autonomous scope of practice*

Hospital bed block is a national and international issue. Bed block results in the ramping of ambulances and fragile and vulnerable patients lining the ED corridors without a dedicated nurse to care for them. A nursing specific strategy that is being used with good effect is nurse led discharges. Nurse led discharges, that are collaboratively designed with medical officers, must be looked at to improve flow of patients out of in-patient care units. This strategy primarily serves to discharge patients in a supported and time effective way. It also allows the development of independent nursing practice allowing for more autonomy in nursing work leading to higher job satisfaction.

### *Rostering Practices and Childcare*

87% of the nursing workforce in Australia is female. Yet our access to flexible workplace arrangements post having children is poor. Childcare services and out of hours after school care only offer provision of care to children between the hours of 0700 and 1800. (Occasionally a rare day care opens at 0630). There needs to be investments made in the services that are available outside of standard business hours.

Access to leave is another area where improvement must be made. The 2022 Christmas period is the first Christmas in 12 years of working for CHS that I have received annual leave over the Christmas period. It was also the first time I was on annual leave since September 2021. I have applied for leave (and have over 800 hours of accrued annual leave) though the managers are simply unable to approve it as the staffing numbers are so short.

### *Mentoring for wellbeing*

In the hospital setting, after an initial, supported, New Graduate year nurses are often employed by an individual ward with a set speciality (e.g. orthopaedics, emergency, coronary care). From this point forward there is specific ward orientation and an occasional 'touch base' with an educator however there is no consistent effort made to grow and progress staff. Developing a mentoring education program, where senior nurses are assisted to acquire the skills to be mentors, is a necessary step to move us on from the perception that 'nurses eat their young'. Formalised mentoring programs have been shown to improve staff wellbeing.

### *Leadership*

To lead people in a clinical profession you need to gain their trust. I believe regular clinical time for all nursing managers is essential to maintain the confidence of clinical staff and provides realistic insight into current conditions on the floor. Furthermore, as senior staff are promoted into management and education positions it is paramount that we train them for their expanded role. Much like we wouldn't ask an SOG C to work as a nurse, nor should we expect nurses to preform managerial roles well without additional training and mentoring.

Ideas for a positive future in nursing:

1. Professional learning opportunities where roster release is assured and cannot be recalled if the clinical staff are short on the day
2. More flexible work hours. Could we look at 10-hour day shifts like the medical officers do?
3. Investment in out of standard hours childcare.
4. Managers maintaining a small portion of their hours clinically (perhaps 10%) so that they keep touch with how difficult and relentless clinical work is.
5. Empowering registered nurses through appropriately written clinical treatment protocols, medication standing orders and criteria led discharges to work more autonomously
6. Clinical career progression so that you don't reach your career peak when you are sub 30 and remain at that scope and pay bracket for the next 30 years
7. A professional mentoring program where staff are developed as mentors to guide and assist new members of staff

Nurses are, and will always be, resilient and highly capable health practitioners who truly advocate for the best patient outcomes.

I hope that this inquiry can highlight the short comings we are facing as a profession and develop an evidence based, safe and effective plan for the coming years. Our profession depends on it.