



nursing education: enrolled nurse

In Australia there are two categories of nurse licensed to practice: the registered nurse and the enrolled nurse. The enrolled nurse provides nursing care working under the direction and supervision of the registered nurse.¹

It is the policy of the Australian Nursing Federation that:

1. All nursing care must be provided by appropriately educated nursing personnel.
2. Education for enrolled nurses must prepare students to meet the Nursing and Midwifery Board of Australia's (NMBA) national competency standards for the enrolled nurse and to function as a safe beginning level nurse in a variety of health and aged care settings.
3. Enrolled nurse education is provided at Diploma level.
4. Education for enrolled nurses must be consistent with their scope of practice.
 - 4.1 Enrolled nurses work under the direction and supervision of registered nurses, unless otherwise specified in legislation. 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.
 - 4.2 The scope of practice for enrolled nurses is determined by the:
 - extent of educational preparation;
 - clinical competence of the enrolled nurse;
 - acuity of the person requiring nursing care;
 - type of clinical judgement required;
 - degree of registered nurse direction and supervision available; and
 - legislation in the State or Territory in which the enrolled nurse practices, in relation to Drugs, Poisons and Controlled Substances.
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 nursing workforce now and into the future.

6. Education courses should be structured as a combination of theory and clinical experience which meets NMBA requirements and be available through a variety of course delivery modes including part time study and distance education to provide equitable and optimal access for students.
7. Formal articulation and recognition of prior learning arrangements should be developed and implemented between Certificate III and Certificate IV courses for assistants in nursing, Aboriginal and Torres Strait Islander Health Workers and other unlicensed workers (however titled) and enrolled nurse courses, as well as between enrolled nurse courses and registered nurse/midwife courses (including recognition of prior learning as an enrolled nurse).
8. The development of core curriculum elements across disciplines must not compromise the philosophy and integrity of nursing.
9. Education courses 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.
10. The provider of the theoretical component of the education course leading to registration as an enrolled nurse (such as TAFE, private Registered Training Organisation, employer) should be negotiated with the NMBA in consultation with all relevant industry parties including: employers, unions, education providers, and enrolled nurse representatives.
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, the NMBA and enrolled nurse representatives. Those not employed and trainees must remain supernumerary during any periods of 'off the job' clinical experience.
12. Clinical placements for students of enrolled nurse education courses require active and positive collaboration between the health and aged care and education sectors and sufficient resources to assist education providers and facilities in which clinical education occurs to deliver a quality learning experience. Formal mechanisms to support dialogue and interaction between the 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 issues relating to health, culture, history and the social determinants of health.

14. 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.
15. Comprehensive orientation, the provision of preceptors and mentors and access to continuing education must be available to support enrolled nurses to make the transition from education to practice.
16. Postgraduate education should be available in all States and Territories to facilitate career development for the enrolled nurse.

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reviewed and re-endorsed may 2007

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reference

1. Direct supervision: the registered nurse is actually present, observes, works with and directs the person who is being supervised. Indirect supervision: the registered nurse is easily contactable but does not directly observe the activities.