



ANMF (Vic Branch) Policy

Graduate programs – registered and enrolled nurses and registered midwives

Preamble

Graduate programs have a critical role in supporting newly graduated nurses and midwives to transition into the role of registered nurse, midwife or enrolled nurse. They support beginning practitioners to consolidate and expand knowledge and skills learned through their undergraduate or VET programs of study and to apply these to their practice in a safe and supportive learning environment. Graduate programs also provide health services with access to a sustainable and well-prepared nursing and midwifery workforce and in turn, provide community access to high quality safe nursing and midwifery care and improved health outcomes.

Policy

It is the position of ANMF (Vic Branch) that:

1. Graduate programs should provide a structured outcome-based framework to help newly graduated nurses and midwives consolidate knowledge and skills obtained during their undergraduate educational preparation.
2. Whilst not a requirement for employment, every graduate of the Bachelor of Nursing and the Diploma in Nursing should be provided access to a transition to practice program which aligns with the evidence-based framework provided for in the Victorian Nursing and Midwifery Transition to Practice Programs Guidelines Graduate programs should be aligned with the best practice principals outlined in the *Nursing and Midwifery Transition to Practice Program Guidelines 2018* (Department of Health and Human Services, 2018) and therefore must:
 - i. be provided in a positive learning environment;
 - ii. be provided in an environment which promotes culture of safety and quality through adopting a systems based, non-punitive approach to human error;
 - iii. provide clear and transparent mechanism to ensure each graduate receives timely, targeted and individualised clinical support from nurse educator, preceptor and clinical support nurse (however titled); and
 - iv. ensure all employers, nursing leaders and registered nurses involved in supporting graduates have realistic expectations off the individual scope of practice of the nursing graduate.
3. Graduate programs should address the individual transition needs of graduates and be delivered in an environment that values their contribution as a graduate and supports their professional development.
4. Transition from undergraduate student in the academic or vocational education and training setting to a registered/enrolled nurse or registered midwife in the clinical setting can be challenging, stressful and lead to 'transition shock' (Duchscher, 2009; Ostini and Bonner, 2012; Price, 2014; Fenwick, et al, 2012; and Healy and Howe, 2012). Therefore, graduate programs must be provided in a positive learning environment and organisational culture which is safe, nurturing, respectful and supportive of the new graduate and where learning is prioritised

within the organisation's strategic plan. All nurses involved in supporting graduates are resourced and provided additional education and professional development to provide effective clinical support and mentoring to graduates.

5. In addition to fostering a positive learning environment and a culture of safety, graduate programs should provide:
 - i. structured ward orientation;
 - ii. appropriate supernumerary time provided according to the individual transition needs of the graduate;
 - iii. study days for structured professional development;
 - iv. structured opportunity for facilitated reflection;
 - v. timely access to peer support and clinical support staff such as preceptors, clinical educators and graduate program coordinators who in turn are resourced and supported to adequately support graduates;
 - vi. setting of individual goals which are realistic, objectively measurable and achievable. Graduates should also be provided with a graduate handbook which outlines requirements and expectations of their participation within the graduate program;
 - vii. performance appraisals which are implemented in a collaborative, non-punitive and constructive manner;
 - viii. a fair and transparent mechanism to provide formal and informal constructive feedback;
 - ix. rotations which are suited to the individual graduate and which support the graduate to develop confidence and competence and reduce 'transition shock';
 - x. gradual or staggered introduction to working a rotating roster and or varying shifts to ensure acclimatization to shift work while maintaining access to clinical support staff;
 - xi. graduate midwives should be provided the opportunity to gain clinical experience in all areas of pregnancy, birth and post natal care;
 - xii. specialist mental health graduate programs build on a comprehensive educational preparation and encompass broad knowledge and skill relating to mental health nursing; and
 - xiii. new graduates should not be required to perform in charge roles which are outside of the scope of practice of a beginning practitioner.

6. If newly graduated nurses and midwives are unable to obtain access to a formal graduate program, employers should provide the new graduate appropriate support to help them consolidate and expand knowledge and skills obtained during their undergraduate degree. This can occur through implementing all elements of the best practice principals outlined in the *Nursing and Midwifery Transition to Practice Program Guidelines 2018* (Department of Health and Human Services, 2018) and in particular provide:
 - i. a positive learning environment and organisational culture which is safe, nurturing and supportive of the new graduate;
 - ii. timely access to peer support and clinical support staff such as preceptors, clinical educators and graduate program coordinators;
 - iii. setting of individual learning goals which are realistic, objectively measurable and achievable; and
 - iv. a fair and transparent mechanism to provide formal and informal constructive feedback.

References

- Department of Health and Humans Services (2018) *Nursing and Midwifery Transition to Practice Program Guidelines 2018*. Retrieved 06/07/2019 from: <https://www2.health.vic.gov.au/health-workforce/nursing-and-midwifery/nursing-and-midwifery-graduates>
- Duchscher, J.E.B. (2009) Transition Shock: The initial Stage of role adaptation for the new gradated registered nurses. *Journal of Advanced Nursing* 65, 1103-1113.
- Fenwick, J., Hammond, A., Raymond, J., Smith, R., Gray, J., Foureur, M., Homer, C., & Symon, A. (2012). Surviving, not thriving: a qualitative study of newly qualified midwives' experience of their transition to practice. *Journal Of Clinical Nursing*, 21(13/14), 2054-2063. doi:10.1111/j.1365-2702.2012.04090.x
- Ostini, F., and Bonner, A. (2012). Australian new graduate experiences during their transition program in a rural /regional acute care setting. *Contemporary Nurse* 41 (2) pages 242-252.
- Price, B. (2014). Preceptorship of nurses in the community. *Primary Health Care*. 24 (4) pages 36-41.
- Healy, M. and Howe, V. (2014) *Monitoring and Evaluation Framework for Victorian Graduate Programs for Nurses and Midwives. Final Monitoring and Evaluation Framework*. Prepared by TNS for Nursing and Midwifery Workforce Wellbeing, Integrated Care and Ageing Department of Health. Retrieved 5/8/14 from http://www.health.vic.gov.au/_data/assets/pdf_file/0005/859604/Final-ME-Framework_270314.pdf
- Healy, M. and Howe, V. (2012) *Study of Victorian Early Graduate Programs for Nurses and Midwives. Final Research Report*. Prepared by TNS for Nursing and Midwifery Workforce Wellbeing, Integrated Care and Ageing Department of Health. Retrieved 5/8/14 from http://www.health.vic.gov.au/_data/assets/pdf_file/0004/751261/EGP-Final-research-report.pdf
- Healy, M. and Howe, V. (2012) *Study of Victorian Early Graduate Programs for Nurses and Midwives. Appendices*. Prepared by TNS for Nursing and Midwifery Workforce Wellbeing, Integrated Care and Ageing Department of Health. Retrieved 5/8/14 from http://www.health.vic.gov.au/_data/assets/pdf_file/0003/751260/EGP-Final-appendices.pdf