Nurses in aged care: Developing educational links with the aged care industry

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ABSTRACT

The paper outlines the Partnership in Aged Care Education (PACE) project established between the School of Nursing and Midwifery at Flinders University and five industry partners in aged care. The aim of the project was to develop educational programs to support the development of the nursing workforce in aged care across the spectrum from novice to advanced practice. The aged care industry in Australia faces the dual challenges of a growing ageing population and a declining qualified nursing workforce. Education is widely viewed as one means of addressing this shortfall. A review of recent literature highlights concerns with the manner in which nursing education currently prepares nurses for aged care.

The PACE project addresses issues of recruitment and retention of trained nursing staff within aged care through action research to identify and develop educational programs that are responsive to industry needs. The purposes of this project are to prepare registered nurses with an aged care focus at the entry level through an accountable curriculum, development of graduate nurse programs in residential aged care, continuing education programs for nursing staff within the aged care industry from care worker to nurse specialist and undergraduate and postgraduate courses that meet the practice needs of aged care nursing staff.

KEYWORDS

action research, aged care, nursing education

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Introduction
There is general recognition that there is a shortage of registered nurses (RNs) in all areas of health care (Heath, 2002) and that the situation in aged care is critical (Australian Nursing Federation, 2005). The shortage of RNs in aged care is compounded by the ageing of the population leading to a growing demand for services for older people. This paper outlines a project established by the School of Nursing and Midwifery at Flinders University and five aged care industry partners to address issues of recruitment and retention of qualified staff in aged care through an educational innovation that is tailored to meet the needs of the aged care industry and of aged care nursing staff. Action research is being undertaken to determine the educational needs of this sector to inform the development of courses and clinical placements that address these needs across the practice spectrum from novice to advanced practice. The challenges facing the aged care industry and the role of education in addressing these challenges are explored through action research collaboratively conducted by Flinders University and its five aged care industry partners.

Challenges to aged care
Australia faces a growing ageing population. Current projections suggest that 33.4% of Australia’s population will be aged over 60 by 2041 (Healthy Ageing Task Force, 2000). There is also a marked growth in the population who are 85 or over who potentially need placements in residential aged care. In 2004 there were approximately 298,000 Australians who were 85 or over (ABS, 2005) and this group is estimated to increase by over 10,000 per year until 2026 (Healthy Ageing Task Force, 2000). Projected demographic changes contribute to concerns about a growing demand for aged care services. Recent estimates suggest that the aged care workforce will increase by 35% over the next decade compared with eight percent in the entire Australian workforce (Hogan, 2004).

The proportion of qualified nursing staff within aged care is currently declining. The number of RNs and enrolled nurses (ENs) identifying their clinical specialty as geriatric/gerontology decreased by 8.7% between 1997 and 2001 (Australian Institute of Health and Welfare, 2002). The shortfall in RNs is being made up through the employment of care workers (CWs) or personal carers. Over 49,000 people identified as nursing assistants and CWs in the 2001 census. This accounts to 20.7% of all people providing nursing services; it was 18.4% in 1996. This looks set to escalate as the numbers of RNs working in the sector continue to fall (Australian Institute of Health and Welfare, 2003).

Literature exploring the labour shortage in aged care identifies the major issues in retaining and recruiting a qualified aged care workforce as: the ageing of this workforce; the lack of wage parity with other health sectors; the lack of educational opportunities; and the poor public image of aged care nursing (Department of Health and Aged Care, 2002; AGDHA, 2004). These issues are compounded by the increasingly complex needs of the ageing consumers of services. Earlier discharge from acute care hospitals has resulted in the emergence of sub-acute care in residential aged care facilities. This change challenges the skill mix of the care team in residential aged care requiring staff to be better prepared to manage more complex cases.

Challenges to aged care education
In recognition of difficulties in retaining and recruiting nursing staff to aged care the Commonwealth Government is currently exploring the role of education in recruitment of RNs to the aged care sector (Edwards, Courtney & Nash, et al., 2003; Hogan, 2004; La Trobe University, 2002; National Nursing & Nursing Education Taskforce Secretariat; 2006). Hogan (2004, 40) argues that to maintain quality care services, the Commonwealth Government, as the “major purchaser of aged care, should actively influence the development of nursing curricula more suited to the needs of a workforce providing care in aged care settings”. While there is some evidence that this is occurring for ENs and CWs (Richardson & Martin, 2004), there is a general perception that the provision of specialist training for aged care nurses by universities has hardly begun and there continues to be a number of barriers to professional nursing development (Hogan, 2004; National Nursing & Nursing Education Taskforce, 2006).
Undergraduate nursing education

Edwards et al. (2003) in a review of aged care content in undergraduate nursing curricula in Australia identify a lack of integration of aged care nursing content into undergraduate nursing. Nursing education is dominated by a biomedical construction of ageing which has impacted not only on the "status of older people...within health care and the wider community", but also on the status of the nurses who care for them (Koch & Webb, 1996, 958). Nurse graduates perceive curing within the biomedical acute care model to carry more status than caring, which dominates aged care nursing (Happell, 2002). This is a threat to the maintenance of a viable workforce in residential aged care (Jackson, Mannix & Daly, 2002). There is evidence that nursing students have negative attitudes towards older people and that universities fail to change such attitudes (Stevens & Crouch, 1998; Happell, 2002). The universities failure can be addressed through integrating aged care nursing content and topics in undergraduate curricula and developing clinical placement in aged care facilities that build positive attitudes and learning experience for undergraduate nursing students (Grocki & Fox, 2004; Robinson & Cubit, 2005).

In a longitudinal study, Zembruszki (2000) found that the integration of aged care nursing content into the undergraduate curricula had a positive impact on nursing students' knowledge base and career choice. Developing stand-alone or elective topics in aged care sends a positive message to nursing students that aged care is as important as other care areas (Grocki & Fox, 2004). These require more appropriate and comprehensive learning design supported by partnership between educational institutions and aged care organisations, and through interdisciplinary collaboration (Grocki & Fox, 2004).

Difficulties in providing quality undergraduate education for work in aged care is also hindered by the need to develop clinical placements in aged care that allow residential aged care facilities to be viewed positively, especially in relation to the benefits associated with the specific learning opportunities that are available within these environments. Nursing students often spend time in residential aged care facilities as part of their student working lives (Happell, 2002). These experiences appear to have a negative influence on the possibility of working in as a RNs in aged care (Happell, 2002). In a recent study of clinical placements in residential aged care, Robinson, Venter, Anderson, et al., (2005) identified regular researcher-led critical reflection with clinical preceptors and nursing students, and the exchange of information after reflection as a means of facilitating clinical teaching and learning (Robinson et al., 2005). The students were rotated through high care, low care, dementia units, and community care services to test whether such learning experience changed nursing students' attitudes towards older people (Robinson et al., 2005). Findings from this study highlight the effectiveness of mandatory rotation in aged care setting however, clinical placements were only developed for second year nursing students. Further research is needed to explore the development of clinical placement in residential aged care across all three years of the undergraduate nursing program.

Graduate nursing program

There is a deficit in the nursing literature with regards to graduate nursing programs (GNP) in aged care. This may be due, in part, to a lack of funding, resources and teaching support. Acute settings experience a turnover rate of 53% for graduate nurses because of difficulties in making the transition from the university to clinical setting, lack confidence in practice, an inability to socialise in a workplace, and bullying or humiliation arising from novice status (Butler & Hardin-Pierce, 2005). The retention issues identified in acute care setting may be exacerbated in aged care because of lower staffing levels, staff burnout and the multiple responsibility of the RN (La Trobe University, 2002; Parker et al., 2003). Lack of funding support may also be a barrier as public hospitals receive funding from state governments to support GNP. As such, exploring enablers and barriers in developing GNP in residential aged care is imperative in order to address the recruitment and retention issues of qualified RNs in aged care.

Postgraduate nursing education

The Commonwealth Government has also identified a growing need for more appropriate postgraduate courses in aged care. A recent report recommends
that "(h)igher education and training providers further develop and market clinically relevant postgraduate programs in aged care in collaboration with aged care facilities" (La Trobe University, 2002, 8). This recommendation was supported in the 2002–03 Federal Budget by $26.3 million dollars over four years allocated to "encourage nurses to engage in advanced study in gerontological nursing, ... and develop roles to accommodate the knowledge and skills of advanced gerontological nursing clinicians" (La Trobe University, 2002, x).

The development of nurse practitioners (NPs) in aged care is still in its infancy in Australia. Research has shown that the role should be grounded in improving the quality of nursing care, health promotion and cost-effectiveness (Daly & Carnwell, 2003; Gardner & Gardner, 2005; ACT Health, 2005). This requires collaboration between educational institutions, service corporations and nursing students enrolled in the advanced nursing programs to promote educational preparation for nursing specialists and nursing practitioners (ACT Health, 2005). Recent research into the work of nurse practitioners in residential aged care facilities in Canberra found that the problems most commonly dealt with included management of infections, falls, dementia and delirium, continence, skin care, nutrition and anxiety and depression (ACT Health, 2005). Allen and Fabri (2005) identify the key skills required by NPs in aged care as holistic health assessment, symptom management, client and carer education, advocacy, assistance with accessing aids, and collaboration with the health care team. As such, in developing education for advanced practice universities may need to consider teaching brokerage, leadership and management skills alongside of advanced clinical skills.

**Developing aged care education in collaboration with industry: The PACE Project**

These issues and others inform the PACE project, a recent initiative undertaken by the School of Nursing and Midwifery at Flinders University in conjunction with five aged care industry partners. A two year postdoctoral position has been created and jointly funded by the University and the industry partners to establish a long-term collaborative approach to developing a best practice model for nursing education and research within the aged care sector. This process involves implementing and evaluating an articulated educational pathway for aged care nursing staff from undergraduate to nurse practitioner and to provide continuing education (CE) for all aged care nursing staff.

The specific goals of this project are to:
- prepare RNs with an aged care focus at entry level
- support the transformation of the graduate nurse from novice to competent nurses in residential aged care facilities
- develop collaborative continuing education with aged care industry partners to develop continuing competencies for all nursing providers in aged care
- prepare RNs for leadership roles, advanced practice and specialisation in aged care.

The project is being conducted over five consecutive but interrelated stages. The five phases of this project with the major events planned are outlined in table 1 (over page).

Action research had been adopted as the methodology for this project for its capacity to foster collaborative educational innovation in residential aged care. Action research involves a cycle of collaborative problem identification, joint planning of action, the implementation and monitoring of these actions and evaluation (Kemmis & McTaggart, 2005). The philosophical assumptions underpinning this project are that partnership in aged care education can:
- identify problems and strengths through collaborative critical reflection
- reach consensus on actions through communication
- transform research findings into practice
- promote mutual benefits for both academic and service settings.

The project team consist of academics in Flinders University and an advisory committee comprised of representatives from the five aged care industry
partners. The research team is seeking to identify issues and factors related to existing education programs in aged care that act as barriers to the recruitment and retention of the aged care workforce and to address these issues through educational programs that are responsive to the needs of the aged care industry and the nursing staff.

The project is currently in the data collection phase. The key activities for this phase include: focus groups at each site with administrators, RNs, ENs and CWs; a focus group with nursing students working as CWs in aged care and with topic coordinators; a survey of the continuing education needs of RNs, ENs and CWs at all sites; and meetings with topic coordinators across the School of Nursing and Midwifery to advocate for and support the incorporation of aged care content into topics in the curriculum operating from 2007 to 2011. Four elective topics in aged care are also currently being developed concerned with incontinence, dementia, active ageing, and palliative care. The success of the changes to the curriculum will be determined through a longitudinal study of attitudes of the 2007 first year cohort towards ageing and working in aged care at the beginning and at two intervals in their degree.

Conclusion

The problems associated with the educational needs of qualified nursing staff in aged care have been identified in many reviews and reports. It is our view that changing educational practices in aged care through more overt links to the tertiary sector needs to be a priority for aged care facilities in Australia. The initiative detailed in this paper has the potential to make a significant difference to ways in which aged care nursing practices are implemented and maintained. This can only auger well for the older person as they approach the stages in life where more overt and often more complex support is required.

Disclosure

Industry partners – Austral Nursing Homes Pty. Ltd., ECH Inc., Helping Hand Aged Care Inc., Resthaven Inc. and Southern Cross Care (SA) Inc. – partly funded a post-doctoral fellowship for two years to work on this project. The School of Nursing and Midwifery at Flinders University contributed the balance.

References


Table 1. Five phases in the PACE Project

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<thead>
<tr>
<th>Phases</th>
<th>Objectives</th>
<th>Major events</th>
<th>Timetable</th>
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<tr>
<td>Phase 1</td>
<td>Identify problems in four areas: Undergraduate Program, GNP, CE and Postgraduate Programs</td>
<td>Focus group discussions in the five residential aged care organisations and the SoNM</td>
<td>July to December 2006</td>
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<td>Phase 2</td>
<td>Implement Undergraduate Program</td>
<td>Develop clinical placement and facilitate teaching and learning in aged care for nursing students in SoNM and in the five residential aged care organisations</td>
<td>January 2007 onward</td>
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<td>Phase 3</td>
<td>Implement Graduate Nurses Program</td>
<td>Establish collaborative GNP program between the residential aged care organisations and the SoNM</td>
<td>July 2007 onward</td>
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<td>Phase 4</td>
<td>Implement Continuing Education</td>
<td>Develop collaborative CE program between the SoNM and the residential aged care organisations</td>
<td>July 2007 onward</td>
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<td>Phase 5</td>
<td>Implement Postgraduate Programs</td>
<td>Develop Postgraduate Programs based on aged care industry's needs</td>
<td>October 2007 onward</td>
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Healthy Ageing Task Force. (2000). *Commonwealth, State and Territory strategy on healthy ageing,* Commonwealth, States and Territories of Australia: Canberra


