

# The New South Wales College of Nursing

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January 6 1998

Mr Roderick West MA  
Chair, Higher Education Review  
The Review of Higher Education Financing and Policy  
Location Code 728  
GPO Box 9880  
CANBERRA ACT 2601

Dear Mr West.

**Re: 'Learning for Life: Review of Higher Education Financing and Policy': a Discussion Paper**

On behalf of the four peak nursing organisations in Australia, I enclose a document detailing the response of the New South Wales College of Nursing, Australian Nursing Federation, NSW Nurses' Association and Royal College of Nursing, Australia to this discussion paper. The four organisations are agreed on this response.

We note that each of these four organisations are not separately acknowledged as having presented a joint submission to the (West) Review Committee, but rather are referred to as 'Nursing Education' in Appendix 2 of the discussion paper and elsewhere as 'The New South Wales College of Nursing' only, in Annex A, Appendix 3. We would ask that complete acknowledgement of the New South Wales College of Nursing, Australian Nursing Federation, NSW Nurses' Association and Royal College of Nursing, Australia, be given in any future publications.

Thank-you for the opportunity to furnish comment on the Discussion Paper. We commend the Committee for the result of its deliberations.

Yours sincerely,

Associate Professor Debora Picone  
Executive Director

## **Comment on 'Learning for Life' - Review of Higher Education Financing and Policy - A policy discussion document**

Jointly from: Australian Nursing Federation; The NSW College of Nursing; NSW Nurses' Association; and Royal College of Nursing, Australia.

### **Introduction:**

In our submission to the Review Committee we expressed our concerns for the future development of the profession of nursing and the delivery of nursing care to the community which rely on the quality education of nurses in universities. Our principal concerns are:

- more time and attention must be given to clinical education during nursing education which may involve additional funding and/or changes to the academic year of some universities;
- sufficient funding is required to enable the expansion of research in nursing so that the public could benefit from improved health outcomes;
- more flexibility is necessary in nursing courses and institutional processes;
- government/institutional policies which require private funding severely disadvantage faculties of nursing.

While we are generally in accord with the principles expressed in the report, 'learning for life' we make the following comments under the rubrics in the document:

### **Provision of universal, publicly funded access to post secondary education**

#### **Universal access to income contingent loans**

The West Committee expresses a preference for the continuation of a HECS style system for all forms of post-secondary education. It also expresses a preference for loans which are given as a whole, rather than over the duration of the undergraduate program, to allow students greater flexibility and enhanced access. Any system which 'gave' students their 'entitlement' up-front would need to be carefully structured to prevent incurring debt by those students who are unable, for whatever reason, to finish their course.

#### **Tuition fee flexibility**

The West Committee discusses the difficulty in setting funding for tuition caused by a lack of nationally agreed or consistent methods of ranking school leavers. We draw their attention to the fact that many students entering the post-secondary education are not school leavers and any effort to rationalise or rank school leavers must take into account people who enter as mature age students. Funding for tuition fees must not be solely or primarily set on ranked school results.

The report maintains that the 'introduction of HECS and the most recent increases in HECS appear to have had impact on the level of interest in undertaking higher education among school leavers' ( Andrews, L. 1997, *The effects of HECS on Interest in undertaking Higher Education, AGPS*). Anecdotal evidence from nursing faculties indicates that it is premature to make such predictions. Moreover, we are disturbed by the fact that there have been reduced rates for mature aged students. These students represent a significant number of undergraduate students in nursing ( Lawler, et al 1997 *Who wants to be a Nurse?*). The profession is experiencing difficulty in recruiting school leavers to the profession so a reduction in mature age applicants is deeply concerning.

The report notes that the introduction of fees for post graduate courses has resulted in increased competition and course differentiation. However, what is not mentioned is the fact that many prospective students now cannot afford a postgraduate education - this must clearly impact on the student profile of those entering the profession.

### **Should levels of public funding be differentiated by course?**

We agree that differentiating funding support requires that some courses have greater social value than others. However, a nursing graduate's remuneration is considerably less than many other graduates from other courses, so we support differentiated funding. If nursing education were not publicly funded it would likely disappear; generous material rewards do not accrue to nurses. Health care is an essential community requirement. Better health outcomes are dependent on quality nursing care. On this basis we argue that the community should bear a large proportion of the funding for nursing courses. However, this discussion document does not alleviate our concern that any mechanism put in place to differentiate funding contributions by individual students, by their projected capacity to earn substantial monies after postgraduate education, would be effective.

### **Use of public funding**

The West Committee advocates public funding for students in public or private institutions as long as the course is accredited. As previously stated, education is a public responsibility. Public money should fund students in public institutions as a first priority.

### **Fair levels of private contribution**

State governments report that while their requirements for general nurses are largely met, they have marked problems recruiting nurses with needed specialist qualifications (requiring in many cases the completion of a post graduate course). If full fee paying were to be introduced at a post graduate level for nursing courses, this workforce problem would be severely exacerbated.

### **Principle statement: Enhancing access**

We fully support equitable access to HECS funded places in post-secondary education. An issue raised in our original submission was access to post-graduate education by nurses. Should postgraduate education become fully fee-paying access will be compromised for many nurses. Given that a large percentage of the nursing profession is employed on a part-time basis and ninety-two percent are women, issues of access must be considered at postgraduate as well as undergraduate level.

The profession is actively encouraging students coming from a non-English speaking background to enter the profession. Providing universal publicly funded access to postsecondary education is a significant factor in ensuring adequate enrolments in nursing faculties and sufficient numbers to meet workforce demands.

The Report speaks of a competitive market but fails to acknowledge market failures in the education sector. For instance, the report assumes that students will be attracted to institutions with 'good teaching' standards but fails to acknowledge other prime reasons for students selecting a particular institution. Institutions with poor teaching standards could, under the proposed model, continue to reap financial rewards simply because of their reputation, deserved or otherwise.

It is noted that the report has focused on the needs of students, but pays little regard to the needs of the community. We would argue that workforce planning for vocationally based courses must be considered in any model based on student demand.

## **Accreditation, Quality Assurance and Accountability**

### **Education accreditation**

The accreditation of courses, particularly nursing courses, is currently an unresolved issue for the nursing profession. We consider this role to be the province of Nurses' Registration Boards for undergraduate programs rather than the 'expert', 'speciality' or other professional groups with vested interests. Accrediting an institution guarantees nothing for the individual courses or units within a course and is not acceptable.

### **Assuring the financial viability of institutions**

We applaud the recommendation for increased scrutiny of financial viability of institutions within a deregulated framework. All institutions and not just those receiving public funding, must be required to undergo financial scrutiny.

### **Information**

While we agree that information is a key to informed decisions in choosing an institution, prospective students make decisions on a range of issues including cost, child care, travel requirements, housing costs, and availability and so on. Information must include all issues as well as information about courses and facilities. We also stress that the internet and email are not widely accessible, despite popular opinion.

### **Principle statement: Promoting quality and accountability**

We agree with the principle that the assessment of quality should be focused on achieving educational outcomes; that universities need to be accountable to both a student body and the taxpayer. However, given that nursing is a practice discipline, we are concerned that quality and accountability mechanisms work to ensure that the relationship between course curricula and industry needs is congruent. We strongly support the premise that with the potential for deregulation, universities make transparent their practices and processes.

### **Other Financial Issues**

#### **Strategies for better asset management**

We are wary that 'better asset management' may mean selling off public land and that public assets should not be privatised as a part of an ideologically/politically driven agenda. Indeed, we consider that the actual advantages of privatisation must be demonstrated before it takes place and then each case examined as to its merits.

#### **Student Centred Funding Models**

We reiterate our commitment to universal access to a publicly funded post secondary education system. Regarding scholarships, "significant funding" by way of scholarships should augment a system allowing universal access, rather than replacing or limiting universal access. Grades or marks must not be the only criteria for awarding scholarships for nursing. Rather, account must be taken of particular characteristics of nursing students. Most are women, with or without children, many are older and have a range of responsibilities requiring them to study part-time.

### **Principle statement: Maximising the study options for students**

We fully support the notion of flexible learning for students who are either not able, or choose not to study, full-time or 'on campus'. This includes graduate nurses who are predominantly women, many of whom are mature age, and almost all of whom work shift-work. Added to these not insignificant factors many of these women work in geographically isolated areas further compromising the options available to them.

### **Encouraging good teaching**

The emphasis in the report on quality teaching and learning is applauded. However, to privilege teaching at the expense of research would seem to simply reverse the error of previous structural priorities through which research was privileged over teaching. Therefore, it is imperative that an environment is established that facilitates the development of high quality research which is relevant to the community and teaching and learning that best meets the needs of students.

## **Maximising the benefits of research**

Given the above emphasis on outcomes, we agree that public funding for university research should be carefully directed with an emphasis on transferring knowledge, technology and skills to the community. In the case of nursing, the current university structures in relation to research funding inhibit new-to-the-university sector practice disciplines, in gaining access and support for research. We would therefore fully support the report's emphasis on industry/academic collaboration in the identification, funding and dissemination of research and are convinced such an approach will enhance both the discipline of nursing and the health of the community. However, we consider that research funding should remain essentially unencumbered. Research by students in universities should not be privately or commercially funded for commercial benefit alone. Research funding from the public sector must be used for its stated purpose.

## **Conclusion**

In summary, we consider this report contains significant recommendations for reform that could change the shape of the tertiary sector. We fully support the 'phased in' approach of managed reform. Accordingly, there will need to be wide and continued consultation with industry and the community at large, to ensure that this reform process does not further destabilise the current system at a time when education is in high demand and is seen as a top priority in maintaining Australia's reputation in the international educational milieu.

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