



Nursing and Midwifery Strategic Framework 2013-2015



Government
of South Australia

SA Health

Every day over 30,000 South Australian nurses and midwives, including more than 16,000 in the public sector, make a positive difference to the lives of individuals, families and communities in the state.

The care and support that nurses and midwives provide to clients takes place in a multitude of practice settings. These may be hospitals, clinics, prisons, the client's home, residential facilities, in vehicles during transportation, GP practices and other varied environments. The delivery of healthcare occurs in metropolitan, country, rural and remote geographical areas, in cities and in country communities. This is what makes our practice so different, so unique and so diverse. Nurses and midwives care for clients 24 hours a day, seven days a week and as a result, they can provide truly holistic care tailored to the individual's needs.

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Introduction

Nurses and midwives working across SA Health contribute to the work of the multidisciplinary health care team by providing contemporary, quality, patient centred care to the South Australian community. This collaborative approach to care, in consultation with our clients/patients, is essential in achieving the best healthcare outcomes for the client/patient and the South Australian community as a whole. The success of a multidisciplinary approach to care relies on each professional group leading the ongoing practice, capacity and capability development for their health practitioners. This enables each professional group to be best positioned to collaborate on healthcare in a multidisciplinary team to achieve best client outcomes.

Change is continual and a reality of the world in which we live today. The pace of change is accelerating. The landscape of the healthcare system is constantly altering and evolving. Technological advances are featured with regularity. Creativity and innovation are an expectation. For the professions of nursing and midwifery, certain challenges are presented by these and other factors.

- > How will we ensure our workforce is adequately prepared and enabled to respond to changes in service requirements?
- > How can we support our workforce to lead and initiate change?

What has not changed however, is the fundamental human need to be looked after with care, compassion and respect, by a professional who is competent and communicates well. To be looked after by someone with the courage to make changes to improve people's health and care, with the commitment to deliver this all day, every day.

The key challenge for nurses and midwives therefore, is how to remain professionally connected to the client and deliver high quality, safe, efficient and effective, evidenced based care, with good outcomes and experiences for those in our care.

In developing the Framework it was essential to ensure that the current health context was considered, including:

- > The National and State reform agendas inclusive of the integration of care, the increased focus on primary health care and community involvement in health service delivery;
- > The National Safety and Quality Health Service Standards;
- > The transition to new models of care to support the SA Health Reform agenda and the New Royal Adelaide Hospital;
- > The Clinical Network Statewide Service Plans;
- > The impact of the Global Financial Crisis on the nursing and midwifery workforce profile, historically a main driver for recruitment both nationally and overseas; and
- > Current evidence and literature on contemporary nursing/midwifery practice.

This document provides a framework for the medium term transformation of nursing and midwifery practice within South Australia.

Who we are and what we do

In addition to providing therapeutic care to clients, nurses and midwives embrace a plethora of other roles and responsibilities; counselling and education, advocacy, service and care coordination, administration, service integration, research, manager, mentor, coach and role model. We are change drivers and leaders.

Nurses and midwives value and respect the diversity of our clients across the continuum of care.

Nurses and midwives demonstrate compassion, empathy and respect, an appreciation of the vulnerability and anxiety experienced by clients, we are passionate about our profession and our work, we are committed to lifelong learning and knowledge acquisition to ensure our practice remains contemporary.

Where do we want to go as professionals?

Nurses and midwives are looking to the future; to share the future, we want to see the vision for the profession, we want leadership, we want direction.

We want autonomy of practice, we want to be part of the solution and the decision making, we want our voice to be heard, we want to be supported and recognised for our contribution.

Nurses and midwives want to increase their knowledge, to learn and grow professionally, we want to generate evidence and to access evidence to inform our practice, and we appreciate the contribution that research makes in ensuring our practice remains contemporary.

Nurses and midwives take pride in their work and want to be proud of our culture – nurturing, caring, kind and authentic.

Nurses and midwives want to have a sustainable workforce for the future with career options and pathways.

But most of all, we want to provide the best care to clients, to support the people in our care and their families when they are at their most vulnerable and when care, compassion and clinical expertise matter most.

To see them and care for them as individuals, to partner and involve them (and their family/significant other) in the delivery of quality care at the right time, in the right place.

We act as guardians of quality for those in our care.



Nursing and Midwifery vision and strategic priorities

Vision

SA Health nurses and midwives practise competently, capably and professionally to meet and exceed the needs of clients in delivering high quality, compassionate care. SA Health nurses and midwives take pride in their work, and aspire to continuing self-development and knowledge acquisition through self-awareness and a nurturing and supportive culture of equality, honesty, passion and accountability.

Strategic priorities

Caring with kindness

1.1 Identify/construct and implement a framework that transforms the way that fundamental care is delivered at the bedside.

1.2 Create and redesign care processes to reflect a truly person centred approach.

1.3 Inform models of care to reflect the essence of caring and kindness.

People and culture

2.1 Clearly articulate and describe the desired culture and identify a process to embed it in daily practice so that it lives and breathes.

2.2 Invest in and acknowledge leadership in all individuals and at all levels.

2.3 Empower and support considered, thoughtful decision making by all nurses and midwives.

Workforce capability and capacity

3.1 Build the capability, capacity and sustainability of the workforce.

3.2 Contribute to robust workforce planning to optimise the supply of nurses and midwives.

3.3 Identify and create innovative models that employ different and alternative roles within health to respond to the emergent needs of clients & reflect the health reform agenda.

Evidence based research in clinical practice

4.1 Develop and implement a framework to support research being undertaken.

4.2 Pursue mechanisms to better apply evidence-based research to practice.

4.3 Demonstrate evidence informed practice.

Workforce organisation

5.1 Research and identify a contemporary staffing methodology that can be applied and implemented for the nursing and midwifery workforce.

5.2 Evaluate quality of care delivered to clients through recognised and accepted nursing/ midwifery sensitive indicators and facilitate benchmarking across SA Health.

The Nursing and Midwifery Strategic Framework

SA Health is fostering new ways of working to ensure a sustainable future health workforce that is able to provide safe, effective patient-centred care.

Following the successful implementation of the *Nursing and Midwifery 2002-2005 Recruitment and Retention Plan* followed by *Building a Valued and Sustainable Nursing and Midwifery Workforce 2008-2011* the Chief Nurse and Midwifery Officer has been working with nurses and midwives across SA Health to develop the *SA Health Nursing and Midwifery Strategic Framework 2013-2015* (the Framework).

This Framework is specific to the Nursing and Midwifery professions and is designed to provide the vision, the direction for the transformation of practice and incorporates the change agenda priorities, actions and outcomes for success.

Purpose of the Framework

The purpose of the Framework is to outline:

- > A clear vision for the professions of nursing and midwifery;
- > The five strategic priorities for the nursing and midwifery professions across SA Health over the next three years, 2013-2015; and
- > The actions, objectives, outcomes and timelines (Appendix) for addressing the strategic priorities.

Focus on five strategic priorities

Five strategic priorities have been identified and include:

1. Caring with kindness

- > Caring with kindness is about connecting with our clients and putting their care and needs at the centre of our purpose.
- > Caring with kindness is about establishing a genuine and authentic relationship with the client, their relatives and friends. And it's about involving them in decisions that affect them (the provision of patient centred care).
- > Caring with kindness is about removing the barriers and obstacles to enable nurses and midwives to provide the best care to clients. And it's also about caring and being kind to one another.
- > Even though much has changed, care and compassion remain at the heart of our professions, bringing them together with knowledge and skills to manage the complexity of modern healthcare.
- > Caring with kindness is intrinsic to how we provide the fundamentals of care to clients, every minute of every day.

Flagship objective: Identify/construct and implement a framework that transforms the way that fundamental care is delivered at the point of care.

Expected outcome: A philosophy of caring, kindness and respect is evident in every interaction with consumer/clients

This strategic priority aligns with the National Safety and Quality Health Service Standard 1 Criterion: Patient rights and engagement and Standard 2 Criterion: Consumer Partnership in designing care.



2. People and culture

- > People and culture is about being explicit in relation to the culture that best supports and facilitates the work of nurses and midwives.
- > All nurses and midwives have a role in setting a gold standard and leading multi-disciplinary teams to deliver high quality care and outcomes, whether they are in a formal leadership role or not.
- > People and culture is about being accountable for all that we do. People and culture is about building and strengthening leadership throughout the professions.
- > People and culture is about increasing autonomy in practice and involvement in decision making.
- > People and culture promotes a culture of care, centred on the person needing it and provided by professionals who have the evidence, intelligence and insight to give the best care and help clients make holistic and informed choices about it.

Flagship objective: Clearly articulate and describe the desired culture and embed it in daily practice so that it lives and breathes.

Expected outcome: The desired culture is identified, articulated and embedded, and living and breathing in daily practice.

This strategic priority aligns with the National Safety and Quality Health Service Standard 1 Criterion: Performance and Skills Management.

3. Workforce capability and capacity

- > Workforce capability and capacity is about ensuring that we have a sustainable and prepared workforce now and into the future.
- > Workforce capability and capacity is about creating, designing and being responsive to new and emerging models of care.

- > Workforce capability and capacity is about enacting a model for the effective education, professional development and growth for nurses and midwives.

Flagship objective: Build the capability, capacity and sustainability of the workforce.

Expected outcome: Progressive and incremental increases in the capability, capacity and sustainability of the workforce.

This strategic priority aligns with the National Safety and Quality Health Service Standard 1 Criterion: Performance and Skills Management.

4. Evidence based research in clinical practice

- > Evidence based research in clinical practice is about developing a framework to ensure our practice can be evidenced through research.
- > Evidence based research in clinical practice is about ensuring that our practice is contemporary and reducing the harm that clients experience when in our care.
- > Evidence based research in clinical practice is about generating, facilitating and supporting research, and then translating it into practice.
- > Evidence based research is about measuring what we do and our contribution to quality.

Flagship objective: Develop and implement a framework to support research being undertaken and to validate existing practice.

Expected outcome: Greater proportion of clinical practice is evidence based.

This strategic priority aligns with the National Safety and Quality Standard 1 Criterion: Clinical Practice (care provided by the clinical workforce is guided by current best practice).

5. Workforce organisation

- > Workforce organisation is about utilising our nurses and midwives efficiently and effectively.
- > Workforce organisation is about having the right staff with the right skill mix in the right place and at the right time.
- > Workforce organisation is about how we review and critically evaluate the tasks and activities that we routinely and regularly undertake.
- > Workforce organisation is how we organise ourselves to best meet the needs of our clients.

Flagship objective: Implement a preferred contemporary staffing methodology for the nursing and midwifery workforce.

Expected outcome: A contemporary staffing methodology is identified, analysed and agreed for use within SA Health.

This strategic priority aligns with the National Safety and Quality Health Service Standard 1 Criterion: Performance and Skills Management.





Who is responsible for the implementation of the Framework?

The Chief Nurse and Midwifery Officer is the professional lead sponsor for the Framework and will work in collaboration with the Nursing and Midwifery Leaders, nurses and midwives and the multidisciplinary team across SA Health to implement, evaluate and monitor the Framework.

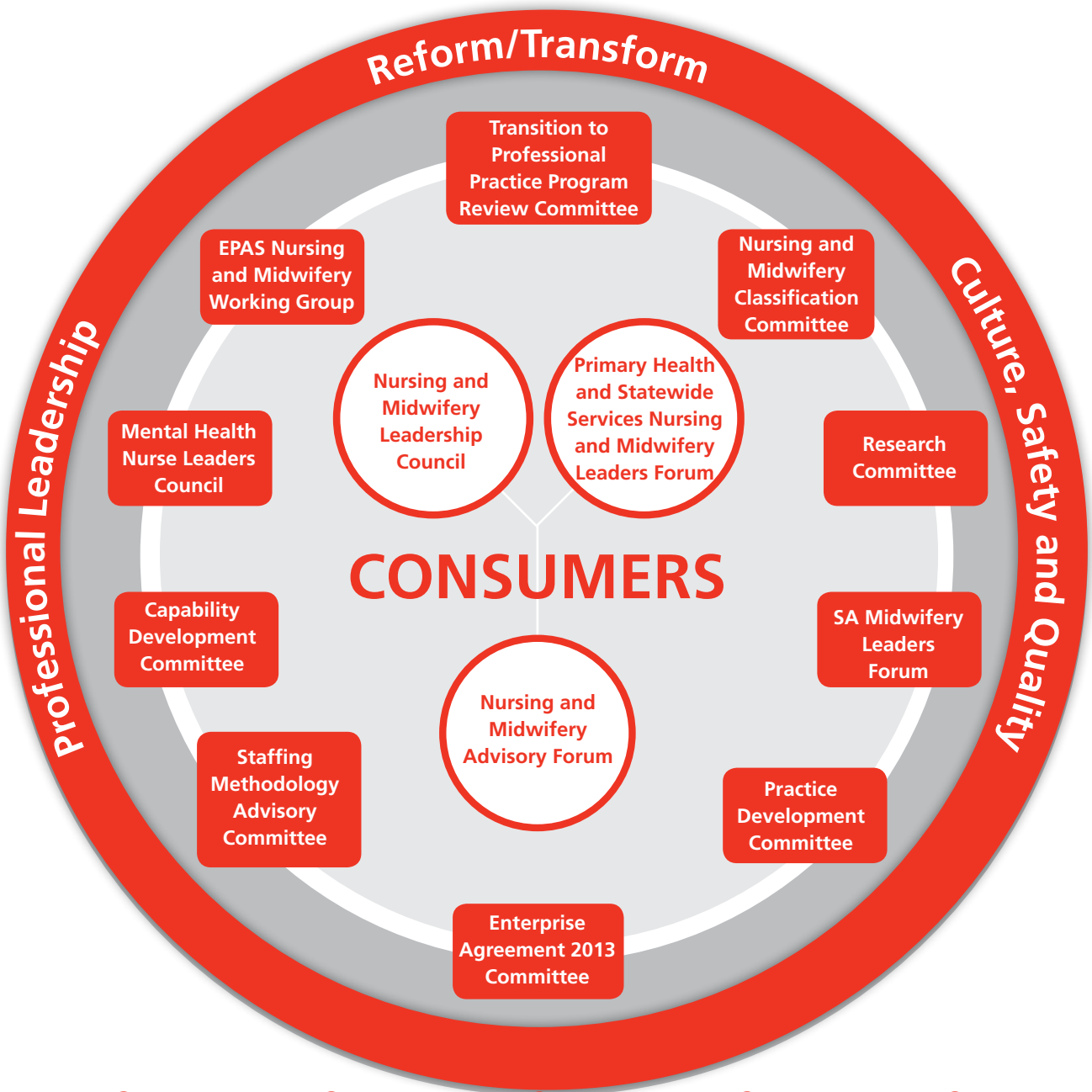
The Nursing and Midwifery Leadership Committee Governance Structure (right) has been introduced to establish the linkages with the nursing and midwifery professions across SA Health and provide the mechanism to implement and achieve the outcomes identified in the Framework. The three primary committees include the:

1. Nursing and Midwifery Leadership Council;
2. Primary Health and Statewide Services Nursing and Midwifery Leaders Forum; and
3. Nursing and Midwifery Advisory Forum.

The Nursing and Midwifery Office will provide support to the Chief Nurse and Midwifery Officer and the above Nursing and Midwifery Leadership Committees for the implementation of the Framework.

The Framework belongs to and is owned by all SA Health nurses and midwives and can only be achieved through the active participation and the commitment of nurses and midwives at all levels and across all service areas.

Nursing and Midwifery Governance Committee Structure



Local Health Networks, Primary and Statewide Services

Appendix — Strategic priorities

Strategic priority	Objective	Timeline	Expected outcome
1. Caring with kindness	1. Identify/construct and implement a framework that transforms the way that fundamental care is delivered at the point of care		A philosophy of caring, kindness and respect is evident in every interaction with consumer/clients
	1.1.1 Review current frameworks in existence	Jan-Apr 2013	Framework identified
	1.1.2 Determine framework to be adopted	May-Jul 2013	Plans completed
	1.1.3 Determine specific components for application	Aug-Dec 2013	Implementation commenced
	1.2.1 Ongoing systematic implementation of framework	Jan-Apr 2014	Improved customer/client satisfaction
	1.2.2 Embed activities into daily practice	May-Jul 2014	Improvements in care outcomes in targeted key nurse sensitive indicators
	1.2.3 Redesign care processes to reflect the essence of caring and kindness	Aug-Dec 2014	Care processes redesigned and implemented and evaluated Dashboard reflects progressive improvements
	1.3.1 Engage the client along the journey to establish a formal feedback process	Jan-Apr 2015	Client stories are captured and used to assist with educating and involving nurses and midwives to identify opportunities for further improvements
	1.3.2 Formal acknowledgement of this theme through recognition/rewards	May-Jul 2015	Establish a consumer nomination at the Excellence Awards
	1.3.3 Continuous evaluation and refinement as required	Aug-Dec 2015	Framework facilitates and accommodates refinement and modification in response to evaluation
2. People and culture	2. Clearly articulate and describe the desired culture and embed it in daily practice so that it lives and breathes.		The desired culture is identified, articulated and embedded, and living and breathing in daily practice
	2.1.1 Identify and articulate the desired culture Review frameworks/models to act as a vehicle for promulgation/saturation Enhance the visibility of the model	Jan-Apr 2013	Framework identified

Appendix — Strategic priorities

Strategic priority	Objective	Timeline	Expected outcome
2. People and culture (cont.)	2.1.2 Develop implementation plan Develop education plan Develop communication plan Develop evaluation plan	May-Jul 2013	Plans completed
	2.1.3 Progressively implement Ongoing evaluation Continuous improvement	Aug-Dec 2013	Implementation commenced
	2.2.1 Review requirements for leadership programs/framework	Jan-Apr 2014	Requirements identified and described
	2.2.2 Ongoing development and delivery of a leadership qualities framework that describes the behaviours and competencies required for good leaders at all levels	Aug-Dec 2013	Implementation commenced

3. Workforce capability and capacity	3. Build the capability, capacity and sustainability of the workforce		Progressive and incremental increase in the capability, capacity and sustainability of the workforce
	3.1.1 Review models of education delivery and application of Capability Development and Self Development Framework. Employ/deploy outcomes of Graduate Employment Report	Jan-Apr 2013	Review and redesign of education delivery model complete
	3.1.2 Redesign model of education delivery. Consider framework for succession planning	May-Jul 2013	
	3.1.3 Develop recommendations for future Transition to Professional Practice Programs (TPPP)	Aug-Dec 2013	TPPP options reviewed Business case for TPPP approved
	3.2.2 Contribute to workforce planning to optimise the supply of nurses and midwives	Jan-Apr 2014	Workforce planning underway linking to national workforce planning initiatives and processes Model progressively implemented
	3.2.3 Implement preferred model of education delivery	May-Jul 2014	
	3.2.4 Evaluate model of education delivery and refine as required	Aug-Dec 2014	

Appendix — Strategic priorities

Strategic priority	Objective	Timeline	Expected outcome
3. Workforce capability and capacity (cont.)	3.3.1 Optimise the skills of our workforce through specialist/Nurse Practitioner led programs	Jan-May 2015	Framework for Nurse Practitioners is in place
	3.3.2 Scope new and innovative roles to assist in augmenting the nursing and midwifery workforce	Jun-Dec 2015	New roles considered and introduced

4. Evidence based research in clinical practice	4. Develop and implement a framework to support research being undertaken and to validate existing practice		Greater proportion of clinical practice is evidence based
	4.1.1 Identify elements/ requirements of a framework or model Collaborate with universities to seek input and ideas	Jan-Apr 2013	
	4.1.2 Commence conceptual design and development of a framework or model	May-Jul 2013	Optimal framework is identified
	4.1.3 Finalise framework design Implement and embed framework/model Evaluate effectiveness	Aug-Dec 2013	Implementation of framework commenced
	4.2.1 Develop key priority areas for nursing/midwifery research	Jan-Apr 2014	Priority areas identified and articulated
	4.2.2 Examine ongoing opportunities for interdisciplinary research	May-Jul 2013	Increase in collaborative clinical research
	4.2.3 Support external research grant applications	Aug-Dec 2013	Increased number of nurses/ midwives that have received external grant funding

Appendix — Strategic priorities

Strategic priority	Objective	Timeline	Expected outcome
5. Workforce organisation	5. Implement a preferred contemporary staffing methodology for the nursing and midwifery workforce		A contemporary staffing methodology is identified, analysed and agreed for use within SA Health
	5.1.1 Gain agreement on the preferred methodology Finalise negotiations/discussions with relevant stakeholders Potential pilot of methodology	Jan-Apr 2013	Preferred methodology agreed
	5.1.2 Complete business case Formulate implementation plan	May-Jul 2013	Business case accepted
	5.1.3 Finalise timing and schedule for implementation Commence education and training	Aug-Dec 2013	Implementation plan completed
	5.2.1 Ongoing implementation of staffing methodology	Jan-Apr 2014	Implementation achieved
	5.2.2 Monitor and measure outcomes of new methodology and opportunities for further development of a career structure and pathways	May-Jul 2013	Outcomes captured, documented and evidenced. Career structure is further evolved for nurses and midwives Career pathways are articulated and described
	5.2.3 Evaluation of methodology	Aug-Dec 2013	Evaluation completed, refinements made as required
	5.3.2 Undertake horizon scan for contemporary staffing methodologies suitable for the SA Health environment	Jun-Dec 2015	Consideration of alternative and contemporary staffing models undertaken Planning is commenced for future staffing methodologies suitable to the SA Health environment

For more information

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If you do not speak English, request an interpreter from SA Health and the Department will make every effort to provide you with an interpreter in your language.



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