Outline of the Presentation

- Purpose
- Themes
- Objectives
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- Members of the Ministerial Task Team
The purpose of the Nursing Education, Training and Practice Strategy is to develop, reconstruct and revitalize the profession to ensure that nursing and midwifery practitioners are equipped to address the disease burden and population health needs in a revitalized healthcare system in South Africa.
The challenges were examined under seven themes:

- Nursing education and training;
- Resources in nursing;
- Professional ethos and ethics;
- Governance, leadership, legislation and policy;
- Positive practice environments;
- Compensation, benefits and conditions of employment; and
- Nursing human resources for health.
Objectives of the Strategy

The objectives are to:

- Promote and maintain a high standard and quality of nursing and midwifery education and training;
- Enhance and maintain professionalism and professional ethos amongst members of the nursing and midwifery professions;
- Promote and maintain an enabling, well-resourced and positive practice environment for nursing and midwifery;
- Enable strong leadership at all levels of nursing and midwifery practice;
- Guide the production of sufficient numbers and the appropriate categories of nurses required to deliver healthcare services.
Strategic Priority 1
Education and Training

Strategic Objectives

To develop a national nursing education policy

To position nursing education institutions in higher education

To implement a new Model for Clinical Education and Training

To establish a national, uniform policy for student status and funding support
Develop a national nursing education policy

Position nursing education and training as a national competence accountable to the Director General of Health to address provincial inequalities, norms and standards, quality, clinical training, student status and fragmentation between NEIs and provinces.

The office of CNO is instrumental in facilitating the task to develop a national policy for nursing education and training.
Recommendations: Education and Training

1.2 Status of public colleges

Urgent engagement between the national Department of Health and the national Department of Education and Training to facilitate the process of incorporating public nursing colleges and their programmes in higher education to enable them to continue to produce nurses.

Establish a task team to draft a public nursing colleges Act.

Finalise an accreditation framework for NEIs and their clinical training facilities using SANC and CHE criteria and the national core standards.
.3 New Model for Clinical Nursing Education and Training

Initiate the Model for Clinical Education and Training with structural support

Re-establish clinical teaching departments at all NEIs or hospitals supported by a coordinated system of preceptors and clinical supervisors.

Appoint a Working Group to champion the implementation of this model consisting of the nursing education stakeholder (NES) group and two Human Resources representatives from the national and provincial Departments of Health.

Integrate clinical model implications into core curriculum.
Recommendations: Education and Training

.4 National policy for student status and funding support

Award full student status to students in nursing programmes.

Develop a national funding model for nursing students which includes student accommodation and uniforms.

Funding support for all nursing students should be provided by the Department of Health.

Students from countries outside South Africa must be funded by their respective countries.

Funding should be available for the minimum prescribed period for the programme that students are enrolled for plus one additional year which allow one year extension for the study programme.

Compel students to work for the state for the same period as they were funded for, inclusive of the community service year, to retain the skills for the community.
Strategic Objectives

To develop a national nursing portfolio

To develop and re-orient nurse educators to ensure sufficient numbers of well-trained educators

To develop management competencies of, and re-orient nurse managers
1 Structural arrangements

- Appoint a dedicated person, reporting to the Chief Nursing Officer within the NDoH to provide leadership and stewardship for the nursing education portfolio.

- The person should develop a National Plan to update all nurse educators to meet requirements of the various nursing education reforms.
.2 Revision of SANC requirements for registration as nurse educator

SANC should prioritise CPD for nurse educators.

The SANC requirements should be revised to take into account the science and art of teaching and graduating nursing students.

The core competencies required for prospective nurse educators should be stipulated, to include inter alia:

- competencies in interpersonal relationships (including conflict resolution);
- clinical specialty or area of instruction;
- teaching and learning methodologies;
- supervision of theoretical learning and clinical practice;
- research methods, knowledge of technology in education;
- ability to teach/mentor in a clinical environment (not just clinical competence);
- assessment methods;
- involvement in policy development and implementation; and
- leadership.

The practical component should be increased and all nurse educators should ensure ongoing clinical competence.
Dedicated funding

Ear-marked funding should be available for a nurse educator framework (similar to the Clinical Training Grant provided by the Department of Education to universities)

Each NEI should be allocated at least 0.5% of their personnel budget for nurse educator development.

The NDOH should commence with the allocation of seed money to start innovative programmes that target nurse educators. An amount of $5 million per province in 2013/14 financial year, expanding over the MTEF period is recommended.

Provincial/ private sector bursaries should target nurse educators specifically.

Funding is also required for scholarly activities and...
Increase number of resident universities that offer the Advanced Diploma in Nursing Education

Review the training of nurse educators, increasing the number of those who receive Advanced Diploma in Nursing Education from resident universities and reduce the number of nurse educators who obtain their qualifications through distance learning.

Introduce an integrated approach to the education of nurse educators involving education, service and nursing experts in the curriculum planning and presentation, as well as the teaching and learning experiences.

Develop a specific recruitment and retention strategy for nurse educators.

Review the career path of nurse educators.
Merit-based promotion

Implement an open and transparent merit-based promotion system for nursing management positions.

Mentoring Programme

Emerging managers should be identified and allocated mentors from experienced nurses of a senior rank who are respected and keen to teach and assist.

Recognition for different levels

There should be recognition of the different levels of nursing competencies, depending on whether it is an executive nursing manager, an area nursing manager or a unit / PHC facility nursing manager.
Review of the content of nursing management courses and the teaching methods

Competencies for different levels of nursing management should be defined, and should include competencies in human resources, care management, quality/patient/community.

0 Managers’ forums

Set up Managers’ Forums at district or sub-provincial level where managers from both public and private sector can share successes and challenges and learn from each other. These forums should be allocated resources and formally recognised
11 Increase access to education and training

Access to education and training programmes for clinical specialisation must be made available to enable practitioners to enrol and complete programmes. This includes the provision of study leave and financial support.

12 Clinical career pathing

To retain specialist nurses, career pathing must be created to ensure that practitioners have equal opportunity to remain in clinical practice with Masters and PhD degrees. This requires the negotiation for positions for clinical specialists and advanced nurse practitioners at healthcare establishments.
Strategic Objectives

To implement a comprehensive programme to restore ethics and respect in nursing

To promote the nursing profession at school level to attract a good cadre of nurses

To mainstream ethics in basic and post basic nursing training

To promote collaborative partnerships to unify nurses
1 Comprehensive programme

Implement a comprehensive programme to reinstate the profession, to market the profession positively as a career choice to potential recruits for nursing programmes.

Focus the proposed programme on nursing and midwifery practice, nursing education and training, nursing associations and the regulatory body.

2 Promote nursing as a career of choice

Focus the implementation of the proposed programme on both current nurses and prospective nurses or recruits into nursing.

Select nursing students through NEIs using SANC minimum requirements. Evaluate prospective students against the established values of nursing. Selection of students should be the responsibility.
3.3 Mainstream ethics in nursing education and training

Include professional and work ethics as compulsory components of in-service education and CPD programmes for all levels of education and training and practice of nursing and midwifery.

Include ethics, innovative teaching, group studies and electronic media in the development and reorientation of educators.

3.4 Promote collaborative partnerships to unify the profession

Strengthen links between societies, organisations and NGOs for human caring to strengthen their work.

Profile the role of professional organisations and employers in assisting nurses to work together.

Revive and coordinate the professional associations which give the professional a sense of belonging and enhance motivation and
Strategic objectives

• To promote the effectiveness of SANC

• To promote regulation of community health workers

• To promote institutional governance and leadership
1 Promoting Institutional Governance and Leadership

Nurses must comply with the National Core Standards in terms of leadership and governance.

Implement the proposed CNO executive structures.

Fill leadership positions with nurse leaders selected on merit with the ability to meet health service delivery demands.

Institute annual performance contracts for every nurse manager.

Implement effective Performance Management Systems for all categories of staff and set norms for all categories and clinical areas focused on best care practices; staff satisfaction; and quality of services.

Ensure that the minimum service level agreement recommended in the Nursing Compact 2011 is signed to prevent nurses’ participation in future strikes.

Capacitate nurse leaders through executive management programmes rather than a narrow focus on nursing management only.
.2 Community health worker (CHW) regulation

Accredit and regulate CHWs based on provincially determined needs.
Align training of CHWs with the NDoH plan.

.3 South African Nursing Council (SANC)

Review and promote the effectiveness of the SANC.
Consider revising the name of SANC to include an explicit reference to Midwifery in order to reposition Reproductive Health, and to give the discipline the necessary attention as the country focuses on achievement of the Millennium Development Goals 4 and 5.
Fast track the development, promulgation and implementation of regulations to the Nursing Act.
Review the composition of the Council and consider the inclusion of the national Chief Nursing Officer; a representative from a professional organisation;
Strategic Objectives

To develop and implement a structured roll out and monitoring of PPE

To develop a CPD system for nurses and midwives

To develop a framework to recognise post graduate qualifications

To improve the use of Information Communication Technology in nursing and midwifery care provision
Develop and implement a structured rollout monitoring of PPE

Establish an Advisory Committee comprising of education, public and private healthcare stakeholders to assist with developing guidelines to implement and monitor PPE.

Include nurses, midwives in the initial planning and design of health facilities

Incorporate PPE standards into the National Core Standards project

Recognize improvements within and between institutions that enable to attract and retain well qualified nurses and consistently provide quality care.
Develop and implement a structured roll out and monitoring PPE (Continued)

Track performance over time to determine the causal link between implementing improvement initiatives and achieving improved results.

Implement a benchmarking facility to enable sharing of best practices.

Ensure flexible shifts to suit practitioner and nursing unit needs.

Review the current staffing norms and skill mix and align clinical practice pace of work to patient care requirements and needs.

Develop policies on staffing ratios, occupational health and safety including violence prevention.

Re-establish Wellness Centres/Employee Assistance programmes (EAP)
2 Develop a framework to recognise post graduate qualifications

Develop a framework for the recognition of post-graduate qualifications, specialities and sub-specialities
Develop career paths for advanced practitioner’s (Master’s and PhD prepared nurses) in the clinical practice setting.

3 Implement CPD for nurses and midwives

Make induction and Continuous Professional Development (CPD) programmes compulsory for all categories of nurses and midwives.
Institute CPD as matter of urgency and link with licensing and professional progression to CPD.
5.4 Information, Communication and Technology (ICT) for nurses and midwives

Revitalise the SANC database to create a useful tool to strengthen the National Health Information System and inform planning for nursing and midwifery services.

Incorporate ICT competencies into curricula to improve the competency level of nurses and midwives.

Improve access and provision of ICT systems in the workplace to capacitate all employees.
Strategic Objectives

To improve OSD for nurses

To improve incentives to promote retention and recruitment of nursing staff

To popularise and propose the use of white uniforms
.1 Occupational Specific Dispensation (OSD)

Align OSD to be compatible with Performance Management and Development System (PMDS) tool to eliminate the current disputes arising out of the Generic PMDS tool.

Link PMDS with Continuous Professional Development (CPD) to enhance career pathing.

Install systems to facilitate the smooth implementation of OSD.
6.2 Improve incentives to promote retention and recruitment of nursing staff

Review financial incentives such as danger allowance (currently only applicable to nurses working in psychiatric hospitals) to include other settings such as TB hospitals.

Revisit designation rural areas for the purpose of rural allowance.

Extend rural allowance to all categories of nurses.

Standardise the allowance should be standardised across professions.

Improve current night shift allowance.

Align nurses’ salaries to that of other health professionals.
.3 Introduce simple plain white uniforms

Popularise the decision of the Summit through communication campaigns and meetings.

Implement simple, plain white uniform [dress, skirt, blouse, pants, shirt, navy cape, blazer/cardigan, navy shoes,] with navy accessories.

Uniform allowances should be phased out over three years and nurses should be issued with uniforms.

Present the issue to bargaining councils debating the modalities of transition from the allowance to issuing of the uniform for all nurses and midwives, facilitated by the Department of Health.

Centralise procurement of uniform and issue vouchers for uniform.
Strategic Objectives

To develop a model which provides information on the future supply of nurses for the public and private sectors, for hospitals, PHC and NGOs (including the new staff nurse category)

To improved data quality on nurses and ensure a SANC database which details qualifications, location of employment, country of employment, employer, time worked daily, and other relevant details determined with nursing stakeholders.

To develop a database which details education institutions and their output, production and employment of nurses by district and province for the public and private sectors.

To develop a project on safe nurse staffing guidelines based on draft guidelines hospitals and PHC developed by the MTT should be implemented; and the nurse staffing gap by category and the training implications based on safe nurse staffing guidelines determined.

To determine the financial implications of nurse training and nurse employment to meet PHC policy requirements and safe staffing guidelines for hospitals in the public sector.

To facilitate the return of retired nurses and nurses who left the profession.
1. Develop a model which provides information on the future supply of nurses for the public and private sectors, for hospitals, HC and NGOs (including the new staff nurse category).

Develop a model to determine and monitor nurse staffing needs.

In the short term, more professional nurses are going to have to be produced while the new model becomes operational and the new staff nurse category is being trained.

2. SANC should have improved data quality on nurses and ensure a database which details qualifications, location of employment, country of employment, employer, time worked daily, and other relevant details determined with nursing stakeholders.

SANC to improve the data fields they collect when nurses reregister annually to improve the quality of data available on nurses.
Develop a database which details education institutions and their output, production and employment of nurses by district and province for the public and private sectors.

Determine the financial implications of nurse training and nurse employment to meet PHC policy requirements and safe staffing guidelines for hospitals in the public sector.

Facilitate the return of retired nurses and nurses who left the profession.

Develop and implement policies to enable the recruitment and appointment of nurses returning to South Africa from abroad, nurses who have left the profession for other reasons, nurses who have met the
Implementation Plan: Page 41 to 54
Financial implications: Page 55 to 57
THANK YOU

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THANK YOU