CHARLES DARWIN UNIVERSITY

Nursing Workforce Challenges for the Northern Territory

The introduction of an action-oriented workforce research culture to improve Nursing and Midwifery workforce outcomes

KEY FINDINGS	*RESEARCH AIM*
➜ Addressing workforce issues in the remote health services industry is an exceptionally complex task.	
➜ The specific conditions of the Northern Territory (NT) bring additional challenges to the development of successful workforce programs and strategies.	*The aim of this research is to establish a framework for the implementation of an action-oriented NT nursing and midwifery workforce research culture.*
➜ While research 'from the floor' has been shown effective in the context of clinical research, little focus has been put on engaging nurses in research addressing workforce related issues.	
➜ This research will examine local-based workforce challenges faced by NT nurses and midwives and ultimately seeks to develop a framework for the implementation of an action-oriented workforce research culture.	*The research is being conducted with support from the Northern Territory Department of Health and Families.*
➜ By encouraging nurses and midwives to conduct research about challenges they experience in their daily working life, a more efficient and effective nursing labour economy should be established.	*Prepared by **Katharina Voit**.*
➜ Developing an ongoing workforce research agenda should moreover assist future nurses and midwives in their professional development.	

Statement of Purpose

This research investigates how NT nurses may be encouraged to engage in workforce related research, and what benefits such an engagement might bring to workforce policy and practice. The research ultimately aims to develop a framework for the implementation of an action-oriented workforce research culture within the NT nursing and midwifery workforce.

The NT has struggled to deal with recruitment and retention issues, and a diverse nursing and midwifery workforce in terms of age, professionals from both remote and urban background as well as Australian and overseas trained staff. By encouraging nursing and midwifery staff to undertake research into workforce related issues, the NT Department of Health and Families aims to improve workforce outcomes (Department of Health and Families 2010). Such a model has been shown effective in the context of clinical research, where research 'from the floor' leads to improved clinical practice by nurses and midwives. A similar action-oriented research approach may lead to the identification of new approaches to workforce problems. It is, however, unclear how the engagement of nursing and midwifery staff in research dealing with workforce related issues might best occur in a remote context like the NT.

The specific research objectives are:

- What have been the experiences of similar jurisdictions around the World in implementing a culture for nursing workforce research?

- What are NT nurses and midwives levels of confidence and enthusiasm towards workforce related research?

- How well can NT nurses and midwives articulate workforce related research questions that might inform an action-oriented research agenda?

- How might the establishment of an action-oriented workforce research culture within the NT nursing workforce be undertaken? Which professional development strategies are needed for nurse-researchers?

- What concrete strategies for creating an action-oriented research culture arise from this research as potentially useful for NT nursing?

From these findings, it is planned that a comprehensive framework for the implementation of an action-oriented workforce research culture will be developed. The framework should address issues of individual researcher capabilities and the organisational structures required to allow a research culture to develop.

Background

Addressing workforce issues in the health and community services industry is an exceptionally complex task (Department of Health and Families 2008, p7). A variety of stakeholders, high rates of chronic disease, big distances, isolation challenges and shortages of skilled workers have major impacts on the ability to deliver health services in the NT (Department of Health and Families 2008, p7f). Approximately 36% of staff employed by the NT Department of Health and Families (DHF) are nurses and midwives (Department of

Health and Families 2008, p8). With a rapidly increasing demand for nursing services and existing shortages of skilled nursing staff (Department of Health and Families 2009, p1) this group faces particular challenges in workforce planning. To meet not only rising demand but guarantee high standards of care, the NT Department of Health and Families' strategic vision for 2012 emphasises the need to achieve greater effectiveness and efficiencies (Department of Health and Families 2009, p1).

An efficient workforce system may, for example, be one that allows for recruitment of nurses at different career stages (rather than the current focus largely on early career nurses). It may better facilitate the migration of nurses between locations within the NT (rather than the current practice of nurses leaving a location and leaving the NT altogether). It may provide continuing engagement models for nurses who wish to retire from full time work. It may better manage the diversity of a workforce which is characterized by a high proportion of nursing staff from non-English speaking countries as well as a high proportion of nurses trained under different systems.

An efficient workforce system is one in which workforce shortages are met in a timely manner and well performing staff are retained in the short and long term to units where their skills can be best utilised. The existing diversity of the workforce is being acknowledged and ways to manage diversity are being investigated and implemented.

In the NT, Carson (1994) identified that principles of workforce management applying in other jurisdictions may not be relevant due to unusual demographic characteristics, high proportion of Aboriginal people and high non Indigenous population turnover. Recent research conducted by Garnett et al (2008) and Voit and Carson (2009) has identified a range of inefficiencies in the NT nursing workforce. Garnett et al documented the high financial costs of managing turnover, and the complexity of causes of that turnover. Voit and Carson noted that the current workforce system strongly focuses on younger nurses and deals poorly with retention of older staff.

A study by Grundy and Johnston (2003) identified that the NT does have a strong health research record; however, research efforts were fragmentary and lacked a comprehensive impact on practice (Grundy & Johnston 2003, p13). The same can be said about many workforce policies and practices that have been implemented over the years. The opportunity presented by this research is to engage nursing and midwifery staff in the process in a way that they have not previously been engaged. Workforce research 'from the floor' might have great potential in generating more applicable solutions to workforce issues than might be developed by higher management levels. It is for this reason that an action-oriented workforce research culture has been proposed, and it is the intent of this project to examine the issues that might be faced in implementing such a culture.

Key Literature

Building research capacity in the nursing workforce has mainly been focussing on the nurse researcher in the clinical setting. White (2002) however, argues that research is best viewed as a concept not only relating to clinical and biomedical but community health research, health systems research or research relating to health services and their delivery (White 2002, p165).

Different approaches have been used to establish research; among them the introduction of a clinical nurse researcher position responsible for co-ordinating projects, acting as a mentor,

performing clinical supervision and conducting active research (Chan & Gardner & Webster et al. 2010, p64f). Other initiatives include the introduction of skill trainings or the establishment of research support units and research groups (Greenwood & Gray 1998, p646). Cooke (2005) identified six principles of research capacity building:

- building skills and confidence
- developing partnerships
- ensuring the 'closeness to practice'
- developing appropriate dissemination
- building infrastructure and
- investing in sustainability (Cooke 2005, p3).

Previous study findings imply that the majority of nursing staff generally expressed positive attitudes towards research (Hundley & Milne & Leighton-Beck et al. 2000, p85) and there is a general increase in nurses wanting to undertake post-graduate education; Richardson however, argues that research remains a distant skill for many nurses and midwives (Richardson 2005, p33). Retsas (2000) explored various requirements when wanting to foster research engagement within the nursing profession (Retsas 2000, p602).

Table 1: Requirements to undertake a research project

What is required	n	%/400
Time		
Time	63	15·8
Time as paid release from work	30	7·5
Time as study leave	5	1·3
Support		
Professional advice; assistance; guidance	39	9·8
Information; knowledge; 'know how'	23	5·8
Peer support	12	3·0
Support via group research project	6	1·5
Equipment	6	1·5
Money as funding	33	8·3
Money as remuneration	6	1·5
Motivation		
Interest in topic being researched	21	5·3
Motivation	12	3·0
Incentive to achieve something positive	3	0·75
Outcomes/rewards		
Recognition and prestige	7	0·25
Results acted on and make a difference	3	0·75
Realistic outcomes	3	0·75
Opportunity to enhance career	3	0·75
Net benefit/relevance to clinical field	3	0·75
Reward at end	1	0·25
Total	279	69·8

n = no. of times stated by participants; same comment may have been made by more than one participant.

(Retsas 2000, p602)

Nonetheless, there are various barriers keeping nurses and midwives from engaging in research. McCaughan, Thompson, Cullum et al. (2002) identified four characteristics associated with difficulties to use or conduct research. These included the individual, the organisation, the nature of research information itself and the organizational environment. The study identified various existing problems in interpreting and using research and those nurses who felt confident often perceived a lack of organisational support (McCaughan & Thompson & Cullum 2002, p46). A study conducted in Northern Ireland by Parahoo (2000)

found that lack of manager's support ranks among the major reasons perceived as obstacles to research utilization (Parahoo 2000, p93) and these findings might as well be considered as barriers preventing nurses from engaging in research activity themselves. McNicholl, Coates and Dunne (2008) found that just over half of their study participants (n=194, 51%) claimed to have participated in a research project; the authors argue, however, that only a very small cohort (n=13, 7%) had carried out individual research projects (McNicholl & Coates & Dunne 2008, p347). Hutchinson and Johnson (2003) in their study on barriers and facilitators of research found that 104 out of 317 study participants were qualified on Tertiary diploma/degree for registration level although only one nurse out of all study participants held a Masters by Research degree.

Table 2: Nurse Demographics (n=317)

Variable	N (%)	Mean (SD)
Gender		
Male	24 (7.6)	
Female	291 (91.8)	
Missing	2 (0.6)	
Age (years)		33.8 (9.73)
Experience Registered Nurse (years)		12.6 (9.95)
Clinical experience (years)		11.35 (8.8)
Years since most recent qualification		4.28 (6.52)
Highest qualification		
Division 2 certificate for registration	14 (4.4)	
Division 1 hospital certificate for registration	23 (7.3)	
Tertiary diploma/degree for registration	104 (32.8)	
Specialist nursing certificate	26 (8.2)	
Graduate diploma	34 (10.7)	
Masters by coursework	9 (2.8)	
Masters by research	1 (0.3)	
Others (including education and management qualifications)	87 (27.4)	
Missing	19 (6.0)	

(Hutchinson & Johnston 2003, p309)

To not only increase research awareness but foster active research engagement, Retsas (2000) states that a number of hospitals and university schools of nursing have appointed Chairs in clinical nursing and/or nursing research. A significant objective of these initiatives is the enhancement of evidence based practice through strengthening the relationship between research and practice and fostering collaborations between universities and hospitals (Retsas 2000, p599).

However, promoting professionals and creating research expertise is not merely a task of delivering training opportunities and skill workshops. Wimbush (1999) argues that a much more comprehensive approach is needed (Wimbush 1999, p175). It is therefore that this research aims to develop an extensive framework for the implementation of an action-oriented NT nursing and midwifery research culture aiming to address workforce related issues and challenges.

Methods and Observations

The data analysis for this research will include a comprehensive literature review on experiences of similar jurisdictions around the world in implementing a culture for nursing research as well as a qualitative analysis.

Nurses and nursing managers will be interviewed to ascertain their opinions on

1. Attitudes towards the conduct and use of research; Levels of confidence and enthusiasm

2. Necessary support when conducting research

3. How to overcome challenges that may arise in engaging in workforce research

4. Ideas on the development of an action-oriented workforce research culture within the NT nursing and midwifery workforce

5. Specific ideas on required workforce research within the NT nursing and midwifery workforce to develop a future research agenda

Particular attention will be paid to incorporating and carrying on existing research on workforce challenges such as the need to complement current recruitment strategies by fostering flexible retention to ensure sufficient numbers of qualified staff and the need to manage a highly diverse workforce in terms of age and background.

It is planned that a comprehensive framework for the implementation of an action-oriented workforce research culture will be developed from the literature review and qualitative findings.

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