COUNCIL OF DEANS OF NURSING AND MIDWIFERY (Australia & New Zealand)

Submission

26/06/2026

Australian Tertiary Education Commission (ATEC)

tertiarysection@atec.gov.au

Dear Australian Tertiary Education Commission,

Re: A More Joined-Up Tertiary System: Discussion Paper

Thank you for the opportunity to comment on the Australian Tertiary Education Commission's (ATEC's) *A More Joined-Up Tertiary System: Discussion Paper.*

The Council of Deans of Nursing and Midwifery (Australia and New Zealand) "CDNM" is the peak organisation representing universities and other higher education institutions that offer undergraduate and postgraduate programs in nursing and midwifery throughout Australia and New Zealand. CDNM has an essential role in ensuring a safe and sustainable nursing and midwifery workforce by leading higher education, research, and knowledge translation in these professions.

We understand that the discussion paper is across all disciplines. However, nursing and midwifery – and especially nursing – offers a valuable perspective, supported with several examples, on which further tertiary harmonisation models may be built.

Overall Comments

Support for Tertiary Harmonisation

CDNM is broadly supportive of tertiary harmonisation and recognises the benefits it brings to students and to workforce outcomes. Nursing education already has a well-trodden path from the Vocational Education and Training (VET) Enrolled Nurse (EN) diploma qualification to Bachelor-level Registered Nurses (RN) degrees offered through Higher Education. This pathway has been in place for over 30 years and exists in all universities across Australia. While well established, we recognise that, as outlined in the discussion paper, there are opportunities to strengthen harmonisation along this pathway. However, it already offers strong foundations from which exemplars of tertiary harmonisation could be further developed.

CDNM welcomes the opportunity to provide ATEC with examples of existing EN-RN pathways and to work with ATEC on further harmonisation of this pathway, potentially as a model for other disciplines to consider.

Higher Education to VET pathway

CDNM supports greater harmonisation across all pathways within a learner's journey in the tertiary education system. While we recognise that transitions from VET to Higher Education could be better aligned, CDNM appreciates the discussion paper's recognition of the challenges associated with harmonising the reverse pathway –from higher education to VET. We note this pathway particularly remains underdeveloped and requires a more consolidated and consistent approach.

The importance of delivering registered nursing and midwifery degrees in research rich higher education settings

CDNM have consistently raised concerns regarding the possible introduction of a health service-based higher apprenticeship qualification applying to nursing and/or midwifery disciplines. CDNM does not support this approach for these professions for the reasons outlined below:

- Higher apprenticeships are generally offered at an AQF 5 level, although these can be at higher AQF levels.

- Health services are already stretched providing clinical care. Basing nursing education predominantly within a health service risks compromising both education and health outcomes.

- The higher apprenticeship approach is not in alignment with the overall advancement of the registered nursing and midwifery professions. The new definition of 'nursing' by the International Council of Nurses (ICN)[1] recognises the profession's multiple and expanding aspects – inclusive of increased scope, leadership and evidence-informed decision making.

- There is a strong global evidence-base showing the benefits to patient outcomes, the system, professional practice and uptake of new technologies when nursing and midwifery care is delivered by bachelor's degree-educated nurses and midwives.

- Nursing and midwifery students are already employed by healthcare providers through Assistant-in-Nursing (AIN) and Undergraduate Students in Nursing (or Midwifery) (USIN/USIM). These positions offer flexibility to increase and decrease paid work throughout the academic year. Notable, these models provide students with practical experience and helps with workforce. None of the students' paid work counts towards their clinical placement hours as it is at a lower level than required in a BoN.

- Australia is specifically aiming to maximise use of our existing health workforce[2] through expanded and advanced scopes of practice. For nurses and midwives, this requires additional university-based education. One example is the recently introduced "Designated Registered Nurse Prescriber" role. This endorsement requires registered nurses to complete an NMBA-approved educational program delivered at AQF Level 8.

- Registered nursing and midwifery education needs to be based in research-rich settings to support the evolving roles of registered nurses and midwives. This does not preclude the need for greater harmonisation between the tertiary and higher education sectors. However, there does need to be a clear understanding about which education sector is most appropriate to deliver to which type of education and qualification – see also below.

Strengthening the Distinction Between Education and Training Contexts

An important consideration regarding required graduate outcomes is the need to clearly distinguish:

- those disciplines where higher education institutions need to be the base of the education provision but with strong links to – and substantial supervised student experience in – industry; from
- those disciplines where on-the-job learning is predominant and the training base firmly needs to be in industry but with links to higher/other education providers.

There is a risk that in moving towards harmonisation, this subtle but important distinction may become lost.

[1] ICN Definition of 'a nurse' and 'nursing': https://www.icn.ch/resources/nursing-definitions/current-nursing-definitions

[2] Unleashing the Potential of our Health Workforce – Scope of Practice Review Final Report: https://www.health.gov.au/sites/default/files/2024-11/unleashing-the-potential-of-our-health-workforce-scope-of-practice-review-final-report_0.pdf

CDNM highlights that, for reasons outlined above, registered nursing and midwifery education delivery must remain the responsibility of Higher Education providers, with health services supporting this through supervised clinical experiences.

This distinction will more clearly define the context in which education occurs, as well as the qualification levels required to ensure safe, competent, and future-ready registered nursing graduates.

Further resources

Many of CDNM's views on tertiary harmonisation and other topics covered in this submission, relevant to the discussion paper are available via the following links:

- Council of Deans of Nursing and Midwifery (CDNM) submission to the TAFE Centre of Excellence in Health Care and Support re: a possible higher apprenticeship in nursing
- CDNM Media Release: CDNM Acknowledges Jobs and Skills Australia Report on Tertiary Harmonisation
- CDNM Position Statement on Registered Nurse and Midwife Entry to Practice Education
- Council of Deans of Nursing and Midwifery submission to the Universities Accord (Australian Tertiary Education Commission) Bill 2025 and a related bill

CDNM welcomes the opportunity to work with ATEC to explore opportunities to enhance harmonisation in nursing and midwifery education, including on a specific harmonised bi-directional pathway for nursing students in the first instance. Please contact us to discuss how we can assist.

Yours sincerely,
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