



ANMJ

AUSTRALIAN NURSING & MIDWIFERY JOURNAL



Discovering Nursing Career Paths

Introduction

Nursing and midwifery offer a myriad of different career opportunities. But demystifying what the right speciality is that aligns with your career aspirations can be challenging.

The *ANMJ* publishes articles on different specialities from the perspective of nurses and midwives to help you decide your career path. Some of these articles are highlighted here.



Five tips on finding your nursing speciality



There may come a point in a nurse's career when it's time to specialise. But with multiple specialities to choose from, how do you find one that's right for you?

Why specialise

Specialising in a field of nursing can create numerous professional opportunities resulting in greater work satisfaction. Benefits include:

- Gaining the right to work in the area you have the most passion for
- Opening the door to career advancement
- Provide educational opportunities in post graduate studies

Yet discovering your passion for a speciality is not always easy. By asking yourself the following questions may help determine which speciality is right for you.

What population do you like working with?

Working with or being around a specific population such as older people or kids may help clarify what speciality you are drawn to. If you love being around kids, you may find you are more passionate and well suited to paediatrics.

What type of working environment are you attracted to?

Do you like the buzz of ED or the pace of an acute care setting? Perhaps working in a clinic environment or in people's homes is more to your liking. Being comfortable in your environment increases your job satisfaction.

What speciality did you find the most interesting when you were studying?

The benefit of placements during study and being on rotation during your grad year gives you exposure to a number of speciality settings. Was there a specific speciality you found most interesting?

Personal qualities:

Are you comfortable in the role of a leader? Nursing offers numerous opportunities to become a team leader, nurse manager or even a nurse executive.

While not all nurses are leaders some thrive as teachers. If educating colleagues and patients is your thing, specialising as a nurse educator on the wards or in an educational facility could be the right option for you.

If you are attracted to theory and developing best practice, research or quality improvement specialities may suit you better.

Your stress tolerance:

Certain specialities carry different levels of stress that nurses need to manage.

Everyone's stress levels are different. Some nurses tend to get traumatised when dealing with death on a daily basis. Others are incapable of making instant decisions in a critical care situation, where the loss of time can lead to the patient's condition worsening. Assessing how well you cope in a stressful situation can also help you decide the best specialty for you.

Q&A: Recovery and Anaesthetics Nurse



By Robert Fedele

South Australian nurse Louise Jones joined the profession in 1986. Three years later, she began working at the Women's and Children's Hospital in Recovery and Anaesthetics, quickly growing to love the specialties. She now holds the position of Nurse Unit Manager within the team.



Louise chats to the ANMJ about the ins and outs of the job and making a difference in the lives of patients experiencing some of their worst times.

What appealed to you about working in Recovery and Anaesthetics?

The WCH is unique in that the team is both Anaesthetics and Recovery, two very different skillsets that marry up beautifully and allow us as nurses to have a large knowledge base, with the variety to ensure we are kept on our toes.

I have always felt, and always use in my spiel to new staff, the skills you learn with R&A transcends and covers every aspect of nursing that you will come across throughout your nursing career....ABC it is as simple as that, airway, breathing, circulation.

What training did you need to work in the field?

All education and training is provided within R&A through a substantial orientation program of approximately three months involving being precepted into both specialties. We aim to use regular preceptors to reduce the confusion of having too many ways to do tasks.

I personally have not undertaken any post-graduate course, but there are numerous perioperative post-graduate courses both here

in SA and nationally to do, and there is always further progression to the Masters level as well. I have completed APLS as part of the credentialing process for the sedation role and maintain this.

What does an R&A nurse do?

We provide intraoperative anaesthetic care and post-operative stage 1 recovery care to the paediatric and obstetrics/gynaecology patients and stage 2 for the gynaecology patients.

This involves full nursing assessments, completing checklists, assessing the patients, maintaining airways, gaining IV access, pain management, emotional support to the patient and their families, time management, team leader role for RN's, liaising with the multi-disciplinary team, counselling, and lots of checking, cleaning and restocking. We also provide a service in remote areas, not just within the theatre complex- ie. radiology, the haem/onc ward, and radiotherapy/PET scan at the RAH.

What does a typical day look like?

As the NUM, I have to balance my management role with a clinical support role. I often spend the first part of the morning ensuring overtime/SL/on call has been adjusted on PROACT and other managerial tasks. I also check my calendar so that I can inform the TL of my movements for the day.

I will often assist with tea/meal breaks and will assume a patient load if required. I answer phone calls, attend meetings, rostering both daily allocations and the unit roster.

I liaise heavily with both the Scrub side NUM and the anaesthetists to maintain the relationships of all concerned as together we make a united team with common goals. I also provide ad hoc counselling, mentoring and precepting of the R&A team. As a nurse-led service, I also am lucky enough to provide sedation for cohorts of patients.

What are some common challenges?

From a NUM's point of view, managing staff, workloads, budgets, and senior manager expectations provides constant daily challenges. I also have climbed the ranks and had to adjust to my role, changing and getting the balance of manager vs colleague at a good ratio. Trying to balance the management side with the clinical can also be a challenge, especially during the pandemic.

As a nurse, I think the biggest challenge is providing care for some of the most vulnerable patients that exist – sick children with extremely anxious parents/caregivers/families.

Our urge to invest personally presents daily challenges and it has a huge emotional pull to many of the team. We seek to provide care and comfort and sometimes feel inadequate that we cannot ‘fix’ everything. Therefore, the challenge of avoiding burnout becomes a balancing act.

Staff shortages have also had a big impact on the team, not only losing the experience of the staff member, but also having to precept new staff.

What key skills and attributes do you need to succeed in R&A?

Self-belief, good time management, be a team player, an ability to communicate with the patients, their families and the staff, a desire to pass on the knowledge to the next generation of nurses, to promote self-care, a good sense of humour, ability to comply with the policies and protocols, and knowing when to ask for assistance.

What are common misconceptions about working in R&A?

That we have a lot of downtime and we sit around and don’t do a lot. I also think our skill levels are underestimated by the teams outside the perioperative environment and especially doctors who come to our area as trainees and can at times do not know the extent of our skills and knowledge.

What do you love most about the job?

That we can make a difference, are there for people at their worst, and can provide them care and comfort.

Our team is incredible; we are there for each other both work wise and in the emotional support role. They are an incredible bunch whom I know have my back and support me as much as I do them.

I love the challenge of caring for children who cannot often advocate for themselves and being the conduit to ensure they receive the best care possible. The complexity is never boring, you can go from a 1kg baby to a 100kg adult.

Personally, working as a team has always been a drawcard for me and looking to the future and passing on my enthusiasm is becoming a priority to ensure the continued service provisions.

What impact has the COVID-19 pandemic had on the team and delivering care?

COVID has introduced real fear amongst our team and uncertainty about our future. We have had to continuously adapt and redesign our COVID plan. We had to hastily write procedures and protocols that we hoped would keep patients and staff alive!

The fear also that there may be a negative outcome due to the



delays in instigating a case due to having to undergo these new protocols was extremely challenging for staff to comprehend, let alone accept.

The next step has been having to adjust to staff shortages due to exposures or becoming positive. It was a real fear prior to the borders opening in SA that we just didn’t know what to expect and the fear of the unknown can be very unnerving.

At the moment, I feel wary for the new staff coming into these environments for the first time and getting a ‘different’ kind of learning experience due to reduced surgery, and increased stress levels of those teaching them.

However, the positive has been the coming together as a team and cementing the relationships that we have. Trust is vital in this pandemic and it is during times of stress that having a resilient trustworthy team is the best coping mechanism we have.

What advice would you give to a nursing student or early career nurse who aspires to work in R&A?

I honestly believe that the skills you learnt in R&A prepare you for almost every area of nursing.

The fundamental key to nursing is ABC and everything goes from there. All skills learnt will hold you in good stead. Clinical and non-clinical (ie. teaching) opportunities are wide and varied with having R&A on your resume.

I have always advocated that new graduates try not to pigeonhole themselves into one specialty prematurely and that there are so many varied roles under the umbrella of nursing (even though I have not followed that advice in my own career path!)

But if the passion is there from the very beginning that is also a great advantage as you can tailor your career plan to provide yourself with the best opportunity for a successful and fulfilling career.

I would advocate for post-graduate diplomas/certificates in your chosen field.

I would also investigate coping strategies for a career that will be full of highs and lows and how self-protection and self-care are vitally important for sanity and career longevity right from the very beginning.

“...the positive has been the coming together as a team and cementing the relationships that we have. Trust is vital in this pandemic and it is during times of stress that having a resilient trustworthy team is the best coping mechanism we have.”

5 reasons to choose aged care as a career pathway as a registered nurse



“My role working as a registered nurse in aged care has always been extremely exciting, sometimes challenging and very satisfying”, says Charles Sturt University (CSU) Associate Professor of Nursing Maree Bernoth.

Associate Professor Maree Bernoth has been involved with the residential aged care (RAC) sector as a registered nurse and academic for more than 37 years.

In an episode in the CSU podcast series she explores the nation’s critical skills shortages in aged care and shares her own experience of the rewards of working in the sector.

“There’s roughly a 35,000-person shortfall of aged care workers each year. I wanted to share a very real depiction of how rewarding and empowering it is to work with older people to motivate people to join the sector and reduce this workforce gap.

“Aged care work is constantly evolving and really challenges you. As an aged care nurse, you make a tremendous difference in the lives of the residents and clients as you are largely an autonomous practitioner.”

Here are five top reasons from Associate Professor Bernoth on why to choose aged care as a career pathway.

1. Autonomy

This is possible as a registered nurse [working in aged care] because you’re largely autonomous as a practitioner. There’s not always allied health professionals or doctors to consult with in residential aged care so older people have to rely on your ability as a registered nurse to assess their needs and implement appropriate strategies for their care. When you get this right, the registered nurse can make a big difference in the quality of life of the older person.

2. Using your full scope of practice

It’s up to you as a registered nurse to ensure that the person is receiving the best care possible and families are included in and kept informed of that care. This responsibility calls on the registered nurse to use their full scope of practice. For example, using all your senses to assess the person, along with all your knowledge of the person – who they are, their life stories, their interests and their idiosyncrasies to identify any challenges and then be able to instigate strategies to intervene appropriately.

3. Diversity in practice

Working in aged care gives you extensive exposure to the many and varied medical conditions that patients can experience. For example, you learn how to identify whether a resident has a medical emergency happening which can manifest in confusion and then it’s your role to identify the multiplicity of possible

causes. Your responsibility to then intervene gives you the ability to bring that person back to their normal cognitive function which enables their ability to interact with other residents, their families and friends. In short, you reinstate their quality of life.

4. Relationships

Another incredibly rewarding aspect of working in aged care is the relationships that you build. You build them with the residents and they become like family as you’re working with them all the time. It’s not like acute care where patients get well and go home. Instead you get the privilege of getting to know them and their family and you also have the privilege of supporting them in their last days as they move towards their death.

5. A culture of curiosity

I also really enjoyed working with other nurses and aged care workers in what became a culture of curiosity. Staff wanted to know what was happening with the residents and what was going on and how they could best intervene. Questions were constantly asked and staff were thirsty for answers. They would then take this knowledge to use in enhancing the lives of the older people they were working with. The teamwork was also fantastic in many of the places I worked and the extensive gratitude of everyone involved – the residents, the families and the staff was our reward.

“You also need to have foresight, flexibility, creativity, along with a sense of humour to manage some of the more challenging situations that you’re confronted with,” Associate Professor Bernoth says.

The current workforce shortage in aged care is critical, with roughly 65,000 aged care workers who leave the sector each year. These rates of attrition are another huge challenge for the sector.

“The RAC and community aged care sectors are in an exciting but also challenging time. It’s exciting because we now have the outcomes from the Royal Commission being implemented and rolled out. There’s an opportunity for nurses in aged care to be contributing to those changes and being part of what’s happening in aged care. These changes will hopefully encourage more nurses and RNs to the sector and also to stay in the sector,” Associate Professor Bernoth says.

The 2022 Charles Sturt podcast series, Critical Workforces, features experts at the top of their fields who provide first-hand accounts of workforce satisfaction in their sectors.

A day in the life of an Emergency Nurse

By Robert Fedele



“When I tell people that I work in the emergency department, I often hear the term ‘crazy’ brought up a lot,” says Amy Rowsell, an emergency nurse at Royal Hobart Hospital’s ED. “People then want to hear the weirdest story that I’ve encountered. They want to hear all about the blood, guts and gore.”

While the ED does feel ‘crazy’ on most days, Amy says it’s usually due to the need to juggle a large number of patients at any given time rather than high patient acuity or damaging trauma.

Amy always knew she wanted to be a nurse.

After graduating, she worked at the Royal Prince Alfred Hospital Sydney Haematology ward, where she developed a strong connection with patients along their long journey to receiving a stem cell transplant.

She worked on several different wards before finally ending up in the Emergency Department, falling in love with the speciality, then moving to Tasmania to work at the Royal Hobart Hospital.

Amy spoke to the *ANMJ* about her pathway into emergency nursing and what it takes to thrive.

1. What appealed to you about emergency nursing?

Emergency nursing attracts (and then grips onto) a certain kind of person. I thrive in a fast-paced environment. While I enjoyed working on wards and the relationships you can develop with patients, I find the challenges associated with caring for patients who have experienced significant trauma, injury or illness often offer some of the greatest rewards.

Within emergency nursing, there are a vast number of roles that allow you to develop your skills. This begins with providing nursing care for acute medical patients, patients presenting with an acute or chronic injury, paediatric patients and goes right through to triage and the resuscitation of patients who have been involved in a major trauma or cardiac arrest.

I have been successful in becoming a Clinical Nurse Specialist (known as a Grade 4 nurse in Tasmania), and this past year I have been acting as an ED Nurse Navigator who helps with managing the patient flow into and out of the ED.

2. What training did you need to become an emergency nurse?

I started out in Emergency with my undergraduate degree and the skills I’d been able to develop working on different wards.

My first shift was a casual one, where the nurse I was paired with could give me a quick rundown on what my responsibilities were throughout the shift. It was hectic. I remember at the end of that shift, my colleague came up to talk to me and praised me for my hard work and that I should consider working more in the ED.

Fortunately, in my current department, nurses are given a much more thorough orientation and supernumerary exposure to the role. Think less “sink or swim” and more “nurtured into success”.

Emergency nursing requires you to have a vast knowledge of several different nursing specialties.

Since the start of my career in emergency nursing, I have been able to undertake extra training to support myself in this role, including the Emergency Management of the Sick and Injured Child, the Trauma Nursing Core Course offered by the Australian College of Emergency Nurses, attending state-based emergency conferences, as well as completing post graduate education in Emergency Nursing.



3. Take us through a typical day on the job.

No day is typical in Emergency. At the beginning of each shift, you walk in wondering what this shift will entail. It can start with a pleasant surprise when you arrive to see no ambulances RAMPED and minimal (or no) patients waiting in the waiting room.

This hopefully means that access block won't play a significant role in your day. However, this by no means indicates how your day will pan out.

First stop is shift huddle, where essentially the baton is passed onto us and we must rise to the challenge that a new day may bring.

Within the department there are many different areas you can be allocated to work for your shift – these include triage and the waiting room, resuscitation bay, non-ambulatory acute medical and surgical area, ambulatory care, paediatrics, and our short stay department.

Most inpatient wards and departments have a set number of patients that they have capacity to take throughout a day. In ED, there is no such thing. It's not unusual to see 200 patients through the department each day, with the number of those needing admission trending up.

We are the only tertiary trauma hospital in the state, meaning all the really unwell patients come to us. We don't have the option to go on bypass like most hospitals in other capital cities do. We are the only option for the Tasmanian community.

4. What are the biggest challenges facing the speciality?

Burnout is the number one challenge emergency nurses are currently facing – this is fuelled by a number of key issues including:

- access block & high workloads, which leads us to feel we are unable to provide the adequate care that every single one of our patients deserves
- exposure to patients who are critically unwell or who have experienced significant trauma which may lead to the development of conditions such as post-traumatic stress disorder
- exposure to occupational violence and conflict

“Finally, one of the most important qualities of an emergency nurse is one that is shared across all nursing specialties: empathy. I believe every nurse must be compassionate, patient, and unafraid of being human, because there is nothing worse than needing emergency services and having no one around that is smiling, understands you or remembers that you don't want to be there.”

- increasing stressors related to COVID-19, such as increased sick leave among colleagues leading to an increase in working double shifts or working short on shifts, adding to the increasing pressure of our high workloads

This all leads to a decrease in job satisfaction and impacts on our ability to retain staff.

5. What key skills do you need to succeed in emergency nursing?

Being flexible and dynamic, being assertive, being able to multitask and manage your time effectively, as well as maintaining good stamina throughout a busy shift.

Maintaining professionalism is key to supporting patients as well as those within your team. One must have good composure in stressful environments and be able to work through their emotions when facing potentially emotional and scary situations.

Finally, one of the most important qualities of an emergency nurse is one that is shared across all nursing specialties: empathy. I believe every nurse must be compassionate, patient, and unafraid of being human, because there is nothing worse than needing emergency services and having no one around that is smiling, understands you or remembers that you don't want to be there.

6. What do you love most about the job?

The fact that no two shifts are similar and that you never know what will walk in the door next.

I love the challenge of knowing that things can change any second and you must be prepared for that.

Over the years, I've come to learn that I can manage anything that walks (or rolls) through the door, all due to being confident in my own skills and the fact that I am never alone.

This leads me to the number one reason why I love my job – emergency nursing is all about teamwork!

7. What other health professionals do you work with?

We have a vast array of health care professionals within our department including – medical staff from ED as well as home teams, emergency nurses and emergency psychiatric nurses, specialised aged care nurses, physiotherapists, social work, pharmacists, occupational therapists, radiology, clerical staff, orderlies, aides, volunteers & paramedics.

Emergency medicine is a team sport and it is a fundamental belief that every single person on the team plays an integral role in providing patient care and keeping the department running. Teamwork makes the dream work.

8. What role have emergency nurses played during the COVID-19 pandemic at the ED?

Emergency nurses have played a critical role in the COVID-19 pandemic.

In the beginning, we were one of the first frontline workers that confirmed or suspected COVID-19 patients would have physical contact with. We were there to provide care and most importantly reassurance to patients who were often quite scared for their future.

The pandemic has brought many new challenges for emergency care delivery, which have required significant planning, resourcefulness, and leadership. To adapt, we have had to reconfigure our work zones and practices to provide care to suspected and confirmed cases in a manner that means we can continue to care for patients with other diseases.

One of the biggest changes we have had to make is mentally. We often encounter patients who are critically unwell. Our instincts tell us to run toward these patients to initiate assessment and care. However, we have had to learn to take a couple extra seconds to stop and don appropriate PPE safely before any resuscitation. We have learnt that we must care for ourselves to be healthy and therefore available to care for future patients.

Over the last year, the COVID-19 pandemic has shown that nurses have an outstanding ability to be dynamic, resilient and innovative.

9. What career opportunities are there for emergency nurses?

The vast majority of emergency nurses work in the ED of a hospital or healthcare clinic.

Within these settings, there are several different career opportunities available to nursing staff as their careers progress such as emergency nurse educator, emergency nurse consultant, or even a nurse practitioner.

You will find emergency nurses working in a myriad of other places outside of these environments such as schools, community, medical centres, cruise ships and remote areas.

I work with nurses who are medics in the army and regularly travel interstate and overseas on assignments, along with nurses who work for Médecins Sans Frontières.

10. What advice would you give to a nursing student or early career nurse who aspires to work in ED?

Be open to new challenges and opportunities that are given to you and don't be afraid to ask for help and support whenever you need it.

You are not alone, and you have the full support of your team behind you who want you to succeed.

