Careers in Nursing & Midwifery
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NOTE:
Wherever you see this icon please go to www.graduatecareers.com.au >> What Job For You >> Career Profiles >> Nursing & Midwifery >> More Information for continued discussion and/or useful websites on that subject.
Introduction

Make the decision to become a Nurse or a Midwife and you are choosing to make a positive and lasting contribution, not only to the individuals you will support and care for, but to your whole community.

Nurses and Midwives have always performed a vital role in our community. Today, they are highly valued for the range and extent of skills and knowledge they possess in fulfilling their duties. The impact that these dedicated women and men have on our society stretches far beyond the bedside into many specialities and disciplines.

Nurses and Midwives enhance the lives of patients or clients in their varied duties as carers, advocates and educators. They work within teams of skilled health professionals, supporting one another and adapting their abilities and expertise to reflect continuing advances in health service provision, nursing and midwifery.

Careers in Nursing and Midwifery are rewarding and challenging, providing widespread opportunities to work in many areas in hospitals, within the community, in universities and overseas, while offering unparalleled job security.

Nurses and Midwives make up the largest health professional group in the world. They are constantly in demand, both within Australia and overseas. The portability of Nursing and Midwifery offers the choice of where, when and what type of work to do.

Nursing and Midwifery are well-paid professions and with allowances for shift work, there is the opportunity to earn even more.

Salaries depend on the state or territory in which a Nurse or Midwife is practising, although the starting salary for a Registered Nurse or Midwife is in line with starting salaries for other professions, such as teachers and physiotherapists.

(To find out the latest information on activities, salaries and jobs for graduates working in Nursing and Midwifery go to www.gradsonline.com.au).

Varied working hours with the flexibility of shift work means that Nurses and Midwives can choose to work part-time, allowing them to have a career that will accommodate family and other commitments, such as further study, sport, recreation, farm or business responsibilities.

In Nursing, there is the choice of numerous career pathways within the hospital setting, such as intensive care, emergency, neurology, orthopaedics, radiology, communicable diseases, research, paediatrics and special care nurseries, to name just a few.
Nurses also work in a wide variety of settings within the community, including private clinics, aged care facilities, the Defence Forces, schools, industrial sites, remote areas and many more. There are opportunities in education, management, research, remote retrieval services, government, health promotion and sales.

In Midwifery, there are also career pathways both in the hospital and in the community. Increasingly, Midwives in Australia and overseas are providing continuity of care to women, right through pregnancy, labour and birth and the postnatal period.

Much of this care is now based in the community, where Midwives are educated to provide care to healthy women during pregnancy, birth and the postnatal period on their own responsibility.

All Registered Nurses are required to complete a Bachelor of Nursing and there is the opportunity to pursue further study in Midwifery or specialist areas of practice, such as critical care, palliative care, aged care or management.

Midwives have traditionally undertaken a three-year university degree in Nursing and then completed a postgraduate qualification in Midwifery to be eligible to be registered as a Midwife. More recently, three-year university degrees in Midwifery and double degrees have commenced in some states (NSW, SA and VIC).

These qualifications can be combined with other disciplines like Law, Marketing, Health Promotion or Psychology, providing even more possibilities for interesting work and dual careers.

This vast range of choice within the health and allied industries means that there is an interesting career path to suit every person attracted to Nursing and Midwifery in the 21st century.

Imagine a world without Nurses and Midwives and you will realise how critically important they are to the provision of health services in our society.

//This level of flexibility and choice provides constant stimulation and job satisfaction for Nurses and Midwives.//

**Education and Training**

To become a practising Registered Nurse, you will need to complete a Bachelor of Nursing and then obtain a Registration Certificate or licence from the state or territory in which you wish to work.

To become a Midwife, all states and territories offer graduate diplomas or Masters in Midwifery for Nurses who want to become Midwives. Victoria, SA and NSW also offer a Bachelor of Midwifery leading to registration as a Midwife.

Once you hold a Registration Certificate or licence, you are entitled to apply for registration in other states and territories within Australia.

Requirements for university entry may vary slightly between universities. However, most students are required to have completed Year 12, with passes in English, general Maths and at least one Science.

Non-school leavers (mature-aged students) are entering Nursing and Midwifery programs in increasing numbers and becoming valuable members of the Nursing and Midwifery work force. Non-school leavers without a formal Year 12 certificate can still apply to enter Nursing and Midwifery programs on the basis of their educational and vocational backgrounds. Where appropriate, tertiary preparation courses are available in many universities.

To encourage Aboriginal or Torres Strait Islander people to become Nurses and Midwives, some universities have special entry opportunities, which provide introductory courses or a reduced number of subjects in the early years of the course if necessary.

Entry into courses is based on past work experience and an interview. In some cases, the university will conduct week-long residential programs on campus.

All universities have Aboriginal centres, which offer support to students from both staff and fellow students during their university experience.

University courses for Nursing and Midwifery combine theory with clinical experience. Subject areas studied include Nursing Practice, Anatomy, Physiology, Ethics, Law, Physics, Chemistry, Psychology and Communications. Course content can vary slightly between universities.

Clinical practice hours vary across universities, but largely involve spending blocks of time (days or weeks) working alongside experienced Nurses or Midwives in a range of health service settings.
Nurses have an extensive range of career paths, both in hospitals, large or small, public or private, and in the community. Once they choose a certain path, there are still many options open to them. They can also decide to follow a different path at some point in their Nursing career, to seek exciting, new challenges.

This level of flexibility and choice provides constant stimulation and job satisfaction for Nurses and Midwives.

Hospitals offer a diverse range of career choices for Nurses and provide the opportunity to live and work in different settings, with hospitals in every city across Australia, as well as in many regional areas. Nurses are also always needed overseas.

In hospitals, Nurses have the opportunity to rotate through wards or areas which interest them, or they can choose to specialise in one area. In clinical areas, Nurses and Midwives work as members of a diverse team of health professionals, all dedicated to improving the health status and outcomes of their clients or patients.

Around Australia, there are a number of scholarships available to Nursing and Midwifery students from government and professional bodies for both undergraduate and postgraduate studies.

Further qualifications enable highly-experienced Nurses and Midwives in general and specialist areas to work at a more advanced level as a Nurse Practitioner.

Many Nurses and Midwives go on to Masters and Doctoral degrees in Nursing and Midwifery or other disciplines, such as Business, Health Economics, Population Health or Information Technology.
The community offers a wide variety of options for Nurses looking for an alternative to work in hospitals. Community roles include working in community health services, district nursing, primary care or working in industry, schools or teaching in higher education.

In fact, many of the roles that Nurses perform are required in both hospital and community settings, eg. mental health and aged care.

Almost all of us have some idea of the roles that Nurses perform in general areas within a hospital, such as medical and surgical wards, and in the community, such as residential and aged care services, but the reality is that all these roles are extensive and challenging, contributing lasting positive effects on individual patients, clients and the community as a whole.

Of the many career paths available to Nurses and Midwives, some will be more well-known than others. Outlined over the next several pages are just a few of them.

**Aged Care or Gerontic Nurses**

Aged Care or Gerontic Nurses work in a range of settings, which include the community, hospitals, rehabilitation units and residential care facilities. Aged Care Nurses perform many different roles at various levels. They possess well-developed knowledge and skills specific to older people, in assessment, diagnosis, treatment and evaluation.

Aged Care Nurses working in a hospital environment require a thorough understanding of a wide range of age-specific problems and their management. Successful rehabilitation and effective discharge planning requires the ability to liaise closely with Community Nurses and other health care providers to develop an effective plan of care at home.

Those who work in residential care facilities deal with residents with a variety of chronic conditions and diseases. Aged Care Nurses have high-level assessment skills and specialised knowledge which enables them to diagnose, plan and implement appropriate patient care.

Aged Care Nurses who work in the home and/or community settings have the opportunity to work independently, in partnership with families and local health care providers, or in small multidisciplinary teams. They are excellent communicators; so they can advocate for residents and others in their care, coordinate multidisciplinary team members and support family members, all of which are integral components of providing aged care.

**Critical Care Nurses**

Critical Care Nurses also work in highly technological areas, such as intensive care and coronary care, where they care for acutely and critically ill patients of all ages and diagnoses, often on a one-to-one basis.

Critical Care Nursing requires complex assessment skills and a high level of care, involving the use of technology such as monitors and ventilators. Critical Care Nurses work closely with all members of the critical care team and also provide emotional support to patients, families and friends.

**Emergency Nurses**

For a different career path, the emergency department in any hospital is a dynamic, changeable place to work. It is a highly technological area that treats the broadest range of injuries, illness and trauma. Emergency Nurses require a high level of expertise. They adapt quickly to changing situations, relish unpredictability and work very well as members of an extended team of health professionals.

**General Practice Nurses**

General Practice Nurses work with doctors and other allied health professionals in general practice clinics, and are recognised as important members of the team providing health care to people in the community. They often combine nursing duties with other responsibilities, such as practice management. Their role also incorporates aspects of health education and monitoring of people with chronic conditions.

**Maternal and Child Health Nurses**

Maternal and Child Health Nurses work in the community to support young children (newborns...
through to school age) and their families. The main focus of this role is the early detection, intervention and prevention of issues affecting young children and their families, including emotional, social and physical problems.

Mental Health Nurses
Mental Health Nurses work with individuals, families, groups and communities to assess mental health needs, develop diagnoses and plan, implement and evaluate appropriate nursing care. They assess levels of dysfunction in their clients, assist them to regain or improve their coping abilities and prevent further disability.

Mental Health Nursing also includes implementing treatment, health education, crisis intervention and counselling and case management. Specialties within Mental Health Nursing can include child, adolescent, adult, geriatric, substance abuse or eating disorders, to mention a few.

Mental Health Nurses work in a wide array of settings, such as hospitals, community-based or home-care programs, prisons, schools and local, state and federal mental health agencies.

Neonatal Intensive Care Nurses
Neonatal Intensive Care, a very specialised intensive care unit, is a relatively new area of practice compared with adult health, or other areas of Nursing. It provides the opportunity for Neonatal Intensive Care Nurses to devote their expertise to newborns who need this concentrated level of attention at the beginning of their lives.

Babies admitted to a Neonatal Intensive Care Unit (NICU) may be small for their age, premature or sick newborns who require high technology care, such as ventilators.

Occupational Health Nurses
Occupational Health Nurses work in a variety of businesses and industrial sites. They combine public health concepts with their knowledge of emergency care and the law, and they also provide education to minimise workplace accidents and improve risk management in the workplace.

Oncology Nurses
Oncology Nurses provide care, support and education, not only to people with cancer, but also to their families and friends. They guide patients experiencing, or at risk of developing cancer, through counselling for cancer prevention and the screening process. As part of a dedicated team, they provide acute care right through to rehabilitation or palliative care as necessary.

Paediatric Nurses
Paediatric Nurses provide comprehensive care to children of all ages, from newborn to adolescents, and their families, in various settings. They care for the physical, emotional and social aspects of health and illness in their patients, as well as providing education and health promotion for disease prevention.
Paediatric Nurses may work in hospitals with surgical or medical patients or in the community, for example, as a School Nurse.

They manage physical and mental disabilities, and acute and chronic illness, such as respiratory infections, asthma, ear, nose and throat infections, cancer, growth and development problems.

Paediatrics is another area, which is highly demanding emotionally, requiring Nurses who are empathetic, with advanced people skills, a love of children and the ability to relate to families across all cultures.

**Palliative Care Nurses**

Palliative Care Nurses work closely with other healthcare providers, including physicians, social workers and chaplains, to attend to the needs of patients and their families, who face terminal illness and bereavement.

They are different from other Nursing disciplines in their dedication and commitment to almost exclusively caring for dying patients. Of all roles within the profession Palliative Care Nursing is one of the most emotionally demanding, often involving round-the-clock availability, expert management of pain and other symptoms and intensive family support.

Palliative Care Nurses combine compassionate listening and counselling skills to provide the highest quality of life possible for the patient and their family during a very difficult time.

**Perioperative Nurses**

As surgical techniques advance, so do the responsibilities of Theatre or Operating Room Nurses. They are now known as Perioperative Nurses to reflect the range of their duties, both in hospitals and day surgery units, from immediately before surgery, during surgery and while patients are recovering.

They monitor each patient's physical and emotional well being before, during and after surgery. They also create and maintain a sterile and safe operating environment, and coordinate patient care throughout the surgical care period.

During surgery, the Perioperative Nurse may take on one of several roles. As a Scrub Nurse, they work directly with the surgeon, preserving the sterile environment, assisting and passing instruments, sponges and other items needed during the procedure.

As a Circulating Nurse, they work outside the sterile field and manage the nursing care in theatre, observing the surgical team and assisting in creating and maintaining a safe, comfortable environment for the patient.

In recovery, the Perioperative Nurse takes on the monitoring and care of a patient from completion of surgery, until they are transferred to a ward or discharged home.

**Remote Area Nurses**

Remote Area Nursing (RAN) is a challenging and expanded clinical role, with Remote Area Nurses often working without immediate access to doctors.

They provide a 24-hour, on-call emergency service to their client groups, which mainly consist of Aboriginal people, pastoralists and small town, mining and tourist populations.

Aboriginal health is of major concern in Australia, presenting complex problems with alarmingly high rates of chronic and acute illness, the most common of which are cardiac, diabetes, renal and infant growth problems.

**Research Nurses**

Research Nurses are involved with Nursing, Medical and Pharmaceutical Research programs. They work for many different organisations, such as teaching and university hospitals, pharmaceutical companies, universities, educational facilities and research institutes.

Their roles can include monitoring clients on clinical trials, such as new medicines, and studies to improve the outcomes of Nursing practice or new treatments.

The work can be permanent, temporary or part-time and may depend upon grants or availability of funds from other sources.
Career Pathways in Midwifery

Midwives are highly skilled providers of care to women during and after both pregnancy and birth. They work with a team of health professionals to ensure the safe delivery and care of babies and their mothers in a variety of environments, including hospitals, birthing centres, special care nurseries, in the community and in the home.

Midwives may work in roles where one-to-one care is provided to women through pregnancy, labour and birth, and the postnatal period.

Generally, these Midwives work in small group practices with three or four other Midwives to provide care for a number (or a caseload) of women. This way, a pregnant woman gets to know one Midwife and her back-up Midwives. Continuity of care might be provided in the woman's home, a community centre, a birth centre or a hospital. Midwives are on call for the labour and birth of the women in their caseload.

Midwives might also work in larger teams, responsible for a number of women throughout pregnancy, labour and birth and the postnatal period. These Midwives are also on call at times for women's labour and birth. Care might be provided at home, in community centres, birth centres or hospitals.

Midwives may also work in hospitals or the community, providing care in one specific area at a time, for example, antenatal or postnatal. Sometimes, these Midwives will also rotate around or work across the different areas in the hospital or community services.

Midwives may be based in the community and provide home visits both antenatally and postnatally. Community Midwives work closely with other agencies and professionals, including Child and Family Health Nurses. Some community Midwives are also caseload or team Midwives and provide care during labour and birth.

Midwives are also involved in research, education and management.
As a Registered Nurse, it is a privilege to work and live in paradise on Daydream Island. I have been here for three and a half years now. Before that, I worked in many varied places, including major city hospitals, early discharge midwifery, community health, small hospitals and the bush.

Working on a resort is very different. You are the sole practitioner, which means you have to make decisions quickly and effectively. The clinic is open seven days a week from 8.00 am-5.00 pm. A Nurse is there everyday and then on call after hours.

We see a variety of illnesses and injuries. We are also available to listen to guests and staff, if something is worrying them. There are a lot of young people working on the island, so we sometimes have to be like an advisor too.

We have a great team here and work very well together. We also have an agreement with a medical practice on the mainland that provides us with telephone consultations with a doctor when required.

It is very rewarding when you have helped someone and the next day they are...saying “thank you for helping me to get better...”

To get to work on Daydream Island, I take a beautiful 10-15 minute ride in a luxury boat cruising in turquoise water. It is very relaxing. I really love my job.

I also provide strategic advice to ministers and senior health officials to assist in developing a health work force that meets the future demands of the Australian community.

Katherine – Government Policy Adviser

In my job I have a lot of flexibility. I get to meet lots of people from around the country and I also travel a lot. We are currently going through a significant change process in the health sector and I have a hand in influencing the direction, which is exciting.

My experience as a Nurse has been useful in understanding the health system and how it operates. My job pays well and I am surrounded by people who appreciate my skills, knowledge and background. I am part of a good team of people from a variety of backgrounds, such as nursing, law and community care; and I have direct access to very senior officials.

I provide policy recommendations, project management advice and research related to issues affecting the health work force locally, nationally and internationally. I collect and interpret data, and I write papers, reports and briefings for departmental and ministerial groups. I speak to the media, professional colleges and other work force groups, from consumers to health care providers, industrial organisations and education providers.

I also provide strategic advice to ministers and senior health officials to assist in developing a health work force that meets the future demands of the Australian community.

I started my career as a Nurse and developed administrative experience at a senior level within a metropolitan health service, before moving to the state department of health. From there, I moved into the specialist area of Nurse Policy and worked for a national taskforce and now I work in policy at a national level.

The number of Nurses who work in government departments demonstrates that the skills, attributes and competencies they bring to the work force are valued and sought after.

I still regularly work in clinical practice to maintain my skills and to keep in touch with issues relevant to the health work force at the clinical level, but mostly because I love the work. Nursing is a job for life!
Anne-Marie
– Nurse Educator

I firmly believe that my role is to facilitate the learning of others by effectively engaging learners through participation. The best way to do this is to talk to groups of Nurses about what they do and what matters to them. Sure, we have essential material that needs to be covered in education sessions, but the most valuable learning comes through dialogue.

I follow this principle with my management style, which is one of encouragement and engagement with others to ensure that they have the opportunity to reach their full potential. It is vital that Nurse Educators are aware of and contribute to Nursing issues to inform their teaching.

Although always interested in educating and supporting other Nurses, my first formal education role was as a Graduate Nurse Program Coordinator. Since then I have had many different roles in a variety of settings.

My Nursing Education career has taken me from acute care to higher education, to the community and back to acute care. When I began my education career, I did not have any postgraduate qualifications in education, but I quickly realised that there was much to know about educating others.

I obtained my postgraduate qualifications at the University of Melbourne and I have a Graduate Diploma in Adult Education and a Master of Training and Development. Both of these courses have stimulated my thinking and assisted me to focus on learners and more importantly on how individuals learn.

Nursing education is a dynamic area to work in. There are always new and exciting innovations within Nursing and Health Care that need to be communicated to the wider Nursing community, and it is often the role of Nurse Educators to do this.

Although I’m not directly involved in patient care, everything I do has an effect on that, because I support those Nurses and student Nurses who are delivering direct care.

Keeping in touch with contemporary issues that impact on Nursing practice, ensures that as Educators, we are able to provide education opportunities and forums for Nurses to debate. We also discuss the myriad of practice issues that affect them.

Every day is different and that in itself is a very positive aspect of my role. As well as managing a clinical Nursing Education department in a busy metropolitan hospital, I have a teaching load, which is focused on my interest areas of Law and Ethics, Evidence-based Practice, Nursing Research and contemporary issues within Nursing Education.
Once you hold a Registration Certificate or licence, you are entitled to apply for registration in other states and territories...//

Anne-Marie – Nurse Educator

As an emergency department Nurse Practitioner, many barriers to providing timely appropriate health care to clients have been or are in the process of being removed. I am able to order an x-ray or medications without having to wait for a doctor to sanction the order. My knowledge and skills are properly recognised.

I attend to patients who present to the emergency department with problems such as lacerations, simple fractures and minor respiratory illness. These patients will routinely be discharged after treatment and I will have managed their whole episode of care. I work within a multidisciplinary team and consult with other health providers as necessary.

I have completed my postgraduate education, including a Masters degree in Nursing. Enmeshed in this theoretical knowledge base are many years of learning through experience.

To use the title Nurse Practitioner, I had to be authorised and endorsed by my state nurse regulating authority. This required submission and verification of all relevant paperwork and evidence of my practise as an expert within this specialised area of practice.

I guess I am also an ambassador for the hospital. I need to make certain that there are enough Nurses, and I take this seriously.

The role of DON is a challenging one and this is essentially what excited me about it. My job is to lead the Nurses in the organisation and also to be the Director of Operations, which means day-to-day responsibility for ensuring that the hospital runs efficiently. The combined role means that I have great exposure to the entire workings of the hospital and it presents a wonderful opportunity to drive innovation.

I feel privileged and proud to represent the Nurses in the organisation at the various health service and Board meetings.

I have learned a lot more about the organisation and how it all fits or works together. I enjoy bringing people together to solve organisational issues and watching people grow through the various experiences and opportunities that I am in a position to facilitate.

I am responsible for the standard of Nursing within the organisation and for ensuring that the Nurses contribute in a meaningful way to the needs of the organisation as a whole.

I guess I am also an ambassador for the hospital. I need to make certain that there are enough Nurses, and I take this seriously. People are attracted to organisations that have good leadership and I work hard to ensure that we have a good team and that all Nurses in the organisation have opportunities to demonstrate leadership, both inside and outside the organisation.

I also enjoy working with the doctors and allied health professionals to ensure that the professions do not work in isolation.

I had varied experience prior to this appointment, undertaking roles that have been particularly challenging and have moved me out of my comfort zone. All of them prepared me well for the Director of Nursing/Director of Operations role. I have been a Nurse Unit Manager, a Project Officer, a Deputy Director of Nursing, a team leader and I have held roles on specific taskforces, as well as corporate
positions. Most of these roles related to working with people to effect change and I have really enjoyed these roles.

Along the way, I have undertaken numerous development opportunities, including a Masters, and I have many connections with external groups and professional colleges.

Tricia
– Homeless Persons Program

As a Nurse working in the community, I start with what the client sees as the issue. It may not be a health issue. It could be a legal issue or a housing issue.

My position is based in a day centre which targets individuals and families who are experiencing homelessness. As a member of a team, I provide hands on care, as well as resourcing and referring clients to welfare, housing or specific health services. The program works from a social health model with clients who are very isolated from their family and the community.

My job is flexible and responsive to clients’ needs. The role is holistic. As a Nurse working in the community, I start with what the client sees as the issue. It may not be a health issue. It could be a legal issue or a housing issue. Our team of Nurses all come from different backgrounds and there is respect of our differences, so we are free to be ourselves and the diversity of our skills is utilised. My background in Nursing is diverse. I have worked in emergency departments in remote Australian communities and in developing countries. The ad in the paper for this role interested me, as I had liked working with this client group during my training in an inner Melbourne hospital. I have worked in two different settings in the program, which are mostly clinic based, but there are also outreach positions that go looking for clients in their environments.

This is a challenging, but immensely rewarding job.
People skills were mandatory as we were dealing with the residents and their families on a long-term basis.

Anne - Aged Care Nurse, PhD Student

I found myself attending local and international conferences, and even presenting the work that I had been involved in. Having this broader approach to my work has helped me to see that there are many areas which could be improved in residential care. I became fascinated with the way Nurses managed pain in those people who couldn’t verbalise clearly. I am now enrolled in a PhD, researching that very topic.

Our population is ageing and I think Nurses with expertise in aged care will play a vital role in the future of Nursing. Apart from obstetrics and paediatrics, acute care facilities are mostly filled with people who are 70-plus years. We need more Nurses with advanced aged care skills to carry us forward. I think it is great that I’m going to be a part of that.

Cathy - Intensive Care Nurse

Quite early in my Nursing career, I decided to develop my capability to manage critically ill people and emergency situations, so I completed a post-registration course in critical care. In those days, it was conducted by a large metropolitan hospital. Now, Registered Nurses complete a postgraduate certificate or diploma at university to specialise in Critical Care Nursing.

I have worked for many years in critical care and related areas in a number of different roles, including Clinical Nurse Specialist, Associate Charge Nurse, Unit Manager, Research Nurse, Clinical Coordinator, Clinical Educator and Clinical Consultant liaising with general ward areas.

I have a family now, but I continue to work night duty two days a week, and I am completing a Masters degree part-time.

Critical Care Nurses are part of a multidisciplinary team which cares for patients with complex and life-threatening conditions. I care mostly for patients following serious trauma, such as head injuries, cardiac or respiratory failure and patients following major surgery, such as cardiac or neurosurgery.
The work involves managing patients dependent on advanced medical technology and life support systems, including ventilators, cardiac monitors, balloon pumps, bypass machines and dialysis. Patients' lives depend on our assessment and technical skills and clinical judgment.

We also provide support to patients and their families. Critically ill patients often can't communicate verbally, so their Nurse has to anticipate their needs and facilitate communication using non-verbal techniques.

Critical Care Nursing is challenging and demanding, but rewarding and satisfying too. It is never dull, as an emergency situation may be only a minute away, and our job is to be prepared, anticipate and intervene quickly and efficiently.

There is something quite gratifying about seeing former patients return to the unit to thank us, and to see them recovering.

My strengths and skills are really suited to this area and my contribution is valued and respected by the other members of the health team.

There are many opportunities to pursue a career as a Critical Care Nurse and many different pathways within the one specialised area of practice.

Sue – General Practice Nurse

We get to know our clients who need regular care pretty well and we always try to provide a friendly and professional environment...

I've worked in the same general practice (GP) clinic for a number of years and I enjoy the pace and variety of the work. It's perhaps not as busy as an acute hospital, but it is busy in a different kind of way – and I don't work night-duty shifts or weekends, which suits me.

People in the community rely on GP clinics to provide a comprehensive health service, so it is important that we focus on building strong relationships with our clients, as well as with other local health services. We get to know our clients who need regular care pretty well and we always try to provide a friendly and professional environment, even when it's really busy and the waiting room is full.

I work as part of a team that includes the GPs (doctors), GP Nurses, a Nurse Diabetic Consultant, the Practice Manager and other health practitioners, such as a Clinical Psychologist.
This clinic is located in a metropolitan community which has a lot of older people with complex needs. The GP Nurses have an important role providing ongoing monitoring and management of chronic conditions, such as diabetes, high blood pressure and heart problems. GP Nurses in this clinic provide the first level of care as people arrive and over the phone. Sometimes, young people ring with health concerns and (if they don't feel comfortable talking with their parents) we give advice and refer them to other services as needed.

GP Nurses have to be multiskilled with a broad knowledge base. If a child comes in with acute asthma, for example, I assess their condition and start up a ventolin nebuliser. My role includes wound management, blood pressure monitoring, pathology tests, ECGs and I also manage groups of clients with chronic conditions, according to their care plans. I provide vaccinations to children and follow up on women's health screening, like repeat PAP tests.

I also assist in the administration side of the practice, managing records and test results, stock control and ordering. To ensure the quality and safety of our service, I also have an important role in infection control and occupational health and safety in the practice.

Every day is different, because you don’t know who will walk through the door. Sometimes we get acute emergencies like people with chest pain, bleeding injuries or acute asthma, so we have to be prepared to act quickly.

In a busy clinic like this one, my biggest challenge is keeping abreast of the many changes in health management in the community and the Medicare system. It's really important to be a member of professional organisations and to have current up-to-date knowledge and skills, so I am always learning and developing. It's very rewarding!
Because there are so few doctors out there, you get to use all your skills, and gain knowledge from other members of the team. It can be a great learning environment.

Working at Tennant Creek really set me up for my future clinical work as a Remote Area Nurse (RAN) in an Aboriginal Community. I spent a number of years working with a team of Aboriginal Health workers and an experienced RAN, and while the clinical component was important, so too was the ability to work and live within the cultural environment. I cannot stress how important this is. Western behaviour in health is culturally unimportant in an Aboriginal setting. You are in a different world and none of your value systems are relevant. In fact, it can get you into a lot of trouble, so you need a cultural advisor and educator to ensure you are culturally aware.

I have completed short courses on Remote Area Emergency Management, Sexual Health, dealing with aggressive clients and staff, Mental Health Crisis Management, Immunisation Provision and a graduate certificate in Information Systems. As a RAN you can become isolated, so it is important to link into continuing professional development and training opportunities.

Bruce
– Remote Area Nurse

...You are in a different world and none of your value systems are relevant. In fact, it can get you into a lot of trouble...

After completing my training, I spent a number of years in theatre, obtaining an Operating Department Certificate from Guys Hospital in London. I then completed my Midwifery training in Darwin, before starting work at Tennant Creek Hospital.

My background gave me the skills to deal with big and small situations, and a good basic set of skills to fall back on. Working in a small outback hospital gives you an opportunity to learn all the diagnostic skills you need.
I was a Registered Nurse before becoming a Midwife and wanted to specialise in paediatrics, so the first step was to do my Midwifery. I never returned to Nursing. Once I had experienced Midwifery I knew it was a very different role to that of the Registered Nurse, and it was the career for me. A lot has changed since then and you can now become a Midwife without being a Nurse first.

There are many different roles and areas that a Midwife can work in, and many hospitals and health services now encourage Midwives to use their full range of skills, rather than being a specialist in one ward area. That means that one day you may be working in the birthing suite helping with births, and the next day you are out on the road visiting new mums and babies in their homes.

Midwives look after women during pregnancy with check-ups, help women in labour, teach childbirth education to parents, look after families after birth and assist with breastfeeding. There are not too many jobs where you can do so many different things. It never gets boring.

The best thing about being a Midwife is working with women in a normal life event. It is such a privilege to watch and be with women as they manage their labour, be a part of a birth and to see the new family in their first moments together. It is the sort of job where you can go home almost every day knowing you’ve made a huge difference in someone’s life!

Support Organisations

The Australian Nursing and Midwifery Council (ANMC) promotes high standards of Nursing and Midwifery practice. It oversees standards of competency, develops policy, provides advice and represents the collective voice of Nursing and Midwifery regulatory bodies.

Each state has its own Nurses’ Board (or Nurses and Midwives Board), which provides advice, screening, registration and monitoring of every Registered Nurse and Registered Midwife within its borders.

The Australian Nursing Federation (ANF) is the union body representing Nurses in Australia. There are also smaller state-based unions for Nurses and Midwives.

The National Nursing Organisations (NNOs) is a coalition of organisations representing specialist and generalist Nursing groups. It provides a forum to discuss, consult and develop the direction of Nursing and Midwifery, as well as acting as a lobby group at a national level.

The Congress of Aboriginal and Torres Strait Islander Nurses (CATSIN), promotes the status of indigenous Nurses and provides support on a broad range of issues, as well as liaising between members and appropriate professional bodies. It encourages and supports indigenous Nurses’ participation in Nursing research, thus promoting indigenous perspectives.

CATSIN also lobbies for recognition of the unique contributions and commitment of indigenous Nurses in the area of health, as well as acknowledging the cultural expertise and knowledge that indigenous Nurses contribute to the health industry and Nursing profession.

The Australian College of Midwives (ACM) is the peak professional body for Midwives. The College strives to maximise the quality of Midwifery and maternity care for Australian women and their families through providing a unified political voice for the Midwifery profession.

The College also supports Midwives to reach their full potential by setting professional practice and education standards, while ensuring that all childbearing women have access to continuity of care by a Midwife.

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//The GP Nurses have an important role providing ongoing monitoring and management of chronic conditions...//

Sue – General Practice Nurse
Acknowledgments

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This booklet is one of a series produced by GCA and intended for use by Careers Advisory Services in Higher Education in Australia. The booklets will also be of interest to secondary students and others considering further study.

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