



Language proficiency and nursing registration



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ARTICLE INFO

Article history:

Received 28 August 2014

Received in revised form 7 January 2015

Accepted 12 January 2015

Keywords:

Communication

Language testing

Nursing registration

Policy

ABSTRACT

This discussion paper focuses on English proficiency standards for nursing registration in Australia, how Australia has dealt with the issue of language proficiency, and the factors which have led to the establishment of the current language standards. Also, this paper will provide a comparison of the two language tests that are currently accepted in Australia (OET and IELTS), including the appropriateness of these tests and the minimum standards used. The paper will also examine the use of educational background as an indicator of language proficiency. Finally, communication-based complaints in the post-registration environment will be explored, and some discussion will be provided about why pre-registration measures might have failed to prevent such problematic situations from occurring.

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What is already known about the topic

- Clear communication is essential to patient care and the healthcare team.
- Language difficulties among international nurses are seen in many countries.
- There are international variations in how language proficiency is addressed at a policy level for registered nurses.

What this paper adds

- This paper outlines how English language proficiency is assessed for nursing registration, focusing on the Australian context, explaining how the current standards were developed and how these compare to various other countries.
- This paper evaluates the language tests used in Australia, including their points of difference, and the validity of language tests for the nursing context, i.e. with language

skills being a core pillar, rather than the sole contributor, of communicative competence.

- This paper evaluates the use of educational experience as a means to establish language proficiency in Australia, including the pros and cons of the educational pathway, the assumptions about language skills, and how this pathway can be used to avoid standardised language tests
- This paper examines the issue of language proficiency standards, focusing on the Australian context, and provides a discussion of the rationales, minimum requirements, drawbacks, and implementation of standards.

1. Language proficiency and nursing registration: discussion paper

Internationally, it is important to have language testing for both immigrant nurses and graduating international students who have studied nursing and wish to work in their country of residence. Proficiency testing of foreign nursing graduate's language has been a concern since the mid-1970s in the USA (Powers and Stansfield, 1985: 21–22). In Australia, language testing of overseas nurses has been in place since at least 2000 (Wickett and McCutcheon,

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2002: 47). Australia has a large migrant population, with 44% of the population either born overseas or having a parent born overseas (Xiao et al., 2014: 641). By 2007, approximately 15.5% of the nursing workforce were trained outside of Australia (Xiao et al., 2014: 641), and currently about 30% of international students with an Australian nursing qualification will enter the Australian nursing workforce (HWA, 2012: 51). English is not necessarily the first language of Australian nurses, so it is certainly a concern that there may be a language barrier between patients and healthcare providers which may contribute to poor health outcomes. This paper explores the English language proficiency standards found in Australia, evaluates the two methods used to demonstrate English language ability, and examines how post-registration language problems in the workplace have been regulated.

The Nursing and Midwifery Board of Australia (NMBA) is the single national body that governs the various State and Territory Nursing and Midwifery Boards. The NMBA registers nurses, develops standards, and handles complaints, among other duties. One of its main roles is to protect the public, so communicative proficiency is a prominent feature in the NMBA's (2010: 8–9) 'National competency standards for the registered nurse', particularly under sections 9.1, 9.2, 10.2, and 10.3. In the standards, the direct references to language and communication skills are (NMBA, 2010: 8–9):

- demonstrates the necessary communication skills to manage avoidance, confusion, and confrontation
- ensures that written communication is comprehensive, logical, legible, clear and concise, and that spelling is accurate
- communicates effectively with individuals/groups to facilitate provision of care
- uses written and spoken communication skills appropriate to the needs of individuals/groups.

Thus, Australian registered nurses are expected to have a range of effective communication skills which are appropriate to different contexts, and to possess good written and verbal skills that allow information to be conveyed to patients and to initiate/maintain rapport with others. A good grasp of English – especially grammar, syntax, vocabulary, and fluent spontaneous speech – is a prerequisite for these communicative skills to be possible.

These linguistic expectations have been formed as a result of an ongoing problem of poor language skills impeding the provision of quality health care. In one Australian study, internationally-educated health professionals with linguistically-diverse backgrounds expressed how communication issues negatively affected patient care and the general working atmosphere (Clayton et al., 2014: 4). Another Australian study found that immigrant nurses' language and communication issues placed stress on healthcare teams (Xiao et al., 2014: 646). Similar problems were reported in a review of the Canadian healthcare environment which found that internationally qualified nurses' language and communication issues were the greatest challenge faced by employers and that communication barriers caused frustration and confusion among staff

and patients (ANMC, 2009: 14). In the UK, changes were made to increase language proficiency standards after public consultation, British Council evidence, and patient lobby groups who sought better English language proficiency requirements for nurses, since poor English was found to be a safety risk to patients' health (Smith, 2009: 5).

Currently, proof of English language skills is required as one element of the application for nursing registration in Australia (NMBA, 2014a: 1). This requirement applies to both native and non-native English speakers and those trained to be a nurse in either Australia or overseas countries. In setting language proficiency standards, the NMBA (2011a: 1) assert their commitment to best practice regulation and protection of the public by ensuring that its practitioners have effective English language skills. The current language standards were formed as a result of community and professional consultation, and were guided by the desire to be fair and reasonable but also safe (NMBA, 2011a: 2). The guiding principles include (NMBA, 2011a: 2):

- an ability to implement the registration standards effectively
- the establishment of a rigorous registration standard that can be understood easily
- national consistency and alignment, where possible, with the registration standard on English language skills of other National Boards
- the protection of the public.

The result is that Australia recognises two main methods of establishing English language proficiency for nursing registration: having an extended educational background conducted in the English language, or through an English language proficiency test. Once registered with the national body, a nurse will typically interview for employment, and commence working without further linguistic induction being provided by the workplace.

There are three exceptions to the need to demonstrate English language proficiency. The first is for applicants who have previously held, or currently hold, nursing registration in Australia (NMBA, 2014a: 2). The second is for applicants who hold current registration as a nurse in New Zealand, which has a special agreement in place (NMBA, 2014a: 2). The third is for applicants who can provide compelling evidence of their language proficiency that shows it is equivalent to the required standard (NMBA, 2014a: 3). It is unclear whether this pathway has ever been used by the NMBA, although this clause does allow future latitude in policy for atypical or unusual applications to be successfully processed.

In the next section, we will look at language testing (including overseas comparisons), the differences between the tests, and the appropriateness of these tests.

2. Language tests

Standardised language tests are objective, applicable across time, place, and individuals, and are not prone to the problem of significant score variation between assessors. Standardised language tests satisfy the principles of being

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