

# The Evaluation of a Dual Nursing/Paramedic New Graduate Recruitment Model: The graduate experience



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## Introduction/Aim

- Bachelor of Nursing/Bachelor of Paramedicine (BNBP) dual degree graduates can register with both the Nursing and Midwifery Board of Australia and the Paramedicine Board of Australia.<sup>1</sup>
- Graduates may face challenges maintaining dual registration due to limited opportunities to practice both roles simultaneously.<sup>2</sup>
- Metro North Hospital and Health Service (MNHHS) and the Queensland Ambulance Service (QAS) initiated a 22-month pilot New Graduate Recruitment Model, enabling BNBP graduates to rotate between working in emergency departments (ED) and on-road for QAS.
- This qualitative evaluative study aimed to explore the experiences of BNBP graduates undertaking the pilot program

## Methods

- Cross-sectional qualitative approach using Braun and Clarke's six step Reflexive Thematic Analysis<sup>3</sup>
- Participants were contacted by QAS, and volunteered to take part in the study
- Semi-structured interviews (N = 4) i.e. 50% of the total cohort (N = 8) who completed the program.
- Inclusion criteria - Australian BNBP university graduates undertaking the MNHHS and QAS New Graduate Recruitment Model in 2023/2024
- ACU HREC (2024-3747E) and industry research approvals were obtained

## 1. Onboarding

- Participants applied for both jobs separately and didn't know the program existed.
- Were accepted into the program with little notice and didn't have time to establish pre-conceptions
- Differences in onboarding were apparent between QAS and MNHHS ED. The QAS induction was longer and more structured, the MNHHS ED process involved a shifts with a nurse educator
- The system involved work buddies who shared a roster between QAS and MNHHS on a week about basis
- In ED they started in fast-track and progressed to acute, and had nurse educators 'on tap'
- With QAS, they were exposed to all case types, and relied heavily on their preceptor for guidance
- Rostering issues became apparent as neither organisation could see the others' rostering
- There were challenges in taking more than a weeks leave
- Two different enterprise awards and 'two bosses to appease', and ambulance work paid better

## Results/Themes



## 2. Enculturation and Socialisation

- Two different workplace/professional cultures
- Better acceptance in ED than nurses in non-ED roles, or from their experiences with nursing placements as BNBP students
- Ambulance culture focused on skills proficiency, and the rumour mill makes or breaks reputations
- ED culture focused more on the importance of time management, problem solving and routines
- Greater team assistance in ED with nurses, doctors, physios, orderlies ... etc whereas with ambulance it was you and your preceptor
- The transition to practice in ambulance was perceived to be much harder
- ED processes were very structured, with many skills signoffs required to progress to working in resus, but with QAS, they were exposed to all case types including significant trauma, deteriorating patients and cardiac arrests from the start
- Had overinflated expectations from managing critical cases with QAS, and when finally working in resus realised how out of their depth they were
- The 'I've made it' moment was wearing qualified epaulets with QAS, and in ED it was working in resus

## 3. Navigating Between Roles

- The cognitive load was initially intense swapping between roles
- Transferable skills eased the role transition
- Greater exposure to more 'sick' patients in ED improved clinical knowledge and their QAS practice
- Greater understanding of the health system and saw ramping from both sides
- Better understanding around non-conveyance, and knowledge about definitive care hours/days downstream after the initial ED presentation
- Many skills and acronyms used in ED were taught in the paramedic component of the BNBP degree such as PQRST & SAMPLE, as well as cannulation, i-gels and nose-to-toes patient assessment
- The nursing curriculum did not cover much ED content in the BNBP degree
- Believed they accelerated to practice at a faster rate in ED than their BN graduate colleagues
- Frustration at the inflexible structure of ED transition and skills signoffs

## Research Translation to Paramedicine

The research focuses on a large ambulance service and hospital and health service's innovate pilot program to utilise the untapped potential of dual qualified nurse/paramedic graduates and clinicians

## References

- 1 Australian Catholic University. Bachelor of Nursing/Bachelor of Paramedicine - Course Information. 2025
- 2 Devenish, S., A. Rolley, and D. Long. Investigating Career Intentions of Undergraduate Paramedic Students Studying in Queensland, Australia. Australasian Journal of Paramedicine, 2020. 17: p. 1-6.
3. Braun, V., & Clarke, V. (2022b). Thematic analysis: A practical guide. 2013, Sage Publications Ltd.

## 4. Future Recommendations

- Graduates recommended that the model be continued
- They were grateful they had the opportunity to complete the dual role transition to practice model
- Found the program incredibly valuable and felt well supported in both professional roles
- There was no formal dual role available at the end of the recruitment model, and they needed to drop to fractional or casual to keep both roles going
- They recommended better communication between organisations for rostering and suggested a liaison role would be beneficial
- They were exhausted, not having a good holiday over the 22 months as two organisational leave processes needed to align
- Recommended two week about blocks or pre-arranged leave blocks for future iterations of the program if it continued
- Developing resilience and maintaining personal wellbeing were more difficult than they had anticipated

## Conclusion

This research explored the experiences of BNBP graduates undertaking a new dual nursing/paramedicine recruitment model with MNHHS and QAS. It offers insights for dual-degree graduates, academic institutions and healthcare employers, highlighting the model's potential for broader application and enhancement of the dual-degree transition to practice process.

## Acknowledgements

A/Prof Paula Schulz – ACU Head of School, SoNMP QLD/ACT  
Dr Caitlin Fitzgibbon – Senior Lecturer, Paramedicine ACU Melbourne  
Robyn Dickie – Senior Lecturer ACU Nursing Brisbane  
Prof Alanna Geary – Chief Nursing and Midwifery Officer MNHHS  
Christine Burrigge – Former Nursing and Midwifery Director of Education MNHHS



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