Academic support for enrolled nursing auxiliaries following the adoption of the National Qualifications Framework

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DECLARATION

I, Tebogo Baipidi Auditte Titus (Student number 20915586), declare that the mini-dissertation with the title:

Academic support for the enrolled nursing auxiliaries following adoption of the National Qualifications Framework is my own work and that all the sources that are used, have been indicated and acknowledged by means of a complete referencing method.

T B A Titus

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Tebogo Baipidi Auditte Titus March 2018

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LIST OF ACRONYMS /ABBREVIATIONS

DHET	Department of Higher Education and Training
ENA	Enrolled Nursing Auxiliaries
HWSETA	Health and Welfare Sector Education and Training Authority
NDOH	National Department of Health
NQF	National Qualifications Framework
RAN	Registered Auxiliary Nurse
RPL	Recognition of Prior Learning
SANC	South African Nursing Council
SAQA	South African Qualifications Framework
SETA	Sector Education and Training Authority
WHO	World Health Organisation
WP: PSET	White Paper for Post -School Education and Training

ABSTRACT

Background: The study focused on the changes of nursing education in South Africa, which was aligned to the international standards post 1994. The results were that nursing education and training would then be incorporated into the Department of Higher Education since the National Qualifications Framework classified the levels of education from level (1) one to ten. Unfortunately, the Department of Higher Education in South Africa had its entry level at level (5) five, above that of the current enrolled nursing auxiliaries who are the lowest category in the hierarchy of nursing. Therefore, this higher education framework excludes the enrolled nursing auxiliaries, as they are classified as level (3) three. Certainly, these para-professionals will remain excluded in the higher education band and will need academic support following the adoption of the national qualifications framework. Clearly there are limited opportunities available for academic support to the enrolled nursing auxiliaries following the adoption of the national qualifications framework.

Purpose: The purpose of this study was to explore and describe the academic support that is required for enrolled nursing auxiliaries following the adoption of the national qualifications framework; as well as recommendations for stakeholders involved in the education and training of enrolled nursing auxiliaries in bridging the competency and theoretical gap.

Design: The research study followed a qualitative explorative approach. The population included documents on nursing transformation and national qualifications framework in relation to the lowest category in the nursing hierarchy structure. The documents were selected through purposive sampling, based on the above description. The sample size was determined by means of data saturation. The data was selected through documents, the contents were analysed by an open coding method. Data was broken down, closely studied and compared for similarities and differences whereby enquiries were then reflected on academic support for the enrolled nursing auxiliaries.

Findings: Three themes and nine subthemes were identified as they emerged from the data. It was noted that the enrolled nursing auxiliaries would require support through promotion of learning by the principle of recognition of prior learning. They would need to bridge the competency and theory gap through a broadened scope of

knowledge. The acquired knowledge would result in the need to acquire independent supervisory responsibilities. Although there are other support measures stated in the recommendations, collaboration with Sector Education Training Authorities came up as the main support to the stakeholders.

Conclusions: Recommendations for academic support of enrolled nursing auxiliaries following the adoption of a national qualifications framework were formulated from the research findings. There were additional recommendations to stakeholders involved in the training and education of enrolled nursing auxiliaries in order to bridge the competency- and theory gap.

Key words: enrolled nursing auxiliaries, academic support, national qualifications framework

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CHAPTER ONE: OVERVIEW OF THE STUDY

1.1. Introduction

Chapter one provides the outline and rationale for conducting this study. This Chapter commences with the introduction and background of the study, followed by the problem statement; aims and objectives of the study. The research questions and the significance of the study are also elaborated on. This is subsequently followed by the discussion and demonstration of the research methodology employed in the study.

The study focused on the enrolled nursing auxiliaries (henceforth ENA) as a lower category in the levels of training and qualifications of the nursing professions recognized by the South African Nursing Council (hereafter SANC). This study explores the academic support that is required for the ENA following the adoption of the National Qualifications Framework (henceforward NQF).

1.2. Background

The consequences of the apartheid system are clearly seen in the education and training curriculum framework of nursing (South African Nursing Council, 2009:1). Nursing in South Africa was previously known to provide access to marginalised individuals with minimal access to formal education (SANC, 2013:11). Since 1994, nursing education has undergone what can be termed as a qualification journey, due to the higher education transformation. The World Health Organisation (WHO) prescribed that there must be a production of competent nurses whereby South Africa aligned itself to the call (WHO, 2009:14). Noteworthy to mention is that this phenomenon of transformation is not limited to South Africa only but is a global endeavour. To elaborate, in Australia the transformation of nursing education led to the scope of practice being reviewed to maintain competency and improved quality care (Ruth, Barnet, Sellick & McKenna, 2013:155-163). Adding to this, since 1960

Nigeria has experienced transformation in nursing education and training. The evolution of Nigeria's non-formalised structure of training of nursing from semi-skilled to skilled and certificated nurses who can independently nurse patients, happened during the transformation of their nurse training programme (Dolamo & Olubiyi, 2013:14-21). Hence, the researcher saw it fit to explore the academic support that is required in the South African context for the ENA following the adoption of the NQF.

Furthermore, in South Africa, basic nursing education and training was transformed from hospital based training to higher learning institutions based training (Blaauw, Ditlopo & Rispel, 2014:2). Before this transition, nursing candidates were awarded with higher certificates after completing the basic nursing course through in-service training in the hospital training environment, that enabled them to be registered with the South African Nursing Council (SANC) as Enrolled Nursing Auxiliaries(ENA's) (Blaauw *et al.*, 2014). It is for this reason that a shift from the hospital based traineeship model, to professional education in institutions of higher learning is enhanced by these processes.

The ENA's are the lowest category in the levels of qualifications and registrations of the nursing profession at the SANC. The admission criteria to train as an ENA are stated in the government regulation R.2176. According to R.2176, the minimum requirement is that a candidate should have at least completed a standard (8) eight or grade 10 level of education. The training category of the ENA's was not formalised but was based on in-service training after which they were certificated (Bezuidenhout *et al.*, 2013). The duration of training was not consistent and standardised. Therefore, the standardization of this qualification became important with the promulgation of the current Nursing Act (Act 33 of 2005).

In addition, the Nursing Act (33 of 2005), states that the SANC controls and exercises authority in respect of all matters affecting the education and training of registered nurses, midwives, enrolled nurses and enrolled nursing auxiliaries. An ENA is a person who is enrolled with SANC under the Government Notice R.2176 and is trained at the hospitals that have been accredited by SANC.

The guidance on nursing education transformation was based on acts and regulations as promulgated by the SANC. Importantly, the South African Qualification Authority Act (58 of 1995), supports the transformation of education and

training which is in line with international norms. With South Africa's historical background were the minority benefited at the expense of the majority, more should be done to ensure the accessibility of training and qualifications to all levels of society (SAQA, 58 of 1995). Equally, it is crucial to align with international standards to ensure compatibility and consequently the recognition of South African qualification (SAQA, 58 OF 1995) on an international level.

Ultimately the aim of the National Qualifications Framework Act (NQF) 67 of 2008, is to enhance the quality of education and training. SAQA described all levels of the NQF to ensure coherence in learning and achievement. Another objective of the NQF is to facilitate access, mobility and progression within education. This would be accomplished by Recognition of Prior Learning (RPL) as stated by SAQA. The main function of RPL is to facilitate a career path to individuals who were previously disadvantaged which is explained through a process used to support the individuals whereby non-formal and formal learning are measured and mediated for recognition and certified for "credits, access, inclusion, or advancement" in the formal education and training system or workplace (SAQA, 2013:5).

Nursing education after 1994 emerged with higher education outlining support strategies to the principles of NQF (Bezuidenhout *et al.*, 2013). The result was level descriptors for the NQF which positioned the ENA's on level three (Blaauw *et al.*, 2014:6) and thus excluded them from the higher education band.

As a result, the phasing out of legacy courses and phasing in of NQF-levelled qualifications was pronounced by SANC through a circular (Circular 3/2009), announcing implementation of the new nursing qualifications registered on the NQF. The circular further mandated the nursing colleges to offer legacy qualification courses for ENA's until 30 June 2015. The main reason for terminating training was to pave way for the new legislation. The legacy courses were defined as courses that were inherited prior to 1994. Furthermore, in the circular (13/2014), SANC stated that there has been an oversupply of ENA's.

This reported overproduction of nurses is revealed by a survey that was done by the SANC on the recently qualified enrolled nurses and ENA's (SANC, 2016). The study continues to emphasise that the average employability is low for the ENA's irrespective of where they are trained. These study findings reported the average

percentage rate of unemployed of ENA's was found to be 75, 63%. The MEC of Health for Kwa-Zulu Natal province, Dr Sibongiseni Dhlomo is being mentioned confirming that there has been an overproduction of nurses that were unemployable in the province (Ndaliso, *Daily News: 2015*). This survey's results recommend that this category of nurses need to be retrained under the new qualification framework so as to be equated to NQF-level five. This clearly provides a need for the researcher to embark on this study by exploring the support available for the enrolled nursing assistants.

1.3. Problem statement

The previous discussion emphasises that nursing education in South Africa transformed for the better, but unfortunately with noticeable weaknesses. It is noted that the entry level nurse category, Registered Auxiliary Nurse (RAN) are trained on NQF-level (5) five. This means an Auxiliary nurse will qualify as a Registered Auxiliary Nurse as per regulation R.169 which at the end provides that the candidate will receive integrated education on the theory and clinical outcomes. After obtaining the qualification the enrolled nurse assistant will have an independent practitioner role on an elementary level where nursing care is planned and initiated by a registered nurse or registered midwife and carried out under his/her direct or indirect supervision (R.169). This has resulted in Enrolled Nursing Assistants (ENA's) who have been trained prior to the transformation, being left out in the whole process, as this category is classified as a NQF-level (3) three and these ENA's work under the direct supervision of the professional nurse. The phasing out of legacy courses entails that a candidate on SANC regulation, R.2176, is excluded from the NQF as it is a level (3) three qualification (Bezuidenhout *et al,* 2013). The exclusion from the NQF is exacerbated by the contents of the training programme. Ultimately there is a difference of two levels between the ENA's training and that of RAN's.

As a registered nurse and nurse manager in a clinical setting, I observed that ENA's became concerned, demotivated and uncertain about their future due to the developments and new processes on the phasing in of the NQF due to both clinical and theoretical gaps. These uncertainties are realised through the increased shortage of staff, ENA's being stagnant on their level, and an inability to further their studies as they require full time study leave whilst earning a salary. This is a concern

as it was found in the survey conducted by SANC (2016:4), that there is a "need to train these categories under new nursing qualifications".

Therefore, the researcher endeavoured to explore the academic training gap between the NQF level (3) three and (5) five qualifications and recommend academic education and training to support the ENA's in bridging in the competency and qualification gap following the adoption of the NQF level (5) five qualifications.

1.4. The Aim of the study

The aim of this study was to explore the academic training gap between the qualifications for the Registered Auxiliary Nurse and the Enrolled Nursing Auxiliary and recommend academic education and training to support the ENA's in bridging the academic training gap following the adoption of the NQF level five qualifications.

1.5. Research questions

- What academic support is required for current ENA's following the adoption of the NQF level five qualifications?

- What academic support recommendations can be made for stakeholders involved in education and training of ENA's to bridge the competency and theoretical gap?

1.6. Objectives of the study

The objectives of the study were to:

- Explore the academic support required for current ENA's following the adoption of the NQF level five qualification, and

- Propose academic support recommendations for stakeholders involved in education and training of ENA's to bridge the competency and theoretical gap.

1.7. Significance of the study

The study is significant because it sought to identify gaps and opportunities that can be explored to:

- Assist in the transition period when training of the new group commences, and support the processes for the legacy curriculum candidates following the adoption of the NQF;

- Find ways of filling in a missing qualification and competency gap, between the NQF level (3) three which classify the ENA's and a level (5) five of the Auxiliary nurses, as there is a missing NQF level (4) four;

- Assist the policy makers to create and enable conditions that seek a proper implementation that will assist ENA's in nursing education and training issues regarding adoption of the NQF.

1.8. Central theoretical statement

The central theoretical statement of this study was exploring academic support for the enrolled nursing auxiliaries following adoption of the National Qualifications Framework, including the recommendations made by the stakeholders who are involved in nursing education and training will lead to the bridging of the competency and theory gap in order to support the enrolled nursing auxiliaries

1.9. Research design and methodology

The research design and methodology are discussed briefly in this Chapter and a more detailed discussion follows in Chapter Two.

1.9.1. Research design

The research methodology is the way in which a study is conducted, and it comprises of description of the population, sampling, sample size, data collection

plan and the data analysis (Polit & Beck, 2012:62). A comprehensive discussion of the research method follows in Chapter Two.

- Population

Brink *et al.,* (2012:131) and Botma *et al.*, (2015:200), define population as a group of persons or objects that are of interest to researchers or the group or objects that meet the criteria set for a particular research study. In this study, the population are documents that are outlined the academic support for the enrolled nursing auxiliaries following the adoption of the National Qualifications Framework.

- Sampling

Brink *et al.* (2012:132) defines sampling as; the procedure that researchers follow to select a sample from a population in order to obtain information on a phenomenon. In this research, the researcher used purposive sampling to select participants. Inclusion and exclusion criteria were used to select the sample for this research study (Botma *et al.,* 2015:200).

- Sample size

A sample size is determined through data saturation (Botma *et al.*,2015:200). The saturation of data is reached once the amount of information is repeated, and no new information can be extracted from the instruments.

- Data collection

Document analysis will be used, which is a systematic process that reviews printed and electronic documents (O'Leary, 2014). The existing documents will assist in giving deeper meaning regarding the topic, thus the most appropriate method of gathering data for this research was document analysis.

- Data analysis

The steps will be used to systematically analyse data (de Vos *et al.,* 2011:410). Data will be further be open. The categorised information will be broken down, examined, compared and conceptualised (de Vos *et al.,* 2011:410). Themes and sub-themes will be used to present the collected data.

- Measures to ensure rigour

Brink *et al.,* (2012:97) explain that the principle of trustworthiness in qualitative studies is vital. In qualitative studies, researchers always try to understand and obtain knowledge. In order to ensure rigour, (3) three criteria will be used; credibility, dependability and confirmability will be used. A detailed discussion follows in Chapter Two.

- Ethical considerations

The study poses no risk, as neither humans nor animals were used in this study. However, permission and clearance to the documents were obtained before the documents were published. The proposal was presented at the Departmental level (School of Nursing Science), whereby the research experts scrutinised the research proposal during a formal public defence.

1.10. Definition of concepts

1.10.1. Academic support

Academic support comprises of methods and educational standards provided to students to help them to meet set learning standards and outcomes. Athal & Kumar (2016) argues that the provision of support to students will lead to improved academic performance. This is further described by strategies used to improve knowledge and skills in the form of curriculum, rules and regulations. Academic support is required for the enrolled nursing auxiliaries, who are on the national qualifications framework level (3) three as they are excluded from the Higher Education framework (SAQA, 2012). The academic support is further required to bridge the competency and theory gap for the enrolled nursing auxiliaries.

In this study academic support means measures that can assist the enrolled nursing auxiliaries to be competent in the occupational field after adoption of the national qualifications framework. In order to achieve this, theory, knowledge and

competency gap should be bridged whilst recognising learning assumed to be in place.

1.10.2 Enrolled Nursing Auxiliary (ENA)

The Nursing Act (50 of 1978) defines auxiliary nurses as individuals who are trained to provide basic nursing care, whereby implementation of nursing acts is planned by the registered nurses and the role of the ENA is to support the plan. The duration of training is (1) one year, whereby the learner will be awarded with a certificate and be registered as an enrolled nursing auxiliary. The production of this class has been permanently stopped since 30 June 2015 as the level is excluded in the NQF of nursing. The training was done at the different hospitals and not standardised (Blaauw *et al.*,2014). The affiliation of the training institutions was not with the Higher education sector. Even though the training was stopped there was a need for the training of the nurses on the level, which will then be changed thereafter. This is an entry level platform in the hierarchy of nursing.

1.10.3. Registered Auxiliary Nurse (RAN)

The transformational changes that transpired, led to the Nursing Act being amended and aligned to the Higher Education changes. After amendment it became the Nursing Act 33 of 2005 which then defines auxiliary nurses as individuals who are trained to provide elementary nursing care according to prescribed levels. After completion of training, the individual who trained under these regulations will then be a Registered Nursing Auxiliary. These individuals will be registered as level (5) five on the National Qualifications Framework, after obtaining a higher certificate. The Nursing Act 33 of 2005 section 58 (1)(q) mentions that the Minister after consultation with the council, may make regulations relating to the scope of practitioners. This led to the RAN's being under Regulation No.169. The current rolls and register will be kept and be "grandfathered" as the new registers will be opened when the new scope becomes effective.

1.10.4. National Qualification Framework

The national qualifications frameworks can be defined as the rankings of trainings and qualifications defined in terms of learning outcomes. This explains a movement between the levels. Furthermore, it is defined as an outcome of learning (Allais, 2014: 15). The consequence is measured differently, as it depends on the output of work. These outcomes are also supposed to deliver a yardstick against which assessment can be conducted, learning programmes can be developed, and educational quality can be evaluated. The frameworks are defined by level of descriptors, which excluded the ENA's from the qualification band (SAQA, 2012).

1.11. Divisions of Chapters

This research project is divided into (4) four Chapters that are broken down as follows:

Chapter One introduces the study and thus gives a general overview of the entire study.

Chapter Two gives discussion on the research design and methods of data collection and the justification for the chosen design.

Chapter Three discusses the research findings as well as literature integration

Chapter Four Focuses on the study's limitations, recommendations and conclusions.

1.12. Summary of this Chapter

Chapter one discusses the introduction and background of the research study. It has also presented the problem statement, research questions and the purpose of the study. This Chapter has in addition unravelled the significance of the study, the central theoretical statement and has also defined the concepts used in the study.

CHAPTER TWO: RESEARCH DESIGN AND METHOD

2.1. Introduction

Research designs are types of inquiries within quantitative, qualitative, and mixed methods approaches that provide specific direction for procedures in a research design (Creswell, 2014:12). For the purpose of this research study, a qualitative, explorative, descriptive document analysis research design was selected to enable the researcher to explore and recommend academic support for the ENA's following the adoption of the NQF. The research method includes the population, sample, data collection techniques and analysis of data.

The study design and method are discussed in greater detail in this Chapter.

2.2. Research design

Brink *et al.,* (2012:120) states that a study design includes the entire design for collecting, analysing and interpreting the data of a research study. Qualitative, explorative approach is the design of this research study (Botma *et al.,* 2015:194). Qualitative research is a systemic approach of exploring and describing experiences of the phenomenon that is being studied (Grove *et al.*, 2013:705). It is further explained by Brink *et al.,* (2012:120) that when the boundaries are poorly understood qualitative methods should be the approach of choice to allow the researcher to ask in-depth questions that will give meaning and understanding to the phenomenon under study. Similarly, Botma *et al.*, (2015:182) state that qualitative research provides explanation through exploration. In this study, the researcher focused on documents to explore the support for the ENA's following the adoption of the NQF, hence qualitative, explorative, document analysis was the approach used.

It is also essential to note that exploratory research is conducted to seek for new knowledge when little is known about the topic and where to look for feasibility and predict problems with implementation (Green & Thorogood, 2018:18). The adoption

of the NQF in nursing is still at the implementation phase where currently little is known. De Vos *et al.,* (2011:95) observe that "a study could arise out of lack of basic information on a new area of interest". Grove *et al.*, (2013:66) point out that exploratory studies in nursing contribute in creating a programme that will intervene and benefit the population. Hence, this methodology was found to be appropriate as it would assist in supporting and addressing the qualification and competency gap. Presently the ENA's are semi para-professional excluded from the NQF, this must be explored so that there must be supporting measures to can bridge the gap. According to Grove *et al.*, (2013:692), the purpose of descriptive research is to discover new meanings on what exists and will ultimately categorise information and describe support for the ENA's on adoption of the NQF and bridging the academic gap. Therefore, the researcher employed a qualitative, explorative document analysis. The analysis was focused on relevant documents seeking to achieve the aim of the research study. This aim was to explore the academic training gap between the qualifications for the Registered Auxiliary Nurse and the Enrolled Nursing Auxiliary. The aim also entailed making recommendations on academic education and training avenues to support the ENA's in bridging the competency gap that became glaring after the adoption of the NQF level five qualifications.

2.2.1. Research Method

Research methodology refers to the way in which a study is conducted. It includes a description of the population, sampling and sampling size, the data collection plan as well as data analysis (Polit & Beck, 2012:62). The aforementioned are discussed in the next sub-sections.

2.2.1.1 Population

Brink *et al.,* (2012:131) and Botma *et al.,* (2015:200), define population as a group of objects or substances that meet the criteria to researchers in a research study. In this study, the population was the documents that focused, discussed and outlined the academic support for the enrolled nursing auxiliaries in the processes following the adoption of the national qualifications framework.

The population for the study were documents which were accessed via the internet. The search also included newspaper articles, on Google whereby the focus was the South African Nursing Council's official web page and the Department of Higher Education. This is because, the whole transformation was done based on quality assurance which is the nursing council's duty, and the Department of Higher Education official documents as the accreditation body. Lastly other searches were done through Google Scholar and theses databases. The key words that were used to source documents were: NQF, SANC implementation of nursing qualifications, nursing academic support and, Higher education and nursing.

2.2.1.2 Sampling

Sampling is defined by Botma *et al.,* (2010:199-200) as the procedure followed by researchers to select a specimen from a population in order to obtain information on a phenomenon of interest in a research study. For the purpose of this study, purposive sampling was used to collect data. Grove *et al.,* (2013:365) explain that the sampling method should enable the researcher to choose the relevant participants that would provide the most extensive information about the phenomenon. Sampling terminates "when the process generates no new references" Krippendorff (2013:119).

According to Coffey (2014) there must be conditions and principles on usage of documents. The guide for selection was the following:

The researcher must determine the author and the approver of the document. This is to ensure that establishment on authenticity of the document is maintained. Therefore, the researcher should verify that the documents were signed by the people who are supposed to.

Secondly, the period of approval should be looked at to make sure that the facts are still valid. This assists in making sure that the documents are still reliable. The documents used were less than ten years old, and as for the Acts, there are no new amendments.

Lastly; what is the function and purpose of the document? All the documents that were used focused on academic support for the ENA's and the NQF and these documents were most relevant for the study. The researcher further established the exclusion criteria prior to the selection of samples took place (Botma *et al.*, 2015:200).

- *The exclusion criteria*

Personal blogs were excluded as they are journals or diaries of individuals who are merely expressing themselves. The researcher realised that the documents that were selected, were representing the collaboration of many people who are lawmakers, thus the acts and regulations were officially accepted at the legislative sitting. The documents under study were aimed at making changes to society, and furthermore the opinions of the collective individuals were given attention through the processes on legislation that describes the processes from the green paper where drafts and opinions are noted, through until finalisation at parliament.

Wikipedia was also excluded from the population. This is because it is not a reliable source as the information can be edited at any time and most of the times the errors are unnoticed.

2.2.1.3 Sample size

A sample size is determined through data saturation (Botma *et al.*, 2015:200). The saturation of data is reached once the amount of information is repeated, and no new information can be extracted from the instruments.

2.2.2 Data collection plan

The outcome of the search diary came up with many documents. Out of all documents these documents were selected:

Table 2.1: Selected documents on search diary
1. **Higher Education Act 101 of 1997**
2. **South African Qualifications Authority Act(SAQA), Act 58 of 1995)**
3. **National Qualifications Framework (NQF) Act (67 of 2008)**
4. **Level of descriptors (SAQA,2012)**
5. **Nursing Act 50 of 1978**
6. **Nursing Act 33 of 2005**
7. **Nursing regulation R.2176**
8. **Nursing regulation R .169**
9. **White paper for post-school education and training - Building an expanded, effective and integrated post school system**
10. **The South African Qualification Authority: National implementation of the Recognition of Prior Learning**
11. **Guide for the implementation of recognition of prior learning (RPL) by Nursing Education institutions(SANC,2009)**
12. **Survey for the recently qualified Enrolled nurses and enrolled nursing assistant(SANC,2016).**

2.3. Document analysis

Document analysis is a systematic process that reviews printed and electronic documents (Bowen, 2009:27). The process is focused on studying existing documents, to come up with deeper meanings regarding the topic which is researched. De Vos *et al.* (2011:377) mentioned that documents are studied and analysed particularly when the events or experiences cannot be studied through direct observation or interviewing. Botma *et al.* (2015:219) share the same opinion with de Vos *et al. (*2011:37) namely that the use of document analysis allows the researcher to carry out in-depth investigation of systems, by analysing authentic written material.

Because the phenomenon under study primarily entails change in curriculum framework(s) which by nature is/are document(s). Subsequently, the researcher found it fit that document analysis was the method of choice to be used.

Mills and Birks (2014:40) explain that document analysis include peer reviewed and 'grey literature that is not peer reviewed', thus the peer reviewed documents are in the form of government reports, acts and regulations. In fact, government documents fall under primary ones that include public records, personal documents and physical evidence (O'Leary 2014). In this study, only public records were used. De Vos *et al.*, (2011) continue to explain that the types of documents that are maintained on a continuous basis are solely by large organisations, namely; government institutions and corporations. However (de Vos *et al.*, 2011) cautions that the accessibility of such documents might prove to be problematic at times. Important to note is that the documents that were used for this study did not pose problems to obtain. These documents are published and archived in a public database as provided for by the Bill of Rights in Chapter Two, Section 32, of the Constitution of South Africa (108 of 1996), which states that every citizen has the right of access to information including all information held by the government.

Study area

This refers to the place where the research study was conducted and where information was collected (Polit & Beck, 2017:744). As previously alluded to, this study's population was based on documents only that were all accessed via the internet.

2.3.1. Data collection and analysis

2.3.1.1 Data collection

In document analysis the researcher selects the documents that will be used in the study. The researcher further analyses written material (Botma *et al.,* 2015:219*).* The documents that were used comprised of public documents that are the Parliament of South Africa Acts and other government regulations that were in the public domain. The documents enabled the researcher to obtain the discussions of the people and

the information represents the data that the participants have given attention to (Creswell, 2014:193).

2.3.1.2 Data analysis

According to de Vos *et al.* (2011: 410) information can be reduced to coded notes to classify and give data meaning in order to make it manageable and ready to be used for analysis purposes. It is in light of this that the contents were analysed and categorised into codes that will be used as headings in the next Chapter. Codes can differ, for this study, open coding was used. The categorised information was broken down, examined, compared, and conceptualised (de Vos *et al.*, 2011:410). The information is presented by themes and subthemes for the document to give more meaning and explanation. The findings of the qualitative descriptive inquiry outlined the academic support for ENA's following the adoption of the NQF.

2.3.1.3. Steps in analysing the documents

The data collection and analysis techniques are explained in the steps of nine practical steps in analysing the documents (De Vos *et al.*, 2011:381).

The steps are as follows:

I. Formulate your research questions
II. Start a research diary
III. Find possible sources of material and begin to generate an archive
IV. Transcribe the texts in some detail
V. Critically read and interrogate the texts and documents
VI. Code
VII. Analyse
VIII. Check credibility, validity and reliability
IX. Write up

I. ***Formulate your initial research questions***

The focus research question was formulated, and it reads as follows:

- 'What support is required for the ENA's regarding phasing in of the NQF level five qualification?' followed by the next research question.
- The second research question was: 'What academic support recommendations can be made for stakeholders involved in education and training of ENA's to bridge the competency and theoretical gap?'

II. ***Start a research diary***. The search diary commenced by obtaining all possible sources. The basis of search was based on the analysis processes of the phasing in of the NQF. The focus was on the SANC's engagement with stakeholders and the sharing of knowledge. There were workshops as well as circulars that were issued for the purpose of sharing information.

III. ***Find possible sources of material and begin to generate an archive.*** The analysis of processes led to more information being required. The information was recorded by noting on a table (included in the study) and further downloading the documents used to be kept in the form of hard copies. Archived documents were also recorded and included in the study in table format. All the documents were then classified in terms of originality. The Acts, regulations and other media were all grouped accordingly. No books or other documents were used. The next step entailed:

IV. ***Transcribe the texts in some detail***

Since the documents used were already archived documents, transcription was not required. The documents were then critically read, and notes taken down so that the differences and similarities could be obtained and compared in order to identify gaps, if any. This was done so that greater understanding would give meaning. Each document was studied and analysed.

V. ***Critically read and interrogate the texts and documents***. The documents were critically read, to establish if they related to the focus questions and were reread in detail. The focus question did not change, the second research

question was also addressed. The documents that were now being read and interrogated were also recorded in a table format so that similarities and differences were noted. The researcher immersed herself in the data to identify the main points so that they could be coded adequately. This immersion in the data allowed the researcher to remain fully dedicated to the data, through ample time spent reading data and to extrapolate meaning (Grove *et al.* 2013:280). As the documents were in table format, it was easy to interrogate their contents.

VI. ***Code***. The procedure for data analysis comprises the putting together of collected data, further making the data less complex thus making it more comprehensible and understandable (Grove *et al.*, 2013: 279). As a result, open coding was done. Initially, it was challenging for the researcher as the codes were overlapping. This impression and experience is echoed by De Vos *et al.* (2011:381) who mention that it must not be a worrying exercise as the "codes can overlap". Coding is defined as a process whereby data is organised by joining texts (Creswell, 2014:197). The constant comparison method was used in developing a systematic coding scheme. De Vos *et al.* (2011:381) explains further that in open coding, analysis relates to naming and categorising phenomena through processes of "breaking down, examining, comparing, conceptualising and categorising data". Mathipa and Gumbo (2015:139) emphasise that elements of coding include defining and describing the identification of themes. Researchers in exploratory descriptive studies, analyse the text contents to describe the relation to the study (Grove *et al.*, 2013: 281). Data analysis entails a systemic way of data reduction into a manageable format (Botma *et al.*, 2015: 221). Detailed discussions will be addressed in the next Chapter.

VII. ***Analyse***. This is based on the facts that thorough examination of data frequency and regularity as it is being presented were then used. The researcher re-checked the formulated tables that emanated from the documents list to make sure that nothing important was omitted.

VIII. ***Check credibility, validity and reliability*** Brink *et al.* (2012:97) explain that the principle of trustworthiness in qualitative research is of paramount importance. To ensure trustworthiness the researcher used the three criteria as highlighted by De Vos *et al.* (2011:381-382). Trustworthiness refers to the degree of trust and confidence that the qualitative researchers have in their studies and includes the criteria of validity, reliability, confirmability and credibility (Polit & Beck, 2017:747 and Munhall, 2012:518). Three criteria were adhered to.

- The researcher compared the findings of this study with prior studies and, previous document analysis topics. These studies are included in the reference list.
- The discussion of findings was done with the supervisor.
- To avoid misinterpreting the meaning of the documents, there was reading and engaging the independent editor to make sure that the meaning from the documents is maintained.

IX. ***Write up***. The reflection is on the analysis of the findings of the study. These are fully explained in Chapter Four of this dissertation.

2.4 Ethical considerations

International ethical guidelines ensure that standards are followed worldwide. This study poses no risk, as neither humans nor animals were used. However, permission and clearance to access the documents was obtained legally before the documents were published.

The proposal was presented at the Departmental Level (School of Nursing Science), whereby the research experts scrutinised the research proposal during a formal public defence.

To avoid plagiarism, all sources and references used, are acknowledged and are included in the reference list. ***Anti-plagiarism software to check breach of copyright was done on this dissertation with the aid of the librarian and the***

turn-it-in report (See Annexure A) as attached. Policies regarding plagiarism and copyright as described in the Manual for Master's and Doctoral studies (NWU, 2016:21) were adhered to.

2.4.1 Ethical issues using digital technology

Document analysis uses documents in archives. The quality of these documents are protected, and the said protection must be maintained especially in the event where there is sensitive content embodied in such documents. Posts must be checked with vigour. They must be noted as there are instructions on the privacy of the documents (Gray, 2014: 507). Misinterpretation must be avoided at all cost.

These documents serve as a live person's opinion. The difference is that, they were written by human beings and they have been archived. Gray (2014:507) maintains that it is very dangerous to misinterpret the meaning of documents.

2.5 Measures to ensure rigor

To ensure trustworthiness the researcher used the three criteria as highlighted by, De Vos *et al.* (2011:381-382). Trustworthiness deliberates the degree of trust and confidence that qualitative researchers have in their studies. **Credibility** refers to the truthfulness and verification of evidence (Polit & Beck, 2017:747 and Munhall, 2012:518). The researcher engaged herself with the documents for a prolonged time. This included reading the documents all over and making sure that there is clear referencing of the documents used. The period of engaging with the documents was from September 2017 until December 2017.

Dependability refers to the integrity of the data through thick and dense description of the methodology (Botma *et al,* 2015:234 and Creswell, 2014: 201). The same findings could be obtained if the study is repeated using the same research methodology. To achieve dependability, further evaluation was done by an independent editor to verify the findings.

Conformability was used as a neutrality strategy to ensure trustworthiness (Botma *et al.*, 2015:234). The researcher further acknowledged the limitations of the qualitative research method selected for the study and audit enquiry for the study by engaging with the supervisor who is an expert in the field and also involved with curriculum development. This was a research review control measure.

2.6. Summary of the Chapter

This Chapter discussed the research design, it also discussed the research method, data collection methods and measures to ensure rigor. These measures are highlighted as key issues that helped in guiding the study. The importance of ethical considerations was outlined. Chapter Three presents documents reviewed and discussion of the research findings.

CHAPTER THREE: REALIZATION OF THE RESEARCH

3.1. Introduction

The previous Chapter presented the methodology employed in this study. In this Chapter the focus is on the interpretation and understanding of the collected data by means of an active review of important documents to address the research objectives. To review the documents, the researcher follows the (9) nine practical steps by de Vos *et al.*, (2011:381), this will include the application of these steps.

3.2 Application of document review according to the (9) nine practical steps

This study focuses on the gap between two nursing qualifications (RNA & ENA). It is carried out necessitated by the need to bring about support and recommendations to the nurse training institutions. As a result of the problem statement referred to in Chapter One, the all-encompassing aim of this study was to explore the academic training gap that has already been mentioned. It is then essential to critically review relevant documents. In this way, the researcher endeavours to interrogate these pertinent documents efficiently to support the ENA's academically in order to propose measures that can assist them in bridging the competency and qualification gap after the adoption of the national qualifications framework. Consequently, this Chapter strives to present the procedures of the research methodology employed in this study.

Document analysis was conducted using selected documents. The researcher followed the nine steps of de Vos *et al.*, (2011:381). Data selection commenced from the 26th of August 2017. The documents were surfed, read and re-read from the 15th of September 2017 until December 2017.

I. Step: Formulate the research question:

The question that was formulated was derived from the main aim and the research objectives of this study followed by the subsequent question. These questions assisted in acquiring the relevant information.

The questions:

What support is required for the ENA's following the adoption of the NQF level five qualifications?

What academic recommendations can be made for stakeholders involved in education and training of ENA's to bridge competency and theoretical gap?

The questions sought to mainly clarify the nature of support required and how it could be implemented. The exploration of the questions further inquired about the recommendations to all stakeholders involved in the education and training of the ENA's. The focus question as well as the follow up question, never changed throughout study, from one step to a next.

ii. Step: Start a research diary

The beginning of the diary started when the researcher gathered information on the topic. The process started from the 23rd of August 2017 after the formulation of the research question. On a weekly basis the researcher summarised the work done on the topic.

Table: 3.1 The insert of the researcher's diary A

DATE		ACTION AND COMMENTS
23 August 2017		
Formulation of research question		• What support is required?
Week of 26 August 2017		
Concentration on Acts		• South African Qualification Authority • National Qualifications Framework • Nursing Acts
Week of 31 August 2017		
Weekly summary of documents		• Level descriptors • Knowledge • Competency
September 2017		
SANC-processes, engagement with the stakeholders		• Finalisation of documents • SANC engagement processes • Critically reading the documents
October 2017		
		• Archiving of documents
November and December 2017		
		• Review of documents write up • Finalisation
January, February and March 2018		
		• Write up, conclusion, proof read • Editing, checking for plagiarism • Submission

INITIAL RESEARCH DIARY DOCUMENTS

Notes

August 2011

The following documents were collected for analysis:

1. Nursing Act 50 of 1978
2. Nursing Act 33 of 2005
3. Regulations relating to the course leading to enrolment of Nursing auxiliary R2176.
4. Teaching guide for the programme leading to enrolment as a nursing auxiliary R2176
5. Regulations relating to the Approval of and the Minimum requirements for the Education and Training of a learner Leading to Registration in the category Auxiliary Nurse No R 169 under the Nursing Act, 2005.
6. Higher certificate: Auxiliary nursing qualification framework developed under Nursing Act, 2005
7. National Policy for the implementation of the Recognition of Prior Learning SAQA, 2013.

The developments that occurred after adoption of the National Qualifications Framework at the South African Nursing Council regarding the Enrolled Nursing Auxiliaries qualification were noted (SANC,2009). At the beginning of the process at the SANC, the information was supposed to be disseminated to providers of nursing education and training as well as the other stakeholders involved. The enrolled nursing auxiliary training leads to registration as an auxiliary nurse that is recorded as a level three on the NQF. Subsequently, this category is abolished. The "abrupt" ending of the training of the ENA's is a challenge that must be addressed, the rationale for addressing the challenge is that, already at the SANC register, the ENA's are already registered. The ENA's are now classified as level three in the NQF.

The table in the next page will explain the processes of engagement at the South African Nursing Council.

Table 3.2. Processes engagement at the SANC with stakeholders in relation to implementation of NQF

	2009	2011	2012	2013		2014	2016		
	26 March	16-18 March	20 September	14 February		30 September	September	15 November	20 December
TOPIC /OUTCOME	• Implementation of the new nursing qualifications registered on the National Qualifications Framework (NQF)	• The Changing Landscape of Nursing Education and Training in South Africa	• Date extension for offering legacy nursing qualification and progress towards the implementation of new nursing qualification registered on the NQF	• Milestones in the implementation of Nursing Qualification workshop	Curriculum Framework for entry levels of Nursing: • Higher Certificate: Auxiliary nurse; • National Diploma: Staff Nurse; • Advanced Diploma: Midwifery and • Bachelor's Degree: Professional Nurse and Midwife	• Legacy Nursing Education and Training Programmes that will ***NO LONGER BE OFFERED*** after **30 June 2015**	• Findings on the survey of the recently qualified enrolled nurses and nursing auxiliaries	• Nursing Education and Training and Nursing Education Institutions in South Africa	Information regarding phasing out of the Legacy Nursing Qualifications and implementation of Nursing Qualifications aligned to the Higher Education Qualifications Sub-Framework (HEQSF)
ENGAGEMENT/ AUDIENCE	• All Nursing Education institutions. • Provincial Departments of Health • All Stakeholders	• DENOSA: First South African Nurses Conference	• All Nursing Education institutions. • National and Provincial Departments of Health • All Stakeholders	• Workshop for the council of Higher Education (CHE)	• All Nursing Education institutions. • National and Provincial Departments of Health • All Stakeholders	• All Nursing Education institutions. • National and Provincial Departments of Health • All Stakeholders	• Nursing Profession • Public and private employers • Critical stakeholders • Prospective nursing students • South African Community	• Media and news editors	• All Nursing Education institutions. • National and Provincial Departments of Health • All Stakeholders
OUTCOME	Circular 3/2009	Presentation by Mr Tendani Mabuda: Registrar and CEO South African Nursing Council	Circular 7/2012	SANC	Circular 8/2013	Circular 13/2014	Publication of survey	Media release Nov 2016	Circular 7/2016

The processes and engagement at the SANC with the stakeholders, led to further the third step which involved finding the right sources and beginning to archive the documents.

iii. Step: Find possible sources of material and begin to archive

The collection of documents included the academic and non-academic material sources. The first documents that were classified at the point of departure were the Acts from the Department of Higher Education. The Higher Education Act was then discussed first, as it was the one that paved way for the amendments of the Nursing Act. Nursing is being guided by Nursing Acts, thus the discussion that followed focused on these legal instruments. These documents then referred the researcher to the regulations as well as the scholarly journals that were already published. The implementation of the NQF in nursing is a new concept that is at the implementation phase. The search further led to the newspaper articles. The search was terminated when the process did not generate new references.

The electronic documents were downloaded, printed and filed as hard copies. These copies will be safely kept by the researcher for a period of (5) five years and can be produced when needed. This is for documents being readily available when needed. The documents were then grouped and listed in table format. The selected Acts in **table 3.3** were then placed in one specific column with regulations also placed in their own column. The documents that were referred to in this study are included in the reference list. The table of documents that were reviewed will follow on the next page.

Table 3.3 List of documents reviewed

Acts and regulations
1.Act-Higher Education Act
2. South African Qualification Authority Act
3. National Qualifications Framework Act
4.SAQA level of descriptors
5.Nursing Acts
6.SANC processes
7.Enrolled Nursing Auxiliaries regulations from SANC
8. Department of Higher Education and training White paper for post-school education and training. Building an expanded, effective and integrated post-school system
9.Recogntion of Prior Learning (RPL)
10.Survey of the recently qualified enrolled nurses and enrolled nursing auxiliaries

The transcription of the texts was the next step to be followed:

iv. Step: Transcribe the texts in some detail

All the documents are already archived as national documents, thus the transcription was not required for the study, and the next step was:

v. Step: Critically read and interrogate the texts and documents

Constant reading of the texts and highlighting the similarities and differences came up during analysis of the documents by means of comparative analysis. Out of the documents used in the search diary, the documents that were more relevant in answering the question were then individually analysed. Each document was read in detail, to get the facts from the focus question.

In the following step (step five) the researcher critically discusses the wealth of the analysed documents. Each document was individually discussed, by extracting the points related and relevant to the focus question.

3.2.1 Review discussion

- *The Higher Education Act (101 of 1997)*

This Act was developed and promulgated by the Minister of Higher Education in South Africa to redress past discrimination and to ensure that there is equal access to higher education by all. The Department of Higher Education as the regulatory authority indicated that there must be provision for transitional arrangements; and rescinding of certain laws and regulations of Higher Education through this Act. The aim was to provide quality promotion and quality assurance in all institutions of Higher Education and furthermore to register qualifications in terms of the National Qualifications Framework. The outcome of the transformation of the Higher Education and Training sector ended up with changes that moved nursing from the Further Education and Training sub-framework on Nursing Training to the Department of Higher Education and Training sub-frameworks (SANC, 2009:1). The Council of Higher Education has the responsibility on accreditation matters, thus SANC too has a dual responsibility of accreditation. Consequently, nursing ended up with dual accreditation with the Council of Higher Education dealing with academic qualifications and the Nursing Council overseeing the professional qualifications.

It has to be noted that there was a need for a single qualifications framework applicable to all higher education institutions in alignment with all the changes. Thus the subsequent legal framework to be reviewed is the South African Qualification Authority Act (SAQA), (58 of 1995). Qualifications are regulated and continuously controlled to produce outcomes that are credible and monitored under the South African Qualifications Authority. One of the objectives of the SAQA Act (58 of 1995) is to direct the articulation of courses, for all levels of education Including the framework on recognition of prior learning (RPL) and that must include the principle of articulation. It noted that learners must be independent with supervisory role within their scope.

Therefore, the next document for discussion was:

- *South African Qualifications Authority Act (SAQA), Act 58 of 1995*

The period after 1994 was focused on correcting the whole education structure based on the disparities of the past. This would be achieved through the SAQA objectives. One of the objectives of the SAQA is to develop policies and criteria in collaboration with the quality councils. This includes registration of qualifications, assessment for recognition of prior learning, credit accumulation and transfer for all post school education as it must be accessible to all. Therefore, the aim of creating a uniform system to rectify and replace the divided system of the pre-1994 era would be achieved. The SAQA Act was repealed by the National Qualifications Framework (NQF) Act (67 of 2008).

The discussion above highlighted the objectives of SAQA. The NQF Act introduced the registrations of the sub-frameworks as well as the level descriptors. The Minister of Higher Education had approved the system that would facilitate access, mobility and progression within education and training for career paths through the NQF. This was achieved through the determination of the sub frameworks. SAQA and NQF must allocate all registered qualifications to each of the three coordinated sub-frameworks (SAQA,2012). One of the objectives of the NQF is to create a single integrated national framework for learning. In creating integration in learning, learners should be evaluated fairly based on standards. The set standards are intended to contribute to consistency in learning. This will be accomplished and facilitated by evaluation criteria for comparability within the NQF (SAQA, 2012: 3). Ten level descriptors were created to express learning accomplishments, outcomes, and competencies. These increase in complexity as they progress upwards from one level to the next (SAQA, 2012). The purposes of the level descriptors are to ensure coherence in learning, and to enable the allocation of qualifications to levels to assess their comparability. The level descriptors provide a general platform from which more specific descriptors can be developed by practitioners working in the three NQF Sub-Framework contexts highlighting the three areas of evaluation:

Foundational competence: This outlines the intellectual, logical and academic skills of information on a learner. It is based on analysis and evaluation on problem solving abilities (SAQA, 2012:3).

Practical competence: This requires that the learner be able to determine and reveal the capability to accomplish a set of responsibilities and activities in reliable settings based on operational context.

Reflexive competence: This relates to the integration of learner self-sufficiency of knowledge, and independently incorporating spontaneous information. It is further based on adapting to changed situations and full descriptions. In this case nursing education and transformation became aligned to the changes that were introduced. The restructuring of nursing programmes had good opportunities as the associated curricula have more compatibility with knowledge, expertise and skills needs of a changing society and economy (Matlakala, 2016:6)

Level descriptors for the South African National Qualifications Framework (2012:6-9) are focused on the similarities of these (3) three level descriptors, as well as the differences. A level descriptor is defined as "that statement describing learning achievements at a particular level of the NQF that provides a broad indication of learning outcomes and achievements are appropriate to a qualification at that level" (SAQA, 2012: 4). The focus will assist in exploring the academic support for the ENA's who are at level (3) three on the NQF, that will further point out the ENA's who will be registered at the nursing council as Registered Enrolled Nurses. Therefore, it is clear from the above discussion that the level four on the SAQA descriptors in nursing is missing. The NQF is the guiding level to explore and find ways in bridging the missing nursing curriculum and describing ways to bridge the gap.

The (3) three level descriptors adopted from (SAQA, 2012) are discussed and illustrated as per the attached table on the next page.

Table 3.4 - Illustration of three level descriptors under discussion (Adopted from SAQA, 2012).

NQF THREE	NQF FOUR	NQF FIVE
)PE OF KNOWLEDGE	**SCOPE OF KNOWLEDGE**	**SCOPE OF KNOWLEDGE**
c understanding of key concepts only.	Basic knowledge, with fundamental understanding of key concepts.	Informed understanding of core areas including, laws rules and key terms.
)WLEDGE LITERACY	**KNOWLEDGE LITERACY**	**KNOWLEDGE LITERACY**
erstand that knowledge in a can be applied lated field.	Understand the application of knowledge to related fields.	Awareness of how knowledge system develops.
'HOD AND PROCEDURE	**METHOD AND PROCEDURE**	**METHOD AND PROCEDURE**
acity to operate within defined contexts.	Capability to apply essential methods, procedures and techniques of a given familiar context.	Plan manage and implementation process within a supported environment.
)BLEM SOLVING	**PROBLEM SOLVING**	**PROBLEM SOLVING**
ing of problems within a given parameters.	Knowledge to solve common problems within a familiar context.	Identify, evaluate and solve defined and new problems. Application of solutions based on relevant evidence.
ICS AND PROFESSIONAL PRACTICE	**ETHICS AND PROFESSIONAL PRACTICE**	**ETHICS AND PROFESSIONAL PRACTICE**
ply with organization.	Adherence and comply to professional practice.	Take an account. Seek guidance on ethical issues.

ıle 3.4 Illustration of three level descriptors under discussion (Adopted from SAQA, 2012) - Continuation

NQF THREE	NQF FOUR	NQF FIVE
)DUCING AND COMMUNICATING)RMATION	**PRODUCING AND COMMUNICATING INFORMATION**	**PRODUCING AND COMMUNICATING INFORMATION**
uce coherent report presentation.	Produce coherent report presentation, consistently and precisely in written and in oral signed form.	Produce coherent report presentation, reliably in practical demonstration. Understanding of intellectual processes including legal implications.
IAGEMENT OF LEARNING	**MANAGEMENT OF LEARNING**	**MANAGEMENT OF LEARNING**
:y to learn within an environment.	Take responsibility for own learning.	Ability to evaluate his \her performance. Promoting of learning to others.
OUNTABILITY	**ACCOUNTABILITY**	**ACCOUNTABILITY**
ıcity to actively contribute to team :tiveness.	Take decisions and responsibility.	Ability to account to take account for actions. Supervisory responsibilities.

Text outlines and description of the aforementioned table (Table 3.4)

The discussion's argument is that there is a theoretical and competency gap which is required to bridge the missing level four. It is evident that level five has got informed understanding of laws and key terms on the scope of knowledge that is missing in the other levels. Therefore it is evident that the phasing out of legacy nursing qualifications will benefit the nursing training and ultimately the development of an interconnected national framework for learning will then be achieved. On the knowledge literacy, it is required that the learner should be more aware on knowledge systems development, whereby evidence-based problem solving will be applied.

The learner on professional practice should seek guidance on ethical issues and should comply. The understanding of intellectual processes should be an emphasis.

- *Nursing Acts*

The sub-section discusses the South African Nursing Council Acts. The South African Nursing Council (SANC) is the quality assurance body assigned to set and uphold standards in nursing education and practice in the Republic of South Africa. As explained in the Nursing Act, (50 of 1978) one of the function of the SANC is to "approve nursing schools in accordance with the prescribed conditions". The process of transformation of the higher education sector led to SANC making amendments to the Nursing Act. Nursing therefore ended up with a second accreditation body. The amendments that were made to the Nursing Act further enhanced the mandate of the Higher Education Department. The amended nursing act was then registered as (33 of 2005), in terms of section 58 of the Nursing Act (2005) the Minister may, after consultation with the Council, develop regulations relating to the scope of practice of practitioners for all categories of nursing.

The most remarkable change has been the introduction of the new scope of practice for nursing. The new scope of practice entails the re-categorising of nurses based on the new qualification types. This came up with regulation R.169, for the auxiliary nurses.

The tables below illustrate changes occurred in the Nursing Act from 1978 to 2005 as well as nursing regulations.

Table 3.5: Changes in the Nursing Acts.

Discussion	Nursing Act 50 of 1978	Nursing Act 33 of 2005
Category	Stated in section 16, as a person who was enrolled as a pupil nursing auxiliary for the duration of the course and attained the course objectives.	Stated in section 30, as a person educated for provision of elementary nursing care in the manner and to the level prescribed.
Title to be used	Enrolled Nursing Auxiliary.	Registered Auxiliary Nurse.
Era	Period before adoption of National Qualifications Framework.	Period after adoption of National Qualifications Framework.
NQF level	Nursing was not yet included in the National Qualifications Framework	R.169 National Qualification Framework curriculum.

The teaching of learners is regulated by law, thus the amendment of nursing acts also led to the transformation of the teaching guides for the ENA and RAN. The discussion that follows indicates the old and the new teaching guides for the categories of nurses.

Table 3.6 REGULATIONS-TEACHING GUIDE

Regulation (R.2176 and R.169). The ENA as well as the RAN

Regulations	R 2176(ENA)	R 169 (RAN)
Admission requirements	The candidate must at "least have an academic standard 8 as stated in the regulation or Grade 10 or has an equivalent educational qualification" (R2176).	National Senior certificate or equivalent educational qualification (R169:5). Exit level of level four on the National Qualifications Framework, a grade 12.
Qualification type	Below the NQF.	Higher certificate.
Pre-learning expected to be in place	None.	Communication Level 4. Maths literacy Level 4. Life Sciences Level 4. Computer Literacy level 3.
Contents in the curriculum	Teaching programme-Framework. • Nursing theory. • Basic nursing care (elementary). • Elementary nutrition. • First aid. • Comprehensive health care.	Teaching programme-Framework • Knowledge (emphasis). • Comprehension. • Application. • Analysis. • Evaluation.
Purpose and rationale for the qualification	Practice guidelines: Applied level of training. Clinical training Hours. Health education. Last offices. Examinations.	Knowledge: The demonstration on whether the student has gained knowledge should be an outcome of the learning process. The prescribed competencies and educational outcomes of the programme include measurement and assessment of the

		programme (SANC: 2013). Furthermore, the learner should be able to solve problems related to the application of the curriculum under the supervision of a nurse with a National Diploma or a Nursing degree within the applicable scope on the Nursing Act, 2005. The regulation then allows the learner to understand and interpret the given instructions. Hence, application of what is learned will then be collaborated in theory and practice. Competence should be sustained, through integration of "professional attributes but not limited to knowledge, skills, judgement, values and practice settings (SANC: 2013)". According to R.169 of SANC competence means the "ability of a practitioner to integrate the professional attributes and not limited to knowledge, skills, judgement, values and beliefs required to perform as an auxiliary nurse in all situations and practice setting". The learners should be supported by a structured process.
Duration of the course	One study year which shall be	One academic year of full time

	completed within a period of 18 months from the date of commencement, unless the council determines otherwise, furthermore academic year means a period of at least 44 weeks (Act No.50 of 1978).	study. It is stated on the Regulation 169:1 under Nursing Act, 2005 (Act No.33 of 2005) that academic year is at least 44 weeks of a calendar year.
Total hours of training	Minimum of 1000 hours of clinical training.	1200 hours both for the fundamental and core contents.
Who can supervise?	Registered nurses or enrolled nurses as prescribed by the Nursing Act, 1978.	Professional Nurses with Diploma and /or degree in Nursing science.
The curriculum outcomes	Trained to provide care, whereby assistance with implementation of Nursing Acts planned by registered nurses. Introduction of comprehensive health care	Trained to be skilful in assessment, planning and implementation of basic nursing care. The candidate must present ability to independently provide nursing care within the relevant lawful and ethical parameters as stated on the Qualification Frameworks under Nursing Act, 2005.Develop writing and oral communication skills, hence the admission criteria require computer literacy at least at level 3 (South African Nursing Council Qualification Framework: 2).
Exit level outcomes	1. Elementary anatomy and physiology. 2. First aid	Apply basic knowledge of anatomy, physiology, biophysics, pharmacology and microbiology in carrying out nursing care. 2. Use the scientific nursing approach to address basic needs,

		with emergency care whereby life support is applied.

- ***Text description***

The discussion above, clearly pointed out the two Nursing Acts and the two regulations that are mainly focusing on the training of the ENA's as well as the RAN's. The main purpose of the two documents was to point out the differences of nurses that are the lowest categories in the nursing hierarchy structure, and that are then differentiated by the Acts and regulations. These will point out the facts of identified gaps in terms of areas of concerns for supporting of the other category (the ENA's).

Nursing acts: Nursing Act 50 of 1978

Nursing Act 33 of 2005

Nursing Regulations: R169

R 2176

The discussion here, outlines the requirements and expectations of the ENA on the level (5) five NQF (This shows functions above the current ENA).

The registration title changes showing the status of a registered person on the council register. The NQF aligned the curriculum on the amended Nursing Act. The admission requirements exclude the current ENA's who are classified as level three. There must be pre-knowledge of subjects to be passed before training as a Registered auxiliary nurse. The acquisition of knowledge is an outcome of learning processes.

The prescribed competencies should measure assessment of the programmes. The educational outcome should measure assessment programmes. Problem solving should be done under supervision of the registered professional nurse. The mixture of theory and practice after interpretation of given instruction by the registered professional nurse is key. Also of importance is the realisation that competence is not limited to knowledge only, but to skills, judgement, values and practice settings.

The hours of practice have been increased for both core and fundamental contents. The RAN's training entails the ability to assess, plan and implement basic nursing care.

Exit level outcomes include application of knowledge of subjects in carrying out nursing care and the ability of the nurse to use the scientific nursing approach in order to address basic needs. The discussion above explains the changes that came about after adoption of the NQF. There are challenges evident through the document above which will be highlighted in Table 3.7. The plans came out from the Department of Higher Education and Training (DHET) to curb and attend to the identified problems. The collaboration with the other authorities which support the needs of learners, brought development of document to attend to the needs of learners' post-school education. The discussion below will be based on the White Paper for Post-School Education and Training (WP: PSET, 2013) that was officially released in 2013.

Table 3.7: White paper for post -school education and training-Building an expanded, effective and integrated post school system.

TOPIC	DISCUSSION AND COMMENTS
Policy objectives	Coordinated education post school and training system, whereby there will be further articulation in between qualifications.
Challenges - Main policy objectives	**1. A single coordinated system** Responsibilities for education and training were solely for Dept. of Education and Training as well as the Department of Labour. • Collaboration and joint support amongst post school institutions for the benefit of students and stakeholders. • Sector Education and Training Authority (SETA) and other stakeholders should be starting to work closely with the public institutions to establish partnerships for work integrated learning. • Ensuring coherent and coordinated post school system for easy articulation of levels. • Further recommended that post school institutions should strive for methods such as bridging of foundations programmes.

	• Mentoring programme to be instituted. • Learning pathways to be offered to learners that will including workplace training. **2. Education and work** • Combination of theoretical knowledge and practical experiences must be prioritised especially to areas such as health and medicine, where work is integral part of training. • There must be a provision of a possible model including professional organisation. • The SETA's have a critical role in facilitating workplace learning partnership between employers and educational institutions. **3. Responsiveness** • Skills development systems including the SETA's and the colleges must remain strongly aware of skills challenges facing education institutions.
The College System	**Main aims of colleges** • Educate young school leavers. • Provision of knowledge, skills, and attitudes necessary for employment in the labour market. • Provision of training to the midlevel skills. **Whom can the college system cater for?** • Candidates who left school whether they have completed secondary school or not. • Those who wish to do occupational training or complete their schooling. **College sub-system** • Technical • Vocational • Community colleges **Programmes and qualifications** In 2007, National Curriculum Vocational (NCV) was introduced as a general occupational programme included academic and vocational subjects which is equivalent to NQF level four.

	Criticism of NCV Confusing admission policies. No provision for part time or distance-learning. Development of occupational qualifications as there is no coordination - on quality assurance that is needed.
Higher certificates Level five on the NQF	Programmes have been introduced in partnership with colleges and universities on level five. Worked well in developing and enhancing intermediate skills.
Improving teaching and learning	**Lecturers** • Enough lecturers to cover disciplinary arrays. • Universities have an important role to play in training college lecturers to expand the numbers and to improve the quality of tutoring skills.
Student Support	**Academic support** • Financial support through Bursaries. • Finding workplaces by learnerships. • Work integrated learning.
Funding	**Funding model** • Core funding for Department of Higher Education (DHET) staff. • Infrastructure. • Cover foundation and bridging programmes. • Include SETA's and employers.
Effective leadership and governance	Capacity building programmes for senior managers to excellently perform their duties and provide effective leadership
COMMUNITY COLLEGES	**Context** • Discover ways to provide for the requirements of youths and adults who are unemployed and poorly educated. • Expansion of colleges and universities will not be adequate hence "a new type of institution has to be built and supported, one that can offer a diverse range of possibilities to people for whom vocational and technical colleges and universities are not desirable" (DHET,

	2013: 20). **Candidates for community colleges** • Learners who did not complete school (in the context of the study, the ENA's as they are level three in the NQF). • Candidates who wish to continue in other ways. • Knowledge and learning skills to allow for labour market. • Learners affected by the changes of qualifications, whereby the obtained courses were made to be redundant by new technologies. • The abovementioned learners or workers who need to be re- trained.
Finding innovative ways	**Innovative ways** • Public Adult learning Centre. • Adult centres for the basic educations. • Positive response by the state for provision of education and training. • New institutional type. • Community college. • Post-college (support level 3-5 on the NQF). **Establishment of community colleges** • DHET will start preparation and planning processes for introduction of piloted colleges **Recommendations from the researcher** • Pilot process on bridging curriculum for ENA's which will be closely monitored and evaluated by the Quality Assurance body of Nursing – SANC. • Resolving issues of curriculum. • Funding requirements. • Core teaching and administrative curriculum design. • Opening of colleges that have been closed for the past decades which can then be used to enhance this process. • Plans on controlling colleges, whereby SETA's must assist with funding, and pilot areas should be named for each province.

Supporting education and training provision in the workplace	**Bridge education and work** The RPL (SANC,2016) mentions the Bridging course R 687, thus: • The SETAs are the key stakeholder bodies that can bridge education and work as stated in the Skills Development Act (97 of 1997). • Public sector provides opportunities for workplace learning. • Learnership, internships or other programmes with the tools to assess the ENAs with the goal of registering them under R.169. This strategy will ensure that 'redundancy' will be addressed.
	A tighter emphasis on SETA's • Finding precise data about the workplace skills requirements • Support of providers to deliver the programme • The existing innovation should be based on skills development for workers.
National Qualifications Framework (NQF)	**Intentions** • Creation of an integrated national framework • Facilitating of access and mobility within education • Enhance the quality of education and training • ENA's training is classified as a level three on the central and further education training qualifications sub-framework (SAQA:2012). • Encouragement on articulation processes

Thus far, documents reviewed indicated that there are gaps from level three to level five. Therefore, there must be support for the ENA's. The previous discussion highlights the requirement for support. The nursing education sector previously had learners that were improving their level of education whilst still working. The next discussion is based on the bridging programme that was a legacy programme.

Table 3.8 Regulations relating to the minimum requirements for a bridging course for enrolled nurses leading to registration as a general nurse or a psychiatric nurse.

TOPIC	DISCUSSION AND COMMENTS
Qualification type	Intermediate certificate.
Conditions for registration	• Candidate must have registered at an institution that has been approved and accredited by the SANC. • The learner must have registered following the stated regulations regarding students under the regulation. • The learner must have completed the programme and the assessments as required.
Conditions for approval of the school	For a nursing school to be approved: • The council must be satisfied as stated in the requirements for approval. • The curriculum must be approved by the SANC as required. • The responsible person in the school must be a registered nurse, who is in a possession of a further added qualification in nursing education and nursing management, also registered with the council. • The simulation rooms where the clinical practical is performed must meet the standards of the SANC facilities for clinical are satisfactory in the opinion of the council. • SANC is the only regulating body that can approve the nursing schools based on the assessments.

Admission to the course	• Applications should be directed to the responsible person of the school. • The following documents are required for one to be considered for application: i. Proof of practice licence as a nurse ii. Grade 12 certificate or equivalent otherwise the recognition of prior learning is considered. iii. A learner will maintain status of Enrolled Nurse until duration of the course is complete, and the requirements of the course are met. iv. On completion of the course, a responsible individual of a nursing school shall inform the council when a student completes the course as regulated, and council furnished a record of the theoretical and clinical instruction undergone by the learner.
Quality Assurance body	South African Nursing Council
Academic year	The duration of the course shall be two academic years. **Leaves and approved days of absence** • A learner may be granted not more than 60 days leave of absence at such times during the set course based on the decision by the person in charge per regulation. • A learner may be given an approval of sick leave calculated at the rate of 12 days for each academic year of the course, and sick leave of a proportionate number of days for a shorter period.

Curriculum	**Subjects** (a) Applied Social Sciences (including Communication Skills and Mental Health), the duration of which shall be spread over two academic years; (b) Ethos and Professional Practice (including Ward Management and Clinical Teaching), the duration of which shall be spread over two academic years; (c) Integrated General or Psychiatric Nursing Science, depending on which registration is desired by the student, the duration of which shall be at least two academic years. **Programme objectives** • *Respect for the dignity and uniqueness of man in his socio-cultural and religious context and approaches and understands him as a psychological, physical and social being within this context;* • *Is skilled in the diagnosing of man's health problems, the planning and implementing of therapeutic action and nursing care for the individual at any point along the health/illness continuum in all stages of the life cycle as well as care of the dying, and in the evaluation thereof;* • *Can direct and control interaction with patients in such a way that sympathetic and empathic interaction takes place;* • *Can maintain the ethical and moral codes of the nursing profession and to practise within the prescriptions of the relevant laws* • *Can delineate his own practice according to personal knowledge and skill, practise it*

	independently and accept responsibility thereof; *Can evaluate his own practice continuously and accept responsibility for continuing professional and personal development;* • *Displays an enquiring and scientific approach to the problems of practice and is prepared to initiate and to accept change;* • *Can apply the principles of management in a nursing unit;* • *Can provide clinical teaching within the nursing unit* • *cognitive, psychomotor and affective skills to serve as a basis for effective practice and for continuing education*
Registration	A candidate who has met the requirements and completed the course shall be registered, without the payment of a fee, as a general nurse or psychiatric nurse in terms of the regulations regarding registers after the notification and record referred to in sub regulation 5(c) have been lodged.
Conditions for enrolment	• The learner has received the education and training and has passed after assessment

- **Recognition of Prior Learning (RPL)**

The policy originates from the SAQA as the legislative body responsible for the development of the NQF, included in the objectives and the principle called "the recognition of prior learning in the context of the South African National Qualifications Framework" (SAQA, 2002:8). In this policy SAQA highlighted "that RPL in the South African context is directed at the facilitation of access to, and

mobility and progression with education, training and career paths. Its aim is to ensure urgent redress of the past unfair discrimination in education, training and employment opportunities (SAQA, 2002:8)".

Regulations were printed and published under SAQA and highlight the framework in which the RPL is to operate in South Africa: Criteria and guidelines for Education Training Quality Assurances (ETQAs), Criteria and Guidelines for assessment of NQF registered unit standards and qualifications. Furthermore, the providers were guided by the criteria and guidelines to do self-assessment to check what they need to have in place. According to (SANC, 2009:13), RPL is one of the ways of promoting access and redressing discriminations of the past to the people who are employed. SANC is aligning itself to the SAQA on RPL.

Furthermore, the circular (SANC, 13/2009:4) explained the RPL as a principle that endorses the value of knowledge obtained that will further enhance processes for "certification, alternative access, admission and further learning and development". RPL is a process through which formal and non-formal learning are measured and mediated for recognition and are certified for "credits, access, inclusion", or advancement in the formal education and training system or workplace (SAQA 2013:5)

Work experience involves the acquiring of competency which can be formal or non-formal and should be recognised. The principles dictate that the portfolio of evidence should be kept, meaning that evidence should be collected in a file format, whereby the individual should submit to and can demonstrate levels of competency and learning outcomes achieved. Learning is an ongoing acquiring of knowledge and the guidance and support are considered core approaches to the candidates.

The following table is the survey that was done on the recently enrolled nurses and the ENA's who recently qualified.

Table 3.9: Survey on Enrolled Nurse and Enrolled Nursing Auxiliaries (SANC: 2015)

TOPIC	DISCUSSION AND COMMENTS
Purpose	Report the finding of the survey to all stakeholders.
Background	South African Nursing Council (SANC) mandated Education and Training to conduct the survey. To report to the Minister of Health on every six months.
Aim	• To find out if there is a high production of Enrolled and ENA's categories. • To investigate their employability status in both public and private sectors.
Methodology	• Purposive sampling was used through retrieving examination results of students who wrote exams in May and November 2013 and 2014. • Survey monkey method was used, whereby questionnaires were sent through SMSs with a linkage through to a web browser to access the attached questionnaire. • A period of six weeks was given to participate, and the participation was voluntary. **Analysis of responses based on** • *Age group.* • *Province where trained.* • *Province of employment.* • *Permanent employment.* • *Temporary employment.* • *Unemployment.* **Results and findings** Ages between 26-30 are unemployed (75.11%) the highest. Ages between 46-50 are permanently employed (32,76%)

	the highest. Ages between 20-25 are temporary (17,86) employed the highest. **Provincial results ENA's** Permanent:32.30% Western Cape. Temporary :28,08 % Western Cape. Unemployed: 93.33% Mpumalanga. Total Average National:75,63% Unemployed. **Appointment by nursing agencies** • Nursing agencies can secure employment on a permanent basis, however there was a significant decline. **Concluding remarks** • Average unemployability is higher in the ENA categories irrespective of where they have undergone training. • There is a need to train these categories under the new nursing qualifications R.169. **Recommendation** The private and public employers are encouraged to access the findings for human resource planning and provisioning.

- **Text review (Table 3.9)**

The discussion of the mentioned survey is presented on the table above. The emphasis was on the ENA's as they are the population under study. The concluding statement for the study is that the nurses are perceived as unemployable despite the fact of where they are trained. This is reflected by the fact that 75.63% of them are unemployed(SANC,2016).

The ENA's being perceived as unemployable can be attributed to the level status on the NQF level (3) three that is excluded from the Higher Education and Training Department.

v. Step coding

The next step that followed the text reviews and analysis was coding. This was done taking the information from the provided tables and discussion. The researcher then categorised the points as they were regularly appearing, and the outcome was the discussion from the codes as displayed by three themes.

According to de Vos *et al.* (2011:410) information can be reduced to code notes to classify and give data meaning so that it can be manageable and finally be used for analysis. The contents were analysed and categorised into codes that are used as headings. Codes can differ. For this study, open coding was used. This was to categorise information which was later broken down, examined, compared, and conceptualised (de Vos *et al.*, 2011:410).

Table 3.10: Illustration of open coding

Document	Open code	Final codes
Higher Education Act (101 of 1997)	Equal access to education.	Access
	Direct articulation of courses.	Articulation
	Provision of support during transition.	Support
	Promotion of learning.	Promotion
	Support during rescinding of certain laws.	Support
	Quality assurance in the accreditation.	Quality assurance
	Recognition of Prior Learning (RPL) that resulted from organised and structured daily activities should be recognised	RPL
	Learners should be independent and responsible within their scope.	Independent
	Principle of articulation (RPL)	Articulation

South African Qualifications Authority Act (SAQA), Act 58 of 1995) and National Qualifications Framework (NQF) Act (67 of 2008).	Missing scope of knowledge on level three. On knowledge literacy, and development of knowledge system. Problem solving which are based on evidence bases. The learner seeks guidance on ethical issues and complies. Intellectual processes understanding. Promotion of learning to the others. Supervisory responsibilities resumed by learner. Relationship of theory and practice.	Scope of knowledge Knowledge literacy Knowledge system Problem solving Seeks guidance Intellectual Promotion of learning Supervisory responsibilities Theory and practice
Nursing Acts and Regulations.	Category classification Title to be used NQF level Admission criteria Qualification type Learning outcomes Knowledge Competence. Curriculum outcomes	Category Title Level Criteria Qualification Outcomes Knowledge Competence Outcomes

White paper for post -school education and training - Building an expanded, effective and integrated post school system	Articulation between the administrators of universities Sector Education and Training Authority (SETA) and other stakeholders.	Articulation
	Integrated learning by institutions of education.	Integrated learning
	Coherent and coordinated post-school for articulation.	Articulation
	Mentoring programmes to be instituted.	Mentoring
	Workplace training for learning pathways.	Workplace training
	Combination of theoretical knowledge and practical experiences.	Theoretical knowledge and practical
	Skills development systems.	Skills development
	Strengthening of college systems.	Strengthening
	Provision of part time or distance learning.	Part time learning
	Academic support for learners.	Academic support
	Cover foundation and bridging programmes.	Bridging programmes
	Accurate data from the SETA's about workplace skills needs	SETA's
	Promoting of RPL	RPL
Recognition of Prior Learning (RPL)	Recognition of prior learning.	RPL
	Promotion of access to education.	Access
	Recognition from formal and non-formal education obtained.	Recognition
	Provision of progression opportunities.	Progression
	Development of competencies.	Competencies
Bridging course for	Development of competencies after	Competencies

enrolled nurses leading to registration as a general nurse or a psychiatric nurse	assessment. Duration of training. Promotion of access to education. Academic support for learners. Critical evaluation of and assessment of the programme.	 Duration Access Academic support Assessment
Survey on Enrolled Nurse and Enrolled Nursing assistants	The ENA are unemployable. Less knowledge. Curriculum outcome makes them less knowledgeable. Irrespective of where they trained.	Unemployable Less knowledge Less knowledgeable Trained

The next step that followed was analysis. This was done taking the information from the provided tables and discussion. The researcher then categorised the points as they were regularly appearing, and the outcome was the discussion from the codes as displayed by three themes and nine sub-themes.

Steps vii and viii. Analysis of data and checking

Text review of the documents was done. These highlighted codes from **table 3.10** came out regularly appearing in the text. The analysis came up with these terms and codes which are discussed in the write up and discussion. The discussion was done with the supervisor to make sure that the information is reliable. Agreement was reached on the research findings and the main themes and sub themes that emerged.

Step ix: Write up

This final step that outlines what came out from the reviewed documents. The research findings are presented and discussed as they came up through the open coding to identify support required for the ENA's after adoption of the NQF as a reference to the objectives of the study.

Research findings

The findings of the research were derived from the contents of the documents in review. Three main themes and related sub-themes developed from the documents analysed (**see table 3.11**). These themes and subthemes are discussed in this Chapter and illustrated with reference to the documents analysed. The direct citations from the documents are given in italics.

The findings of this qualitative explorative descriptive inquiry describe the academic support needed for the enrolled nursing auxiliaries following the adoption of the national qualifications framework.

Table 3.11: Themes and sub-themes: academic support for the ENA's following the adoption of the NQF

THEMES	SUB THEMES
3.4.1. Gaps identified between the NQF level three and NQF level five qualification.	3.4.1.1 Theoretical content learning gaps
	3.4.1.2 Clinical practice learning gaps
	3.4.1.3 Cognitive thinking learning gaps
3.4.2 Challenges faced by Auxiliary nurses categories.	3.4.2.1 Over supply of this category of nurses
	3.4.2.2. Lack of positions in the practice for this category of nurse
	3.4.2.3 High unemployment rate of auxiliary nurses.
3.4.3 Educational and training support for the auxiliary nurses.	3.4.3.1 Previous support
	3.4.3.2 RPL principles (access, articulation and credits).
	3.4.3.2. Other post school support.

3.3 Themes and sub-themes: academic support for the ENAs following the adoption of the NQF

3.3.1 Theme one: Gaps identified between the NQF level three and NQF level five qualifications

The following sub-themes were identified: Theoretical content learning gaps, clinical practice learning gaps and cognitive thinking learning gaps. Transformation in the department of education effected changes in nursing education and training which were aimed at improving provision of care. Researchers on health workforce agree that transformation of nursing education is an important strategy for improving health workforce supply (Blaauw *et al.*,2014).

3.3.1.1 Theoretical content learning gaps

Learning is a continuous process that can be accompanied by experience. Learning is defined as "an active process of constructing meaning and transforming understandings in interaction with the environment" (Bruce *et al.*, 2011:122).

The text description on the curriculum of the ENA and the RNA concludes that the level of training is not the same. This requires improvement on the level of training for ENA's. The combination of "theoretical knowledge and practical experience is essential" (DOHE, 9). The theory will provide knowledge of principles and laws which will ultimately lead to a competent learner. The ENA's who are now classified as level (3) three on the NQF will benefit immensely from an improved and expanded training and learning programme.

The nursing Acts and regulations are supporting the training and improvement through the principles of RPL. There is a recommendation from the document, White paper for post-school education and training (DOH,2013) whereby training "need to be designed around close cooperation between employers and education and training providers" (DOH,2013). According to the teaching guides for Regulation (R2176), the teaching programme frameworks include "*basic nursing elementary care, elementary nutrition first aid and comprehensive health care".*

The above regulation is applicable to the ENA's on NQF level three. The amendment of the Nursing Act (33. of 2005), brought the changes to the scope of practice, which

clearly highlights that there are theoretical gaps as the revised teaching guide prescribes that approach must be "*emphasis on knowledge, comprehension, application, analysis and evaluation*". The above information explains that indeed there is a theoretical training gap in the current ENA's curriculum.

3.3.1.2 Clinical practice learning gaps

The nursing summit (NDOH:2011) reports that there is a need for better skills for nurses and a new modelling whereby a detailed education forecast that is aimed at producing appropriate categories which are better equipped. The practical and clinical competency is based on the total hours the learner is exposed to at the clinical facilities. The previous curriculum for the ENA's required that the "*prescribed minimum hours of clinical training was supposed to be 1000 to provide care". The* nursing Act (33 of 2005) mandates that the total number of hours should be *1200 for* the training as a requirement for the RAN. The course inclusion of fundamental and core contents for one to be considered a competent nurse after training.

The information explains that the ENA is a para-professional who is totally dependent on the registered professional nurse and or enrolled nurse whereas the RAN has got an independent element and that is approved by the Act and only reports to the registered nurse whom his or her academic prescripts are registered on the NQF level seven, which is above the level of RAN .The purpose for the qualification of the RAN is that the learner should gain knowledge and demonstrate the "*outcome of the learning process". The prescribed competencies and educational outcomes of the programme include measurement of assessment of the programme.*

The curriculum for the learner on the NQF level (5) five entail learning that is to be corroborated in theory and practice, whereby competency is to be striven for. The learner on NQF level (3) three has partly required competency, as the attributes for competency include values, judgement, skills in all situations. *The courses that are offered for the training of the RAN's are based on the fact that the scientific nursing approach is used to address the basic needs with emergency care where life support is applied.*

There is need for continuing professional development to ensure a positive practice environment that will ultimately improve competence and skills development, as

stated in the Nursing strategy of 2011. The ENA's will require continuous training so that they can be on the same level with the RAN's.

3.3.1.3 Cognitive thinking learning gaps

Learning occurs in order of complexity from a lower order to a higher one (Bloom, 1956). There is advocacy role through a taxonomy or classification of cognitive thinking (Ignatavicius, 2017:61). Furthermore, stating that the elements of cognitive learning amongst others will include understanding, application, analysis evaluation and creation of concepts. Nkhoma *et al.*, 2017 conducted a study whereby analysis revealed that knowledge application creates a positive impact on higher-order thinking and has positive influence on practice evaluation and knowledge improvement.

3.3.2 Theme two Challenges faced by the auxiliary nurse category

These challenges include oversupply of this category for the past ten years, lack of positions in the practice for this category and high unemployment rate.

3.3.2.1 Oversupply for the category for the past ten years

The deadline for the legacy courses was 30 June 2015 (SANC, 2009), further supporting the recommendations of the Strategic Plan for Nurse Education and Training (2011), which outlines that there must be an address to the "inequalities, norms and standards to eliminate 'fly by night' Nursing Educational Institutions (NEI)". It is evident that there have been an overproduction of this category of nurses (SANC, 2009). There has been training that was done at the public colleges, as well as at the private colleges. SANC has the mandatory role to monitor and regulate the training of the nurses and the affiliated colleges. Evidence of the oversupply of ENAs is attested to by the survey that pointed out there is a high rate of unemployability within that category of nurses.

3.3.2.2 Lack of positions in the practice for this category of nurses

The scope of work of the ENA's does not make it easier for this category to be in positions in the workplace(SANC,2013). Furthermore, the content of the curriculum that they were exposed to, makes it difficult for career mobility.

Amongst other duties, the ENA's activities are of daily living (physical care) of patients:

- Maintain hygiene of patient like mouth wash procedures.
- Provide nutrition that include feeding of a helpless client.
- Assist with mobility whereby assisting of patient post operatively.
- Assist with elimination processes, like nappy changes for both adults and children.

3.3.2.3 High unemployment of auxiliary nurses

The survey on the recently qualified enrolled nursing assistants points out that almost 77% are not employed (SANC, 2016). Paterson *et al.*, (2017:6) state that, "possession of a qualification does not facilitate the employee's selection to the workplace".

The solution can be the collaboration of the stakeholders to assist as this will assist them to be covered by the Acts and regulations. Subsequently Paterson *et al.*, (2017:2) mention that enhancing employability can be advanced through different ways and the authors further recommend a work-based approach as a better alternative.

The post-apartheid era is characterized by a high unemployment rate. This is attributed to the fact that historically, the disadvantaged groups received inferior education (SANC 2009:1-2). This includes the legacy courses that were offered. Qualifications affect the employment rate, as legacy qualifications are found to be one of the factors as stated in the nurses survey (SANC, 2016). Employability is explained as possessing a skill, and understanding of a chosen occupation (Paterson *et al.*, 2017:13). The ENA's curriculum may be considered as not having equipped trainees with the necessary skills to be independent hence their high rate of unemployment(SANC,2015).

3.3.3 Theme three: Educational and training support for the auxiliary nurses

3.3.3.1 Previous support

Quality assurance requires that the capacity of an institution meets the standard that is set by accrediting authorities in their oversight role. This will enhance the ability of the institution to deliver training of the highest standards. The bridging course had its objective of combining theory and knowledge and practical experience so that the process of learning will be successful. Despite the fact that it emanated from the legacy courses, the objectives of the bridging course in nursing were focused on continuous working learning plan. It is vital to ensure continuous professional development (CPD) for full-time staff in post-school sectors (DOHE, 2013). The plan that should be applied is open and distance learning enrolment including on-line learning and course design using open education resources that must be aligned and monitored by the quality assurance body. This will further make sure that the good standards are maintained whereby workplace learning and work integrated learning are supported

The SETA's are the key stakeholder bodies whose function is to bridge education and work as stated in the Skills Development Act (97 of 1997). The public sector on the other hand provides opportunities for workplace learning. It is important that learnership, internships or other programmes be equipped with the necessary tools to assess the ENA's with the goal of registering them under R.169. This strategy will ensure that redundancy will be addressed, such as in the event where the programmes such as the ENA course which is currently at NQF level (3) three and presently being phased out. There is need for an ongoing evaluation of the range of the occupational programmes that includes nursing in order to apply competency training. The public colleges are recommended as possible institutions to receive funding from SETAs.

3.3.3.2 Recognition of prior learning

The process of recognition of prior knowledge (RPL) entails comparison of the previous learning experiences that a learner obtained against the learning outcomes for a specialised qualification (SANC, 2013:4). Both SANC and the Department of

Higher Education and Training as the accreditation bodies are supportive of the principle of recognition of prior learning. This is important since individuals should be assessed for the purposes of certification and alternate access and admission for further education, training and development.

RPL is important in providing access for students and educators through the provision of appropriate information on entry criteria. The criteria on minimum duration in terms of years of experiences provide that a learner should at least be (5) five years in the rank, before the guidelines can apply. Even though there are documents in place to support the transition, little has been done on the issue. One of the functions of SANC is to ensure that accredited providers implement the RPL system with priorities on nursing education and integrity (SANC, 2009:11). This demonstrates agreement on issues by the two accreditation bodies of nurses as mentioned that "implementation of RPL requires a national strategy within the education and training system" (DOHE, 2013:74). The RPL policy is guiding the service provider in a way whereby learners should be able to enrol for assessments without completing a formal educational programme.

Even though there are documents in place to support the transition, little has been done on the issue. Important to note is that the RPL policy guides the service provider in a way that enables learners to qualify to enrol for assessments without completing a formal educational programme. Learners are not required to replicate knowledge that has previously been verified (Baloyi, 2014:64). Furthermore, this will address the access to education for previously disadvantaged individuals. There must be articulation of programmes to be offered by the post-school system (Kgobe & Baatjies, 2014:2).

3.3.3.3 Other post school support

The linking of education with the workplace depends on continuously developing skills. The post-school system consists of all the institutions, private and public. There are stakeholders that are supporting the processes. The stakeholders that are supporting skills development are clustered according to the area or department of specialisation. These are then called the Sector Education Training Authorities

(SETA's), whereby for the Health Department it is called the Health and Welfare Sector Education and Training Authority (HWSETA).

The White paper for post-school education and training (2013) states:

- "*Sector Education and Training Authority (SETA) and other stakeholders should be starting to work closely with the public institutions to establish partnerships for work integrated learning".*
- *"Ensuring coherent and coordinated post school system for easy articulation of levels".*

Once more, the task will be difficult without the assistance and support of the stakeholders which will be the Sector Education Training Authorities (SETA's), as the requirement for the award is from (2) two to (3) three years.

Learnership programmes are bridging the soft skills deficit and further narrows the gap between workplace environment and student life (Van Heerden, 2012:40). They support:

- Pilot processes on bridging curriculum for ENA's which will be closely monitored and evaluated by the Quality Assurance body of Nursing – SANC.
- Resolving issues of curriculum.
- Funding requirements.
- Core teaching and administrative curricula design.
- Opening of colleges that have been closed for the past decades that can then be used to enhance this process.
- Plans on controlling colleges, SETA's must assist with funding, then pilot areas should be identified and officially announced for each province.

One of the criteria for obtaining approval and accredited for teaching students on R.169 is adhering to principles of recognition of prior learning.

3.3.3.4 Other post school support

The availability of Acts and legal frameworks support the continuing of learning to the learners who are already registered as para-professionals. Both the SANC and

Department of Higher Education as the accreditation bodies are supportive of the principle of recognition of prior learning. This is promoted because individuals should be assessed for the purposes of certification and alternate access and admission for further learning and development in appropriate colleges.

It is stated in the SANC, circular (9/2013) that learners should be advised in the activities and services available to them on coaching as well information on accessing integrated curriculum designs that are available and can assist them. Furthermore, it is stated that a variety of assessment practices ought to be used in assisting the learners to acquire the learning credits required so that they are classified on the next descriptor in the NQF level which will and can be achieved. Various "forms of formal and non-formal learning that learners acquired" should also be recognised (SANC,2013).

The policy of RPL informs them for the advancement and of an award. This process ensures that learners after intense assessment for entry of exemption have chances of advancement to the next level of acceptance. The adoption of the NQF had challenges. This is evident through the postponement of dates for phasing in of the nursing qualifications (Circular 12/2014). It appears as if the policymakers were aiming at implementation, without planning for the transition period. Many facts indeed point to this assumption as; the current band of ENAs when compared to the new Registered Auxiliary Nurses, the current class's package of training could not compete with the coming ones. Further challenges that emanated from the adoption of NQF were related to interpretation of the Acts, whereby it was stated that legacy courses will be discontinued (Circular 13/2014). Due to the fact that there was no evidence of transitional measures of the curricula leads to a conclusion that there were uncertainties, the private health education providers took the matter to court on the issue whereby they lost the case (Private Health Education providers of South Africa (Pty) Ltd vs South African Nursing Council, 2015).

The regulations have been changed to align with global changes. The SANC's role is to ensure the rendering of quality care, thus "training shall direct the development of nurses on professional level with the principle of learning" (SANC, 1989). The process was done for the enrolled nurses who were bridging to become registered

nurses. Similarly, the processes that can be followed as bridging can be recommended. The process is to make sure that learners can independently work and functions on their own. The pre-course or foundation course will then be easier to upgrade, and the candidates can attain the equivalent level (5) five on the National Qualifications Framework. The pre-course will enable one to get opportunities to train as an enrolled nursing auxiliary. The linking of education with the workplace is dependent on the continuous skills development of the learners.

The post-school system is inclusive of all the institutions, private and public. The stakeholders that are supporting the processes on skills development are clustered according to the area or department of specialisation. The roles of the SETA's are to give mandatory grants to employers on submission of their skills plans. For the HWSETA, as a stakeholder, it is recommended that there should be accurate data about the workplace, whereby together with the SANC, the exact plan must be executed (DOHE,2013). on how many ENA's are affected by the processes. Plans should be based on the basic data, and thereafter they are to deliver programmes that are necessary for the sector. This situation warrants implementation, thus to get support there must be a submission in the annual strategic plan that, after assessment, they plan to develop a programme to make sure that the affected ENA's could be supported. The white paper envisages planned change in the role of the HWSETA in skills development, planning and implementation in supporting the provision of education and training.

The role of HWSETA, as a stakeholder, will strengthen the relationships between the colleges and employers and as such there must be continuous support by establishing such offices in each college (DOHE, 2013:16). Through the classifications of the NQF, nursing is on the Higher Education band. The legacy curriculum of the ENA's falls outside this band as it is classified as level (3) three on the descriptors. The researcher deems this to be inappropriate (SAQA, 2012). Nursing is not classified under the vocational colleges. In the plan for the community colleges, with nursing for ENA's at a level below higher education, the development of a curriculum for the community colleges will be a way to support the ENA's academically. The NQF is aiming at ensuring that the planned curricula are created in a way that allows articulations between the succeeding levels, wherever possible,

but in the case of nursing there is an omission of a level (4) four, which should be dealt with.

3.4. SUMMARY

Research findings related to academic support for the enrolled nursing auxiliaries following the adoption of the national qualifications framework were presented in this Chapter. The themes and subthemes identified from documents reviews were discussed. Quite a number of gaps were identified, which requires redress. The identified gaps were theoretical content, clinical practice as well as cognitive thinking learning gaps. The next Chapter concludes the study. The limitations, conclusions and recommendations are discussed.

CHAPTER FOUR: LIMITATIONS, CONCLUSIONS AND RECOMMENDATIONS

4.1 Introduction

The previous Chapter outlined the discussion of the research findings, whereby research realisation was done. The findings are supported by the discussions from the reviewed documents and direct quotes from the documents, themes and sub themes that emanated from the reviewed documents. In this final Chapter, the study's limitations, recommendations, and conclusions are discussed. The conclusion provides the evidence that the aim of the study was achieved. The aim was to explore the academic training gap between the qualifications for the Registered Auxiliary Nurse and the Enrolled Nursing Auxiliary and recommend academic education and training to support the ENA's in bridging the competency gap following the adoption of the NQF level (5) five qualifications. Recommendations for stakeholders in the nursing education field, nursing research and policy makers are formulated and presented.

4.2 Limitations of the research

Even if this topic provides a fluent discussion on academic support for enrolled nursing auxiliaries, there are some limitations on the research findings. The following are limitations that were identified by the researcher:

The implementation processes on the phasing out of legacy courses did not commence as scheduled, as there were postponements of dates. This could be attributed to dual accreditation on the nursing status. Nursing is accredited to South African Nursing Council and the Department of Higher Learning. This poses a limitation, because had the processes commenced earlier, the gaps would have been identified sooner and could possibly have been rectified by this time.

Qualitative research is mostly viewed and characterised by the involvement of collaborative interaction between researchers and participants in data collection. The data collection method of document analysis however differs. The documents have a voice in that they are created by Parliament which is the voice of the people of the Republic. To avoid misrepresenting the meaning of the documents, there was reading and engaging with the independent editor to ensure the meaning from the documents is maintained.

4.3 Conclusions

The conclusions presented here are based on the research results as discussed in Chapter Three and further discussions in the upcoming sections of this Chapter.

4.3.1 Overall conclusion

Research regarding the academic support for enrolled nursing auxiliaries who are on the level (3) three in the national qualifications framework is limited. The present study revealed that ENA's require academic support following the adoption of the NQF as there are identified learning gaps in theoretical content, clinical practice and cognitive thinking. These identified gaps contributes to the way the current ENA's who are placed in level (3) three on the NQF fails to secure employment. This entails a total of 75.63% ENA's who are currently unemployed (SANC, 2015). Despite the fact that South Africa has a vast shortage of nurses, the identified gaps can be linked to the state of unemployment of these para professionals (SANC, 2015).

This study further, recommended that the stakeholders involved in education and training of the ENA's should provide support through reinforcing the set rules and regulations to support this category of nurses as soon as changes will be implemented. However, it is evident from the findings that articulation and recognition for prior learning is still in the planning phase, thus there must be measures that will improve implementation of RPL to maintain to sustainability. The Department of Higher Education states that articulation should be understood and be functional, and policies have to be followed (DOH, 2013:70).

The statement further explains that "at present, many universities do not recognise courses taken at other universities, the same can be said of colleges"; it is on this basis that the development and support of post school articulation will benefit ENA's academically.

4.3.2 Proposed recommendations

The recommendations for this research are based on the discussions and conclusion statements from Chapter Three. Some of the ENA's who have been left in limbo because of a skills/competency deficiency that has resulted in most of them largely remaining unemployed, as reported by the survey (SANC, 2015).

4.3.2.1 *Academic support for the current ENA's and recommendations to the stakeholders in bridging the competency and theory gaps.*

As mentioned above, the current ENA's who are at level (3) three on the NQF should be supported through implementing measures to close the academic gap to level (5) five and through bridging the *competency, and theory gaps*. Most important; for the provision of quality care, changes should be effected by means of implementing strategies as a matter of priority. These strategies should include prioritisation on increasing competency and theoretical knowledge to acceptable existing levels so that the ENA's are brought up to level (4) four or (5) five as per the National Qualifications Framework. Such development will ensure that the ENA's are not left out of the national qualifications framework which emanated from the transformation of nursing education in South Africa.

The adoption and implementation of the NQF is an important aspect in nursing as it will produce better equipped nurses who are competent and knowledgeable in both theoretical knowledge and practical skills. The outcome will reduce the challenges as associated with the ENA's who are left out in the current National Qualifications Framework. Activities to bridge the skills gap will require academic support in order to produce competent and knowledgeable nurses to satisfactory levels and thus hopefully decreasing the rates of unemployment of the ENA's. This can only be possible if DHET and SANC work together in a united endeavour to bridge the knowledge and competency gap.

4.3.2.2 Programme for support and collaboration with stakeholders

The success in implementation of the NQF is based on collaborations with all stakeholders, aimed at supporting the ENAs academically so that the objectives of the study can be achieved. Cooperation between the Department of Higher Education and the SANC will ensure the maintenance of quality assurance throughout the process. The academic support of the ENA's will also allow them to become independent practitioners, capable of fulfilling the mandate of nursing care. The transformation is aimed at uplifting nursing care to be on par with international standards.

The current ENA's are at NQF level (3) three which does not fall under the ambit of the Higher Education band. There however are structures that can assist in upgrading them to a higher level through adequate support. The consequence of the apartheid system influenced the education and training of these nurses (SANC, 2009:1) and they should therefore not be disadvantaged. It is on this basis that there must be assistance on correcting what transpired in ensuring that the NQF is well adopted and that the ENA's who are currently excluded in the framework can also be adequately trained and mentored. This can be achieved through collaborations between stakeholders such as HWSETA and the Department of Higher Education and Training.

The Department of Higher Education through workplace and work-integration learning (DHET, 2013:64) should assist with programmes funded by the SETA's. One of the reasons that the SETA's were established, was to "support the provision of education and training for the workplace", furthermore this is a key focus in addressing challenges on post school education (DHET, 2013:61). This will ensure that HWSETA will then use the national as well as the skills demand to supply data and full information on how many learners would require assistance. It is on this basis that HWSETA ought to assist with strategies aimed at capacity development as they are the funders and partners in the government on levels below level (5) of the NQF and consequently excluded from the Higher Education Department.

It is further recommended that the colleges that were closed down could be amalgamated into single colleges. These should be opened for learning so that workplace and work-integration can continue as required by the DHET.

The HWSETA should also be involved in mentoring the ENA's as one of their key functions is to support holistic training and skills development, to a point where HWSETA should also establish offices on the institutions' premises.

4.3.2.3 Recommendations for nursing education

Recognition of prior learning remains a key approach in redressing the injustices of the past and the establishment of relevant hands-on experience in nursing education. The facilitation of the continued process and progress for leaners to move

within the sub-framework in the work place must be practiced (SANC,2013). There must be a programme that is structured by means of set learning experiences that will lead to a qualification based on previous obtained qualifications. The researcher concurs with SANC on its report of the survey done on the ENA's, namely, that this category of nurses should be retrained. The retraining of this category should be based on objectives that will facilitate access, mobility and progression within education NQF Act 67 of 2008.

According to SANC (2009:16) an ENA who has "attained learning through work experience may utilise the RPL process". The recommendations are; to update the skills and knowledge gap and RPL principles should address that.

The principles of RPL require that learners should provide evidence of prior learning by means of portfolios or other forms of appropriate evidence and/or challenge examinations so that the principle should be applicable to the learner. This is strongly recommended as well as a route that is worth pursuing.

Furthermore, the processes should include the working together of learners as well as educators. Educators are expected to provide the summative assessments to be included in the work-integrated learning.

The nursing colleges should submit the credits that the learners acquired before retraining to SANC so that the credits could be considered during decision making.

ENA's who are employed; the emphasis should be placed on participation in continuous professional development (CPD) programmes as mandated by SANC. In addition, open and distance learning should be used. The nursing education institutions (NEI's) should be engaged in programmes that will standardise in-service training that is aligned to the recommended bridging training curriculum. They should aim at bridging the competency and theory gap in collaboration with the HWSETA.

4.3.2.4 Recommendation to the policy makers

It is strongly recommended that there must be a new curriculum which should be geared at bridging the competency and knowledge gap of the ENA's, enabling those at NQF level (3) three to be upgraded to level (5) five.

The curriculum should combine theory and practice, with the outcome aimed at assessing the candidates through formative clinical assessment activities such as summative assessment (which is explained as formalised assessment used to certificate the accomplishment of a level of education) (SANC, 2013:4). Learners should thus receive integrated education and training to achieve both theoretical and practical competencies for positive clinical outcomes.

The programme should ensure that clinical placements meet the requirements of the RAN programme as determined by the Council. The incorporation of clinical education and training must be provided in clinical facilities as accredited by SANC.

All clinical training records should be kept and monitored by the mentors and HWSETA. The HWSETAs are expected to produce plans within time-frames and have to make sure that the updated programme is registered with the NQF. The duration should be less than a full calendar year, as the category has already acquired some skills on the curriculum. It is further recommended that there must be formulation of strategic plans to form the foundation of the service level agreement as required by the Skills Development Act. This service level agreement must be renewed with the DHET annually (WP: PSET, 2013:67).

4.3.2.5 Recommendations for research

To improve patient care and practice, research should encourage and promote evidence-based nursing with more skills and competencies as prescribed by the Education and Training Ministry. The third National Skills Development Strategy has raised research and innovation to a strategic level (DHET, 2013:63). Based on the research findings of this study and discussion, further research is needed to explore other options in the training of the lower categories especially ENA's so that they must be on par with the RAN's who commence training on level five of the NQF.

It is mentioned that some of the challenges impact on the "way we understand our challenges as a nation" (DHET, 2013:63). In the case of the Private Health Education Providers of South Africa vs SANC (2015) it is evident that the adoption of the NQF had an impact on nursing in understanding and implementing the legal

framework after transformation. It is on this basis that there should be exploration of different models and strategies on curricula development especially on the new developments that should be supported through the National Skill Development Strategy and funding.

Research is required for the stakeholders so that the outcome can build more facts. The dual accreditation should also be researched on with the aim of lowering or entirely removing delays in decision making.

4.4 Evaluation and final conclusion

In Chapter One, an overview of the study is provided by outlining the introduction and background to the study. The research problem was formulated; the research questions and the purpose of the study were discussed. In section1.2, the researcher indicated that the previous training of the ENAs was not standardised, and the training was conducted at the hospitals, furthermore the admission criteria was not well defined. The outcome of the study indicated that there must be assistance in the transition period. The study noted that there are ways to fill in the missing qualifications especially through engagement and collaboration with other stakeholders.

To the researcher's knowledge, this study is the first one of its kind to be conducted regarding academic support for the enrolled nursing auxiliaries following adoption of the National Qualifications Framework. The conducting of the research was an eye opener to the researcher in terms of the academic gap identified by the study. This research report reflects the significance of the study which was conducted with the purpose of achieving the research objectives and provides feedback that the researcher considers appropriate.

The findings of the study can be generalised as the data collection tools were secondary documents, that when read by any other person, the findings will remain the same. The findings that the ENA's are excluded from the higher education on the NQF, and that there is an academic gap that must be bridged will be identified by any person who read the documents, will still find the similar findings.

The knowledge gained through this study, is very important for the Department of Higher Education and Training, the South African Nursing Council, the Health and Welfare Sector Education and Training Authority, nursing education and the nursing institutions where the Enrolled Nursing Auxiliaries are rendering care.

The methodology used was suitable for qualitative, explorative, and descriptive inquiry as it yielded results that were reaching the objectives of study. Non-probability, purposive sampling, utilising the snowball technique for document analysis was employed. The nine practical steps in analysing documents as propounded by de Vos *et al., (*2011:381*)* were adopted and followed to the letter. From the themes, statements were formulated which argue for the need for academic support for the enrolled nursing auxiliaries following adoption of the national qualifications frameworks. These led to proposed recommendations to stakeholders to help bridge the competency and theoretical gap in support of the enrolled nursing auxiliaries.

Chapter Three presents the research findings based on the documents review. The findings were supported with direct quotations and excerpts from the official documents. The final Chapter concludes the study by discussing the limitations of the research as part of conclusions and recommendations.

In conclusion, the declaration can be made that the purpose of the mini- dissertation was accomplished, namely to explore the academic training gap between the qualifications for the Registered Auxiliary Nurse and the Enrolled Nursing Auxiliary and to recommended academic education and training support for the ENA's in bridging the academic training gap following the adoption of the NQF level (5) five.

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Annexure A

Tebogo Baipidi Auditte Titus Turnitin Report

by Dr Francis Lugayizi

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