

Tuhinga whai tohutohu | Consultation document

Review of enrolled nurse and
registered nurse competencies
Including amendments to the
registered nurse scope of practice
statement

December 2023

Ngā pātai whaitohutohu | Consultation questions

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Please keep this response confidential

Overall feedback

Thank you for the opportunity to provide feedback. A few initial notations are made here with some general commentary. Within the NCNZ Competencies consultation December 2023 document key points that have been drawn from the document to inform this feedback include:

Drivers for setting new scopes;

- To clearly describe what nurses do and what it means to do that competently
- To ensure the key features of education programmes can create competent and safe practitioners
- To take account of the changed environment and health context
- To enable a future focussed workforce to meet delivery of healthcare services
- To have credibility with the profession and other **key stakeholders*** (including other professions, regulations, employers, educators and internationally)

Plus

The Pou and competency alignment to scope statements developed via core themes (Page 9);

1. Positioning of Te Tiriti o Waitangi, Kawa Whakaruruhau, and cultural safety in everyday practice
2. Breadth of knowledge and skills across the life span in all settings consistent with educational preparation and level of competence
3. Professional accountability and responsibility to provide safe nursing care
4. Collaboration and partnerships with whānau and communities across the life span, and an interprofessional healthcare team

Firstly, it is acknowledged that the proposed Pou of Competence for both EN and RN capture the shifts we are seeing in health and the complexities of care nurses need to demonstrate to be able to assess, plan, apply/deliver and evaluate safe clinical and cultural care. From a metrics perspective, in terms of how we measure these proposed competencies in our various programmes such as Nurse Entry to Practice (NETP) and the Professional Development Recognition of Practice Programme (PDRP) with example of episodes of care and practice delivery the proposed could be challenging.

Can consideration be given to **simplifying, reducing and applying consistency** across EN and RN Pou/headings and competencies? This could offer a more usable and workable framework to both activate in practice and measure from the point of view of key stakeholders* as noted above.

Can consideration be given to using the Pou and competency alignment to scope statements developed via core themes (page 9/noted above) as alternative Pou or heading options (with some modification), for both EN and RN?

For EN and RN the competency detail that is then applied to each of the revised Pou could be provided specific to their scope. The RN competencies would be different and progressive showing a clear differentiation or delineation between the two scopes. In addition, this could potentially offer a pathway to progression for any EN's. In practice, education and for employers delineating between EN and RN scope can often become grey and unclear. Being clear on the different scope aspects between EN's and RN's is in practice not always well articulated across the variety of healthcare contexts and employers and by the nurse themselves. This can result in risk around scope creep and practice application, which is an area we need to be able to avoid to ensure public safety.

For the proposed RN Pou, professional accountability and responsibility to provide safe nursing care is not positioned as a heading and appears embedded within Pou three and six; greater visibility of this as a Pou/header for RN's would be preferable, especially as it is noted as a core theme (Page 9 a/a). For the proposed EN Pou and competencies this is captured well under Pou four.

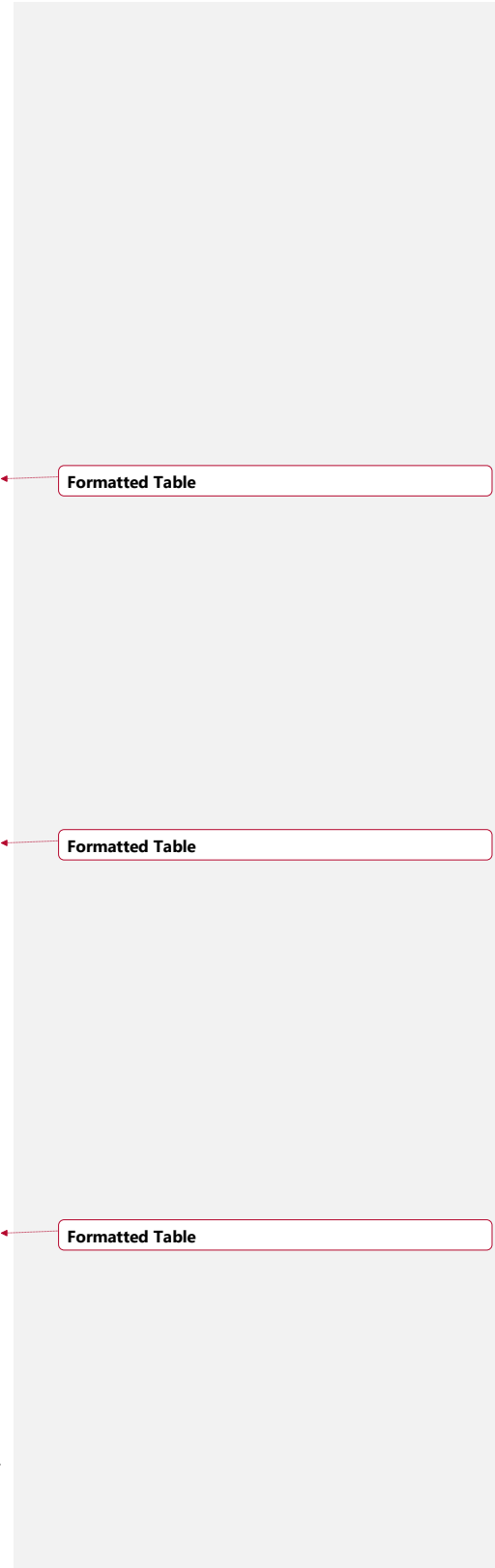
Further thoughts/commentary are noted below particularly within the RN proposed Pou/competencies.

Enrolled nurse competencies

Consultation questions	Your response
Question 1. Do you think the proposed enrolled nurse competencies are broad enough to cover all practice areas?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Comment	
Question 2. Do you agree with the overall structure of the proposed enrolled nurse competencies?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Comment	

Pou One: Te Tiriti o Waitangi	
Question 3. Do you agree with the scope and focus of Pou One: Te Tiriti o Waitangi?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partly <input type="checkbox"/>
Question 4. What would you strengthen, change, or add to Pou One?	
Pou Two: Cultural Safety	
Question 5. Do you agree with the scope and focus of Pou Two: Cultural Safety?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partly <input type="checkbox"/>

Question 6. What would you strengthen, change, or add to Pou Two?	
Pou Three: Knowledge Informed Practice	
Question 7. Do you agree with the scope and focus of Pou Three: Knowledge Informed Practice?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partly <input type="checkbox"/>
Question 8. What would you strengthen, change, or add to Pou Three?	
Pou Four: Professional Accountability and Responsibility	
Question 9. Do you agree with the scope and focus of Pou Four: Professional Accountability and Responsibility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partly <input type="checkbox"/>
Question 10. What would you strengthen, change, or add to Pou Four?	This has been captured well for EN's and as a header/recommend the same should apply for the RN's proposed Pou (see below)
Pou Five: Partnership and Collaboration	
Question 11. Do you agree with the scope and focus of Pou Five: Partnership and Collaboration?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partly <input type="checkbox"/>
Question 12. What would you strengthen, change, or add to Pou Five?	
Other comments	
Question 13. Do you have any other comments?	See overall comments inserted above.



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Registered nurse competencies

Consultation questions	Your response
<p>Question 14. Do you think the proposed registered nurse competencies are broad enough to cover all practice areas?</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>Comment</p>	<p>Broad enough, however some duplication. In practice, episodes of care and example of practice will be challenging to demonstrate and measure due to the volume of competencies. How could they be refined/streamlined?</p> <p>A suggestion is made to use your core themes on your NCNZ Competency consultation Dec 2023 document page 9, as your headings for both the EN and RN.</p>
<p>Question 15. Do you agree with the overall structure of the proposed registered nurse competencies?</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>Comment</p>	<p>Overall structure is clear with Pou of competence (header domains and competence structured below) and yet 6 Pou is challenging in the reality of the practice setting. The headings for RN lean into the healthcare shifts of what we know is crucial to transformational change however do they fully stand out as what we need to be able to articulate is the work of nurses?</p> <p>Some key aspects we know are important to the professionalism of nursing (Responsibility/Accountability) appear to be embedded or lost within the proposed Pou and are therefore at risk of becoming deactivated or an add in rather than a must have.</p> <p>Unclear as to how a nurse might demonstrate each of the competencies within each Pou. Understanding that the aim is for them to achieve the Pou overall but does that mean each competency within the Pou need to be reflected within one example or will they need to provide an example for each competency? Supportive of having one reflection per Pou that demonstrates all competencies.</p>

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Pou One: Te Tiriti o Waitangi, Ōritetanga and Social Justice

<p>Question 16. Do you agree with the scope and focus of Pou One: Te Tiriti o Waitangi, Oritetanga and Social Justice?</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>Partly <input type="checkbox"/></p>
<p>Question 17. What would you strengthen, change, or add to Pou One?</p>	<p>Please consider connecting 1.1 and 1.5-individual and team obligations to Te Tiriti-a distinguishing factor for Aotearoa.</p> <p>1.5 speaks to keeping informed and up to date with developments of our understanding of Te Tiriti, for example the movement from the 3 Ps to the 5 principles identified by the Waitangi Tribunal. I think 1.5 should stay on its own.</p> <p>1.1 needs rewording or merging with an overall competency that demonstrates identifying breaches of the Te Tiriti and responding in some way. Potential to merge / reword with 1.2?</p> <p>Supportive of retaining the word equity throughout this Pou.</p> <p>Can 1.3 and 1.4 become one competency with revised narrative?</p>
<p>Pou Two: Kawa Whakaruruhau and Cultural Safety</p>	
<p>Question 18. Do you agree with the scope and focus of Pou Two: Kawa Whakaruruhau and Cultural Safety?</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>Partly <input type="checkbox"/></p>
<p>Question 19. What would you strengthen, change, or add to Pou Two?</p>	<p>Supportive of keeping 2.2 and 2.3 separated as 2.3 ensures that the nurse can demonstrate the obligation to Tangata Whenua (indigenous peoples of NZ) and to Te Tiriti o Waitangi.</p> <p>Could incorporate competency that demonstrates the implementation of cultural models of care e.g. Fono Fale, Te Wheke etc. Noting these models get taught in undergraduate training.</p>
<p>Pou Three: Pūkengatanga and Excellence in Nursing Practice</p>	
<p>Question 20. Do you agree with the scope and focus of Pou Three: Pūkengatanga and Excellence in Nursing Practice?</p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>

	Partly <input type="checkbox"/>
<p>Question 21. What would you strengthen, change, or add to Pou Three?</p>	<p>This is a really important Pou although we think this pou is over complicated. The competencies seem to be disparate and challenging to follow; with specific and general elements. Can consideration to reduce and simplify be taken?</p> <p>Does it capture what we want to see from care that is delivered in a timely, accessible, safe and quality focused approach? Agree it needs to be about practice where quality clinical and cultural care is delivered in unison. Can the premise of this be captured to guide comprehensive assessment, care management and evaluations with critical thinking through the lens of clinical and cultural excellence?</p> <p>Can the importance of evidence based/knowledge or informed practice (as you have for the EN) be included to capture the importance of mental/psychological health need as equitable to the physical presentation and the social impact affecting the person and their whanau. The shift in recent years in recognising the importance of mental and psychological wellbeing on that of a person with what appears to be a physical presentation cannot be negated. This is an area we want to raise the visibility on, as an attribute of nursing excellence (parity of esteem), so that nurses are more ready, able and capable of communicating and building authentic connection and to ensure every interaction they have with our patients and whanau is one that counts.</p> <p>This Pou does not accommodate for Community or RN prescribing –it would be logical to have in this document to future proof nursing.</p> <p>Some of the competencies can be merged to avoid repetition and encourage a more holistic approach. For example:</p> <ul style="list-style-type: none"> • 3.3 is about planning care and 3.8 is about evaluation of care. These should not be done in isolation, when planning care, they should incorporate evaluation into the plan. Also reviewing any other feedback or evidence in their planning. • 3.4 Potential to lift up even further by referring to the tools the nurse accessed / utilised to assess or deliver care. Tools that complement the fundamentals of nursing care. • Does there need to be such specific competencies around medication and infection prevention. Does 3.5 come under the broader competency 3.11. Can 3.4 to be simplified or removed.

Pou Four: Manaakitanga and People Centredness	
Question 22. Do you agree with the scope and focus of Pou Four: Manaakitanga and People Centredness	Yes <input type="checkbox"/> No <input type="checkbox"/> Partly <input checked="" type="checkbox"/>
Question 23. What would you strengthen, change, or add to Pou Four?	<p>The content is important critical as is Pou 5, we would recommend simplifying as per core themes (page 9, as noted above). One suggestion would be to join Pou four and five making sure the importance is not lost.</p> <p>Some specific feedback:</p> <ul style="list-style-type: none"> •review the wording to give clarity •some could be difficult to demonstrate and assess for example compassion is often measured by someone else (service user / whānau) telling you that what you did demonstrated compassion. • potentially this Pou and Pou 5 could be combined and then simplified
Pou Five: Whakawhanaungatanga and Communication	
Question 24. Do you agree with the scope and focus of Pou Five: Whakawhanaungatanga and Communication?	Yes <input type="checkbox"/> No <input type="checkbox"/> Partly <input checked="" type="checkbox"/>
Question 25. What would you strengthen, change, or add to Pou Five?	<p>As for the narrative provided above, important content, however consider simplify as per core themes or join to Pou four. Supportive of reducing and merge some competencies where they can be.</p> <p>Specific feedback:</p> <p>5.5 should focus on tailoring language according to the audience / person in front of them?</p>
Pou Six: Rangatiratanga and Leadership	

Question 26. Do you agree with the scope and focus of Pou Six: Rangatiratanga and Leadership?	Yes <input type="checkbox"/> No <input type="checkbox"/> Partly <input checked="" type="checkbox"/>
Question 27. What would you strengthen, change or add to Pou Six?	<p>Agree mastery at all levels is important. Enabling flexibility and choice to achieve this is different for all as nurses grow and move through stages of learning, change, practice development and growth.</p> <p>This Pou is important to capture leadership at all levels / ages / stages. To enable all levels of nurses to complete, we support altering some of the competencies to capture all stages. For example, 6.2 talks to contributing to healthcare system development, it might need to reflect a nurses' role (big or small) in contributing to the healthcare system E.g. by completing incident forms you can influence change and development. Current wording appears to be aimed at high level influencing by management / leadership roles.</p>
Other comments	
Question 13. Do you have any other comments?	

Registered nurse scope of practice statement amendments

Consultation questions	Your response
Question 28. Do you agree with the proposed amendments to the registered nurse scope of practice?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have any comments?	Partly, with the change for EN's – to seeking guidance from an RN or other registered health practitioner, when appropriate (and establishing a relationship) how will an EN always know, when it is appropriate...? If a stage of learning or level of skill has not been achieved or there is

Consultation questions	Your response
	<p>a degree of unconscious incompetence- how is this supported and guided?</p> <p>Important to ensure the right safety netting is in place so we can support and guide competence growth and more clearly delineate between the EN and RN scopes in practice? This is also important for employers to be able to understand, to avoid scope creep and minimize risk to the public.</p>
<p>Question 29. What would you strengthen, change, or add to the proposed registered nurse scope of practice</p>	
<p>Do you have any other comments?</p>	<p>See overall comments inserted above.</p>