To Whom It May Concern/ Aotearoa New Zealand Nursing Council,

First, I'd like *to applaud the steps* that are being taken to address the health and cultural sensitivity disparities that have long been identified which are taking place in this country in the form of the Pae Ora Act 2022. These changes and movements to educate the workforce are long overdue. Formally addressing Cultural Sensitivity and adherence to Tiriti O Waitangi is a positive step in the right direction.

I must also admit, however, that I have been opposed vehemently to the PDRP for the grounds that it is primarily self-reflective accounts, nurses can make alliances with each other and sign each other off without actually witnessing practice, the number of written reflections required can bog nurses down who are already strained by current staffing situations and hectic workloads, and the PDRP is not an accurate indicator of expertise as it favors specific demographics while leaving out others (Nurses who struggle to write long reflections, nurses who may not have strong allegiance in the workplace or work in hostile workplaces). Placing this *vital* information in the competencies content in the PDRP also allows for gaps, as not all nurses in Aotearoa participate in this programme. There are MANY nurses in Aotearoa who strongly detest the PDRP in its current iteration and the way it is being carried out. The PDRP is useful for new RNs and ENs but not all nurses- and, as I just mentioned, not all nurses are even participating in them. A major overhaul for the PDRP is needed and an approach that is entirely inclusive to the current workforce should be implemented- the principle of self-determination (Rangatiratanga) should be extended to nurses in the workforce around this programme, especially in a moment where New Zealand nurses are leaving in large numbers.

I suggest implementing <u>a mandatory learning module for ALL nurses</u>, which would include a mandatory test (like ACLS/BLS- etc). Nurses must pass this test to demonstrate understanding of the new areas addressed by the Pae Ora Act 2022- not have it left to another "self-reflective" exercise in the already bloated workload the PDRP hands to Aotearoa Nurses. *This module would be mandatory continuing education credits to maintain licensure* instead of placing it in the PDRP. It might be wise to take inventory of specific continuing education credits that could be implemented for all nurses, as this ensures there are no gaps. Several State Boards of Nursing in the USA have a practice that requires nurses to complete mandatory education hours on specific subjects that are deemed vital by that state's governing boards (HIV education for Washington State, Domestic Violence for multiple states, BioTerrorism for Nevada, the list goes on...etc.). Cultural safety and adherence to Tiriti O Waitangi are long overdue. They should be embedded in required CONTINUING education- meaning it will be repeated as long as nurses renew their licensure.

Thank you for listening to my comments and suggestions on the matter, and I'd be delighted to chat personally about these ideas or expand on them.

Ngā Mihi Nui,

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