

12 February 2024

Nursing Council of New Zealand

PO Box 9644 Wellington

6141 New Zealand

competenciesreview@nursingcouncil.org.nz

Tēnā koe Cath,

Re: Feedback on review of enrolled nurse and registered nurse competencies including amendments to the RN scope of practice statement

Thank you for the opportunity to provide feedback on the review of enrolled nurse (EN) and registered nurse (RN) competencies, including amendments to the RN scope of practice statement.

We wish to acknowledge the members of the EN and RN design groups, including Māori and Pacific expertise, that have worked with the Nursing Council of New Zealand to inform this review.

Amendments to the RN Scope Statement:

- We note that changes to the new EN scope of practice statement was an independent process to the review of EN competencies. It is not clear why there is a different process applied to the RN scope statement.
- We note inclusion of “*differential diagnosis*” in the scope statement but cannot find an explanation for this or a definition of what this means. This will have challenging implications for the beginning nurse and nursing education standards.

Review of proposed EN and RN competencies:

- We note that the EN and RN scopes have differences in Pou which impacts domestic workforce development. As the largest employer of nurses in the health system, we see the benefit of Nursing Council supporting the development at pace of a staircase for EN to RN qualification in parallel to this review. In particular, we feel the EN qualification should be credited into an RN undergraduate degree. This may require reviewing the education standards.
- The EN competencies reflect a novice nurse whereas the RN competencies read as advanced with new concepts such as social justice. Adding new concepts into basic continuing competence will have implications for employers, nursing education standards and professional development needs of all nurses. We do not see the NZ context reflected with the inclusion of the Health and Disability Commissioner Act (2001).
- The competencies should reflect and build on the new EN scope statement. The EN competencies do not reflect the last paragraph which states the need for access to guidance from a registered nurse or health practitioner.
- It is not clear why there are differences between EN and RN Pou one and Pou two. We support making Te Tiriti and cultural safety for both scopes the same.

- We note that the review of cultural safety guidelines is not complete. We strongly advise Nursing Council completes this critical work as a matter of priority to inform any changes to EN and RN competencies, and scope statements.
- There is a significant increase in competencies (41) and expectations, such as leadership. The consultation documents lack detail to guide education programmes or examination or assessment settings for new nurses or those with competence concerns.
- We support simplification and fewer competencies to meet continuing competence and ensure patient safety. Examples noted are absence of reflection on practice in Pou 1 and 2, unclear why cultural safety and kawa whakaruruhau are in the same Pou, mental health is absent, AI is included with little clarity.
- As an employer, we strongly advise the Nursing Council to involve nurses in practice, those that assess and manage professional development and recognition programmes, and internationally qualified nurses (IQNs). Competencies need to be assessable, and we are concerned that new graduates and IQNs would not meet these requirements, particularly Pou 1, 2 and 6.
- The document does not mention competencies for nurses working in research, management, digital technology, education and policy, or continuing competence requirements.

It is important that Nursing Council triangulates any proposed competencies with nursing education standards and that guidelines for employers are developed to support any changes.

We would like to request a meeting with the Council to further discuss the points outlined above.

Thank you again for the opportunity to submit feedback. We look forward to receiving a summary of the consultation submissions and the next steps.

Ngā mihi,



Emma Hickson

National Chief Nurse



Nadine Gray

Akatū Aki Hauora Matua: Tapuhi | Chief Nurse

