

Consultation document Tuhinga whai tohutohu

**Proposed standards of competence for
enrolled and registered nurses**

Including amendments to the registered
nurse scope of practice statement

July 2024



Te Kaunihera Tapuhi o Aotearoa
Nursing Council of New Zealand

Have your say / Me pēhea te whakatakoto tāpaetanga

How to make a submission

We would like to hear your views on our proposals for standards of competence for enrolled nurses and registered nurses, and amendments to the registered nurse scope of practice statement. We appreciate your time and effort to respond to this consultation.

The consultation is structured into two parts – enrolled nurse and registered nurse. You do not need to answer all questions. Please respond to the questions that are relevant to you.

The closing date for submissions is **5pm Friday 2 August 2024**.

Submitting as an individual

If you are completing your submission as an individual, you can choose to complete a short anonymous [survey](#) or provide more substantive feedback via our [submission template](#). We will ask you for some information about yourself to help us understand the responses we receive and the impact our proposals have on different groups. We will only use this information to inform the Council's decision on the final standards of nursing competence.

If you choose to submit via the submission template, we may publish your submission. Please clearly indicate if you would like your response to be kept confidential to the Nursing Council.

Submitting on behalf of an organisation

If you are submitting on behalf of an organisation or group, please use our [submission template](#). This will help us to better understand your submission and make sure your views are fully considered. Please also include your name and name of your organisation in your submission.

We may publish your submission. Please clearly indicate if you would like your response to be kept confidential to the Nursing Council.

Sending your submission to us

You can send us your submission by emailing it to competenciesreview@nursingcouncil.org.nz.

Please direct any questions you have in relation to the consultation process to competenciesreview@nursingcouncil.org.nz.

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Introduction / Kupu whakataki

Under the Health Practitioners Competence Assurance Act 2003 (the Act), the role of Te Kaunihera Tapuhi o Aotearoa Nursing Council of New Zealand (the Council) is to protect the health and safety of the public by providing mechanisms to ensure that nurses are competent and fit to practise.

These mechanisms include setting scopes of practice and standards of competence for the nursing profession. A scope of practice statement describes the general nature of the nursing role and is broad rather than prescriptive. Standards of competence (also known as competencies) define the combination of skills, knowledge, behaviours, values, and abilities that underpin effective performance as a nurse. Standards of competence are used to:

- inform nursing education curriculums
- assess nursing students before registration
- assess nurses returning to the workforce
- assess overseas nurses looking to work in Aotearoa New Zealand
- assess the ongoing competence of nurses.

We regularly review scopes of practice and competencies to clearly describe what nurses do, and what it means to do that competently. In reviewing these standards, we need to consider the context in which nursing is practised and taught. The scope and expectations of nursing have increased significantly over the last few decades and regulation, practice, and employment arrangements must keep pace with these changes.

It is important that the standards we set can enable a flexible future-focused workforce to meet health needs and deliver quality health services. They must also have credibility with the profession and other stakeholders and be able to be implemented in practice.

Te Tiriti o Waitangi and equity for Māori

The Council carries out its functions within the context of its commitments, responsibilities, and obligations under Te Tiriti o Waitangi and has developed a [Te Tiriti o Waitangi policy statement](#) to guide its work.

This commitment is reflected in several key actions we have identified to uphold Te Tiriti o Waitangi. These include:

- **Building relationships with tangata whenua:** the Nursing Council is focused on identifying and building relationships with tangata whenua (Māori) partners to work collaboratively and in partnership. This collaborative approach is essential to understanding and addressing the unique needs and aspirations of Māori nurses and the Māori population in healthcare.
- **Engaging and collaborating with the wider sector and stakeholders:** collaborating with strategic partners, with a focus on a commitment to working together to advance ngā mātāpono / principles of Te Tiriti o Waitangi and improve healthcare outcomes for Māori as a key strategic partner.
- **Examining the data and representation:** analysing data to understand the representation of Māori nurses within enrolled nursing and registered nursing, and the healthcare workforce. This is a crucial step in addressing disparities and taking proactive measures to improve representation and healthcare outcomes for Māori.

- **Historical and future aspirations:** understanding historical tangata whenua connections to enrolled nursing and registered nursing and working in partnership to enact aspirations for the future. This involves acknowledging the past while working towards a more equitable future for Māori in nursing.
- **Kawa whakaruruhau, cultural safety and competency:** the Council recognises the importance of kawa whakaruruhau, cultural safety and competency in nursing practice. The Council is working to ensure ENs and RNs are appropriately prepared and competent, with a strong focus on kawa whakaruruhau and cultural safety. This is aligned with the Council's statutory role to protect public safety, particularly in the context of Te Tiriti o Waitangi, and is essential for achieving equitable health outcomes for tangata whenua.
- **Incorporating te reo Māori (Māori language) and concepts:** the Council recognises the importance of preserving Māori language and culture in nursing practice and education. Overall, these actions promote cultural competency, inclusivity, and respect for Māori culture and values in the nursing profession. This is essential for providing equitable healthcare for all in Aotearoa New Zealand.

What are our next steps

Following consultation, the Council will consider all feedback and make decisions on the final standards of competence. We will publish the feedback and final standards of competence on our website later in 2024.

We will work with the sector over the next year to implement changes resulting from the new scopes and standards.

Background / Kōrero whakamuri

The Council consulted on proposed enrolled nurse (EN) and registered nurse (RN) competencies between 18 December 2023 and 12 February 2024. At the same time, we sought feedback on an amended RN scope of practice statement to align with the newly developed EN scope of practice statement.

Previous consultation materials are available [here](#).

A summary of what we heard from this consultation is found [here](#).

The distinct roles of enrolled and registered nurses

ENs and RNs have distinct scopes of practice and competencies, each with their own significance and mana. Both play crucial roles in the health system contributing to the overall effectiveness and efficiency of person/whānau centred care. Their collaboration forms a critical foundation for delivering high quality health care.

Direction and delegation

One of the features of the current EN and RN scopes of practice, including their respective competencies, is the requirement for RNs to 'delegate to and direct' ENs. The new EN scope of practice, [consulted on in 2022](#), removes this requirement from the EN scope of practice statement. The new scope of practice statement, and associated proposed standards of competence, instead focus on an EN establishing a relationship with the RN and wider healthcare team. This includes seeking guidance from an RN or other registered health practitioner, when appropriate.

As part of the new EN scope of practice, the proposed new standards of competence are intended to enable a more optimal scope of practice than in the past. They are intended to recognise that the EN works in partnership and collaboration with individuals, their whānau, communities, and the wider healthcare team that may include a leadership or coordination role within the team. They consider the differences in role expectations between an EN and RN.

Differential diagnosis

A feature of the RN scope and competencies is the inclusion of differential diagnosis. Differential diagnosis has become a key element of nursing practice that incorporates history taking, comprehensive nursing assessment, and clinical reasoning skills. This level of critical thinking develops with practice from novice to expert. A differential diagnosis is not an official diagnosis, but a step before determining what condition may be causing a person's presenting symptoms. Different conditions often share similar symptoms.

Reviewing the RN scope of practice statement

We have reviewed the RN scope of practice statement, and the RN competencies, in the context of changes to the EN scope of practice. At the same time, we have taken the opportunity to modernise and align the language, where appropriate, to recognise areas of commonality. We have also included a footnote to clarify that both scope statements describe general nursing functions to meet some legislative definitions of 'nurse'.

You can review the commonalities and differences between the EN and RN scopes of practice [here](#).

Design groups guided changes to the initial competencies in phase one

In phase one, we established EN and RN design groups with members drawn from the Council, the New Zealand Nurses Organisation (including Te Poari o Te Rūnanga o Aotearoa), Te Kaunihera o Ngā Neehi

Māori, Māori and Pacific nursing leaders, directors of nursing, educators, and employers. Consultation included a series of wānanga with Māori nurses to guide the review of the cultural safety and kawa whakaruruhau guidelines and their application to nursing competencies.

These design groups informed the development and design of the competencies for initial consultation in late 2023 - early 2024, as well as the amendments to the RN scope of practice statement. The design groups' Māori rōpū guided the development of the pou (domains) to ensure Te Tiriti o Waitangi, kawa whakaruruhau and cultural safety concepts were reflected.

The design groups analysed [international competencies](#) with comparative international jurisdictions and researched broadly within the realms of current and relevant academic literature. The design groups also considered the context in which nursing is practised and taught in Aotearoa New Zealand.

Project leads and some members of each design group have been across both EN and RN projects to ensure alignment. Concepts were tested through a broader sector reference group and wider sector engagement. In addition to the consultation call for submissions, the Council continues to seek wider engagement to hear a range of views and perspectives on the proposed changes.

We have continued to engage with design groups in phase two

We have continued to engage with the design groups as we have developed the revised proposals in phase two following consultation. These proposals have been informed by consultation feedback.

Council project leads, members of the Māori rōpū, and some members of the EN and RN design groups have supported us to develop the proposed revised standards of nursing competence. Concepts have been tested through wider stakeholder groups.

The use of Māori kupu (words)

The Council has included Māori kupu and concepts within the proposed standards of competence. In consultation with our Māori rōpū from the EN and RN design groups, the preference is to avoid direct translations. Therefore, pou have Māori kupu and English words, which are not intended to be a translation of each other, rather to add depth and meaning.

The pou is an important symbol in Māori culture. Its identity, meaning, and significance reflect the deep connection that Māori have to land and traditions. In this context, the pou tells a story of the core values of nursing and the connection with a Māori world view.

We acknowledge that there are regional differences in the meaning of kupu Māori. Māori are not a homogenous culture; while there are many common threads, themes, and links, there are also many differences. Different dialects of te reo Māori often build on regional differences between Māori in various parts of Aotearoa. For example, the meaning of pou in Te Arawa means anchor, while in other regions, it means pillar.

The understanding of the diversity within Māori culture is essential as we strive to uphold the standards of nursing competence and honor the unique cultural heritage and perspectives of Māori across Aotearoa.

Non direct clinical nursing roles

Practice is not restricted to the provision of direct clinical care. Nursing practice extends to any role where the nurse uses their nursing skills and knowledge. Practice includes working in non-clinical roles, such as in management, administration, education, research, advisory, regulatory and policy development roles that impact on safe, effective delivery of services. The proposed standards of competence are designed to apply to all nursing practice settings.

Our proposals / Ō mātou marohi

What we heard from our initial consultation

The Council received 1,532 submissions from the consultation carried out from December 2023 to February 2024. A full summary of consultation feedback is available [here](#).

General feedback

We received a range of feedback which reflected the following:

Supportive feedback – the proposals covered all aspects of current and future nursing practice well. Many submitters were supportive of the inclusion of certain topic such as Te Tiriti o Waitangi, cultural safety, and digital health. They liked more accountability and scope for ENs and welcomed the breadth of competencies.

Neutral feedback – the proposals were welcomed but required further refinement. Competencies could be amalgamated and condensed in places and wording could be amended. Submitters requested aligning the language and competencies between EN and RN where possible and called for indicators to guide practice.

Critical feedback – there were too many competencies, and they were too academic and complicated. The biggest concern we heard was the impact on completing a portfolio for a professional development and recognition programme (PDRP).

Feedback on EN competencies

Suggestions for improvement included:

- the competencies needed to cover all EN practice areas
- the competencies would benefit from examples
- te reo Māori needed to be translated in the text or the glossary
- te reo Māori could be further incorporated into the pou headings
- there could be greater alignment between the EN and RN pou and competencies
- there were too many competencies – they could be combined with other competencies or condensed.

Feedback on RN competencies

Suggestions for improvement included:

- the competencies needed to cover all RN practice areas
- the pou and structure were generally supported but the competencies needed refining
- the competencies could benefit from indicators
- there were too many competencies – they could be combined with other competencies or condensed.

Feedback on RN scope statement

Suggestions for improvement included:

- the differences between the EN and RN scope of practice statements needed to be further developed and clarified
- where there is similar language used, the EN and RN scope statements should be more closely aligned
- the scope of practice should cover all people and cultures
- the scope of practice needed to be more focused on specific nursing parameters
- differential diagnosis should be better described or removed.

What we propose

Based on the broad range of feedback we received, and guided by the expertise of the design groups and Māori rōpū, we propose:

- reframing the language from 'competencies' to 'standards of nursing competence'
- retaining and emphasising the pou as core nursing standards, with a set of clear descriptors for each pou to guide quality practice in a range of settings
- aligning the EN and RN pou related to Te Tiriti o Waitangi and cultural safety (with an additional descriptor for EN which is reflected in the RN pou heading)
- retaining Māori kupu within the pou and descriptors, with explanations in the glossary.

The proposed standards of competence are intended to provide a broad comprehensive view to reflect the complexities of nursing. They are designed at a level that enables all nurses to apply them in the practice context where they work.

To meet competence requirements, nurses will not need to provide evidence for each individual descriptor. Instead, evidence of the quality of nursing practice needs to be sufficient to reflect each pou.

Employers may develop supplementary and additional competencies for different employment settings.

The use of te reo Māori in nursing aligns with policies, processes and practices that emphasise the importance of cultural safety, kawa whakaruruhau, and competence in health care. It supports the goals of health initiatives aimed at improving Māori health outcomes. We consider it is important for fostering cultural competency, promoting equity, enhancing communication, preserving Māori language and culture, and ultimately addressing health disparities. It reflects our commitment to Te Tiriti o Waitangi and supports the overall wellbeing of Māori nurses and whanau in Aotearoa.

The proposed revised standards of nursing competence and revised registered nurse scope of practice statement can be found [here](#).

The current competencies can be found on the Nursing Council of New Zealand website [here](#). The proposed initial competencies, consulted on earlier in the year, can be found [here](#). A summary of the key changes since that consultation is found [here](#).