

Tuhinga whai tohutohu | Consultation document

Enrolled Nurse education standards Amendments to Registered Nurse education standards

October 2023

Ngā pātai whaitohutohu | Consultation questions

Name of organisation/submitter: College of Emergency Nurses NZ - NZNO

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Please keep this response confidential

Subject	Consultation questions	Your response
Generic set of education standards for nursing programmes leading to registration	<p>Do you agree with a generic set of education standards for all nursing programmes?</p> <p>If so, why?</p> <p>If not, why not?</p> <p>What changes would you suggest to this proposal to make it more meaningful for nursing education providers and programmes?</p>	<p>In principle yes.</p> <p>It creates a common standard and a common understanding.</p> <p>EN & RN should not be viewed in isolation.</p> <p>Would assist with pipelining through qualifications.</p> <p>Sets clear expectations</p>
Standard One	<p>Do you agree with standard one and its criteria?</p> <p>If so, why?</p> <p>If not, why not?</p>	<p>Yes.</p> <p>Particularly agree with the need to have relationships with local Iwi/hapu.</p>

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		<p>The inclusion and reaffirmation is essential, supporting whanau entering healthcare is imperative and having a nursing workforce that can demonstrate dual clinical competence as well as knowledge in Te Tiriti and also its application within nursing ensures this is upheld.</p>
Te Tiriti o Waitangi	<p>Do you think standard one will enable nursing education providers and programmes to meet their Te Tiriti o Waitangi obligations?</p> <p>What changes would you suggest to standard one to make it more meaningful for nursing education providers and programmes?</p>	<p>Changes I would suggest is teaching examples of how this relates to the students and newly graduated nurses practice within clinical settings, rather than talking about a document but actually transferrable within practice.</p>
Standard Two	<p>Do you agree with standard two and its criteria?</p> <p>If so, why?</p> <p>If not, why not?</p>	
Safe care for the public	<p>Do you think standard two will ensure nursing education programmes' focus on safe and socially accountable practice?</p> <p>What changes would you suggest to standard two to make it more meaningful for nursing education programmes?</p>	<p>Yes</p> <p>CENNZ agree with the proposed standards.</p> <p>We would also suggest the need for Clinical Supervision.</p> <p>Given the unique challenges and experiences encountered by nurses, and the realities of nursing practice, having structured supervision can provide a platform for addressing sensitive issues and fostering a supportive learning environment.</p> <p>2.1 The current healthcare system is unsafe in terms of Cultural safety, therefore teaching and applying Kawa Whakaruruhau within practice is essential to change this, reinforcing this with new EN/RN nurses will enable this to improve the healthcare environment now and moving forward. This is also transferrable to all cultures as we become a more culturally diverse country.</p> <p>2.7 Supporting strategies to increase a Māori nursing workforce is essential to remove health gaps. The previous 30 years has seen little growth in this area, in order to match future</p>

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		population growth different strategies and action is needed.
Standard Three	Do you agree with standard three and its criteria? If so, why? If not, why not?	Yes
Academic governance, leadership and partnership	Do you think standard three will ensure nursing education programmes' focus on safe and socially accountable practice? What changes would you suggest to standard three to make it more meaningful for nursing education programmes? Do you think criteria 3.1 reflects the positioning of the Head or Lead of nursing to enable quality outcomes from the nursing education programme?	I would suggest changing who is appointed in these roles, currently there are nurses in these roles who are not from NZ, are not NZ trained and therefore lack a cultural and historical awareness of where a lot of our whanau come from. That is, doing a Tiriti paper and lived experiences are separate having NZ nurses ensures it is genuine and also builds our own nursing leaders within NZ.
Standard Four	Do you agree with standard four, that includes individual schedules for EN and RN programmes of study, and its criteria? If so, why? If not, why not?	Regarding the use of AI. There is a need for thoughtful consideration. Acknowledging AI's potential benefits, it is proposed to include it in contemporary practices, but this should be done with strict governance and only where appropriate. Academic institutions face challenges in regulating AI, some programs may not be equipped to ensure its safe and responsible use. 4.10 Preceptors need training and support, this is often delegated to staff with no formal training.
Enrolled Nurse schedule Programme of Study	Do you think standard four will ensure nursing education providers and programmes enable graduates to achieve safe and competent practice? What changes would you suggest to standard four to make it more meaningful for nursing education providers and programmes? Do you agree with the proposed change to ākonga/students completing	Students remunerated for their clinical hours. Recognizing the significant contribution they make to healthcare settings during these practical training sessions, fair compensation would not only acknowledge their efforts but also alleviate financial burdens. Advocating for accessible and cost-effective transportation to clinical placements is essential. By ensuring free or subsidized parking and public transport options, we can ease the logistical challenges faced by nursing

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	<p>a minimum of 700 clinical hours and 900 hours if required?</p> <p>If the number of clinical hours is reduced, what measures would the Nursing Council use to evaluate EN ākonga/students quality learning experiences?</p>	<p>students, allowing them to focus more on their education and less on social/financial issues.</p> <p>CENNZ does not support the reduction of clinical hours.</p> <p>If changes to hours are made:</p> <p>Robust learning outcomes for clinical placements.</p> <p>Appropriate support for both the Education institute AND clinical placement sights to be able to achieve these Learning outcomes and provide appropriate support to the ākonga/students i,e standardized DEU & funded CLN/ALN positions across ALL placements.</p> <p>Regarding 4.10 Are the nursing education providers responsible for ensuring this education is given to the preceptors from the Clinical placement sites?</p>
<p>Registered Nurse schedule</p> <p>Programme of Study</p>	<p>Do you think standard four will ensure nursing education providers and programmes enable graduates to achieve safe and competent practice?</p> <p>What changes would you suggest to standard four to make it more meaningful for nursing education providers and programmes?</p> <p>Do you agree with the proposed change to RN ākonga/students completing a minimum of 1,000 clinical hours and 1,400 hours if required?</p> <p>If the number of clinical hours is reduced, what measures would the Nursing Council use to evaluate RN ākonga/students quality learning experiences?</p>	<p>As above.</p>
<p>Standard Five</p>	<p>Do you agree with standard five and its criteria?</p> <p>If so, why?</p> <p>If not, why not?</p>	<p>Yes</p>

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Ākonga/Student Experience	<p>Do you think standard five will ensure students are appropriately supported?</p> <p>What changes would you suggest to standard five to make it more meaningful for nursing education providers, programmes, and students?</p>	
Standard Six	<p>Do you agree with standard six and its criteria?</p> <p>If so, why?</p> <p>If not, why not?</p>	Yes
Ākonga/Student assessment	<p>Do you think standard six will ensure assessments are robust and effectively demonstrate graduates meet the competencies?</p> <p>What changes would you suggest to standard six to make it more meaningful for nursing education providers and programmes?</p>	Reviewing the standards of our nursing at EN & RN level is absolutely necessary. This will also allow gaps to be examined.
Standard Seven	<p>Do you agree with standard seven and its criteria?</p> <p>If so, why?</p> <p>If not, why not?</p> <p>What changes would you suggest to standard seven.</p>	<p>Yes, this proved to be successful during COVID.</p> <p>Adapting and utilizing nursing students in 'disasters' either natural, or environmentally is necessary, especially in view of the health workforce shortages internationally. This also allows these students to maintain or learn new skills and transfer this learning to clinical hours and therefore reaching their clinical hours requirement.</p>
Emergency Events	<p>Do you think standard seven will enable nursing ākonga/students to contribute during emergencies to support communities?</p> <p>What changes would you suggest to standard seven?</p>	<p>Yes.</p> <p>Also teaches resilience and adaptability. The option for students to volunteer in these scenarios should be supported. Capturing clinical hours in 'disasters' should be supported.</p>
General Questions	<p>Do you have any additional comments you would like to make regarding the consultation?</p>	