

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:

We may publish submissions on our website. Please check the box below if you would like your response to be kept confidential.

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, support a generic suite of standards that promotes nurses working and learning together. As long as the specific aspects of EN and RN practice is evident/</p>

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Standard One	Do you agree with standard one and its criteria? If so, why? If not, why not?	Yes, reflects extensive work shops to date, is thorough and sets standards for culturally safe practice.
Te Tiriti o Waitangi	Do you think standard one will enable nursing education providers and programmes to meet their Te Tiriti o Waitangi obligations? What changes would you suggest to standard one to make it more meaningful for nursing education providers and programmes?	
Standard Two	Do you agree with standard two and its criteria? If so, why? If not, why not?	Acknowledge the emphasis on diverse learners and that not all learn in the same way.
Safe care for the public	Do you think standard two will ensure nursing education programmes' focus on safe and socially accountable practice? What changes would you suggest to standard two to make it more meaningful for nursing education programmes?	Yes however need to link in with local community aspirations for health to ensure the programme is a reflection of society and community.
Standard Three	Do you agree with standard three and its criteria? If so, why? If not, why not?	Support principle of approved lead at each site however need to be able to explore flexibility for smaller/satellite sites.
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	Referring to 3.8, there needs to be greater authenticity towards Kaupapa and matauranga Maori in evidence, beyond (lecturers) being "supported in their own development...." Programme lead needs to be able to reflect and represent the community

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	from the nursing education programme?	
Standard Four	<p>Do you agree with standard four, that includes individual schedules for EN and RN programmes of study, and its criteria?</p> <p>If so, why?</p> <p>If not, why not?</p>	<p>Could consider how the programme is planned out, e.g. over the academic or calendar year.</p> <p>The agreed hours must consider clinical and workplace preparation. Considering the spread of clinical hours and placements, rather than reducing hours, explore opportunities for a student training allowance which can take pressure off students who need to earn during holidays thus gaining additional weeks for placements.</p>
<p>Enrolled 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 ākongā/students completing 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 ākongā/students quality learning experiences?</p>	<p>Fifty percent of theory hours with a defined nursing focus needs to be explained further.</p> <p>No, whilst it is stated that there is little evidence related to clinical hours vs clinical competence (pg 7), the reduction in hours seems arbitrary and would benefit from more explanation. The primary purpose should be preparation of students rather than increasing student placements.</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 ākongā/students</p>	<p>Fifty percent of theory hours with a defined nursing focus needs to be explained further.</p> <p>No, support maintaining overall hours however consider utilising simulation hours to support clinical learning.</p>

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	<p>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>	
Standard Five	<p>Do you agree with standard five and its criteria?</p> <p>If so, why?</p> <p>If not, why not?</p>	
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>	
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>	<p>Assessments must reflect specific requirements of RN and EN practice. Requires oversight to ensure assessment process consistency across programmes.</p>
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>If standard seven is invoked, reduction in clinical hours needs to reflect year of study, e.g. would not support a reduction in hours in year 3 however any reduction in year 2 can be made up. Overall, however, do not support reduction below the minimum programme hours.</p> <p>Substitution of hours to simulation should be considered for the RN programme as well. Need</p>

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		<p>to ensure that aspects of the programme are not compromised, e.g. mental health.</p> <p>Standard seven needs and process should be reflected in the proposed national student placement contract.</p>
Emergency Events	<p>Do you think standard seven will enable nursing ākongā/students to contribute during emergencies to support communities?</p> <p>What changes would you suggest to standard seven?</p>	
General Questions	Do you have any additional comments you would like to make regarding the consultation?	Given the rigour of 7.2, why can't paid clinical hours be considered outside of standard seven?