

Mātanga Tapuhi Nurse Practitioner (NP)

Purpose

This position statement was prepared in recognition of the need for a definitive statement from the New Zealand Nurses Organisation (NZNO) on the contribution to healthcare in Aotearoa New Zealand (NZ) made by Nurse Practitioners (NPs). This statement has been prepared through focus group research and consultation with NPs and current relevant literature.

Background

In 2001 the first Mātanga Tapuhi Nurse Practitioner (NP), Deborah Harris registered in Aotearoa New Zealand and in 2003 Janet Maloney-Moni became the first Māori NP as well as the first in primary care. The trend Janet began continues with more than half of NPs now working in a primary care setting (NCNZ, 2022). In 2014, with an amendment to the Medicines Act, Nurse Practitioners became authorised prescribers.

In March 2022 there were 612 NPs with Annual Practicing Certificates (APCs) in Aotearoa, by 31 December 2022 this had increased to 672 (NCNZ, 2023). The addition of 60 NPs to the register in a nine-month period is noteworthy and, if this trend continues, the significant milestone of 1000 NPs will be reached in 2026 when 25 years of NPs in Aotearoa is celebrated.

Nurse Practitioner scope and role

The NP Scope of practice is defined by the Nursing Council of New Zealand (NCNZ, 2017) and encompasses competence and legal authority above that of a registered nurse. NPs work autonomously and in collaboration with health care teams to prevent disease, promote health, improve access and health outcomes. The scope of practice enables NPs to construct their practice around the healthcare needs of the communities they work in, allowing them to co-design practices and services which their communities identify as priorities.

Nurse Practitioners are prepared through postgraduate study at Level 9 (Masters level) on the NZQA framework. This preparation is designed to complement and enhance knowledge and skills derived from nursing practice. NPs are well educated, highly experienced clinical nurses who deliver an excellent standard of care which is accessible and therefore more equitable.

Working within communities and in acute care settings, NPs improve access to healthcare for rural and remote communities as well as those with high levels of poverty and vulnerability. The combination of extensive nursing knowledge and clinical expertise makes NPs well placed to manage complexity. They are positioned to bridge the gap in remote specialist care for people who find it hard to access healthcare services. NPs have been shown to be valued by both doctors and health care consumers (Mitchell et al., 2016; Wilson et al., 2021).

Nurse Practitioners provide high quality standards of care taking an individualised approach. As independent and autonomous practitioners, NPs describe practice that is focused on building relationships with healthcare consumers and whānau/family, using a set of skills and tools which include prescribing but places emphasis on communication and history-taking. History taking is pivotal to NP practice and enables a focus on

important details and complexity. Communication helps patients and whānau make sense of their individual and complex situations, and places as much emphasis on the psychosocial and cultural issues as it does on investigation, achieving a diagnosis and treatment options and adds skilled 'translation' and 'navigation' to an NPs tool kit/kete.

Nurse Practitioners develop deep, layered relationships with healthcare consumers and are grounded in their communities through the networks and connections they build. Their reputation is one of approachability, creating a sense of belonging and inclusiveness for whānau/family. Relationship development, straightforward communication and detailed history-taking enables a meaningful care pathway for patients and whānau.

Members of NZNO have expressed the importance of the nursing mindset they bring to health consumer care and stressed that while prescribing is an important part of that care it is one of many tools and skills that is utilised in practice. NPs work collaboratively in team environments, and this has been shown to benefit healthcare consumers (Schadewaldt et al., 2016). NPs are culturally responsive and are grounded in their communities. The community buy-in and networks streamline care through these relationships and networks which decreases barriers to accessing health care.

Analysis of the data gathered by NCNZ in the annual workforce survey shows that the greatest proportion, more than 37% (n=225), self-identified their practice area as primary health care. This is a welcome outcome given that the early rationale for the development of the role in Aotearoa New Zealand was to strengthen the primary healthcare workforce. *'If we start to see NPs as the highly valuable, highly educated and highly intelligent professionals they are, we raise the value of all primary healthcare.'* (O'Hagan, 2023)

NZNO believes that the expansion of Māori and Pacific NPs is essential to achieve the objectives of Pae Ora, particularly a more flexible and equitable health system that meets the needs of Māori and Pacific communities. It is important that Te Aka Whai Ora and Te Whatu Ora co-operate on developing a policy and funding environment that facilitates the growth and training of a Māori and Pacific NP workforce and reduces barriers to that growth.

Māori and Pasifika NPs combine clinical knowledge with cultural and community experience, through listening and respectful conversations, to achieve holistic and culturally appropriate care. Māori and Pasifika NPs, when working for providers within their communities, are able to offer a wholistic support system across health and other social support systems in a way that develops and builds the capacity and rangatiratanga of those communities. They are an essential tool to achieve the Government's, Māori and Pasifika aspirations of equity in health outcomes, and support for NP growth needs to be a priority.

Nurse Practitioners deliver holistic care with a nursing perspective in collaboration with teams in primary, secondary, and tertiary services. With many specialist areas of practice benefiting from the expertise and leadership of NPs. These include but are not limited to aged care; emergency; trauma; perioperative; endoscopy; respiratory and cardiac care; neonatal and paediatric care; cancer services and palliative care, mental health and addictions, and education. Nurse Practitioners specialist knowledge and practice supports both health consumers and their professional colleagues as they navigate complex co-morbidities. Qualitative and quantitative research evidence confirms the benefits NPs provide to healthcare consumers and whānau, and the functioning of healthcare teams, for example the extensive research by New Zealand NP Alison Pirret (2015; 2016; Bogati & Pirret 2021)

Alongside providing health consumer care, NPs support and develop other nurses, developing regional nursing networks and providing mentorship. NPs describe a commitment to mentoring nurses and other health professionals including students of those professions, to develop a depth and breadth of practice that is focused on wellbeing, individual strengths rather than deficits and a sense of place in whānau and community. A shift in the locality of care and a 'as close to home as possible' approach sees NPs identifying and filling gaps created by specialisation and professional silos. Health screening, promotion of wellbeing and prevention of illness are fundamental to their holistic practice in all areas.

Skilful, mana enhancing care is achieved in collaboration with other members of the healthcare team, utilising complimentary skills in diverse settings. Since the NP scope of practice was first proposed nearly 25 years ago (MOH, 1998), evaluations of this care model are conclusive: NP practice is safe, effective, and widely endorsed. NPs utilise every stream of funding available such as ACC; sexual health; Long-Acting Reversible Contraceptives (LARCs); Primary Options for Acute Care (POAC); minor surgery; priority smears and palliative care.

Conclusion

Nurse Practitioners, now influential in the fabric of Aotearoa's healthcare system, are making an increasingly significant contribution to the delivery of the aspirations and obligations in the Pae Ora (Healthy Futures) Act 2021. There remain some ongoing barriers to NP practice including negative attitudes of some in leadership roles; access to section 29 medications; issues with current funding models; and limited time and resources in the promotion of health and wellbeing. A dedicated pathway and ongoing professional development framework for NPs now needs to be established to support the sustainability of this nursing workforce.

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Mission statement

NZNO is committed to the representation of members and the promotion of nursing and midwifery. NZNO embraces Te Tiriti o Waitangi and works to improve the health status of all peoples of Aotearoa/ New Zealand through participation in health and social policy development.

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