



Enrolled Nurses – Scope of Practice Survey 2019



Enrolled Nurse Section
NEW ZEALAND NURSES ORGANISATION

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NZNO Principal Researcher

FOREWARD

The Enrolled Nurse Section NZNO National Committee had been hearing from our members that the current enrolled nurse scope of practice, particularly around “under direction and delegation of a registered nurse or nurse practitioner” had become very limiting and restricting. One of the main reasons being that our nursing colleagues do not fully understand the enrolled nurse scope of practice.

The climate of nursing is changing, enrolled nurses would like to be fully enabled to practice to the top of their scope of practice and to provide safe effective nursing care to the population of Aotearoa New Zealand.

The Section had been meeting with the Nursing Council of New Zealand for a couple of years to discuss the scope of practice and we suggested that we would do the background work, therefore our Enrolled Nurse Scope of Practice survey.

The committee wrote the questions for the survey and asked NZNO to formalise the questions and send out to all enrolled nurses who were financial members of NZNO at the time.

The response we received was over whelming and the answers to our posed questions, were not a surprise. Enrolled nurses had been informing us via various networks that they were either working to the full enabled enrolled nurse scope of practice or they were very restricted in their practice, due to practising under the direction and delegation of a Registered Nurse or Nurse Practitioner.

The Enrolled Nurse Section National committee have met with the Nursing Council of New Zealand in regards to the survey results and have commenced discussions on a way forward for the enrolled nurse scope of practice.

The Enrolled Nurse Section national committee would like to thank Jinny Willis, NZNO Principal Researcher who conducted the survey and completed the analysis of the survey results on our behalf.

Robyn Hewlett
Chairperson
Enrolled Nurse Section NZNO National Committee

Introduction

The Enrolled Nurse Scope of Practice was broadened in 2010. The Enrolled Nurse Section of the New Zealand Nurses Organisation (NZNO) believed that a full review of the scope was timely. Direction & Delegation appears to be the most confusing part of the Enrolled Nurse Scope of Practice. The EN section canvassed all enrolled nurses who are members of NZNO for their view on the issue of delegation and direction, and other components of their work. The Nursing Council of New Zealand will be provided with the study findings.

Methods

A survey of all Enrolled Nurse members of NZNO was undertaken for four weeks commencing 14 November 2019 using the Survey Monkey web-based platform. Invitations to participate in the survey were sent by e-mail link, along with a covering email.

The entire Employment Survey questionnaire covers core employment issues (employer, field of practice, and details of training) along with demographic details, retirement plans, and various aspects of the Enrolled Nurse scope of practice. The survey was developed in collaboration with the Enrolled Nurses Section of NZNO, but was not restricted to survey members.

Of the 1308 invitations sent out, 19 bounced back indicating the email address was incorrect, and 295 (23%) were unopened. A web-link to the survey was also provided for those individuals who did not receive the email invitation. A total of 746 responses were received, representing a response rate of 57% per cent. Data were analysed using descriptive statistics and frequency reported as counts and percentages.

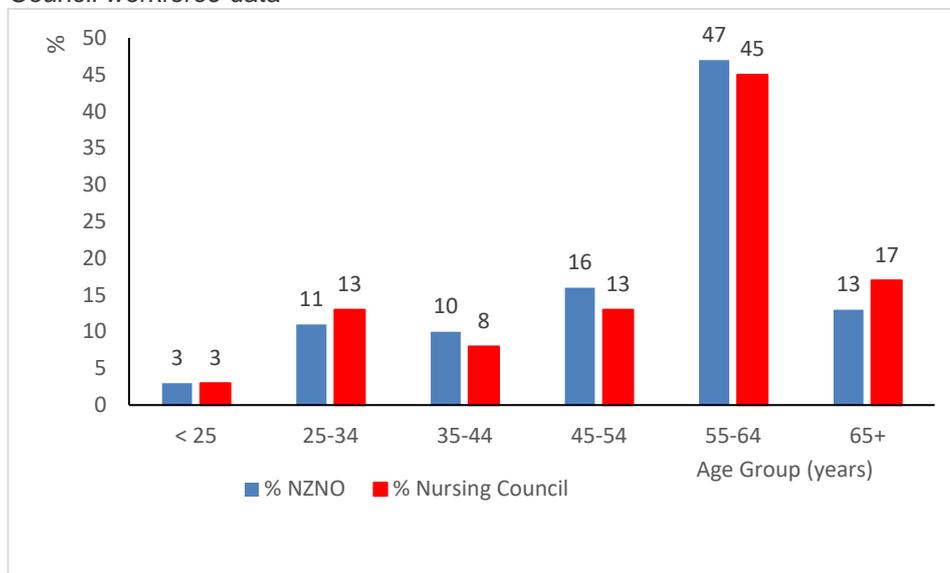
Results

Respondent characteristics

The age distribution of respondents is shown in figure 1 below. The distribution is skewed, with almost half of the respondents (46.6%) aged 55-64 years of age. There are 2391 enrolled nurses according to the Nursing Council of New Zealand *New Zealand Nursing Workforce 2018-2019*. As shown in the figure below, the NZNO survey population is well matched with the entire New Zealand enrolled nurse population.

The survey cohort was predominantly European (NZE 78.9%; Other European 5.2%) with 9.6 percent of respondents identifying as Māori. The remainder of the study cohort comprised Pacific (5.0%), Asian (5.1%) and African (1.9%) nurses

Figure 1. Age Distribution NZNO survey respondents compared with Nursing Council workforce data



Some 94% (n=692) of the survey respondents gained their enrolled nurse qualification in New Zealand. Nineteen nurses (2.6%) trained in Australia and six nurses (0.8%) trained in the United Kingdom.

Employment

Virtually all the participants in the survey (99.1%) were currently registered with the Nursing Council of New Zealand. The majority (n=702, 94.5%) were currently employed, and 14 (1.9%) nurses indicated that they were semi-retired. Only two individuals (0.3%) were unemployed and looking for work. As shown in figure 2, almost half of enrolled nurses are employed in roles within the DHB – in patient sector.

Figure 2. Employer for Main Job

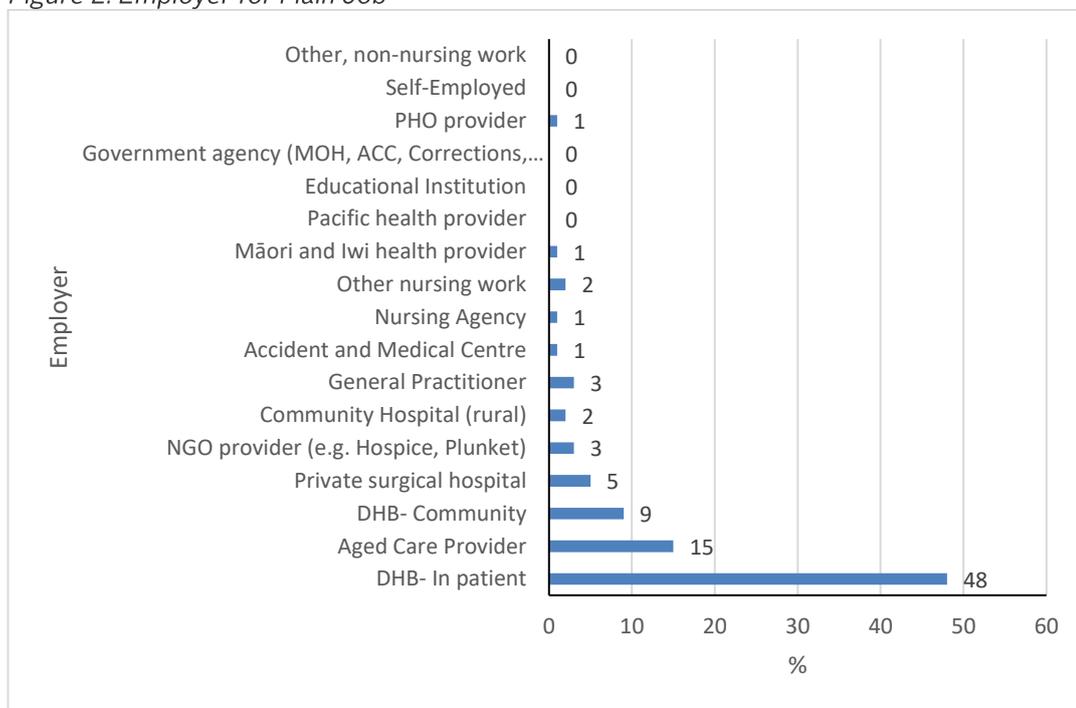


Figure 3. Responses by DHB Region

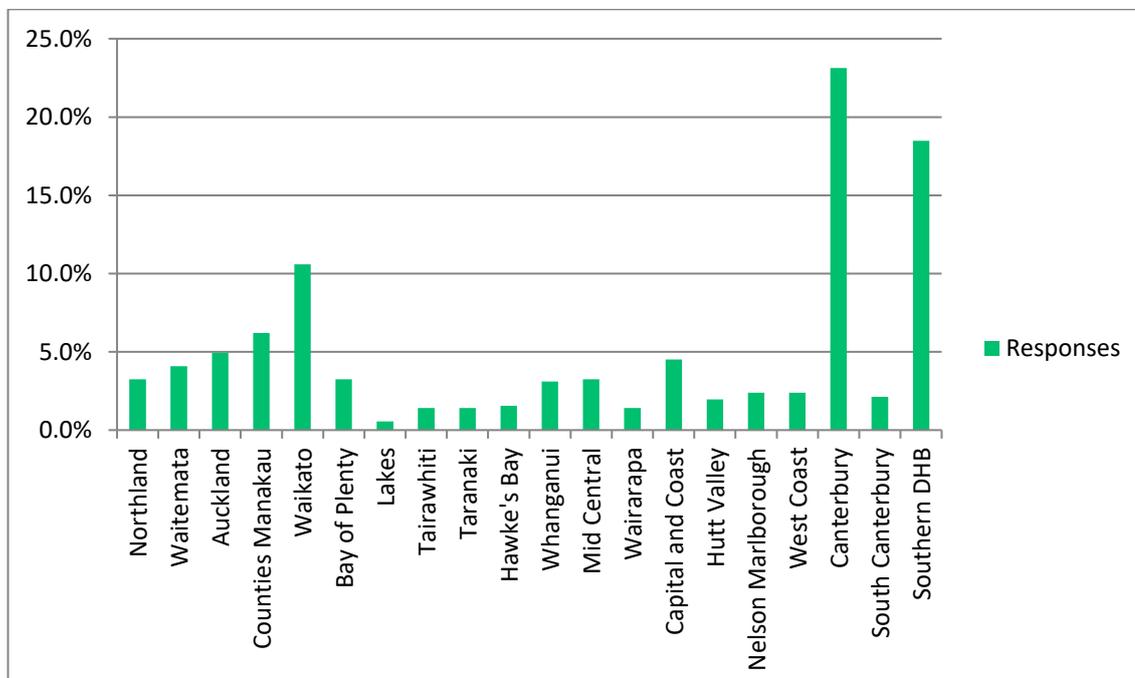


Figure 4. Field of Practice for Main Job

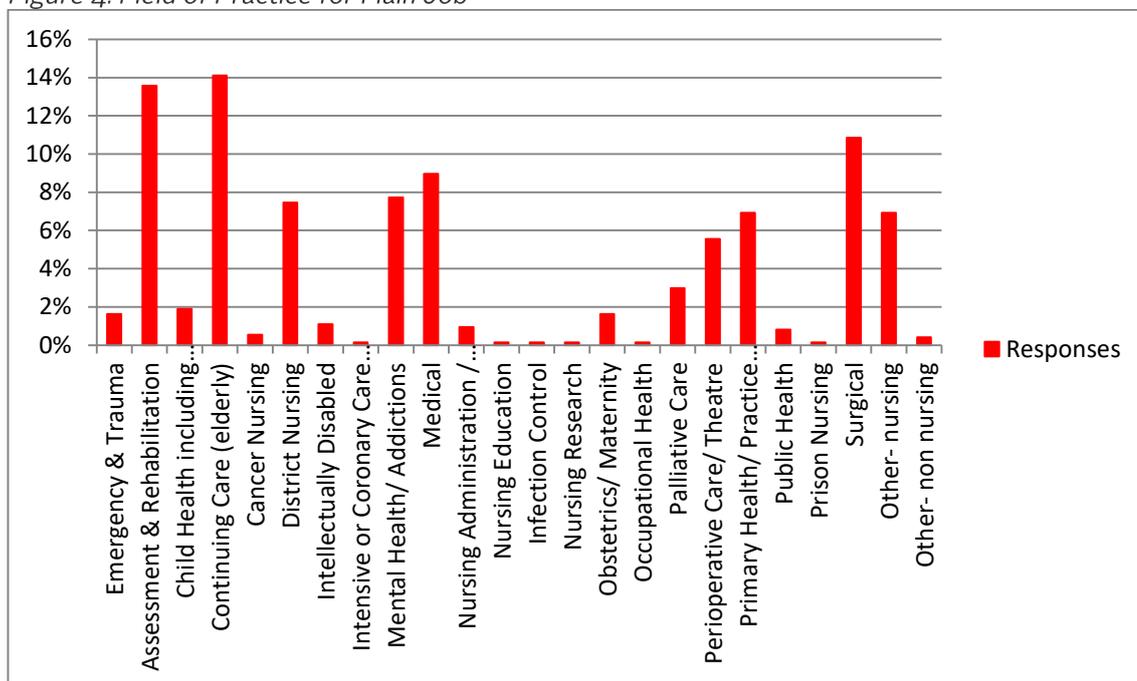
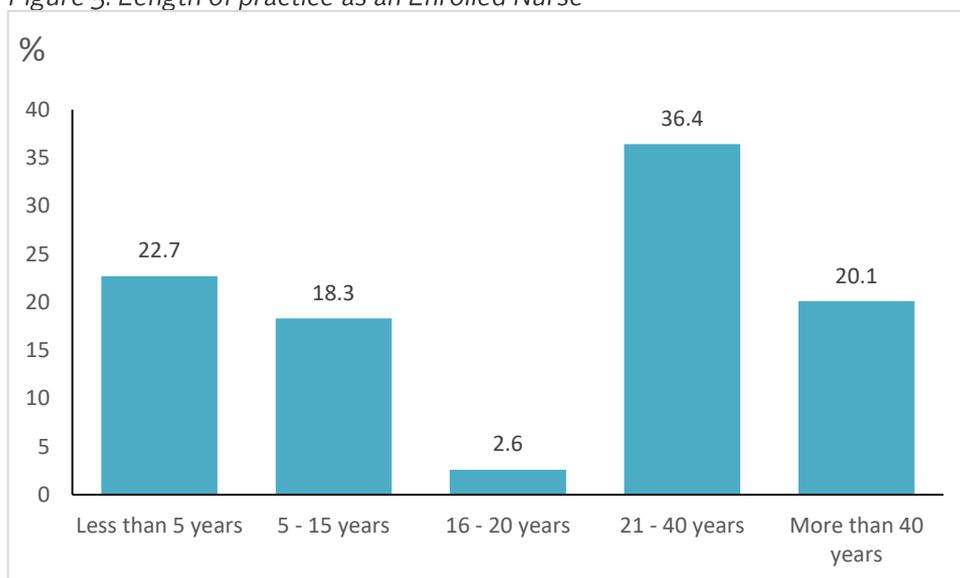


Figure 5. Length of practice as an Enrolled Nurse



The length of time practicing as an enrolled nurse is illustrated in figure 5. The graph does not show a normal distribution. The small numbers of nurses who have practiced 16-20 years likely reflects the period in the late 1980s and early 1990s when training for the enrolled nurse qualification was phased out in New Zealand. Nearly 60% (n=416) of the study sample had practiced as an enrolled nurse for more than 15 years.

Figure 6. Duration until Retirement

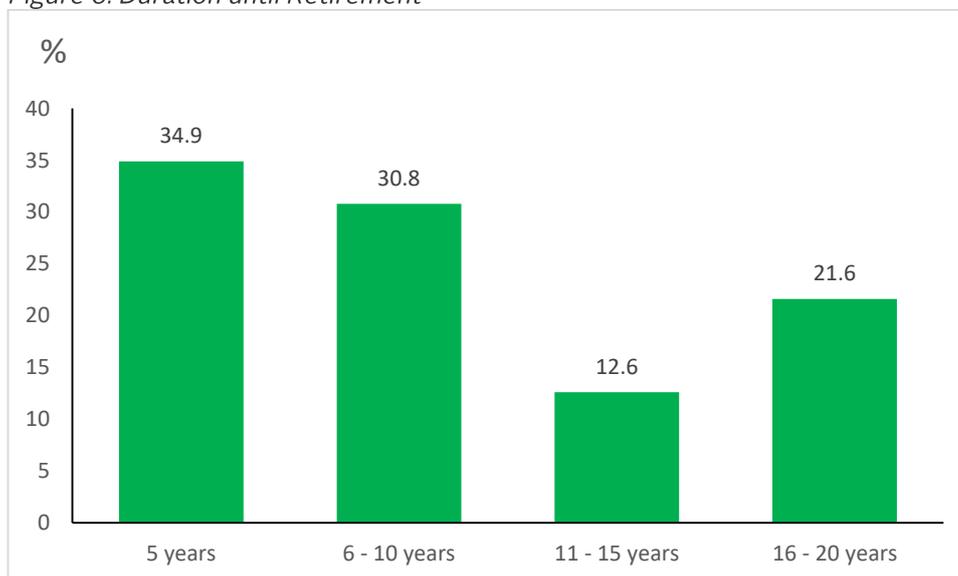


Figure 6 reveals the number of nurses intending to retire in the next 5-20 years. Of concern, more nurses (35%) intend to retire in the next five years, than in any other period. This is consistent with nearly 60% of the cohort being older than 55 years of age. Within the next ten years, 65% of the current EN cohort would have retired if the survey cohort is a representative sample. This has significant training implications for the nursing workforce.

Enrolled Nurse Scope of Practice

Virtually all of the respondents (99%) knew the enrolled nurse scope of practice. However, only 37% of respondents believed that Registered Nurses, Midwives, Nurse Practitioners, Directors of Nursing, workplace educators, and other regulated health professionals understand the Enrolled Nurse Scope of Practice. More than two-thirds (67.6%) of the respondents believed that the most restrictive part of the current enrolled nurse scope of practice was the requirement to practice under direction and delegation.

Comments included:

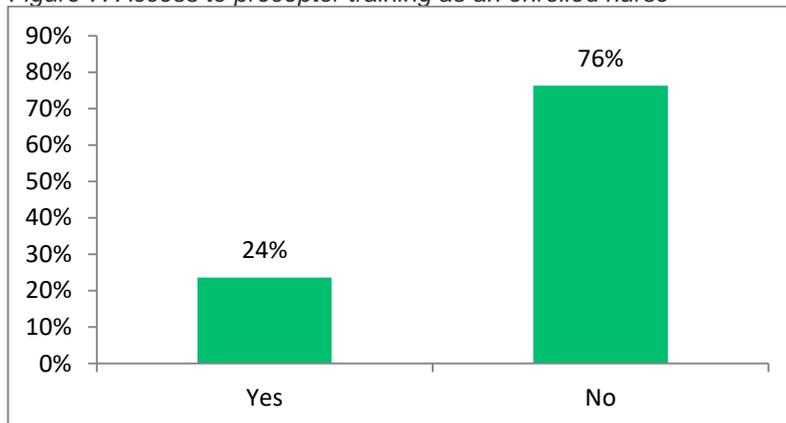
- There is a general lack of understanding of what direction and delegation is Very reliant on the personal perception of others in what direction & delegation means.
- Large inconsistencies remain with this, as you are either micromanaged to the point of the RN overseeing ALL your clinical practice (ie administering meds ...) or the opposite of a laissez-faire attitude and your left isolated without any support mechanism
- Partly but I think our biggest restriction is lack of understanding of the EN SoP and enabling enrolled nurses to work to their full potential. Maybe instead of 'practice under direction and delegation' it could be work in partnership with
- Let's have the wording changed to 'supervision and support or 'working in partnership with RN's
- Most RN's are great and have a good attitude to EN's. But there is still a few out there with a poor attitude to EN's. After all at the end of the day, we are here as a team working towards the same thing. The care and wellbeing of the patient

- I am fortunate to work in a supportive hospital who encourages me to nurse to the top of my scope of practice. This helps me to remain enthusiastic and current
- Peoples lack of understanding about the role. I believe that ENs are underutilised in health care. Ideally in many situations there could be a team of ENs with an RN in charge over seeing. Or, an RN and EN team working together
- Another source of frustration is not being able to perform specific techniques, for example, performing iv cannulation, administering iv antibiotics, and not being able to administer OTC meds. Some nurses also expressed frustration at not being able to practice at the top of their scope.

Preceptor Training

As shown in figure 7, less than a quarter (23.6%) of enrolled nurses surveyed had been able to access to preceptor training.

Figure 7. Access to preceptor training as an enrolled nurse



Respondents who had accessed preceptor training were asked to indicate how the training had occurred. A total of 174 comments were coded by theme. The majority of comments (n=78, 45%) indicated that preceptor training for enrolled nurses had been available; 42 nurses (24%) had joined Registered Nurse preceptor training and 19 nurses (11%) had attended a combined training day for both enrolled and registered nurses.

Comments included:

- All Enrolled Nurses fortunate in gaining a position in the EN Graduate programme have access to a preceptor/s.
- Joined the RN training. Preceptor principles are the same no matter who you are preceptoring
- It is available in my area of work but I get put off every time I show interest in doing the preceptor course as I would so love to be there for the new graduate ENs
- I joined the RN group which was not specific to EN practice, as there is no specific course available to EN's.
- I had enrolled nurses as my preceptors. I had orientation for 6 weeks

InterRAI training

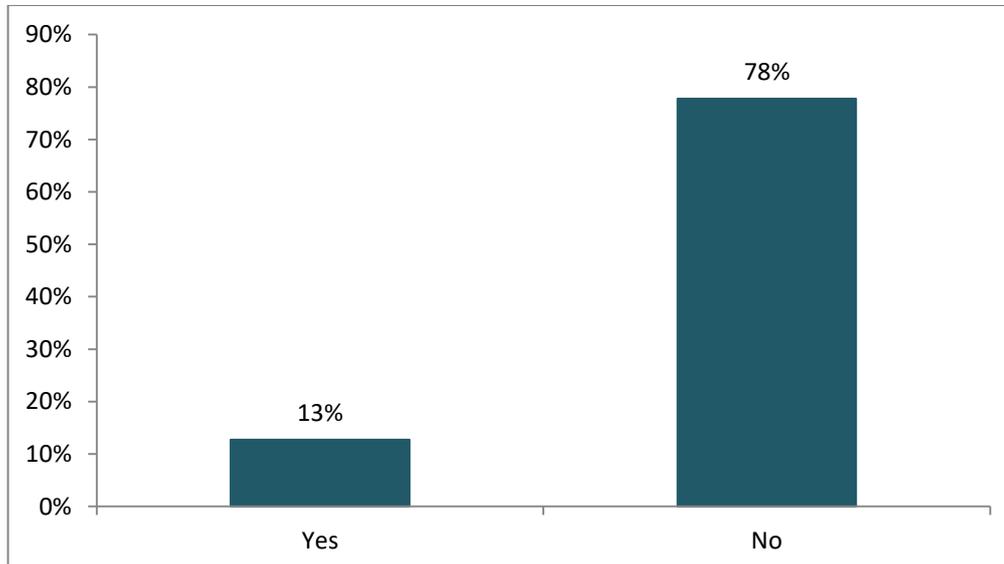
Enrolled Nurses working in aged care were asked if they were being supported to do the training for, and/or if their current work involved the use of the InterRAI suite of clinical assessment instruments. Only 256 nurses answered the question. Only 40 respondents (16%) indicated that they either had access to the training or were currently using InterRAI. The majority of respondents (n=120, 48%) did not have access to training or use of the tools and the remainder (n=93, 36%) indicated it was not applicable to their work setting.

Comments included:

- No. Only Registered Nurses have InterRAI training
- I have had training and now an assessor for interRAI in community for contact assessments
- No. Not allowed to do this even though I have asked to do it many times to support RNs
- My last position was in aged care and I did InterRAI as I asked to do it and had worked at the facility for 13 years
- Previously a Needs Assessor I was declined InterRAI training

Administering Immunisations in Primary Health Care

Figure 8. Enrolled Nurses working in Primary Health Care who administer immunisations



The survey explored the extent to which enrolled nurses who worked in Primary Health Care were delivering immunisations. The question was answered by 392 respondents, with only 50 nurses (13%) indicating that they were doing immunisations. The comments revealed a wide range of involvement in immunising activity. Only eight nurses indicated that they administered the full range of immunisations. Seven enrolled nurses were authorised vaccinators, and thirteen nurses gave vaccinations under delegation. Some nurses never gave live vaccines, and others did not vaccinate babies.

NZNO Research:

Comments included:

- Have discussed with our officer of Medical Health and she feels this would be helpful in today's climate if ENs could become registered vaccinators after training and meeting competencies
- Am fully qualified immuniser
- Trained vaccinator but cannot become 'authorised' due to being an enrolled nurse, even though I have done the same training
- In my previous position in Primary Health care I was able to vaccinate after completing the
- IMAC vaccinators certificate but not as an independent vaccinator. Immunisations mainly I gave were B12, Tetanus & Flu
- I have recently completed vaccination training, waiting to complete practical assessment before being able to give vaccines. Also waiting for scope guidelines from MOH
- Although having completed vaccinators course several years ago where I achieved 98%, and 2 yearly updates, I am still restricted to vaccinating adults in flu season only. Very frustrating!

Ease of moving into different areas of health care as an Enrolled Nurse

Asked whether enrolled nurses were finding it easier to apply for and move into other areas of health care as an enrolled nurse, almost three quarters (81%) respondents indicated that it was not easier. Comments were invited. Among the 183 comments received, 72 (39%) respondents indicated that they were happy with their current role and/or had not looked for other opportunities. Mental Health and Primary Health care were supportive fields of practice for enrolled nurses (n=22, 12%). Respondents stated that there was variable employment of enrolled nurses within DHBs and this was supported by the range of comments with 26 (14.2%) nurses indicating that ENs were employed throughout their DHB, while 12 (6.6%) nurses reported restricted options for ENs in the DHBs. Sixteen (8.7%) nurses commented that either jobs were not available or at least not advertised.

Summary

- The survey received 746 responses indicating a high degree of interest in a review of the enrolled nurse scope of practice. Nurses from all the DHBs participated.
- The NZ cohort of enrolled nurses is very experienced; 36% having practiced for 21-40 years and 20% have exceeded 40 years of practice.
- Two thirds of respondents indicated that they planned to retire within the next 10 years.
- Little more than one third of enrolled nurses believed that other regulated health professionals understood the enrolled nurse scope of practice.
- The requirement to work under direction and delegation represents the most restrictive part of the current scope of practice for two thirds of enrolled nurses.
- Access to preceptor training was very limited.
- Access to training for InterRAI was very limited.
- Among enrolled nurses working in primary care, relatively small numbers were giving immunisations, and often this was restricted to a limited range of vaccinations.
- It remains difficult for enrolled nurses to move between different areas of health care. Employment options for enrolled nurses vary considerably between DHBs.

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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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