



New Zealand Nurses Organisations

**Submission
on the**

Nursing Council of New Zealand

**Scopes of Practice for Nursing
Consultation Document
March 2004**

INTRODUCTION

The New Zealand Nurses Organisation (NZNO) represents 35,000 health workers on a range of employment related and professional issues across the public, private and community sectors. The majority of our members are registered, enrolled and student nurses and midwives. NZNO has twenty-one professional colleges and sections which support and represent nursing specialities these include an Enrolled Nurse Section and a Registered Obstetric Nurses Section.

NZNO welcomes the opportunity to comment on the Nursing Council of New Zealand (NCNZ) Scopes of Practice for Nursing consultation document and an opportunity to present this submission orally.

NZNO agrees with the position presented by NCNZ that it is important that any scope of nursing practice must retain the word *'nurse'* within the title.

The Treaty of Waitangi is the founding document that guides the practise of nursing in New Zealand. In the descriptions suggested by NCNZ the principle of protection is not explicit. NZNO suggests that any scope description needs to include the wording which states that nurses *'respect the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing'*.

NCNZ have proposed that there will be three scopes of practice, (Nurse, Nurse Practitioner, and 'Second Level' Nurse) and have requested comment on the title, description, qualifications and conditions for each of these scopes. In this submission NZNO will submit:

- alternative wording for each scope of practice
- response to the specific aspects of the title, description, qualification and conditions for the:
 - 'Nurse' Scope
 - Nurse Practitioner Scope
 - 'Second level' Nurse Scope

1. ALTERNATIVE WORDING FOR SCOPES OF PRACTICE

- 1.1 A scope of practice statement needs to inform the public of the philosophy that underpins nursing as well as the purpose and parameters of practitioners working within the scope of practice.
- 1.2 The Registered Nurse scope is the fundamental scope that forms the basis of the Nurse Practitioner scope and links to all scopes of nursing practice. The following wording has been suggested as an alternative to wording provided in the consultation paper:

1.2.1 Registered Nurse

The health needs of individuals, families, whanau and communities are the practical and moral basis for nurses' work with people. The Registered Nurse respects the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing. Registered Nurses work in collaboration and partnership with people in a variety of environments to develop, provide and evaluate a plan of care intended to improve their health. The plan of care may be delegated to others. The nurses' contribution to the partnership includes but is not limited to caring practices together with scientific nursing knowledge, technical skills, a wholistic view of people and an understanding of the context of health care. Registered Nurses may practice, manage, teach, evaluate and research nursing and influence health policy.

1.2.2 Nurse Practitioner

Nurse Practitioners are expert nurses whose practice is founded on nursing. Through partnership they provide direct care to a specified population of people. Nurse Practitioners respect the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing. Their clinical practice emphasises health promotion, health maintenance and disease prevention. In addition, Nurse Practitioners provide a holistic assessment that may include, but is not limited to, ordering, conducting and interpreting diagnostic and laboratory tests. They diagnose conditions. Nurse Practitioners determine the most appropriate approach for improving health by integrating the experiences of individuals, family, whanau and communities with knowledge of nursing, socio-political influences and ethics. Approaches Nurse Practitioners use to improve health may include but are not limited to teaching, counselling, change strategies and prescribing interventions. Nurse Practitioners practice both autonomously and in collaboration with other health practitioners. To meet health needs in the specified population of people their practice includes leadership, education research and policy development.

1.2.3 Enrolled Nurse

Enrolled nurses practicing both autonomously and in collaboration, use nursing knowledge to assist registered nurses/midwives to deliver nursing care in a range of settings through active partnership with individuals, families, whanau and communities. The responsibilities of the Enrolled Nurse includes assisting people with the activities of daily living, observing and reporting changes in individual/group conditions and behaviours and performing assigned interventions from the nursing care plan. Enrolled Nurses respect the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing.

Where the patient/client has a well defined health challenge with predictable outcomes the Enrolled Nurse may function independently within their scope of practice. As the acuity or complexity of care increases and/or outcomes are not predictable and an advanced level of knowledge is required, the Enrolled Nurse works under direction from a Nurse Practitioner, Registered Nurse, Midwife or Medical Practitioner to meet the healthcare needs of the patient/client. The Enrolled Nurse is accountable for her or his own actions in both situations.

2. NCNZ NURSE PRACTITIONER SCOPE STATEMENT

2.1 Description:

2.1.1 Suggest delete the wording “as consultants, educators, nurse managers and researchers” from the last sentence. These activities are also performed by experienced Registered Nurses who are not Nurse Practitioner’s (NP) and it implies that they can only be performed by NP’s. NZNO suggests that the last sentence should instead have the following wording:

“To meet health needs in the specified population of people their practice includes leadership, education research and policy development.”

2.1.2 In the description suggested by NCNZ the principle of protection is not explicit. NZNO suggests the inclusion of the following wording

“Nurse Practitioners respect the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing.”

2.2 Qualifications:

NZNO believes that the qualification statement needs to include reference to the qualifications that Nurse Practitioners obtained under previously approved training programmes for nursing. This would be by the addition of the word “national” in the qualifications statement i.e.

Dot point 1:

*“An approved Bachelor degree in nursing (or an equivalent **national** or international qualification) and a pass in an assessment of Nursing Council competencies for entry to the register of nurses.”*

2.3 NZNO Recommends that:

- ***the description used for the Nurse Practitioner Scope of Practice is the one outlined in clause 1.2.1 of this submissions***

3 “NURSE” SCOPE STATEMENT

3.1 Title:

NZNO is opposed to the suggestion that Registered Nurses should have the title ‘Nurse’. The current title of Registered Nurse is understood and recognised by the New Zealand population and is also universally accepted and recognised by nurses and health professionals internationally. This title also distinguishes the scope of practice for registered nurses from the other scopes proposed. NZNO recommends that the title **Registered Nurse** is used for the ‘nurse’ scope.

3.2 Description:

3.2.1 As with the Nurse Practitioner scope in the ‘nurse’ description suggested by NCNZ the principle of protection is not explicit. NZNO suggests the inclusion of the following wording

“Registered Nurses respect the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing.”

3.2.2 In order to make it explicit that nursing includes health promotion as well as assisting with managing illness we suggest that the first sentence includes the following wording:

*“Nurses utilise nursing knowledge and complex nursing judgement to assess and provide care, and to advise and support people to manage their **health** and health problems.”*

3.2.3 NZNO also has concerns about the possible interpretation of the wording ‘Nurses may practise psychiatric, psychopaedic, general and obstetric nursing’. (refer second to last sentence of description). The concern is that within the term “*general nursing*” it is not clear that this includes all areas of speciality practice of nursing e.g. neonatal nursing, and a sentence indicating this should be included. There is anxiety that the term “general nurse” may be interpreted in a very limited way and prove to be restrictive to the practice of registered nurses and nursing.

3.2.4 NZNO suggests that the last sentence of the description should be deleted and replaced by the following wording;

“Nurses may also use this expertise in nursing management and administration, nursing education, nursing research or professional nursing advice or policy development”.

It is believed that this wording clearly describes the areas of nursing practice, is inclusive of the advisory, education, research and management roles and is consistent with the proposed wording suggested in the “Draft Guideline for Competence Based Practising Certificates”.

3.2.5 The suggested description also fails to make reference to the need to meet NCNZ competencies. This has been included in both of the other suggested scopes but has been omitted in the ‘nurse’ scope. The following sentence added to the description would rectify this:

“The Nursing Council of New Zealand competencies for Registered Nurse describe the skills, knowledge and activities of Registered Nurses.”

3.3 Qualifications:

As with the Nurse Practitioner scope, NZNO believes that the qualification statement needs to include reference to the qualifications that Registered Nurses obtained under previously approved training programmes for nursing. This would be by the addition of the word “national” i.e.

*“An approved Bachelor degree in nursing (or an equivalent **national** or international qualification) and a pass in an assessment of Nursing Council competencies for entry to the register of nurses.”*

3.4 Conditions:

3.4.1 NZNO submits that Registered Obstetric Nurses (RON) be included in the Registered Nurse Scope of Practice and not in the “second level” nurse scope. Registered Obstetric Nurses were trained under an 18

month speciality nursing programme. The programme included in-depth knowledge and training in obstetric nursing covering antenatal, labour/delivery, postnatal and normal neonatal nursing care. This was the same obstetric curriculum and clinical obstetric training as the Registered General and Obstetric Nurses (RGON) completed. The RON was also required to sit the same state obstetric examination as the RGON.

3.4.2 Registered Obstetric Nurse fits into the Registered Nurse (“Nurse”) Scope and the following condition needs to be included:

“Nurses who have completed a programme leading to registration as a registered obstetric nurse practise within this scope with the condition that they only practise obstetric nursing.”

3.5 NZNO Recommends that:

- ***the title Registered Nurse is retained***
- ***the description used for the Registered Nurse Scope of Practice is the one outlined in clause 1.2.1 of this submissions***
- ***Registered Obstetric Nurses are included in the Registered Nurse Scope of Practice***

4. ‘SECOND LEVEL’ NURSE SCOPE STATEMENT

4.1 Title:

4.1.1 The title for the proposed “*second level*” scope is a contentious issue. The scope proposed by NCNZ contains three difference categories of qualified nurses each with very different training backgrounds and experience.

4.1.2 Enrolled Nurse members of NZNO have strongly expressed their preference for retaining the title “**Enrolled Nurse**”. It is understood that all qualified nurses will be listed on the one register in accordance with the HPCA Act 2003. NZNO does not agree with NCNZ’s premise that, as there will no longer be a role which lists all Enrolled Nurses, then the meaning of the title is lost. While the Act prescribes what must be contained in a scope of practice description it does not state that current titles are unable to continue to be used. The training programme for Enrolled Nurses who qualified prior to 1993 had a broad general nursing focus. Enrolled Nurses who undertook this programme and the previous ‘*Registered Community Nurse*’ programme were qualified to work in both the secondary and primary health care

sectors. Many of these nurses also have speciality endorsements to their original qualification. These endorsements required a further six month training in a specific area nursing with assessment and examinations before they were issued with there endorsements. Any new scope of practice for Enrolled Nurses who completed their training prior to, or during 1993, needs to recognise the qualifications and experience that was required and obtained by these nurses.

4.2 Description:

- 4.2.1 The description for the ‘*second level*’ nurse scope of practice needs to include the wording which states that nurses ‘*respect the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing*’ and they work in partnership with families, whanau, and communities, under the direction of Registered Nurses and Nurse Practitioners.
- 4.2.2 NCNZ states that “the qualifications included as part of the scope statement will only include the current qualification for entering the scope”. Since 2001 Enrolled Nursing programmes have had a specific area of focus and have lead to a qualification which has not been as broad as the previous programmes.
- 4.2.3 Scopes of Practice are intended to inform the public and other health professionals of qualifications and types of practice. The suggested definition is narrow and does not inform the public of the qualifications that were required to enable enrolled nurses from programmes, completed during or prior to 1993, to qualify.
- 4.2.4 NZNO recommends that the Enrolled Nurses (‘second level’ nurse) programme will be at level 5 on the NZQA framework. This would increase the level of training so that the programme graduates are equipped to nurse in the current and future health environment. This would also distinguish between the regulated ‘second level’ nurses and unregulated health workers who are able to complete NZQA certificate level 4 health courses but remain unregulated.

4.2.5 ***Scope of Practice for Enrolled Nurse***

Description:

NZNO recommends the NZNO wording for Enrolled Nurse Scope of Practice (refer clause 1.2.3 of this submission) replaces the NCNZ suggested description.

Qualifications:

- *Enrolled Nurses have completed a nursing programme which was approved by the Nursing Council of New Zealand, or an equivalent international qualification and a pass in an assessment of Nursing Council competencies for enrolled nurse.*

Conditions:

Enrolled Nurses who qualified after 2001, practice in a specific area of practice based on the area of focus in their education programme and this will be annotated on their annual practising certificate e.g. Enrolled Nurse (Aged Care).

Enrolled Nurses who have completed an enrolled nurse programme or an equivalent programme prior to or during 1993 are able to practice in all area of general nursing.

4.3 Associate Nurse Title

4.3.1 Support was expressed also for the title 'Associate Nurse' for the second level nurse scope. This is in conflict with the NZNO Enrolled Nurses' Section position. An alternative option to the NCNZ option of having all 'second level' nurses covered by the same scope of practice is to have two separate scopes to cover these nurses i.e. a total of four scopes.

- A Registered Nurse Scope
- A Nurse Practitioner Scope
- An Enrolled Nurse Scope - which covers all Enrolled Nurses who qualified prior to or during 1993 with the above suggested description and
- An Associate Nurse Scope – which covers all Enrolled Nurses who have qualified since 2001. The description for this scope would still need to be altered to include that they work in partnership and respect the right of people to choose what is in their own best interest and uphold their right to self-determined health and wellbeing.

So that these nurses are able to work effectively as second level nurses NZNO believes that the qualification for an Associate Nurse would also need to a Certificate at Level 5 on the NZQA framework and not at the Level 4 suggested.

4.4 Registered Obstetric Nurses

4.4.1 As per clause 3.4 of this submission, NZNO supports the Registered Obstetric Nurses position that they are included in the Registered Nurse Scope of Practice and removed from the 'second level' scope.

4.3 NZNO Recommends that:

- *the title Enrolled Nurse is retained*
- *the description used for the Enrolled Nurse Scope of Practice is the one outlined in clause 1.2.3 of this submissions*
- *any future Enrolled Nurse ('second level' nurse) programmes will be at level 5 on the NZQA framework.*

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