



NEW ZEALAND
NURSES
ORGANISATION

New Zealand Nurses Organisation (NZNO)

Submission

To the

Nursing Council of New Zealand (NCNZ)

on

**TITLE CHANGE FOR THE NURSE ASSISTANT
SCOPE OF PRACTICE**

3 February 2006

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1. EXECUTIVE SUMMARY

1.1

Of the two options offered, The New Zealand Nurses Organisation supports Option B: registered assistant nurse. The title registered assistant nurse is an accurate and easily understood descriptor of the status and role as established by NCNZ. Changing 'nurse' to a noun and making 'assistant' descriptive in the title removes the confusion that arises from the current title.

1.2

This preference takes into account the range of views expressed and the need to agree on a title that will best protect public safety. It also fits within a comprehensive plan of action to rebuild an effective and sustainable second level nursing workforce in New Zealand.

1.3

There is strong support within NZNO for options other than those offered by NCNZ in its latest consultation document, i.e., associate nurse and enrolled nurse.

1.4

We request that the Nursing Council take responsibility for making their own reasoning clear when they consult nurses. Their consultation process should include reasoned argument that is made available to all relevant parties.

1.5

Second level nurses have made a significant contribution to public safety, health and wellbeing in New Zealand and remain an important component of the nursing workforce. They need to be reestablished as a respected, valued and appropriately practising part of the profession.

2. INTRODUCTION

2.1

The New Zealand Nurses Organisation (NZNO) represents 39,000 health workers on a range of professional and employment issues across the public, private and community sectors. The majority of members are registered, enrolled and student nurses, nurse assistants and midwives. The NZNO believes that it is members' responsibility to make clear how they aim to fulfill society's trust in them (NZNO Social Policy Statement, 1993). In keeping with the strategic aim of building ethically based partnerships (NZNO Strategic Plan, 2006 – 2010), NZNO wholeheartedly supports the Nursing Council's commitment to public safety through the regulation of the nursing workforce. NZNO therefore welcomes the opportunity to comment on any consultation document produced by the Nursing Council. NZNO has a moral obligation to add value to NCNZ documents by communicating to them members' considered opinions and professional judgments about nursing matters.

2.2

The consultation document proposes two options for the title of the second level nurse. There are two difficulties in forming a response. The first is that there is no allowance for proposing an alternative title. The second is the absence of a well-argued justification for either of the titles offered. A thoughtful discussion of what a nursing title actually means and an explanation of the rationale behind the selection of the two options would have been helpful. A key question to consider is: What title will best protect public safety and gain the trust of the public and of the workforce?

3. HOW NZNO MEMBERS HAVE ARGUED

3.1

The main themes arising from those member groups who contributed to the submission are concern for public safety and resolving existing confusion. NZNO believes that the NCNZ's attempt to remove confusion about the roles and title of different kinds of nurses has had the opposite effect. Confusion about titles and the accompanying shrinkage of scopes of practice have resulted in the loss of second level nursing skills and knowledge. NZNO enrolled nurse and nurse assistant members have suffered financial, professional and personal damage.

3.2

The public safety issue that concerns NZNO members is that members of the public who could have benefited from the skill and caring of a qualified nurse have, in many instances, been denied them. It is because of our commitment to public safety that NZNO pledges to continue to work with the NCNZ to advance the nursing profession and fulfill our responsibilities to the public.

4. OPTIONS

An honest appraisal of NZNO member group views reveals a range of positions. This divergence was bound to happen when the problem to be addressed has been presented in such a limited way.

4.1

There was support for the return to the enrolled nurse title. The arguments in support of this are well known to the Nursing Council.

4.2

There was support for the status quo in Option A: nurse assistant
These views were based on the pragmatic argument that more change would add to the existing confusion.

4.3

There was greatest support for Option B: registered assistant nurse with reservations from a few about the addition of 'registered'. These concerns focused on the danger of the public thinking registered assistant nurses and registered nurses are the same.

4.4

Other arguments supporting Option B are as follows;

4.4.1 The use of the word 'nurse' as a noun in the title means that the title holder must be regulated by the Nursing Council. It allows the holder of the title to identify with the profession of nursing, its proud history, its ethical responsibilities and its unique knowledge.

4.4.2 The use of the term 'registered' signals clearly that a register exists and that the person must be regulated by the Nursing Council of New Zealand.

4.4.3 When members of the public meet a nurse with a title prefix 'assistant' they are likely to understand that she/he is assisting registered nurses. They are also likely to understand that the person has knowledge and accountability of his/her own. This is less likely if the main title (noun) is assistant.

4.5

There is also support among the NZNO membership for the title Associate Nurse, based on the argument that it has international currency and that it gives the holder the dignity of being named as a nurse.

5. CONCLUSION

5.1

What is missing in the consultation process is a sound argument from the Nursing Council on what the most appropriate title might be. NZNO is anxious to work with the NCNZ to develop a more robust process for

informing and engaging members of the nursing profession as part of rebuilding the second level nursing workforce.

5.2

Debate and discussion needs to be based on well-honed arguments and also on the rights of individuals and collectives to have their say. The combination of these two processes will result in an enhanced level of decision-making, while respecting the dignity of all nurses.