

# The Development of the Enrolled Nurse Role in the Waikato Tainui Region, Aotearoa New Zealand

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# The Researcher

- First-generation ‘Kiwi’ of Scottish and English parents.
- My mother was a “10-pound pom” who came to New Zealand to continue her nursing career. I grew up in South Auckland, New Zealand, in the late ’60s, the youngest child of a mixed cultural and blended family.
- I trained as a registered nurse in the mid-1980s at Northland Polytechnic, Whangarei.
- I trained alongside Enrolled Nurses in training at Whangarei Hospital. We lived together in the Nurse’s Home, socialised together and worked together on the wards.
- My preceptor as a new graduate Registered Nurse was a Senior Enrolled Nurse.



# Introducing the Research

- Concerns raised by Enrolled Nursing students and graduates regarding the status and employment of Enrolled Nurses within the Waikato Tainui region
- Comments were made by a variety of health staff, including Senior Registered Nurses in clinical settings. Remarks such as "*why do you want to be an EN - there aren't any jobs anyway*" were disheartening for students and myself alike.
- The study investigated the perception of the Enrolled Nurse scope of practice, employment opportunities, the role of the Enrolled Nurse within healthcare teams and regional and employer variances.



# Research Statement

- There is a unique and definitive position for Enrolled Nursing within Aotearoa New Zealand, the key, however, is to address the circumstances under which they practice.
- The question to be considered is *“how might we empower the Enrolled Nurse role and enable their value production at a level of visibility where they can showcase their knowledge and skills?”*
- What innovations may be derived from a collaborative co-creative space?



# Methods

- The research uses a transdisciplinary framework and a mixed-method approach for data collection and Grounded Theory to review the qualitative data.
- It has a strong narrative focus with information analysed into themes and sub-groups from the participants
- 108 respondents for the Qualtrics survey and 12 interviews took place



# Results – participant region and scope of practice

Of the 114 participants who identified their region,

- 54.3% were from the Waikato Tainui region
- 45.6% were from outside the Waikato Tainui region

Of the 120 participants who identified their scope of practice

- 60% identified their current employment position as an Enrolled Nurse
- 14% identified their current position as a Registered Nurse,
- 10% in education
- 14% identified other nursing positions



# Themes Identified

1. Historical hurt and modern day devaluing of the Enrolled Nurse Role
2. Confusion about the Enrolled Nurse Scope of Practice
3. Employment – regional and employer differences
4. Competition with other roles
5. Pay Parity/Disparity
6. Progression, education,
7. Support needed for the role, challenges and opportunities



# Historical hurt and modern day devaluing of the Enrolled Nurse Role

*“ENs have been very poorly treated professionally because it has depended on what the workforce demands have looked like. When workforce demands have been heavy and registered nurses scarce, then ENs are asked to step up and when that picture changes they are pushed back. So I think they have been, I don't know if that abused is too strong a word really, professional group.”*

*“How can I be worth only a dollar more than an HCA? I fully support HCA's and the job they do, and they deserve their pay rise, but the gap is now too small between the 2 of us.”*

*“I have seen a lot, (pause) what we got asked to do when it suited, to what then we couldn’t do and what then we could do again, I used to run a surgical ward with a Nurse Aid. Then all of a sudden we couldn’t do any of that. It’s been a confusing time for ENs, especially the older ENs.... these new ENs are going to come out and hopefully just fly if they understand their scope of practice and those around them understand their scope of practice”.*

# Confusion on Scope of Practice

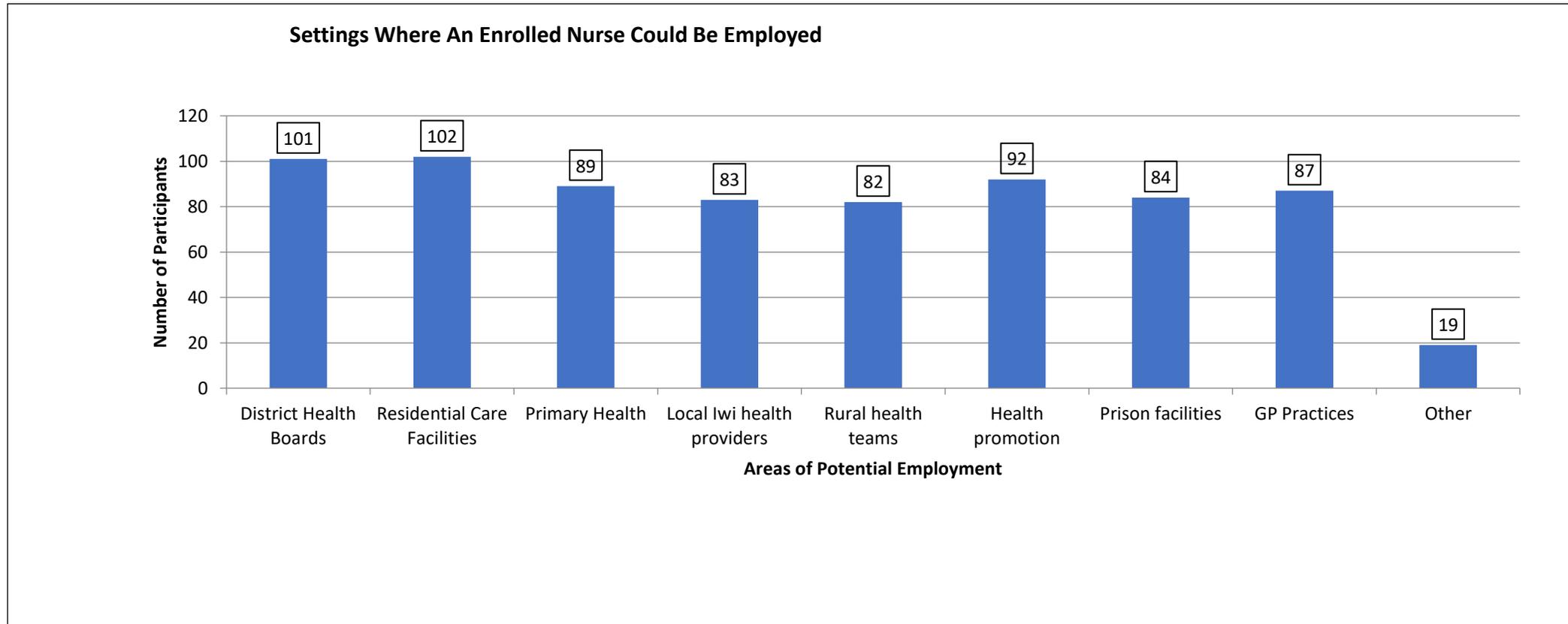
42.8% of respondents considered other health professionals to have a 'poor' understanding of the Enrolled Nurse role.

Conversely, 43% of respondents considered other health professionals to have a 'good' to 'excellent' understanding of the Enrolled Nurse scope of practice.

*"I find that in my DHB a lot of nurses do understand the scope of practice and if unsure they will ask you. I personally believe that New Zealand wide RN's, DON's, CNM's (charge nurse managers, DHB educators) do not fully understand the enrolled nurse scope of practice. This prevents the EN working to their full scope of practice that was broadened in 2010"*

# Employment – regional differences

- Of the 113 responses received nationwide, 80.5% of respondents are employed by a District Health Board, 7.9% within an education provider and 6.1% in aged residential care.



# NETS Destination Survey 2019

<b>Enrolled Nurses</b>	<b>Number of Enrolled Nurses</b>
Number of Enrolled Nurse Graduates who passed Nursing Council Exam (throughout NZ)	104
Number of graduates surveyed	108
Number employed as Enrolled Nurses	63 - (58% of graduates)
Number seeking work but not offered employment	24 - (22% of graduates)
Number not seeking work as EN	16- (15% of graduates)
Number of students who did not complete the survey	5 - (5% of graduates)

For the Wintec graduates, 91% of Registered Nurses were employed compared with 29% of Enrolled Nurses.

While increased employment has occurred, there is still progress to be made to ensure Enrolled Nurses have opportunities for employment at the same level as Registered Nurses.

# Narrative

- The narrative data shows that employment opportunities vary across regions and employers. Narratives were multi-faceted, and comments ranged from areas of employment, numbers of vacancies, use of other health workforce members and understanding of the scope of practice and if this potentially hindered employment.
- There is a proactive movement by Directors of Nursing of District Health Boards to employ Enrolled Nurses where possible. However, this is also tempered with comments of Enrolled Nurses being replaced with Registered Nurses or to supplement Health Care Assistant roles.

*“Hoping when CCDM (Care Capacity Demand Management) is up and running fully that we will get more enrolled nurse positions.”*

*“Very few vacancies, certainly not enough to encourage people to train as an EN.”*

*“Luckily I work for the XDHB who have been one of the only health boards that have increased the use of ENS.”*

# Narrative

- *“I was travelling an hour and half in two different directions to work in rest homes because there were no jobs in the Waikato area .... the DHB is quite difficult to get into and I think applied for about a year before we even got a look at for an interview and then we didn’t have enough experience.”*



# Competition with other roles

Enrolled Nurses have a specific skill set which has been eroded over time with the introduction of non-regulated health care staff. Initially, this may have been fiscally prudent for health care delivery, however, the recent pay increase, albeit it long overdue, now places the Enrolled Nurse at risk and further devalues their skills and knowledge.

- *“I think that the big thing that other health professionals don’t understand is about the difference between ENs and HCAs. I think it is something that HCAs don’t understand.*
- *I have seen some very poor examples of HCAs being used quite like ENs in recent years and especially in private providers residential care situations, where HCAs may be making decisions like which drugs to give when and doing assessments in a way that is considered within the registered nurse scope of practice.”*

# Pay - Parity/Disparity

A significant factor that has impacted on the Enrolled Nurse was the pay equity settlement for Health Care Assistants. As highlighted earlier, many survey participants were supportive of the landmark pay increase for Health Care Assistants. However, this has impacted on Enrolled Nurse remuneration, with Health Care Assistants being paid more than an Enrolled Nurse in some cases.

*“Pay equity has been long overdue, however this has not translated well for the EN's resulting in HCA's now earning more than the EN's in some cases.”*

*“Pay equity changes with HCAs.... we have a qualification, and I'm not putting down HCAs as they have worked hard for their qualification.... but it doesn't recognise that we have a higher qualification, to see an HCA getting more than you, it's a kick in the teeth at times.... They deserve it, they work so hard... but I've seen some ENs give up.... we come under the review of the Nursing Council if something goes wrong and they don't, why put yourself through that, you might as well go down a grade and still get better money.”*

# Progression and Education

An area highlighted as a concern in participant comments. They detailed the lack of education or ability to progress in their chosen career.

*“The limitations come down to the amount of study for us. Now things are opening up for ENS, e.g.: ENs can now do inter-Rai, I think the study is just not there.... EN preceptorship is not available, and why not, there are ENs out that need to be looked after by us.”*

*“You know how RNs can do post-graduate, ENs need an opportunity to do that too – I’d love to do something like that.... extend my knowledge ... maybe a Certificate in Rehab or Elderly Care ... gain theoretical knowledge – I am more than happy being an EN, I am doing as much as I want to.”*

# Support needed, challenges and opportunities

A theme woven through the participant's narratives is the need for greater support for the Enrolled Nurse role. Components of this theme were financial remuneration, ability to work to the top of their scope, opportunities for employment and general recognition of their training.

During the data collection, conversations occurred with employers who are actively involved in the recruitment, support and retention of the Enrolled Nurse within their organisation.

From these discussions, it is apparent a solid orientation, on-going professional development and day to day endorsement of the role are the keys to the successful integration of the Enrolled Nurse role.

# Proposed Interventions

- ✓ Establishing a community of practice
- ✓ Employment models and mentors
- ✓ Raising awareness of enrolled nurse scope of practice
- ✓ Inter-professional development
- ✓ Professional development opportunities
- ✓ Enrolled Nurse training
- ✓ Remuneration and employment opportunities



# Narratives

Researcher:

- *Is there a space for ENs?*

Interviewee:-

- *I see it, I absolutely see it. And once again I think we have to think about the risk of using HCAs, of over using HCAs. There is a professional risk, there is a legal risk, there is a public safety risk and I think those risk narratives are a good way to construct a space for ENs.*
- *Something else to think about ... if the key element of the RNs practice is diagnostic reasoning, then is the EN the repository for the care skills? I think about the practical nursing care, you know the skills set where you can take a person in pain and position them in a bed in a way that relieves their pain and maybe that is the EN specialist knowledge.*



# Personal Reflection

- I have endeavoured to honour the invaluable contribution of all participants within this research, and I wish to give thanks for their time, passion and willingness to share their personal thoughts. Many words and phrases from participants have resonated with me throughout this journey. I am reminded of the words by Catherine Kohler Riessman “an utterance carries the traces of other utterances, past and present, as words carry history on their backs” (Reissman, 2008, p.107).
- In moving forward, let us not forget what has gone before, but use this as a foundation for tomorrow. “Kia whakatōmuri te haere whakamua – I walk backwards into the future with my eyes fixed on the past” (Rameka, 2016).

