

Enrolled Nurse Transition Information Sheet

Information for Enrolled Nurses

The Nursing Council of New Zealand (NCNZ) recently changed the Enrolled Nurse (EN) scope of practice. As a result of this you will have received a letter from the NCNZ outlining the requirements for transition to the revised scope. The requirements you will need to meet depend on when you undertook EN training, this information covers those who qualified pre: 2000.

How does this affect me as an Enrolled Nurse?

Employers are being asked to arrange work based education on the new competencies and to support you in the transition process. Attaining the new competencies will allow you as an EN, to work in more areas such as: nursing assessment, educating health consumers, working with health consumers with mental health concerns, and working under the direction of a health professional who is not a nurse.

If you choose not to complete a competence assessment within 12 months, a condition will be included in your scope of practice by NCNZ, restricting you to working with health consumers with stable and predictable outcomes, this will appear on your annual practising certificate (APC). Until the transition arrangements are complete, you are responsible for ensuring that your practice remains within your currently assessed level of competence. As an EN, you are accountable for your practice and for making sure that you do not undertake activities or care assignments that are beyond your educational preparation or assessed competence to perform.

This information sheet is provided to assist you to understand and support you through this transition period. It is anticipated that any changes will be brought in slowly over the next 12 months, with opportunities to engage and educate all staff involved.

We have formulated a series of questions and answers on: registration, assessors and competence assessment, practice and what your employer needs to do, which we hope will address your concerns especially the last section which reads, **“What can I do to get through?”** If you need more assistance or information please contact the following;

1. **Nursing Council of New Zealand** in relation to EN changes

website	http://www.nursingcouncil.org.nz
email	des@nursingcouncil.org.nz
phone number	EN Transition information line; 0508 3676 5533

2. **District Health Board Director of Nursing (DHB DoN)** for your local district/ region

Contact person	
email	
phone number	

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Registration

<ul style="list-style-type: none"> • What is competence? 	The combination of skills, knowledge, attitudes, values and abilities that underpin effective performance as a nurse.
<ul style="list-style-type: none"> • What are competencies? 	Defined areas of skilled performance as a nurse.
<ul style="list-style-type: none"> • What is scope 	Scope is a word which defines the boundaries and parameters of nursing practice under the HPCA Act. There are 3 scopes of practice; <ul style="list-style-type: none"> • Nurse Practitioner (NP) • Registered Nurse (RN) • Enrolled Nurse (EN)
<ul style="list-style-type: none"> • How will my scope of practice change? 	The new scope enables ENs to have a broader role in client care. It also means that ENs may work in more health settings as part of a team with RNs. In acute settings, ENs must work in a team with an RN who is responsible for directing and delegating nursing interventions. In some settings, EN may coordinate a team of health care assistants under the direction and delegation of an RN. In some settings, ENs may work under the direction and delegation of a registered health practitioner. In these situations, the EN must have RN supervision and must not assume overall responsibility for nursing assessment or care planning
<ul style="list-style-type: none"> • What are the differences in the old and the new competencies? 	The new competencies are 2.1, 2.2, 2.3, 2.6, 3.2, 3.3, 4.2 and 4.3. Refer to the document on http://www.nursingcouncil.org.nz/index.cfm/1,43,0,0/html/Enrolled-Nurse Under direction and delegation of an RN, these competencies cover the following areas- : <ul style="list-style-type: none"> • Providing the planned care in collaboration with consumers. • Contributing to nursing assessments. • Recognising and reporting changes. • Contributing to health education of consumers. • Communicating effectively. • Using a partnership approach with consumers. • Recognising differences in accountability of nurses. • Demonstrating accountability and responsibility within the team.
<ul style="list-style-type: none"> • What will my employer do? 	<ul style="list-style-type: none"> • Familiarise themselves with the new competencies and what they mean to them as an employer of ENs. • Identify the patient/client mix and elements of care that can be safely delegated within the new EN scope. • Determine if these fit within the model of care and staffing needs. • Identify the education and training required to deliver these elements of care. • Identify if there are any areas where you, as an EN will need more skill and knowledge. • Find out if any of the required education is being provided in your region, local DHB or professional organisation. • Find out if your organisation has access to a NCNZ approved PDRP.
<ul style="list-style-type: none"> • Who and where are my resources and information on this? 	<ul style="list-style-type: none"> • Read through the information provided in this sheet. • Access the NCNZ WebPages which cover the EN scope. • Contact your employer
<ul style="list-style-type: none"> • Do I have to complete 	No, but PDRPs are recommended as an established and structured

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<p>a Professional Development and Recognition Programme (PDRP)?</p>	<p>framework used by DHBs and other organisations. The NCNZ has organisations, particularly DHBs that implement approved PDRPs and they already have nurses trained in competence assessment. These organisations will have developed assessment processes which can support you through this time.</p>
<p>• What if I choose not to transition to the new scope?</p>	<p>If you choose not to complete a competence assessment within 12 months, a condition will be included in your scope of practice by NCNZ; this will show on your APC and will restrict you to working with health consumers with stable and predictable outcomes. This may limit your ability to change or apply for jobs in the future.</p>
<p>• What if my employer is not able to provide work in the new scope?</p>	<p>If your employer does not have the range of clients or care to enable you to work in the broader scope you can still work towards revising your scope. Working towards the new scope will offer you more career options into the future.</p>
<p>• I am not currently practising as an EN</p>	<p>If you have been out of practice for five years or more you will need to complete a competence assessment programme (CAP). See the NCNZ website for a CAP programme in your area http://www.nursingcouncil.org.nz/index.cfm/1,68,0,0/html/Competence-assessment-programmes.</p>

Assessors and competence assessment

<p>• What is a competence assessment?</p>	<p>A competence assessment is a structured, formal assessment against the NCNZ competencies for the new EN scope of practice.</p> <ul style="list-style-type: none"> • It must be completed by an approved nurse assessor who is skilled in assessment and is based on evidence included by the nurse in a portfolio. • Examples of evidence that might be used are listed on the NCNZ website. They include; evidence of attendance at training on the new competencies, direct observation of clinical and professional practice, an interview with you to discuss a scenario which can determine that you have the skills, understanding and knowledge to meet the new competency, examples of practice, verbal or written peer assessments. <p>An assessment form can be found on the NCNZ website.</p>
<p>• What is an assessor; who can assess me?</p>	<p>Assessors are RNs who hold a current practicing certificate and have been qualified at least 3 years. They must have at least one of the following:</p> <ul style="list-style-type: none"> • Adult teaching certificate or diploma. • Experience as a nurse lecturer in a NCNZ approved undergraduate programme. • Evidence of having undertaken a preceptor programme or clinical teaching programme which includes learning on assessment. • Unit standards from the NZQA workplace assessor training. • Demonstrated equivalency of above.
<p>• How do I find an assessor to assess me?</p>	<ul style="list-style-type: none"> • If you are employed by a DHB this will be organised through the Director of Nursing. • If you are employed in a non DHB organisation you should discuss your needs with the most senior nurse or appropriate manager in your organisation.
<p>• What is the cost of competence</p>	<p>If an assessor is made available via another organisation, there may or may not be a cost. If there is a cost it would be for RN time to</p>

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assessment?	undertake the assessment. You need to discuss this with your employer, as most employers will cover this cost. Many organisations are organising for an RN to become a trained assessor to undertake this work. Most DHBs will support you or your organisation with this.
<ul style="list-style-type: none"> • Should I be contacting an assessor myself? 	No, please receive information from the DHB Director of Nursing, your employer or nominated DHB contact.

Practice

<ul style="list-style-type: none"> • As an EN, can I now give medications, IV infusions, blood transfusion, perform cannulation and other procedures? 	ENs must follow organisational policies and procedures. You are required to complete the transition process before any change in your practice. Designated senior RNs will determine what is appropriate for the particular clinical environment and ensure quality, risk and educative processes are put in place.
<ul style="list-style-type: none"> • As an EN can I work in the same way as an RN now? 	No. ENs do not have the same educational preparation or scope of practice as RNs. ENs will still work under the direction of the RN at all times and do not complete the total care for individual patients/clients.
<ul style="list-style-type: none"> • What kind of assessments can ENs now undertake? 	ENs continue to contribute to assessments. The delegation of aspects of assessment will depend on the clinical setting and the documents approved by the designated senior RNs in the setting. The overall accountability for patient/ client assessment, care planning and direction remains with the RN.

Employer responsibilities

<ul style="list-style-type: none"> • What your employer will do. 	Your employer is responsible for confirming with you that you intend to apply for the new scope, and then ensuring that you have completed a competence assessment against the new competencies, with an RN who is an approved assessor. If you are not going to transition to the new scope, you will be required to be supported to practice within your existing scope.
<ul style="list-style-type: none"> • What is the timeframe for transition? 	ENs should be assessed by June 2011; this allowed 12 months to transition from the change in the scope.
<ul style="list-style-type: none"> • What if I get to 12 months and it's not done? 	We advise you to discuss this with your employer who can contact the Nursing Council of New Zealand. You can still transition after the 12 month timeframe.
<ul style="list-style-type: none"> • What if I fail the competence process? 	Again discuss this with your employer. You may need some mentorship and guidance to support you through this process. You can also utilise EAP services (Employee assistance programmes; these are confidential services to employees).
<ul style="list-style-type: none"> • Are organisations changing their policies? 	All employers of ENs are required to make changes to assist ENs to transition. Any changes in policy or practice will first require structured education and assessment.
<ul style="list-style-type: none"> • What can I do to get through? 	<ul style="list-style-type: none"> • Read up on the new scope; what the changes are and what they mean to your practice. • Ensure you understand what 'scope' and 'competence' mean to your practice. • Discuss the changes with your employer. • Ask for some support in putting the information together, this could be from another nurse, PDRP

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coordinator, nurse educator, or nurse leader or manager.

- **Keep yourself up to date as per your registration requirements; attend education sessions when they are available**
- **See if you can access a PDRP- this structured framework is set up and ready to support you.**
- **Find out what the assessor will be looking for.**
- **Attend any education sessions on the transition processes e.g. EN workshops.**
- **Link in to other ENs who may be going through this process, work together.**
- **Prepare for and practice receiving feedback.**
- **Clarify the assessor's expectations.**
- **If you are already on a PDRP- update it with the new competencies.**
- **If in doubt, contact the numbers on the front page of this document.**
- **If you are stressed about this or need outside help, you could access EAP (Employee assistance programmes; these are confidential services to employees).**

We will also need to consider the Nurse Assistant role; however at this stage we are making the transition requirements for the EN workforce first. We will be making more information available on Nurse Assistants in the near future.