RULE REMIT: RECEIVED FROM NZgNC

CLAUSE 15: College Sub-Groups

Sub clause reads:

15.1 Establishment of a sub-group would consist of nurses working within that sub-specialty with membership as per the NZgNC rules (see rules 3)
15.2 Each group should formally apply in writing to the chair with supporting documentation relevant to that sub-specialty. Minimum requirement for application and supporting documents are:
- Formal letter
- Terms of Reference
- Minimum roles (including but not limited to chair, secretary and co-chair)
15.3 Sub-groups are established in order to achieve the objectives of the NZgNC (see rules 2)
15.4 The expectation of a sub-group is that it will raise the profile of that sub-specialty and in doing so will produce appropriate documentation in time such as Standards of Practice, Knowledge and Skills Frameworks or credentialing. The subgroup will also contribute regularly to the NZgNC publications (such as the Tube).
15.5 Reporting of the groups’ activities twice yearly (in line with the 6-month NZgNC committee face to face meetings: February and AGM). Reporting would be required a month in advance of each meeting.
15.6 It is optional but encouraged that each sub-group avails of the opportunity to nominate a candidate to apply to the National College Committee when vacancies arise.
15.7 The sub-group holds expertise in their sub-specialty and therefore will be consulted and expected to contribute for relevant advice and input with the NZgNC committee.
15.8 Attend the AGM and participate appropriately in college business
15.9 Sub-groups shall have rules which are consistent with the NZgNC and constitution of NZNO
15.10 Individual sub-groups will be responsible for their own financial governance and transparent in their reporting of activity to the NZgNC. Funding can be allocated from the Accumulated funds, and therefore be set aside within the budget. Sub groups will be advised regarding the sum of funds allocated and invoice the College to be reimbursed by the Treasurer. Sub groups are not able to set up their own bank accounts due to GST and internal control issues.
This is a submission of a new clause within the NZgNC to allow for the inclusion of sub-groups

**Rationale:**

Gastroenterology is a large specialty and the inclusion of sub-groups underneath the NZgNC aims to allow for greater inclusion and development of nursing within sub-group specialty areas of GI practice (such as IBD, Hepatology, Endoscopy).

By providing the possibility of sub-groups this will ensure that the committee has the ability to leverage the opinion of the appropriate experts in field when consulted on relevant national / regional issues related to GI Nursing practice in New Zealand. This will allow the committee to ensure appropriate nursing opinion at relevant forums and sub-specialty areas of GI nursing practice. In addition, this will also allow for the appropriate promotion and development of nursing practice within these areas, whilst these sub-groups will be required to maintain the NZNO constitution and overall aim of the NZgNC.

**Impacts on other areas of the NZNO Constitution:**

The intended consequence is to provide a voice for the sub-specialty GI practice areas of nursing and allow for further development of these specialties underneath the nationally recognised NZgNC. The sub-group itself will also have the intended benefit of being part of a nationally recognised group, as NZgNC and the standing that that provides for professional practice. The unintended consequence is the possibility that the sub-groups will provide some confusion to our members initially, but this can be can be countered against by appropriate communication from the NZgNC. Therefore this may require some amendments to the NZgNC website and also via the TUBE.

**Alignment to the NZNO Constitution - Yes**

The risk with this amendment is the failure of the sub-group and the NZgNC will attempt to mitigate against this by requiring that each sub-group provide six monthly reports to the NZgNC committee in order to ensure that the work of the group continually aligns to the overall aims of the NZgNC.

The other risk is the financial impact of the sub-group on the NZgNC but this will be strictly regulated by the NZgNC committee itself and only approved with a clear application based on need and benefit to the greater membership.

This amendment will be consulted on with the membership at the AGM due to be held at the Annual Scientific Gastroenterology Conference in Wellington in November 2019.

**Additional information**

The inclusion of sub-groups underneath the NZgNC is in keeping with work of other Gastroenterological nursing organisation internationally. Good examples are as follows; In the UK the RCN (Royal College of Nursing) Gastro Forum which is the national committee has speciality groups which sit underneath it including Endoscopy, IBD, stoma care
See link for further information [https://www.rcn.org.uk/get-involved/forums](https://www.rcn.org.uk/get-involved/forums)
A further example is GENCA (Gastroenterological Nurse College of Australasia) which also has sub-specialty groups underneath it which include Endoscopy & IBD
See link for further information [https://www.genca.org/](https://www.genca.org/)