



# **NZNO Regional Convention: Analysing the health of our practice – Nurses competence and insight**

*Marg Bigsby  
Professional Nursing Advisor  
May 2019*

[www.nzno.org.nz](http://www.nzno.org.nz)



# Whakatauki

*“Me haere tahi tātou mō te hauora me te oranga o ngā iwi katoa o Aotearoa”*

“Let us journey together for the health and wellbeing of the people of Aotearoa”

(Rev. Leo Te Kira 15 December 2005)



TŌPŪTANGA  
**TAPUHI**  
KAITIAKI O AOTEAROA

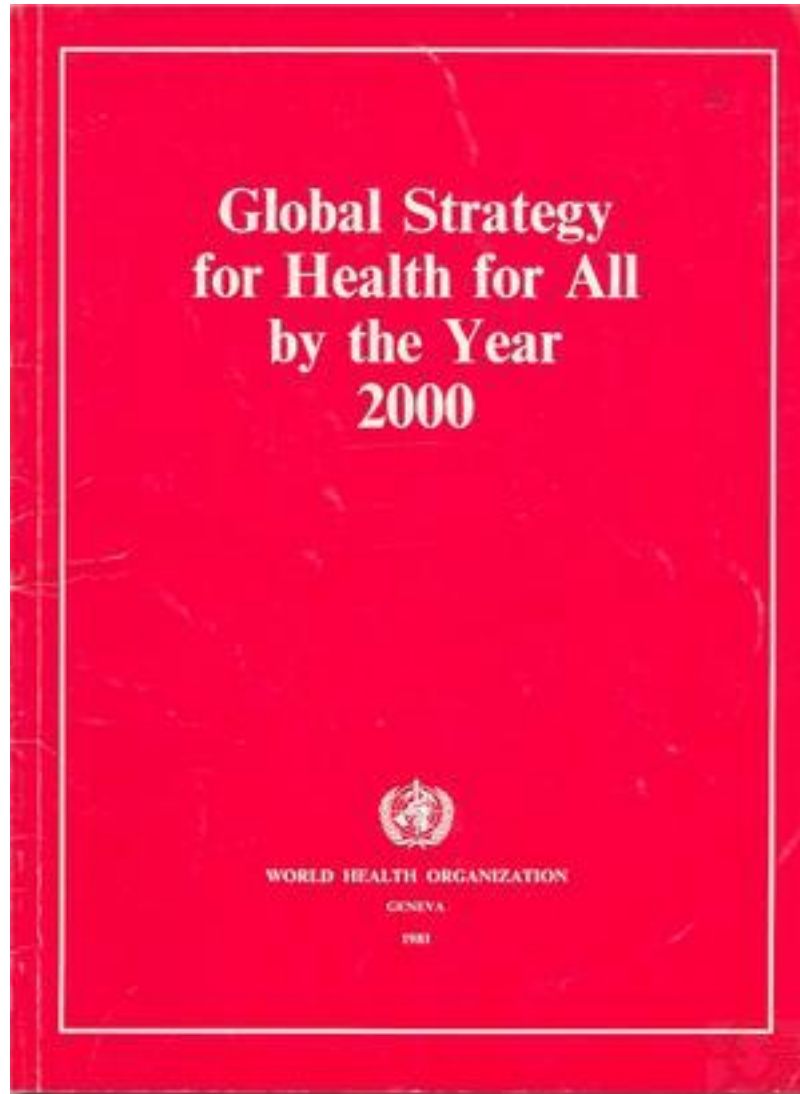
# 2019, 2018, 2017 ICN themes

**NURSES**   
A VOICE TO LEAD  
HEALTH FOR ALL

**NURSES**   
A VOICE TO LEAD  
HEALTH IS A HUMAN RIGHT

**NURSES**   
A VOICE TO LEAD  
ACHIEVING THE SDGS

# Health for All by the year 2000



[www.nzno.org.nz](http://www.nzno.org.nz)





Goal: Health for All by 2000

.... So where would you say we were up to?...



NEW ZEALAND  
**NURSES**  
ORGANISATION

TŌPŪTANGA  
**TAPUHI**  
KAITIAKI O AOTEAROA

[www.nzno.org.nz](http://www.nzno.org.nz)



# Global health challenges remain

- The diseases we know about and the ones we are still learning about
- The impact of our lifestyle on our health and the environment
- Delivering health outcomes that matter to people at an affordable price
- Achieving mental health and wellbeing
- The effects of violence on health care and us all





# MoH definition of health equity

In Aotearoa New Zealand, people have differences in health that are not only avoidable but unfair and unjust. Equity recognises different people with different levels of advantage require different approaches and resources to get equitable health outcomes.

<https://www.health.govt.nz/publication/achieving-equity-health-outcomes-highlights-selected-papers>



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# Competent nursing care

How can we possibly meet  
the 2019 ICN aim of  
**Health for All?**

How can we earn a  
respected voice to lead?



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA





# Nurses & 'Health for All' (HfA)

- Advocate and provider of care for individuals and communities
- Skilled **professionals** with the potential to improve Health for All
- The world is looking for ways to achieve Health for All (p11)

# A definition of a Profession

- “An occupation whose core element is work based upon the mastery of a complex body of knowledge and skills.
- It is a vocation in which knowledge of some department of science or learning or the practice of an art founded upon it is used in the service of others.
- Its members are governed by codes of ethics and profess a commitment to competence, integrity and morality, altruism, and the promotion of the public good within their domain.



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

# Definition of a profession (cont'd)

- These commitments form the basis of a social contract between a profession and society, which in return grants the profession a monopoly over the use of its knowledge base, the right to considerable autonomy in practice and the privilege of self-regulation.
- Professions and their members are accountable to those served and to society”

(Cruess, Johnston & Cruess, 2004, p.74)



NEW ZEALAND  
**NURSES**  
ORGANISATION

TŌPŪTANGA  
**TAPUHI**  
KAITIAKI O AOTEAROA

# Professional practice

... good health and care outcomes are highly dependent on the professional practice and behaviours of nurses and midwives...

<https://www.nmc.org.uk/globalassets/sitedocuments/other-publications/enabling-professionalism.pdf>



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

# Your Rights when receiving a Health or Disability Service

- **Respect**  
You should be treated with respect. This includes respect for your culture, values and beliefs, as well as your right to personal privacy.
- **Fair Treatment**  
No one should discriminate against you, pressure you into something you do not want or take advantage of you in any way.
- **Dignity and Independence**  
Services should support you to live a dignified, independent life.
- **Proper Standards**  
You have the right to be treated with care and skill, and to receive services that reflect your needs. All those involved in your care should work together for you.
- **Communication**  
You have the right to be listened to, understood and receive information in whatever way you need. When it is necessary and practicable, an interpreter should be available.
- **Information**  
You have the right to have your condition explained and to be told what your choices are. This includes how long you may have to wait, an estimate of any costs, and likely benefits and side effects. You can ask any questions to help you to be fully informed.
- **It's Your Decision**  
It is up to you to decide. You can say no or change your mind at any time.
- **Support**  
You have the right to have someone with you to give you support in most circumstances.
- **Teaching and Research**  
All these rights also apply when taking part in teaching and research.
- **Complaints**  
It is OK to complain – your complaints help improve service. It must be easy for you to make a complaint, and it should not have an adverse effect on the way you are treated.

If you need help, ask the person or organisation providing the service.  
You can contact the local advocacy service on 0800 555 050 or the  
Health and Disability Commissioner on 0800 11 22 33 (TTY).



NEW ZEALAND  
**NURSES**  
ORGANISATION

TŌPŪTANGA  
**TAPUHI**  
KAITIAKI O AOTEAROA



# Professional regulation

Four key elements –

1. Determining the criteria for who should enter and remain in the profession

*Registration and renewal*

2. What educational preparation for entering should look like

*Accreditation*



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA





# NCNZ & Professional regulation

## 3. Providing advice and standards

*Codes and guidelines*

## 4. Identifying the criteria that would need to be breached for exclusion

*Complaints and notifications*



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

# Regulation & competence

- Practitioner Competence is reflected in all four of the regulatory elements listed above
- Ensuring Competence is a major purpose of professional regulation
- The need for competent nurses and midwives is inarguably a public protection matter.



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

# NCNZ complaints sources

Table 10: Sources of notifications and complaints 2016-2017

| SOURCE                           | NUMBER     |
|----------------------------------|------------|
| Health consumer/member of public | 31         |
| HDC                              | 17         |
| Health practitioner              | 7          |
| Ministry of Justice              | 19         |
| Employer                         | 132        |
| Self-notification                | 37         |
| Other                            | 33         |
| <b>Total</b>                     | <b>276</b> |

NCNZ Annual Report Year ended March 31, 2017, p 44

# NCNZ complaint outcomes

**Table 11: Outcomes of preliminary investigations into notifications and complaints  
2016-2017**

| OUTCOME                              | NUMBER     |
|--------------------------------------|------------|
| No further action                    | 41         |
| Refer to PCC – Conduct               | 21         |
| Refer to PCC – Initial Investigation | 14         |
| Refer to HDC                         | 26         |
| Refer to Health                      | 78         |
| Refer to Competence                  | 45         |
| Refer to PCC – Court Conviction      | 37         |
| Other                                | 14         |
| <b>Total</b>                         | <b>276</b> |



NEW ZEALAND  
**NURSES**  
ORGANISATION

TŌPŪTANGA  
**TAPUHI**  
KAITIAKI O AOTEAROA

# Competence awareness

- The awareness of competence or incompetence (often referred to as **insight**) is vital to public protection

so... What do we mean by **insight**?



NEW ZEALAND  
**NURSES**  
ORGANISATION

TŌPŪTANGA  
**TAPUHI**  
KAITIAKI O AOTEAROA



# What do we mean by ‘insight’?

## Insight

*noun*


- the *capacity to gain* an accurate and deep *understanding* of someone or something.

([https://www.google.co.nz/search?q=define+%27insight%27&rlz=1C1CHKB\\_en-gbNZ618NZ618&oq=define+%27insight%27&aqs=chrome..69i57j69i59j0l4.8272j1j8&sourceid=chrome&ie=UTF-8](https://www.google.co.nz/search?q=define+%27insight%27&rlz=1C1CHKB_en-gbNZ618NZ618&oq=define+%27insight%27&aqs=chrome..69i57j69i59j0l4.8272j1j8&sourceid=chrome&ie=UTF-8))



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



- 
- The question is – how do we **develop** the **capacity** for insight?



# Exploring insight: Main reference

Chiarella, M. & Vernon. Insight into insight: analysis of case files of nurse and midwife registrant performance complaints. *Collegian* (2018),

<https://doi.org/10.1016/j.colegn.2018.10.001>



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# Insights into insight

Key factors:

Ownership of the event

**AND**

Action on reflection



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# Insights into insight about situation

- Does the **nurse** either:  
demonstrate insight  
**OR** a lack of insight?
- Nurses' responses AND  
behaviours **post** reflection  
are crucially important



# Insights into insight

- Chiarella & Vernon found that reflection was not the same as insight
- Reflection is simply the first step in a series of elements



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

# Insight more closely defined

- “**Insight** is awareness of one’s internal state and is associated with the ability to identify and express feelings; that is, people who inspect and monitor their **thoughts, feelings, and behaviours** well should have good self-reflection and insight. Further, self-reflection and insight are positively correlated.”

(Grant, Franklin, & Langford, 2002, p. 822 as cited in Chiarella & Vernon, p2)



TŌPŪTANGA  
**TAPUHI**  
KAITIAKI O AOTEAROA



# Examples

In an aged care facility where an allegation was made of a medication error involving two RNs, it was found that the RNs failed to check the wrist band of the patient and administered the wrong medication to the wrong patient. The medication was labelled but was not checked by either of the RNs at the time of administration.

(Taken from Chiarella and Vernon (2018))

# Insight?...

In the case of the first RN, the regulatory body determined to address the matters in writing rather than taking other action. This decision was based on “the registrant’s response which indicated she took responsibility for her actions”.

The second RN’s account of the situation included information about other nurses on the ward making mistakes far worse than the one she had made, and no action had been taken. The RN also stated “I have known the reporting RN most of her life and there is friction from the past between our families. My anxiety was heightened as I did not trust her”.



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# Indicators of concern in relation to insight

- Not understanding the seriousness of the issue, or even that there is an issue
- Blaming others for own behaviour
- Making excuses for own behaviour
- Making no attempt to change
- Non-compliance with improvement measures



# Registration renewal for nurses

- Compliance with Continuing Professional Development (CPD) requirements
- Compliance with the requisite hours of recent practice (RoP)
- Satisfactory self-assessment against national competency standards or professional for practice (NZ = competencies)

# Whose responsibility is it?

- In ensuring responsibility for competence

Is it the regulatory authority's issue?

Or

The employer's?

Or

The individual's



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

# Awareness, competence & safety

|         | <b>Competent</b>                                  | <b>Incompetent</b>                               |
|---------|---|--|
| Aware   | Aware they are competent -SAFE                    | Aware they are incompetent -<br>POTENTIALLY SAFE |
| Unaware | Unaware they are competent-<br>POTENTIALLY UNSAFE | Unaware they are incompetent-<br>UNSAFE          |





# Key study findings: Insight involved...

- Ownership of and taking responsibility for the incident
- Evidence of reflection on and analysis of the incident
- Evidence of reflection on and analysis of the registrant's (nurse') own mental and/or physical state
- Analysis of the context in which the incident occurred



# Key findings about insight (cont'd)

- Recognition of own failures or mistakes
- Expressions of remorse, sorrow or regret
- Making an effort to improve oneself through targeted education
- Thinking about and describing what the registrant (nurse) would do differently next time
- Seeking out counselling/mentorship



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# Sources of concern for regulators

1. Not understanding the issue
2. Blaming others
3. Making excuses
4. Making no attempt to change
5. Non-compliance with improvement measures



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# Best approaches to developing insight

- Clear language to describe behaviours and attitudes
- Clear assessment templates of clinicians' performance

Taking a proactive educational approach to the development of insight also seems preferable to using it as a lens through which to make decisions about de-registration.



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# The insightful (or not) nurse

The issues of **ownership** of their role in the situation, followed by a willingness and then the impetus **to improve** seem to go to the heart of what is required for insight to be acceptable to the regulators.

(Chiarella & Vernon, p6)



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

# Insight required:

The insight required by regulators is comprised of (p6):

- Reflection

**PLUS**

- Ownership of the registrant's role in the issue under review

**PLUS**

- Action



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



# The Bottom Line: Safety for everyone



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA

[www.nzno.org.nz](http://www.nzno.org.nz)

# References

- Brown, N., McAvoy, P., & Joffe, M. (2014). Defining insight: A challenge that matters. *The Clinical Teacher*, 11, 170-173.
- Chiarella, M. & Vernon. Insight into insight: analysis of case files of nurse and midwife registrant performance complaints. *Collegian* (2018), <https://doi.org/10.1016/j.colegn.2018.10.001>
- International council of nurses (2019). 'Health for All: Nursing, global health and universal health coverage. Accessed 3/11/2019 at [https://2019.icnvoicetolead.com/wp-content/uploads/2017/04/ICN Toolkit 2019 pdf.pdf](https://2019.icnvoicetolead.com/wp-content/uploads/2017/04/ICN_Toolkit_2019_pdf.pdf)



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA


# References (cont'd)

- NCNZ (2012). *Code of Conduct*. Wellington: Nursing Council of NZ
- NCNZ (2007). *Competencies for Registered nurses*. Wellington: Nursing Council of NZ
- NCNZ (2015). Health Practitioners Competence Assurance Act 2003 Competence Review Process.  
<file:///C:/Users/AnneB/Downloads/Competence%20review%20process%20April%202015.pdf>
- NCNZ (2017). 2017 Annual Report.  
<http://www.nursingcouncil.org.nz/Publications/Reports-and-workforce-statistics>



NEW ZEALAND  
NURSES  
ORGANISATION

TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA



Cruess SR, Johnston S & Cruess RL (2004)  
Profession: a working definition for medical  
educators *Teaching and Learning in Medicine:  
an International Journal* 16 (1), 74-76, p.74

NZNO 2011 NZNO Guideline: Coaching and  
performance plans.

[https://www.nzno.org.nz/resources/nzno\\_publications](https://www.nzno.org.nz/resources/nzno_publications)



TŌPŪTANGA  
TAPUHI  
KAITIAKI O AOTEAROA