



# NZNO FORUM Council Update 2023



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### Overview

- Who we are we, Where we come from
- Our partnership in this 'space'
- Te Whare model protecting public safety
- Reviewing the Guidelines for Cultural Safety, Te Tiriti o Waitangi and Maori
- EN scope and competencies
- RN scope and competencies
- Key Data
- Fitness to Practice



#### 'Kia whakatōmuri te haere whakamua '

'I walk backwards into the future with my eyes fixed on my past'.





Kohikohi ngā kākano, whakaritea te pārekereke, kia puāwai ngā hua

Gather the seeds, prepare the seedbed carefully,

and you will be gifted with abundance of food







### He Kākano Āhau

I am a seed I ruia mai I Rangiatea

Ākeheni Hei One of first early Māori Nurse pioneers







# And I can never be lost I am a seed, born of greatness







# Descended from a line of chiefs

# He kākano ahau - I am a seed



**Niwareka** 

**Nurse Maude** 

Sibylla Emily Maude (1862-1935)





Wherever I may roam
I will hold fast to my traditions
My language is my cherished possession
My language is the object of my affection
My precious adornment

**Erena Mere Taare** 







# My language is my strength

An ornament of grace







## Whenever I stand, I am clothed by my ancestors

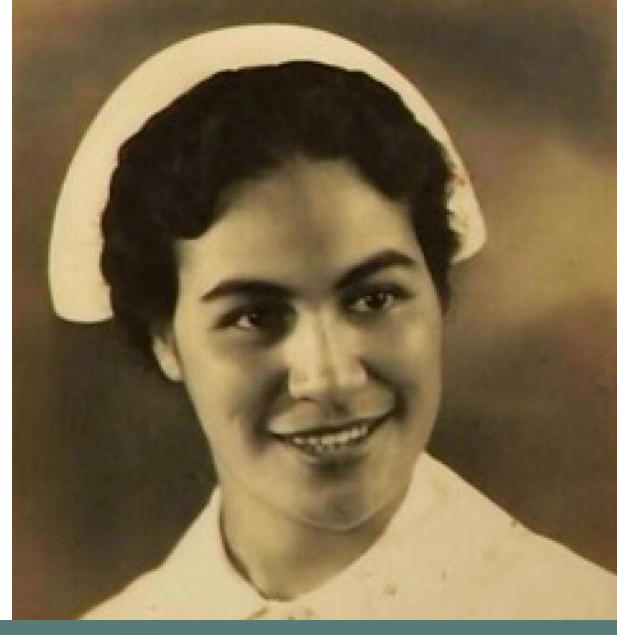






# My pride I will show, That you may know who I am

Whaea Putiputi O'Brien, QSO (1922-2015) was born and raised in Te Teko. Her tribal affiliations include Ngāti Awa, Te Arawa and Tuhoe.







# I am a warrior, a survivor He morehu ahau – I am a remnant

Irihapeti Ramsden







Wherever I may roam
I will hold fast to my traditions
My language is my cherished possession
My language is the object of my
affection









# My precious adornment

Kathryn Chapman,
Ngati Ruanui, Ngaruahinerangi, Ngapuhi, Tainui
Clinical Nurse Advisor – workforce Manakidz @ National Hauora
Coalition







# My language is my strength

Catherine Tu'akalau







# An ornament of grace

Daniel Mataafa



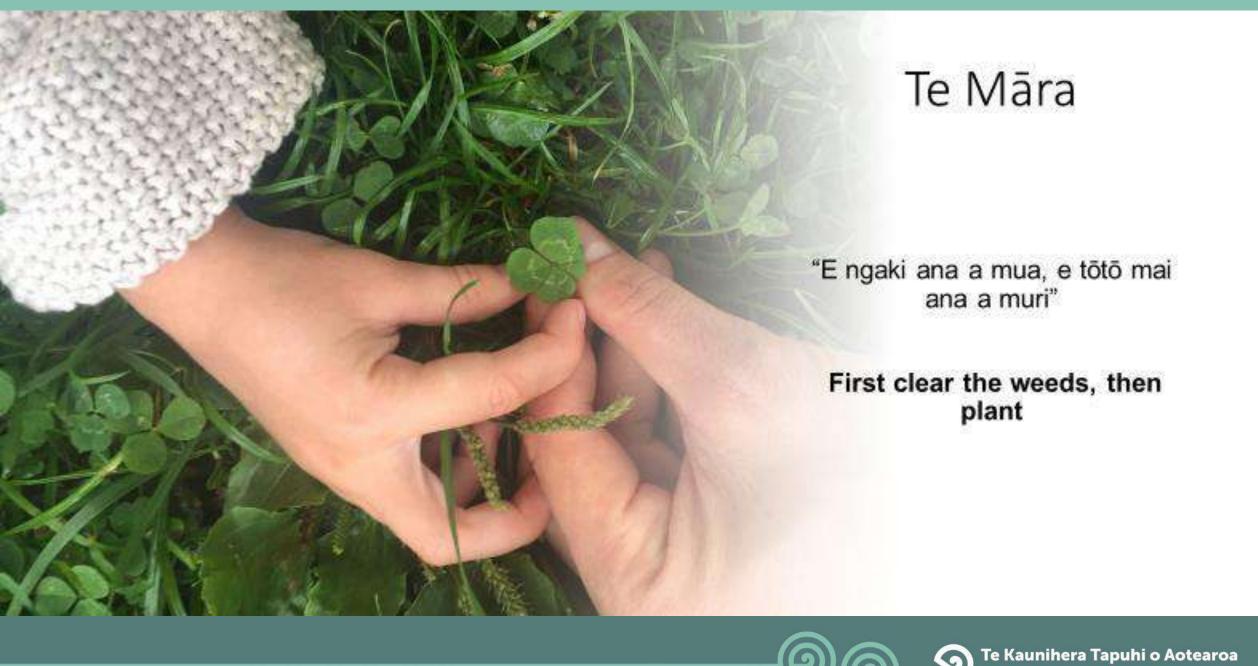












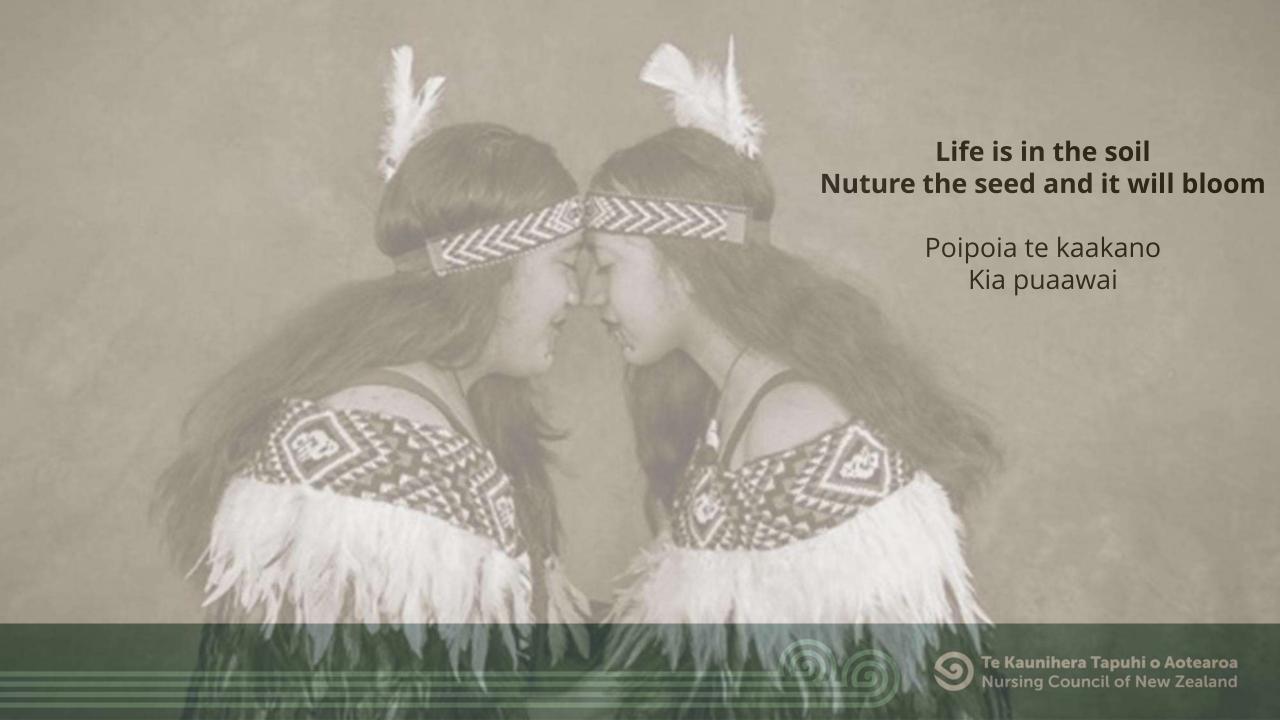












# Te Tiriti o Waitangi - at it's heart a relationship agreement

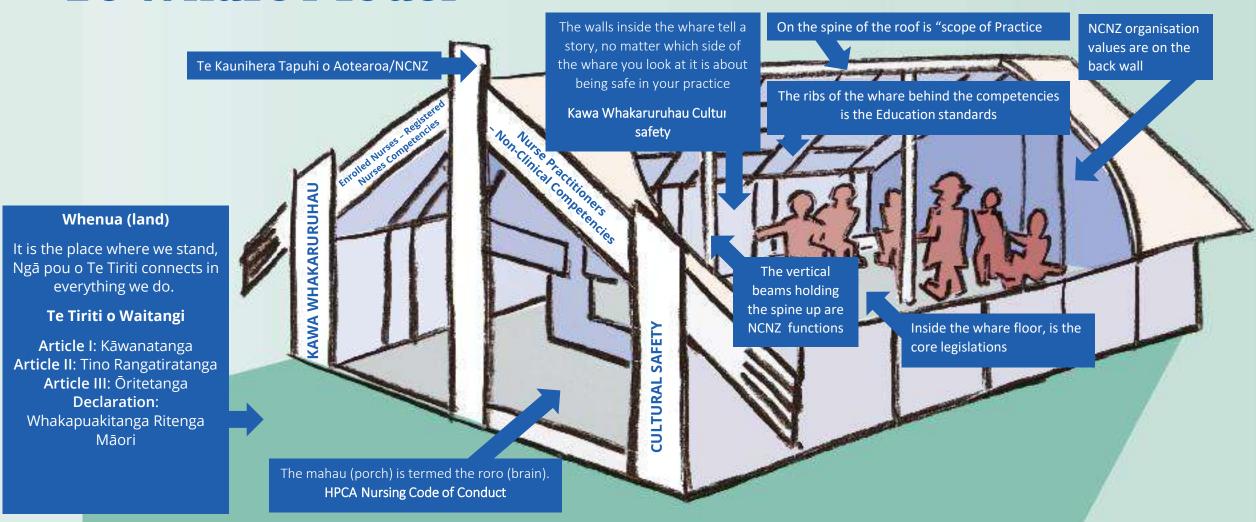
Te Ao western worldview

Te Ao Māori worldview





### Te Whare Model







# Reviewing the Guidelines for Cultural Safety, Te Tiriti o Waitangi and Māori Health in Nursing Education and Practice

Te Rangitāmiro Kaimahi Māori- Engaging with our Māori Nursing Workforce











### Māori Nursing Workforce Engagement Te Rangitāmiro Kaimahi Māori

#### Ngā Taumata Kōrero - Our Engagements



Hui-a-Ipurangi (Rua)

Registered 37

Attended



Te Whanganui-a-Tara

Registered 30

Attended 19



Tāmaki Makaurau

Registered 47

Attended 36



Ōtautahi

Registered 37

Attended 24

#### O Tatou Mahi - Registered



Frontline Nurses



Nursing Management



Public Servants (Health)





Nursing **Educators** 



Other/ Not Listed



Hauora Māori



Ora



Te Whatu



O Tatou Tunga Mahi - Registered

Te Aka Whai Ora



**Tertiary** Gov Institutions Departments



National/ Regional Orgs



16%



#### Ngā Kaupapa Kōrero Matua Our Key Themes



#### Te Tiriti o Waitangi

'Te Tiriti o Waitangi, Cultural Safety, and Kawa Whakaruruhau need to be included in every competency, especially as culturally safe practice should be the outcome of all competencies.'



#### **Whanau Engagement**

'When engaging with whānau and families, nurses need to have space and opportunities to create whakawhanaungatanga. This includes engagements where everything that we do is led with manaaki, keeping whānau at the centre, growing respectful relationships, and understanding the importance of relational care.'



### Defining Cultural Safety in our Context

'Kawa Whakaruruhau needs to exist and be woven through every space. Kawa Whakaruruhau is a te ao Māori perspective that is underpinned by te ao Māori values and that the translation of it into 'cultural safety' has diluted the intent and outcomes of the mahi.'



### Assessing, Monitoring and Reviewing Cultural Safe Practice

'We need to involve patients and whānau in the assessment of culturally safe practice, as they would be able to affirm if the practice received was/is culturally safe.'



#### Mātauranga Māori

'We must utilise and prioritise mātauranga Māori and Māori models of health such as Te Whare Tapawha and Meihana Model etc and move away from only focusing on te taha tinana.'





Sector engagement and participation
Council acknowledges the tremendous guidance and support from the nursing

profession and wider sector

- EN and RN design groups, including Māori roopu
- EN education standards working group
- EN scope sector reference group
- NZNO EN Section and Te Poari
- Te Kaunihera o Ngā Neehi Māori
- Nurse Educators and Leaders
- Komiti Māori
- Pacific Fono
- National Wānanga
- Māori and Pacific nursing leaders
- Professional colleges and sections

- Te Whatu Ora
- Te Aka Whai Ora
- Manatū Hauora
- NNLG
- DONs
- NETs
- Wharangi
- CAN (NZ)
- NEA
- Council of Deans
- ARC
- Toitu Te Wairoa
- ACC



### **Enrolled Nurse - Scope of Practice**

Enrolled Nurses in Aotearoa New Zealand reflects knowledge, concepts, and worldviews of both tangata whenua and tangata tiriti. Enrolled nurses uphold and enact Te Tiriti o Waitangi ngā mātāpono – principles, based within the Kawa Whakaruruhau framework for cultural safety, that promote equity, inclusion, and diversity and rights of Maori as tangata whenua.

Enrolled Nurses are accountable and responsible for their nursing practice, ensuring all health services they provide are consistent with their education and assessed competence, legislative requirements, and are supported by appropriate standards. This includes the right of Māori and other population groups to quality services that are culturally safe and culturally responsive.

The Enrolled Nurse works in partnership and collaboration with the health consumer, their whānau, communities, and the wider healthcare team to deliver equitable person/ whānau/ whakapapa-centred general nursing care, advocacy, and health promotion across the life span in all settings. An Enrolled Nurse's practice is informed by their level of educational preparation and practice experience, and may include a leadership or coordination role within the healthcare team.

Enrolled Nurses partner with health and disability support consumers to initiate care, monitor, and enhance health status through nursing assessments, care planning, implementation, and evaluation of care. Enrolled Nurses work with access to and seek, when appropriate, guidance from a Registered Nurse or other registered health practitioner.\*

\*A health practitioner is a person who is registered under the Health Practitioners Competence Assurance Act 2003 – for example a midwife, medical practitioner or occupational therapist.

This scope will not come into effect until gazetted by the Council mid-2024.



#### **Proposed Amendments to Registered Nurse Scope Statement**

Registered Nurses in Aotearoa New Zealand reflect knowledge, concepts, and worldviews of both tangata whenua and tangata tiriti. Registered nurses uphold and enact Te Tiriti o Waitangi ngā mātāpono – principles, based on the Kawa Whakaruruhau framework for cultural safety, that promote equity, inclusion, diversity, and rights of Māori as tangata whenua.

Registered Nurses are accountable and responsible for their nursing practice, ensuring all health services they provide are consistent with their education, assessed competence, legislative requirements, and are supported by appropriate standards. This includes the right of Pacific peoples and other population groups to quality services that are culturally safe and culturally responsive.

The Registered Nurse works in partnership and collaboration with individuals, their whānau, communities, and the wider healthcare team to deliver equitable person/ whānau/ whakapapa-centred nursing care, advocacy, and health promotion across the life span in all settings. Registered nurses may practise in a variety of clinical contexts depending on their educational preparation and practice experience. Registered nurses may also use this expertise for leadership, management, teaching, evaluation, and research nursing practice.

Registered nurses utilise nursing knowledge and complex nursing judgment to assess health needs, provide care, and **empower** people to manage their health. Registered nurses practise independently, and in collaboration with other health professionals, perform general nursing functions and **delegate and direct others** involved in care. Registered nurses provide comprehensive assessments to **develop differential diagnoses**, provide an integrated plan of health care, implement interventions that require substantial scientific and professional knowledge, skills and clinical decision making, and evaluate care outcomes. This occurs in a range of settings in partnership with individuals, whānau, and communities.

Conditions may be placed on the scope of practice of some registered nurses according to their qualifications or experience limiting them to a specific area of practice. Some nurses who have completed the required additional experience, education and training will be authorised by the Council to prescribe some medicines within their competence and area of practice.



## EN and RN competencies review

Measures have been taken to ensure that the RN and EN competencies reviews align:

- Members across both projects
- Māori Roopu across projects
- National Wānanga to inform review and Kawa Whakaruruhau and Cultural Safety Guidance
- The proposed competencies have been developed considering the international literature, including an extensive review of national and international competency frameworks, and content which focused on cultural, technical and relational competencies
- Background research was also undertaken by individual members of the Design Groups with a particular lens on Aotearoa New Zealand.



# **Key Shifts in Existing EN Competencies Pou/Domains**

- 1:Te Tiriti o Waitangi
- 2: Cultural safety
- 3: Knowledge informed practice
- 4: Professional accountability & responsibility
- 5: Partnership and collaboration.





### Key Shifts in Existing RN Competencies

### Pou/Domains

- 1: Ōritetanga & social justice
- 2: Kawa Whakaruruhau & cultural safety
- 3: Pukengatanga and excellence in nursing practice
- 4: Manaakitanga & people-centredness
- 5: Whanaungatanga & communication
- 6: Rangatiratanga & leadership



### **Timelines**

- EN education standards consultation closes 4 December 2023
- EN and RN competencies (and amendments to RN scope) open for public consultation from 18 December 2023 until 12 February 2024
- Continue sector engagement through end 2023/early 2024
- Board approval of the EN education standards, RN scope statement, and EN and RN competencies by April 2024, before being gazetted
- An implementation and transition plan will be developed to help guide the sector to implement the new scopes, standards and competencies
- Communication and implementation plan to support transition of changes over 2024.





### Key Data Oct 2022 - Sept 2023



### **Total nurses**

with annual practising certificates (APCs)

- 71,345 Registered Nurses
- 2,449 Enrolled Nurses
- 703 Nurse Practitioners\*

40% of nurses are internationally qualified



#### Nurses added to Register

- 12,442 Registered Nurses
- 277 Enrolled Nurses

2,283 New Zealand graduates

10,436 Internationally qualified



#### Māori nurses key data for year end March 2023

4,888 Māori nurses

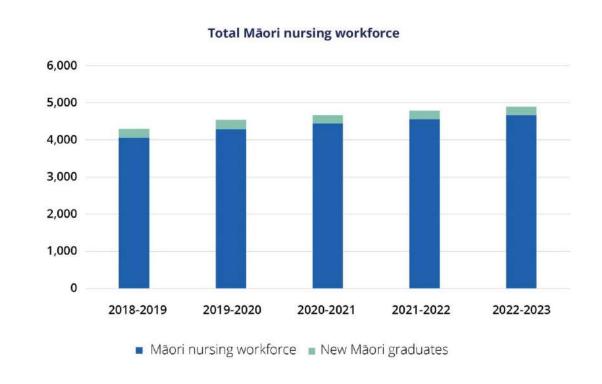
4,584 Registered Nurses

238 Enrolled Nurses, and

**66 Nurse Practitioners** 

220 new Māori nurses were added to the Register.

7% of nurses with APCs are Māori.







#### Pacific Peoples nurses key data for year end March 2023

2,722 Pacific Peoples nurses

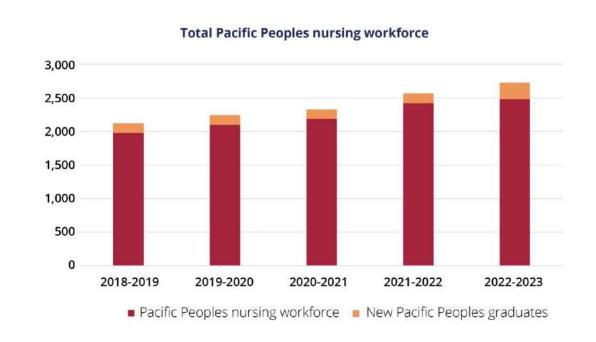
2,528 Registered Nurses

182 Enrolled Nurses, and

12 Nurse Practitioners

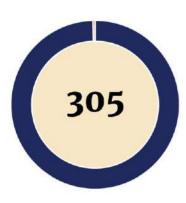
243 new Pacific Peoples nurses were added to the Register.

4% of nurses with APCs are Pacific Peoples.









# Total notifications for year end March 2023

- 29 Competence notifications
- 74 Health notifications
- 34 Conduct committees
- 26 Court convictions

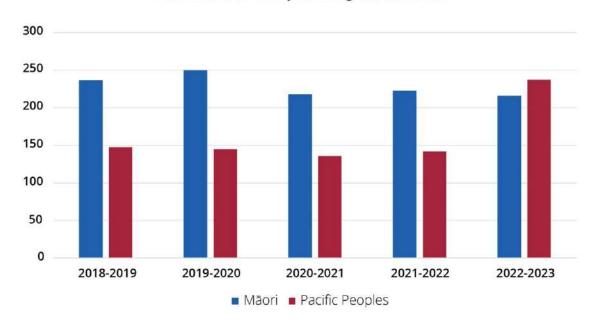


As the regulator, the Nursing Council sets the standards for practice and education, and takes action when these are not met.





#### Māori and Pacific Peoples new graduate nurses



#### Of New Zealand graduates who joined the Register in 2022–2023\*

- 14% identified as Māori
- 13% identified with Pacific Peoples' ethnicities
- 25% identified with Asian ethnicities





<sup>\*</sup> The above percentages represent those graduates who provided ethnicity data as not all did. Next year, all graduates and applicants will supply ethnicity data.

### A Continuum of Professional Behaviour.



Every nurse-client relationship can be plotted on the continuum of professional behaviour





## Disciplinary outcomes -2023

Of the 34 complaints investigated by PCCs

- 10 required no further action
- 9 had charges laid with Health Practitioners Disciplinary Tribunal
- 12 received letters of counsel
- 1 was referred for a review of their competence
- 5 were referred for a review of their health (3 had more than one outcome)





# Recent disciplinary decisions – disinterest or neglect – NICU

- Nurse found guilty of failing to respond to acute apnoea alarms resulting in intervention from another nurse
- Wearing headphones and being distracted by an electronic device
- Failed to document apnoeic episode (for two babies)
- Told a mother who asked to hold her baby that she was too busy, she should get the baby herself and was unsupportive and judgmental
- Registration cancelled





# Failure to provide care and falsified documents 1121/Nur18/429P

- Nurse worked in children's hospital
- Complaints from both colleagues and parents of children that she had not undertaken care on a night duty
- Falsely documented observations had been carried out and medications had been administered
- Refused to take new admission
- Said her experience meant she could undertake observations and administer medications (including spacers) without waking either the patient or parent



### ... Continued

Protection of the public and maintenance of professional standards and trust and confidence in the nursing profession required cancellation

Conduct goes to the heart of the nurse's role to provide safe and competent care and maintain accurate patient records

While did not intend to cause harm, risk of harm was present Cancellation, censure, costs,





# Failing to provide care to children Nur21/526P

- Early Childhood Team nurse providing well child service to high needs families
- Placed on SIP, PIP, practised under supervision, audited then resigned practised elsewhere while suspended by Council
- Failed to visit children at all, failed to visit for extended periods, children seen but not examined, not referred for assessment when significant medical, developmental or behavioural concerns identified (59 charges, 23 established)
- Negligence and bringing discredit
- Registration cancelled



# Recent complaint -interim suspension

- Nurse in aged care facility observed with earphones watching laptop on several occasions by colleagues and CCTV
- Unable to be located by staff
- Discrepancy between documented neuro obs and CCTV recording
- Told a resident he did not "do catheters" when pain and discomfort raised with him and not documented
- Signed that all medication given at same time, some not administered and some not in stock

