Q6: Do you support nurse practitioner being a broad generic scope of practice (like registered nurse and enrolled nurse) and the removal of the requirement for registration to be restricted to a specific area of practice?

Yes,

Please give your reasons
A broad generic scope provides the opportunity for further development and growth as the NP gains more experience. It also enables them flexibility to work across boundaries to provide integrated patient centered care.

Q7: Do you support the focus on leadership within clinical practice in the new proposed scope of practice statement?

Yes,

Please give your reasons
As a new NP clinical excellence is essential and developing a leadership role in this area will then lead to growth in the other areas.

Q8: Do you agree with the inclusion of advanced nursing skills and knowledge in the proposed new scope of practice?

Yes,

Please give your reasons
These are important in order to ensure that the scope clearly differentiates the skills and knowledge level required to be a nurse practitioner so that there is no confusion around their abilities to practice at the level necessary.

Q9: Do you agree with the proposed new scope of practice for nurse practitioner?

Yes,

Please explain your reasons or suggest changes or alternative wording
The new scope appears to clearly define the depth of the work NP's undertake without limiting their flexibility or being to descriptive.

Q10: Do you support a dedicated Masters programme with a broad focus for nurse practitioner preparation?

Yes,

Please give your reasons
There has been some confusion on which courses to take and how to proceed so a dedicated masters program for NP will give more clarity and uniformity for those wishing to become NP's. It will also make it easier for cross crediting or recognizing overseas NP qualifications. There does need to be some flexibility in order for there to be an area of “specialty” included so that NP's can gain knowledge in areas they may intend to specialize or have more interest in.
Q11: Do you support the Council specifying clinical learning time within the programme for nurse practitioners?

Yes,
Please give your reasons
Specified clinical learning time is important as it will make it easier for nurses to obtain support from their employers and funding for cover for this time especially if it is a mandatory area. This will also ensure that each candidate will have similar opportunity to enhance their clinical skills.

Q12: How much clinical learning time should be included in the programme in addition to the prescribing practicum (a minimum of 150 hours)?

I think there should be 520 to 1,000 hrs. If the NP candidate is to have a meaningful experience in practicing their skills in a supernumerary supervised learning environment they need enough time to experience a large range of conditions which needs a longer time frame than the minimum 150 hours.

Q13: Do you think that a student must have employer support to complete a practicum with supernumerary hours?

Yes,
Please give your reasons
There must be employer support for the supernumerary hours as without it there will be extra pressure on the NP candidate to undertake the hours on top of their normal work load risking burn out or failure. Support from the employer indicates their valuing the nurse as a NP. There needs to be something in place to assist the employer financially to provide cover for the NP candidates position while they are getting their clinical learning time or to provide an extra RN within the service to enable the NP candidate to be supernumerary. This support also means their will be a dedicated NP role on successful completion.

Q14: What other requirements for the clinical learning hours should be specified by the Council e.g. mentor criteria, setting, competence or other assessments?

Mentor Criteria: Need to ensure there are mentors of sufficient experience who are able and willing to assist the candidate and the candidate has a choice
The setting needs to be conducive to best practice and enable relevant clinical experience to challenge the candidate
Competence/assessment needs to be built into the clinical learning outcomes which should be agreed by the candidate and mentor
Clinical supervision needs to be mandatory

Q15: Do you think the Postgraduate diploma in registered nurse prescribing for long term and common conditions should be a pre-requisite for nurse practitioner programmes?

Yes,
Please give your reasons
It makes sense to make the post grad dip in prescribing to be part of the Clinical masters NP pathway. If the RN has already gained the post grad dip prescribing and had been utilizing it in their practice area they will have gained experience, knowledge and understanding of their practice and will be able to bring a rich source of knowledge to their NP Masters. If in the transition period between the old pathway and the new pathway a candidate has not taken the post grad dip in prescribing but has completed other similar papers there needs to be an ability for cross crediting and recognition of prior learning.
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<thead>
<tr>
<th>Question</th>
<th>Response</th>
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<tr>
<td>Q16: Do you support Nursing Council setting the programme outcomes for nurse practitioner programmes?</td>
<td>Yes,</td>
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<tr>
<td>Please give your reasons</td>
<td>If nursing council set the program outcomes for NP programs there will be more uniformity to the education that nurse practitioners are receiving</td>
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<td>Q17: Do you agree with the draft programme outcomes for nurse practitioner?</td>
<td>Yes</td>
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<td>Q18: Do you think that the Council has a role in accrediting tertiary courses and programmes that do not lead to nurse practitioner or registered nurse prescribing?</td>
<td>Yes,</td>
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<td>Please give your reasons</td>
<td>Council has role in accrediting programs that do not lead to np and or prescribing? It is important that other programs are accredited by council to ensure and maintain a uniformity of standards. This acknowledges and values that while not all nurses will want to prescribe or become NP’s they still expect programs to be of a certain standard. If they are not accredited by nursing council obtaining funding for them will prove difficult and it will also limit the choice and availability of courses for nurses to pursue their special interest areas.</td>
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<td>Q19: Any other comments on the scope of practice or education programme?</td>
<td>Respondent skipped this question</td>
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