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

NCWNZ is firmly in support of there being a broad generic scope for Nurse Practitioners such as there currently is for medical practitioners and registered nurses. The scope for Nurse Practitioners should not be restrictive because experience and expertise develops over time. Specialisation in certain areas will evolve for many as health needs within the Nurse Practitioner’s general practice become apparent. NCWNZ would like to see a ‘Community Care' component included in the Nurse Practitioner’s scope. It would be beneficial when a Nurse Practitioner is aware of health issues and needs beyond those of the immediate patient, to be able to facilitate wrap around services for the family as a whole. This would be a different health care delivery, but our members believe it would be extremely beneficial if Nurse Practitioners could work across health services and health settings to access appropriate health care and specialist services to meet the particular needs of their clients.

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

Yes,

Please give your reasons

Yes. Clinical leadership is an integral to the Nurse Practitioner’s role. Having a qualified Nurse Practitioner within a clinical practice, must be an incentive for encouraging other nurses to build on their basic nursing skills, to strive for excellence and to consider becoming Nurse Practitioners themselves. Concentration for the clinical leader role is crucial but because there are so many distractions for nurses prior to achieving Nurse Practitioner registration, concentration is often compromised. Therefore the person best suited for the clinical leadership role is the Nurse Practitioner, who has completed the study and now is able to focus totally on the task in hand.
| 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  
Yes. Emphasis on advanced nursing skills and knowledge gives a holistic aspect to the proposed new scope of practice. It also differentiates the Nurse Practitioner’s scope from the Registered Nurse scope. |
| 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  
Yes. It gives a good overview of capabilities and accompanying legislation |
| Q10: Do you support a dedicated Masters programme with a broad focus for nurse practitioner preparation? | Yes,  
Please give your reasons  
Yes. A dedicated Masters programme with a broad focus will reduce confusion and give greater confidence to nurses undertaking this pathway. To date there have been a variety of pathways to reach Nurse Practitioner status depending on which of seven tertiary institutions the nurse enrolls at in New Zealand. NCWNZ members believe the Nurse Practitioner course must be more uniform, with syllabus content uniform throughout New Zealand. A dedicated Masters programme will give broader employment opportunities and in the future will enable the Nurse Practitioner to move with ease into new expanded areas of health service. However, NCWNZ wonder whether Mental Health will fit with a broad focus for Nurse practitioner preparation. We believe establishing a definite pathway incorporating Mental Health into the Primary Health would be preferable. |
| Q11: Do you support the Council specifying clinical learning time within the programme for nurse practitioners? | Respondent skipped this question |
| Q12: How much clinical learning time should be included in the programme in addition to the prescribing practicum (a minimum of 150 hours)? | Respondent skipped this question |
| Q13: Do you think that a student must have employer support to complete a practicum with supernumerary hours? | Respondent skipped this question |
| Q14: What other requirements for the clinical learning hours should be specified by the Council e.g. mentor criteria, setting, competence or other assessments? | Respondent skipped this question |
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
While we would prefer prescribing to be a prerequisite for the Nurse Practitioner programme, we do not believe it should be a definite. There will always be overseas trained nurses wishing to join the programme and New Zealand nurses wishing to work overseas. Looking to the future, with projected population changes, we consider Nurse Practitioners will play an increasing role in rural areas, and as has been pointed out in the consultation document, the anticipated shortage of general practitioners (Royal New Zealand College of General practitioners, 2014) will see qualified nurse practitioners having an increasing role in maintaining service levels and service delivery. New Zealand will be increasingly looking to nurses from overseas to help maintain levels of service. NCWNZ believe cross crediting must be considered at least with countries where the New Zealand Council of Nurses has strategic partnerships, such as with USA, Canada, Australia and Great Britain. There is a need for consistency for easier evaluation of educational standards and competencies as well as to ensure continuity of standards for our nurses and for overseas nurses coming to work in New Zealand.

Q16: Do you support Nursing Council setting the programme outcomes for nurse practitioner programmes?

Yes,

Please give your reasons
Our members view the Nursing Council as the gatekeeper of standards in nursing practice. We consider standards in nursing practice must be upheld, maintained and overseen. Only one body should have the responsibility for setting the Nurse Practitioner’s programme and we consider the appropriate body is the Nursing Council.

Q17: Do you agree with the draft programme outcomes for nurse practitioner?

Respondent skipped this question
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?

Yes,

Please give your reasons

Yes. Many experienced nurses want to study and improve knowledge and skills. However they do not necessarily want to become Nurse Practitioners. Factors which would influence a nurse’s decision making as to whether or not embark on the study programme for Nurse Practitioner registration would depend on whether a position for a Nurse Practitioner exists within the particular organisation where the nurse is employed, the age of the nurse, the cost of tertiary study and the time involved in reaching Nurse Practitioner level. Studying to the CNS level will be more appealing for many nurses. This level also requires post graduate papers, but at the moment there are more employment opportunities available through the District Health Boards for nurses at the CNS level.

Q19: Any other comments on the scope of practice or education programme?

NCWNZ is pleased to have had the opportunity to contribute to the review of the scope of practice and qualifications for Nurse Practitioners. Since its inception the role of the Nurse Practitioner has continued to evolve. As we look to the future, our members realise that with an ageing population and a dwindling rural population, there will be considerable demands placed on the delivery of health care. We believe the role of the Nurse Practitioner will become increasingly important in our health system. It is crucial that the Nursing Council regularly reviews the scope of practice and qualifications for nurses. The Nursing Council must ensure the appropriate skill set for Nurse Practitioners is developed and continues to be relevant and that any funding barriers and employment difficulties are addressed.