Thank you for the opportunity to provide feedback to Nursing Council of New Zealand on the scope of practice and qualifications for Nurse Practitioner. This feedback is provided by a group of senior nurses, at Palmerston North Hospital, Midcentral Health.

Q1 Do you support Nurse Practitioner being a broad generic scope of practice like the registered nurse or enrolled nurse and the removal of the requirement for registration to be restricted to a specific area of practice?

Yes. Nurse Practitioners are educated and have the insight and understanding to develop their own practice and not undertake activities outside their competence, very similar to medical practitioners. Nurse Practitioners are responsible for determining what medications and treatments they are competent to prescribe.

Experience and expertise develops over time. Self-definition may be useful but not mandatory to define scope at registration.

For Nurse Practitioners who are already registered and have a specific area of practice such as diabetes or respiratory, it is unclear what the proposed changes may have to their registration and practice, if any. There is no mention of this in the current document that we could identify.

Q2 Do you support the focus on leadership within clinical practice in the new proposed scope of practice statement?

Yes. A focus on clinical leadership across a community, district, region and at a national level is integral to the Nurse Practitioner role. However, other leadership areas will develop for Nurse Practitioners over time.

The focus on leadership, combined with the complexity of their patients, are key points of difference between a Clinical Nurse Specialist with prescribing rights and a Nurse Practitioner.

Q3 Do you agree with the inclusion of advanced nursing skills and knowledge in the proposed new scope of practice?

Yes. An emphasis on advanced nursing skills and knowledge gives clarity about the differences between the Registered Nurse scope of practice (particularly with prescribing) and the Nurse Practitioner scope of practice. Nurse Practitioners have the legal authority to diagnose, prescribe, treat and be accountable for an episode of care.

Q4 Do you agree with the proposed new scope of practice for nurse practitioner?

Yes. It gives a good overview of capabilities and accompanying legislation. It allows the public to have better understanding of what a Nurse Practitioner is.

Q5. Do you support a dedicated masters programme with a broad focus for nurse practitioner preparation?

Yes, this will reduce confusion and give greater confidence to nurses undertaking this pathway and have a focus on critical thinking skills. It will also potentially give broader employment options and in the future allow easier access for Nurse Practitioners to move into new expanded roles.

The programme would need to ensure that nurses can enter with a post graduate certificate or diploma and can cross credit similar papers from international educational providers, if appropriate.
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Some nurses suggested that clinically focussed postgraduate papers for example advanced assessment and clinical decision making are more primary care focused. This will allow for the development of appropriate advanced assessment skills that will enhance the nurses skill set required to become a Nurse Practitioner in primary care. However, appropriate educational pathways still need to be available for Nurse Practitioners working in acute care settings. The education programme therefore, must be fit for purpose: that is to meet the changing needs of their population and the service needs of the organisation.

And do you support the Council specifying clinical learning time within the programme for nurse practitioners?

Yes, this is to ensure that a nationally consistent approach is taken.

A wide range of experiences over time is needed, to become a competent and safe practitioner, along with appropriate mentorship. There needs to be more clinical learning time, in addition to the prescribing practicum. Employer support is ideal, but should not be mandatory. However, it would be very challenging to complete a practicum with supernumary hours, without employer support. The Prescribing Supervisor should be kept, in addition to a mentor/s.

Q6 Do you think the Postgraduate diploma in registered nurse prescribing for long term and common conditions should be a prerequisite for nurse practitioner programmes?

This could be an option, but there needs to be flexibility for Nurse Practitioners choosing to work in acute care settings.

Q7 Do you agree with the draft programme outcomes for Nurse Practitioners?

Yes.

Q8 Do you think the Nursing Council of New Zealand has a role in accrediting tertiary courses that do not lead to Nurse Practitioner or Registered Nurse prescribing?

Yes. The Nursing Council of New Zealand is the regulatory authority who ensures a consistent standard of nursing education, in this country, that both the public and the profession can be assured of.