



Nurse Practitioner Scope of Practice

February 2015

Submission to:

Nursing Council of New Zealand
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SUBMISSION

The College of Nurses is a professional body of New Zealand registered nurses and nurse practitioners from all regions and specialties both within and outside of the District Health Board (“DHB”) setting. It provides a voice for the nursing profession and professional commentary on issues that affect nurses, and also the health of the whole community, aiming for excellence in nursing practice and health care delivery which addresses disparities in health.

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?

The College supports a broad scope of practice for nurse practitioners. We expect that NPs will deliver broad and comprehensive care to their client group.

We do however agree that many NPs may then practice with a more defined population group or patient group

Nurse practitioners are therefore able to determine their practice against client or patient need and under a broad scope.

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

Leadership requirements currently in place are one aspect that separate the nurse practitioner role from the clinical nurse specialist role. Newly educated nurse practitioners need a comprehensive understanding of the health system, which develops through leadership roles and involvement in policy development. The purpose of requiring four years experience in a specific area of practice is to ensure that a candidate is an experienced registered nurse. The leadership requirements ensure that the candidate understands the multiple facets of health care and is prepared to make changes to that system through any of the channels of education, leadership or policy making and these skills are essential for a nurse practitioner.

However we also note that there are and will be NPs for whom leadership is not part of their practice because they choose or prefer to focus entirely on exemplary clinical practice

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

The College is supportive of this inclusion with a caveat. We note that as currently written it does not add any additional clarity. A registered nurse who has completed a postgraduate diploma and becomes a designated prescriber might well consider they are using advanced skills and knowledge and it would be useful future proofing to sharpen the distinction. One point of difference might be the use of or adherence to more formulaic or algorithm based prescribing for RNs compared with the autonomous clinical judgment of the NP prescriber.

Do you agree with the proposed new scope of practice for nurse practitioner? Please explain your reasons or suggest changes or alternative wording.

The College supports the new scope of practice.

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

The College supports a dedicated Masters programme with a broad focus for nurse practitioner preparation.

A nurse practitioner position is a broad role and therefore requires a broadly focused study programme to adequately prepare for the role.

Do you support the Council specifying clinical learning time within the programme for nurse practitioner?

See next answer

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

The College does not consider that specified clinical hours can be linked to competency acquisition.

We do however suggest that approval of NP programmes be closely linked to the education institution's requirement of appropriate links to clinical practice to ensure the best opportunity for the student to be successful

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

The College does not consider that employer support should become a mandatory aspect of the student journey. We think that employers frequently lack the vision and courage to support the development of RNs to NP roles

The College however does consider that having employer support to complete a practicum would ensure that there is employer buy-in to the process of the Nurse Practitioner pathway. Such support indicates a willingness from employers to employ nurse practitioners at the end of the process, and most people on the pathway would be working as senior nurses who would be completing the nurse practitioner practicums on top of the required reading and study; and usual workload. It would be very difficult to complete the hours without employer support but requiring it also excludes a nurse from being able to resign from a position and devote to full time study and arrange his or her own practicum.

The College sees no advantage to excluding this option.

What other requirements for the clinical learning hours should be specified by the Council eg mentor criteria, setting, competence, or other assessments?

There should be a nominated mentor who is able to comment on the student's practice development, Tying this to competencies may be the simplest way for everyone and helps the candidate when it comes to NP portfolio development. The setting needs to be relevant to the area in which, the NP candidate is planning to commence practice so they are best prepared for that area and can expand practice from a position of strength.

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

The College does not support this. The postgraduate diploma in registered nurse prescribing for long-term and common conditions could be one route towards NP registration, but need not be the only route. The current Council application for RN prescribing is too limiting for future NPs whose area of practice falls outside 'long-term and common conditions' (there has been no direction from Council about what areas of practice this descriptor might encompass). In principle becoming a RN prescriber prior to embarking on study towards NP registration is sound, but a mechanism will be needed to support nurses who already have a completed clinical masters degree, and those whose area of practice is other than 'long-term and common'.

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

Yes it is appropriate that as the registration authority for the nursing profession, the Nursing Council is clear about expectations for nurses at each level.

Do you agree with the draft programme outcomes for nurse practitioners?

Yes, the College considers the outcomes cover the elements of nurse practitioner practice.

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 as a significant marker of quality

Any other comments on the scope of practice or education programme