



EXECUTIVE DIRECTORS REPORT

October 2011



Executive Directors Report 2011

Presented at the **AGM : Rotorua 11th October 2011**

Board Members

Taima Campbell – Co Chairperson, Maori Caucus
Judy Yarwood – Co Chairperson
Ngaira Harker- Wilcox - Board Member Maori Caucus
Margareth Broodkoon – Board Member Maori Caucus
Vicky Noble – Board Member
Angela Bates – Board member

Executive Director

Professor Jenny Carryer

College Patrons



Prof Marilyn Waring



Putiputi O'Brien QSO

College Censors

Prof Nan Kinross
Cathy Cooney
Putiputi O'Brien QSO
Te Miringa Huriwai

College Administration Staff

Kelly Rotherham
Andrea Bond

College Vision:





Foreword

It is my pleasure to present this report to the nineteenth annual general meeting of the College.

As always the College depends for its success on the work and input of those who have the time and energy to extend their leadership beyond their practice or organisational domain and into the broader area of the discipline at large.

The demands of leadership have become ever greater as available time and resources diminish and the challenges to think and do differently become ever greater.

Contained within this report are the outcomes of considerable work and dedication to the College's vision; that in health there will be one hundred percent access to services and zero disparities in health status.

Acknowledgements

As always my thanks are extended to the Board who make sacrifices in their personal lives to contribute to the College. In particular I want to acknowledge the dedication of our co-chairs Taima Campbell and Judy Yarwood. This AGM sees the end of a term of service from Vicki Noble who has contributed considerable wisdom in the area of primary health care and will be indeed missed.

In addition I acknowledge the work of the College Censors and thank them for their continuing attention to college applications for Fellows.

Kelly Rotherham as College Administrator and her assistant Andrea Bond have again provided dedicated and skilled assistance to me, to the Board and most importantly to the College membership.

Professor Jenny Carryer
Executive Director



The report is a summary of College activities and achievements written against the core goals of our strategic plan.

Strategic Goals

Community need for health services is recognized as being at risk from predicted workforce shortages and deficits. The College remains committed to all activities which support releasing the full potential of nursing services to address disparities and to ensure that people have full access to competent and safe care from a health professional who is working at the “top of their license”.

Goal 1. ALIGN NURSING WORKFORCE DEVELOPMENT WITH COMMUNITY NEED

- **NPAC-NZ** (Nurse Practitioner Advisory Group). The College continues to be represented on NPAC- NZ by Pip Rutherford, NP and Sue Wood. Key work this year has focused on the development of a proposal for a national nurse practitioner training program aligning clinical practice experience with academic requirements. In addition NPAC-NZ has been clarifying its important relationship with NPNZ
- **NPNZ:** (Nurse Practitioners of New Zealand-) Dr Michal Boyd is now the chairperson of NPNZ and has done considerable work in revitalising NPNZ as an important division of the College and the site of key engagement for Nurse Practitioners. The College makes a significant commitment to Nurse Practitioners on the basis of strong and long standing evidence of that Nurse Practitioners provide a transformational health service and are a solution to many workforce shortages. NPNZ annual Report attached as Appendix 1.
- **Prescribing:** The College is delighted to note that it is now planned for NPs to achieve authorised prescriber status early in 2012.

For RNs however there are other proposals on the table for a delegated prescriber status to be added alongside or between the existing use of standing orders and the existing designated prescriber role. Further discussions will be held amongst the national nurse leader group but the College would express concern about establishing prescribing situations which require direct medical delegation or supervision given that they encourage inflexibility.

- **Legislative barriers to NP and RN practice:** Again action is occurring but very, very slowly and many NPs remain frustrated by the niggling barriers to their effectiveness and efficiency.
- **Consumer alliance work:** Unfortunately due to demanding workloads of College Board members and others consumer alliance work has not progressed this year.
- **National Consortium:** This is now fully established and has begun considering standards for practice put up by professional groups and sections. Taima Campbell and Angela Bates are our representatives on the consortium and Maureen Morris (NZNO) has been appointed as Chair. I have observed that many members of the profession remain unclear about the purpose of the consortium. In brief it was established as a response to the recognition of a proliferation of various standards for practice being produced by special interest nursing groups. The consortium aims to bring professional organisations and stakeholders together to review and ensure the quality and coherence of standards produced by various nurse groups.



- **NNO (national nurse leaders meetings).** This is an excellent forum for informally bringing together the Chief Nurse and the leaders of NZNO, College of Nurses, College of Mental Health Nurses, Council of Maori Nurses, Nursing Council, Council of Deans, Nurse Educators in the Tertiary Sector, Directors of Nursing and Nurse Executives. The forum is used to discuss topical issues, to move towards consensus positions or determine both agenda setting and responses to groups such as Health Workforce NZ.
- **Portfolio workshops:** Dr Stephen Neville has again made a tremendous contribution with Portfolio workshops in Napier, Nelson and Palmerston North. Attendance at these workshops is variable with some full to overflowing and others very short on numbers despite extensive marketing. We do still go ahead as long as costs are met as all feedback on all aspects of these workshops has been fantastic and it pays off in terms of goodwill for attendees. In addition it meets our commitment to workforce development especially for nurses working outside traditional DHB boundaries
- **Primary health care nurses (including school and youth health nurses).** This is another area of key engagement for the College. We remain concerned to ensure that there are no funding, employment or infrastructural impediments to ensuring that nurses in all primary health care settings can offer the full range of possible services. There is considerable confusion and variation in interpretation about enrolment processes and the disbursement of capitation. Some innovative areas are working around the perceived barriers but in too many instances the perception that only GPs can enrol patients and use capitation is limiting innovation and service delivery especially in areas of critical need. The College will shortly sign an MOU with SYPHANZ reflecting our commitment to children and young people.

Consultation is underway on the Government's green paper on vulnerable children.

2. INFLUENCE POLICY/ HEALTH LEADERSHIP

- Consultation with key sector leaders continues; Regular meetings Dr Jane O'Malley (Chief Nurse) and Carolyn Reed (CEO, Nursing Council) continue
- Health Literacy work. Marama Parore, Eileen McKinlay, Dr Jan Pearson, Julia Ebbett and Dr Jean Gilmour are working with NZNO on a joint statement on Health Literacy. A draft has just been released for consultation with the full College membership.
- Alcohol Group: Annette Milligan has taken leadership for the College to engage with Prof Doug Sellman in the National campaign towards reform of alcohol legislation. We consider it important that Prof Sellman has nursing partnership in this important campaign.



2.1 Submissions

The following submissions have been completed in the previous year. Thanks to College members and the College Board on behalf of the membership for the very concerted effort that goes into this work. These submissions represent a substantial body of work and a major contribution to influencing health and nursing policy.

Name of Submission	Submitted to	Date
Submission: Review of Pharmacy Services for People in Age-related Residential Care	Pharmacy ARRC DHBNZ	November 2010
Career Planning Introduction Input to further development of the proposals related to career planning for health professionals.	Graeme Aitken Career Planning Project Manager Health Workforce New Zealand	November 2010
Draft direction and delegation guidelines: Consultation.	Nursing Council of New Zealand	December 2010
Submission on Smoke-free Environments (Controls and Enforcement) Amendment Bill	Parliamentary Select Committee for Smoke Free Environments	January 2011
RE: Draft (DHB Funded) Service Specifications for People with Chronic Health Conditions for Home Support Services; Out of Family Respite Services and Community Residential Services within Aged Care Facilities. (Unfortunately the College of Nurses, Aotearoa (NZ) Inc was omitted from circulation of this important document. We were however alerted by our colleagues in the New Zealand Nurses Organisation and have conferred with them accordingly.)	National Health Board Business Unit Ministry of Health	March 2011
Statement on Credentialing. (The College membership was consulted about credentialing at the time the MoH held meetings during 2009 to discuss the issue from a multi profession perspective. As a result the College contributed to a shared position statement with NZNO)	Nursing Council NZ	April 2011
Joint Submission on the HWNZ proposal for a shared secretariat and office function for all health-related regulatory authorities together - prepared together with a group of organisations representing the health professions.	Health Workforce NZ	April 2011
Submission on Assessment processes for older people (2003) (NZGG guidelines)	New Zealand Guidelines Group	April 2011
Submission on Nursing Council of New Zealand's DRAFT Professional Boundaries Guidelines August 2011	Nursing Council NZ	September 2011
Feedback submitted on Palliative Resource and Capability Framework	Ministry of Health	September 2011

All submissions are available to view on the College website www.nurse.org.nz under the **resources** tab.



3) DEVELOP A SUSTAINABLE FUTURE FOR THE COLLEGE

- **Marketing:** Some forms of marketing have been quite successful. Word of mouth continues to be the greatest source of membership applications. Marketing this year has been concentrated around -
 1. Website and online presence - We have worked on creating a greater web presence with our own site and links from other sites as well as working on establishing a social media presence and a small advertising campaign via social media, as this is a work in progress it will be interesting to see the results,
 2. Nursing Review - It is difficult to measure the impact of advertising the membership rates in Nursing Review but there is a better awareness of the College and as this is one of our only print forms of advertising to the greater nursing market it must be having some effect.
 3. Direct mail and email to potential members / workshop attendees - The time taken to gather addresses for directly communicating College membership information and Workshops in specific areas has shown clearly this year that it is a very worthwhile form of marketing for the College.
- **Te Puawai:** Earlier this year we made the decision to discontinue hard copies of Te Puawai and to move to an e-book / online format. This will be trialled through next year to determine member acceptance and engagement.
- **Website:** Members continue to comment favourably on the new and vibrant web site. New features are being introduced this month with Te Puawai changing to an e-book format. A slight reformatting of tabs/ sections has also been completed as part of the ongoing development in making this a user friendly website for members. Engagement with the General College forum is low however the NPNZ forum is used on a daily basis by members for all forms of communications and updates.
- **Expertise data:** the expertise database is constantly updated and available. This is a valuable resource, listing all College members and their fields of expertise. Members should note that when this resource is kept up to date we are greatly assisted in calling the right people to provide expertise.
- **Regional groups:** Regional group activity continues to be extremely low with the exception of the Wellington group who maintain active political engagement.
- **Course endorsement :** None completed during the last year
- **College Symposium 2012:** The Christchurch regional group is hosting the College Symposium in Christchurch in 2012. Plans are well underway for this event. Titled "Baby boomers and beyond: Nursing practice and partnerships with older people" it will be held on Thursday 11th & Friday 12th October 2012
- **AGM:** We are delighted to welcome Emeritus Professor Donna Diers (Yale University) as the Guest Speaker at the AGM in Rotorua. The Rotorua College group and Waiariki Institute of Technology have generously supported and sponsored her visit. A report on the event will be in the first e-book issue of Te Puawai in November.
- **Strategic plan:** The Board have met in October to begin the review of the strategic plan for the next three year period.



- **Scholarships:** No scholarships awarded this year.
- **Nursing Praxis in New Zealand:** Nursing Praxis continues in contract with the College office managing the administration and accounts.
- **Financial Status:** Copies of audited financial statements are available at the AGM and also available on request from the College office.
- **Insurance:** The College is delighted to have secured a renewed indemnity policy at a continuation of the previous rate. We had anticipated that in view of world-wide pressure on insurance companies there would be a request for increase.

3.1 Board Changes

This AGM sees the end of a term of service from Vicki Noble who has contributed considerable wisdom in the area of primary health care during her term as a Board Member and will be indeed missed. Vicky will continue to be an active member of the Wellington Regional Group.

Nominations were requested in August of 2011 for a new board member and we welcome Nicola Russell to the College Board. Nicola currently resides in Invercargill and will take up her position on the College Board from Dec 2011 by which time she will have completed her Masters thesis. We include a short bio from Nicola.

Nicola Russell RN, BN, (Masters in progress)



Graduating in 1998 at SIT, I worked for the following three years in acute medical/oncology at Southland Hospital, Manly Hospital (Sydney) and Mackay Base Hospital. Whilst living in rural Queensland I had the opportunity to work in an isolated community hospital/after-hours general practice and soon realised that primary health care was my nursing passion.

Returning to New Zealand, I worked for two years at Family Planning in Invercargill before moving into general practice where I have remained for the past six years. I enjoy the dynamic nature of practice nursing and am fortunate to work in an environment where I am supported in my quest to continually explore new ways of delivering accessible and autonomous nursing care to our practice community.

My postgraduate study pathway began four years ago, and whilst balancing work, study and the demands of a young family has been challenging at times, it has also been immensely rewarding – both personally and professionally. I look forward to obtaining my Master of Philosophy (Nursing) in early 2012, with the completion of my thesis "What are the experiences of large bodied women accessing general practice services?"

In terms of leadership and representative positions I can safely call myself a rookie, yet I see this as, hopefully, a temporary status. I am very grateful and excited to be a member on this board, which represents strength in nursing advocacy, and will embrace all the learning experiences and opportunities that come with this position.



Appendix 1.

Nurse Practitioners of New Zealand (NPNZ) Division of the College of Nurses: Report from Michal Boyd - Chair NPNZ



Nurse Practitioner New Zealand AGM Report 2011

NPNZ has been very active this year with many new developments. There was a change in leadership in December 2011, with Michal Boyd elected as new chair and past chair Lou Roebuck stepping down. The NPNZ terms of reference were finalised by the membership in April 2011. In the past, NPNZ was meeting twice a year and the long periods between meetings made it very difficult to move forward with urgent matters. A proposal was put forward by Alison Pirret, secretary to create a NPNZ executive committee which was approved by the NPNZ membership in April 2011. The NPNZ executive members include:

- Alison Pirret, secretary
- Elizabeth Langer, treasurer
- Pip Rutherford, NPAC-NZ/NPNZ liaison
- Helen Topia, conference facilitator
- Diane Williams, primary healthcare and ACC expert
- Bernadette Paus, website maintenance
- Michal Boyd, chair

The NPNZ executive committee meets via teleconference bi-monthly. A main priority for the committee was to develop a NPNZ mission and strategic plan. This was developed at the NPNZ full membership April 2011 meeting and final drafts were reviewed and approved by membership (though on-line communication) June 2011.

Current NPNZ activities include:

- NPNZ NP Development Day in Auckland on 15 November 2011 to provide mentorship to those preparing to become a nurse practitioner.
- Correspondence regarding NP practice issues with:
 - LCP National Office
 - NENZ
 - ACC policies in collaboration with NPAC-NZ and NZNO College of Primary Care Nurses
 - Controlled medicines prescribing to CNA, NZNO and NPAC-NZ
- Collaboration with Goodfellow Symposium, March 2012 for an education stream specifically for and delivered by NPs and senior nurses and the Auckland "100 NP" celebration.

Below are the mission, values and aims of NPNZ as developed and agreed upon by NPNZ membership in April 2011. This is followed by a 2011 strategic action plan and a description of progress to date.

Mission: To be the voice for Nurse Practitioners in New Zealand and promote the role as integrated clinical health care leaders who provide high quality accessible care to all New Zealanders.

Values

- Excellence in health through service delivery, research and policy
- Closing the gaps in healthcare
- Honest and respectful partnerships
- Nurse Practitioner leadership for New Zealand Nurse Practitioners



- The Treaty of Waitangi is the foundation for nurse practitioner practice

Aims

1. Promote excellence in advance clinical nursing through practice, education and research
2. Enhance capacity of the Nurse Practitioner practice in New Zealand
3. Provide Nurse Practitioner leadership for legislation, regulation and policy development
4. Provide resource and consultation for healthcare practice in New Zealand.

2011 STRATEGIC PLAN AIMS AND 2011 OBJECTIVES and PROGRESS

Aim 1: Promote excellence in advance clinical nursing through practice, education and research

1A. Collaboration with NPAC-NZ regarding the Nurse Practitioner trainee document to ensure a unified nurse practitioner voice.

Discussions have begun to increase the communication between NPAC-NZ and NPNZ membership. Pip Rutherford attends NPAC-NZ meetings and liaises with NPNZ Executive Committee and NPNZ membership. Scheduled teleconferences occur between Helen Snell, chair of NPAC-NZ, Pip Rutherford and Michal Boyd regularly.

1B. Provide an active voice in endorsement of nurse practitioner education and training through collaboration with NPAC-NZ to develop guidelines for NP Trainee/Intern.

NPNZ provided feedback on NPAC-NZ NP Trainee document and the revised version was sent to the membership.

1C. Active participation in Nursing Council of New Zealand post graduate curriculum review and ensure NPNZ representation to represent the NP perspective.

NPNZ is liaising with NPAC-NZ regarding this review.

1D. Develop a NPNZ statement about NP perspective regarding nationally standardised clinical education.

At the November 2011 NPNZ meeting, representatives from all five New Zealand Nursing Council approved clinical master's programmes will attend to discuss current clinical Master's curricula and future NP education. This will inform future NPNZ education position statements.

Aim 2: Enhance the capacity of the Nurse Practitioner profession in New Zealand

2A. NPNZ to send a letter requesting collaboration with PHARMAC to explore NP Special Authority barriers.

A letter was written to Pharmac and the Ministry of Health from NPNZ members in clinical practice discussing specific special authority concerns for NP. A response was received from Tony Ryall and Peter Moody. Issues were also discussed with Chief Nurse Jane O'Malley.

2B. Letter to Minister of Health about NP barriers requiring most focus:

Primary Health Care Funding: NPNZ is collaborating with NPAC-NZ regarding this issue. NPNZ is collaborating with the Goodfellow Primary Healthcare conference to provide sessions that are targeted for NPs as well as raise the NP profile by asking specialist NPs to present with a consultant colleagues. This conference will also host an Auckland "100 NP" celebration that evening during the main conference social event.

The Chief Nurse, Jane O'Malley is scheduled to attend the NPNZ meeting in April 2012 to discuss these issues as well as other NP practice issues.

ACC Funding Issues: A joint submission from NPNZ, NPAC-NZ and College of Primary Care Nurses was sent to ACC regarding changes in fee structure.

Moving forward the legislation to change NPs from designated to authorised prescribing.

NPNZ has collaborated with NPAC-NZ, NZNO and College of Nurses Aotearoa to inform the NPNZ membership about authorised prescribing progress.

2C. NPNZ active link with Chief Nurse Jane O'Malley

Jane O'Malley will attend April 2012 meeting.



Aim 3: Provide Nurse Practitioner leadership for legislation, regulation and policy development

3A. Refine NPNZ organisational processes

3A1. Resolve NPNZ/College of Nurses membership fees Issues:

The fees for NPNZ members who are not CNA(NZ) members was resolved. These NPNZ members will now pay \$150.00 annual fee to CNA(NZ).

3A2. Form Executive Committee for NPNZ and develop processes:

This was completed in April 2011.

3B. Develop NPNZ Website to include DHB-NZ information.

This is in progress by Bernadette Paus who is working with the chief nurse and Health Workforce New Zealand to relocate the DHB-NZ NP website information to another accessible website

3C. Marketing cards for new members: This is in progress.

Aim 4. Resource and consultant for health practice in New Zealand.

4A. NP Special authority issues letter to Pharmac.

This was completed and a response received and sent to members

4B. NPNZ consultation letter to Health Workforce New Zealand to address NP clinical practice training and reimbursement.

This will be done in collaboration with NPAC-NZ and the Chief Nurse Jane O'Malley