



*Nurse Practitioners
New Zealand*

Remuneration Guideline

Nurse Practitioners in

Primary Healthcare

Aotearoa | New Zealand

August 2024



Forward

Welcome to the Nurse Practitioners New Zealand PHC remuneration guideline. This body of work has been developed by our Nurse Practitioner national working group. It aims to support Nurse Practitioners that are working in Primary Healthcare across Aotearoa New Zealand. We trust that the information provided will be helpful to better understand the role of Nurse Practitioners that work in Primary Healthcare, as well as the current contemporary market for Nurse Practitioners across Aotearoa New Zealand in this clinical area.

This remuneration guideline has been developed to support both Nurse Practitioners and their prospective employers. It provides an overview of the current national averages for remuneration in the Primary Healthcare context as well as information to consider in contractual negotiations. The body of work presented in this document is as this document intends 'a guideline'. Nurse Practitioners New Zealand acknowledge that the information presented in this guideline needs to be considered against an individual employer's contextual and circumstantial factors during a contract negotiation process.

Nurse Practitioners New Zealand supports appropriate remuneration levels for Nurse Practitioners. The information that is presented within this guideline acknowledges varying levels of clinical experience and expertise, as well as the autonomous nature of the Nurse Practitioner role, which delivers lead care in the Primary Healthcare context.

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Review

This remuneration guideline will be reviewed and updated in June 2027 by Nurse Practitioners New Zealand (NPNZ).



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THE ROLE OF NURSE PRACTITIONERS

Mātanga Tapuhi | Nurse Practitioners New Zealand's position statement on the role of a Mātanga Tapuhi | Nurse Practitioner in Aotearoa | New Zealand is presented below to provide clarity on the role within the context of Aotearoa | New Zealand.

POSITION STATEMENT

The Mātanga Tapuhi | Nurse Practitioner role in Aotearoa | New Zealand

The role of the Mātanga Tapuhi | Nurse Practitioner (NP) in Aotearoa was first established in 2001. This advanced highly skilled role provides comprehensive and expert-level healthcare to meet the health needs of health consumers and their whānau, while also reducing health inequities. Increasingly health consumers in Aotearoa are enrolling with an NP as their primary provider of healthcare or have their specialty care managed by an NP.

In Aotearoa, NPs work across all areas and specialties of the healthcare system. They have the legal authority under the Health Practitioners Competence Assurance Act (2003) to work as autonomous health professionals. NPs offer evidence-based healthcare and work in a blended nursing and medical sciences model. They have an advanced level of education and knowledge and as a minimum have gained a Master's Degree level of postgraduate education. NPs utilise expert clinical skills to complete comprehensive clinical assessments and physical examinations. They formulate differential diagnoses, order and interpret a wide range of investigations such as blood tests, X-rays, Ultrasound, MRI and CT scans. NPs make formal medical diagnoses and generate evidence-based treatment plans that include prescribing a wide range of pharmacological and non-pharmacological interventions. NPs provide preventative care, diagnose a wide range of health conditions, develop treatment plans, manage healthcare for health consumers all while being grounded within a holistic paradigm. This includes but is not limited to; managing acute illnesses, formulating complex diagnoses, completing mental health and competence assessments and managing multiple complex long-term conditions across the lifespan.

This means NPs may work independently with the general public as a lead care provider of healthcare. In many settings NPs also work collaboratively in teams and with other members of wider specialty multidisciplinary teams. NPs do not require medical supervision or oversight, as they have the legal authority to practice as autonomous practitioners. The level of care that NPs deliver is similar to that of a medical practitioner, and they provide many of the same services. NPs are accountable for their practice and are registered by the Nursing Council of New Zealand Aotearoa who are responsible for maintaining their competency standards. NPs offer and deliver proactive, responsive, innovative, effective and efficient healthcare that positively influences health outcomes.

In primary healthcare, like general practitioners, NPs are often the lead healthcare provider for health consumers and their whānau/families. In hospitals and specialist services, NPs manage complex specialist health conditions, refer to other specialist services, manage multifaceted health needs and admit and discharge people from hospital. NPs also offer specialist healthcare services in other community healthcare service teams such as community mental health and addictions services and aged care. Many NPs own their own medical centres/ are self-employed and provide NP led services. Other NPs work for the Public health service (Health New Zealand | Te Whatu Ora), non-governmental organisations, private businesses or for Māori and iwi providers.



Within the health system, the NP role is a highly skilled leadership role that actively collaborates with other health professionals and teams to promote health, drive positive health outcomes and prevent disease. They supervise and mentor a range of health professionals and many are involved in education and research.

On average it takes 8 to 9 years to become an NP through a rigorous and highly academic advanced clinical educational pathway. In Aotearoa, this is achieved by first completing a Bachelor of Nursing Degree and gaining registration as a registered nurse. As a registered nurse, the candidate then needs to develop and consolidate their skills, and knowledge, and gain clinical experience. This journey supports the advancement from a novice, to competent, to proficient and then enables an expert level to be reached. This developmental pathway is supported by completing postgraduate education to advance an individual's clinical skills further, develop greater clinical reasoning and critical thinking and build underpinning knowledge. To become an NP candidate, the individual is required to have been working in an expert-level clinical role, such as a nurse specialist or other senior expert clinical nursing role for a minimum of 3 years prior to completing the final NP preparation and registration.

The NP scope of practice is different to that of a specialist or advanced practice registered nursing role. A specialist registered nursing role is a role that provides expert care with advanced nursing knowledge. Specialist nurses complete further education and may have limited prescribing rights. Nurse specialist roles function within the margins of the specialty team and works within the registered nurse scope of practice. It is not an autonomous lead care provider role. Nurse specialists that wish to become NP candidates must complete a Master's of Nursing Degree and have their skills and advanced knowledge further developed and advanced within medical and nursing sciences. NP candidates need to apply for acceptance on the national Nurse Practitioner Training Programme (NPTP) or a tertiary-specific Nurse Practitioner candidacy programme. These are rigorous and advanced clinical education programmes. If the candidate meets the requirements, they must then undergo a challenging registration panel examination process with the Nursing Council of New Zealand Aotearoa. If successful, the NP candidate gains registration as an NP and moves into the new legal scope of practice for NPs. They are then able to practice independently as an autonomous lead provider of healthcare. NPs who have gained their NP qualifications outside of Aotearoa may be required to undertake further study to meet the required education and clinical standards for the NP in Aotearoa. It is mandatory that all overseas NPs complete the same rigorous and demanding registration examination process with the Nursing Council of New Zealand Aotearoa.

Across Aotearoa, NPs are the fastest-growing healthcare professional group and work in a wide variety of healthcare settings, often focusing on areas of the highest need. NPs are improving access to healthcare, providing choice to health consumers and are working towards creating more equitable health outcomes for the whole population.

Authorized by Nurse Practitioners New Zealand, August 2024.

Chelsea G. Willmott

Chair | Nurse Practitioners New Zealand



NURSE PRACTITIONERS IN GENERAL PRACTICE

In the Primary Healthcare context, Nurse Practitioners may be employed to work within general practice teams and/or own their own general practice medical centres. In this setting, the Nurse Practitioner role is autonomous and functions as a lead care provider role. Nurse Practitioners in general practice deliver healthcare services that are similar to that of a general practitioner. They provide general practice clinics and acute care services and work with individuals and their whānau across the lifespan. Nurse Practitioners have a commitment to providing excellence in healthcare to the communities that they work within. Nurse Practitioners hold a leadership role, offer an innovative approach to healthcare services, and have a focus to provide equitable care that reduces inequity, increase access to support New Zealanders to get well, stay well and live well.

NURSE PRACTITIONERS IN URGENT CARE

In the Primary Healthcare context, Nurse Practitioners may be employed to work in urgent care clinics and/or own their own urgent care clinics. In this setting, the Nurse Practitioner role is autonomous and functions as a lead care provider role. Nurse Practitioners in urgent care deliver healthcare services that are similar to that of a medical practitioner. They provide acute and urgent healthcare services and work with individuals and their whānau across the lifespan. They have a commitment to providing excellence in healthcare to the communities that they work within. Nurse Practitioners hold a leadership role, offer an innovative approach to healthcare services, and are focused on providing equitable care that reduces inequity, increase access to support New Zealanders to get well, stay well and live well.

NURSE PRACTITIONERS IN AGED RESIDENTIAL CARE

In the Primary Healthcare context, Nurse Practitioners may be employed to work in Aged Residential Care Facilities and/or own their own Aged Residential Care service provider businesses. In this setting, the Nurse Practitioner role is autonomous and functions as a lead care provider role and they may hold the service contract to be the lead provider of healthcare services to an Aged Residential Care facility. Nurse Practitioners in Aged Residential Care deliver healthcare services that are similar to that of a medical practitioner, and they provide general primary healthcare consultations, manage long term conditions and co-morbidities, palliative care as well as acute healthcare services. They work with individuals and their whānau across and have a commitment to providing excellence in healthcare to the health services and communities that they work within. Nurse Practitioners hold a leadership role, offer an innovative approach to healthcare services, and are focused on providing equitable care that reduces inequity, increase access to support New Zealanders to get well, stay well and live well.

Role classifications: The next section of this guideline provides clarity on Nurse Practitioner role classifications from Nurse Practitioner Candidate through to a senior Nurse Practitioner.



ROLE CLASSIFICATIONS

Nurse Practitioner Candidate in Primary Healthcare

- **A Nurse Practitioner Candidate** is a 'training role' that is undertaken by an expert level senior Registered Nurse. To be classified as a **Nurse Practitioner Candidate**, the individual must have successfully met the required prerequisites and entry criteria for an approved Nurse Practitioner Training Program; and be completing this program. In Aotearoa New Zealand the National Nurse Practitioner Training Program (NPTP) is provided by a national NPTP consortium. Six Universities work in partnership to deliver the national training program. It is acknowledged that a **Nurse Practitioner Candidate** may choose to complete an approved Nurse Practitioner training program outside of the NPTP consortium.
 - **'Training' vs 'Qualified': A Nurse Practitioner Candidate** is someone that is 'preparing and/or training' to become a Nurse Practitioner. The candidate has not yet met the criteria or requirements to apply for registration as a Nurse Practitioner. Importantly, a **Nurse Practitioner Candidate** is not able to legally work as a Nurse Practitioner in the Nurse Practitioner Scope of Practice. Due to the role's 'training' status, the role works alongside a clinical supervisor in their area of clinical practice and is additionally supported by an academic nurse practitioner mentor from their chosen tertiary provider. During their final year of preparation, a **Nurse Practitioner candidate** must be supervised. They are not able to complete their clinical training unsupervised. The candidate remains working within the Registered Nurse scope of practice and their wider clinical governance is provided by their clinical supervisor and clinical workplace. The clinical supervisor may be either a senior Nurse Practitioner (NP≥3years post NP registration) or a senior medical practitioner.
 - **It is acknowledged** that a **Nurse Practitioner Candidate** may or may not have been accredited as a Registered Nurse Prescriber in their prior role as an expert Registered Nurse.
 - **It is expected that** as a registered nurse providing healthcare at an advanced level, the **Nurse Practitioner Candidate** is working in a remunerated role versus in a voluntary capacity.
 - **Nurse Practitioners New Zealand** supports workplaces to employ **Nurse Practitioner Candidates** into a **Nurse Practitioner Candidate** role six to twelve months prior to commencing an approved national training program.
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Remuneration guideline:

Nurse Practitioner Candidate

Hourly rate: \$70.00 to \$75.00 per hour



Recommendations for workplaces supporting *Nurse Practitioner Candidates*:

- The Nurse Practitioner Candidate does not continue to work in their previous Registered Nurse role.
 - The Nurse Practitioner Candidate is employed on a contract as a Nurse Practitioner Candidate.
 - The workplace has developed a model of care that describes how the Nurse Practitioner role will be integrated into the clinical model of care provided by the facility and outlines how this role will be supported within the healthcare setting.
 - The workplace has an active and purposeful plan to educate their staff and their patients on the role of a Nurse Practitioner.
 - A Nurse Practitioner Candidate uses a 'student' template while learning and has longer consultation times to allow the candidate to meet the national training programs educational requirements.
 - The workplace provides a clinical supervisor to support the candidate. The clinical supervisor should be on-site and have dedicated teaching spaces blocked within their template on each day that the candidate is undertaking their clinical training. In addition to this, the clinical supervisor should be supported to provide dedicated weekly 'teaching sessions' to the candidate.
 - The candidate is supported with release time from their role to complete an external clinical placement and/or placements while completing the national training program.
 - The candidate joins the workplaces clinical peer review group and attends with their clinical supervisor.
 - The workplace provides funded professional supervision and/or mentorship that is external to their workplace. This should be once a month and be for the duration of the candidates training program.
 - The candidate is supported with release time to attend the compulsory teaching study blocks with their tertiary provider.
 - The workplace is committed to supporting the candidate's additional financial burden from associated costs that maybe incurred, such as but not limited to travel/accommodation/childcare.
 - The workplace provides financial support for the candidate to complete their Nursing Council of New Zealand Nurse Practitioner registration examination.
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Disclaimer: NPNZ acknowledges that the above recommendations are additional to a standard employment contract.

Newly Qualified Nurse Practitioner in Primary Healthcare

NP1

- **An NP1** is a newly qualified Nurse Practitioner that has successfully completed the Nursing Council of New Zealand panel registration examination process and is legally registered as a Nurse Practitioner.
 - **An NP1** no longer works in the Registered Nurse scope of practice and has successfully attained the legal authority to work under the Nurse Practitioner Scope of Practice.
 - **An NP1** is classified as an autonomous healthcare provider under the Health Practitioners Competence Assurance Act (2003) and is responsible for their own decisions and clinical governance. In this sense, the NP1 does not require formal medical supervision to deliver healthcare services. However, an NP1 is acknowledged to be a '**newly qualified novice practitioner**' and therefore, it is expected that all employers of NP1 have commitment to providing NP1's with a high level of clinical and administrative support during their first year of clinical practice. This support should be structured in the primary healthcare workplace in a similar way to how an employer would support a new GP1 registrar with longer appointment times, access to a clinical mentor onsite and ring-fenced clinical teaching time.
 - **NPNZ recommends that** the employer proactively creates a supportive environment for the NP1. This will enable the NP1 to be able to further develop their knowledge, consolidate their skills and grow confidence in their new role. We recommend this process is led by a clinical mentor that is a senior Nurse Practitioner (NP≥3years post NP registration) or a senior medical practitioner.
 - **NPNZ recommends that** all Nurse Practitioners in Primary Healthcare have a professional development plan and annual performance review.
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Remuneration guideline:

NP1: Newly qualified Nurse Practitioner: 0 to 12 months of clinical experience post registration

Hourly rate: \$80.00 to \$85.00 per hour



Recommendations for workplaces supporting an NP1:

- Once qualified, the NP1 is employed onto a Nurse Practitioner contract and is incorporated into the clinical medical team's management and reporting lines.
 - The NP1 has access to a clinical mentor who is supported to have dedicated teaching time throughout the NP1 year.
 - The NP1's clinical template is structured so that they have a gradual and incremental workload increase throughout their first year of clinical practice. This is negotiated with their clinical mentor and employer.
 - The NP1 contract includes funded external professional supervision/mentorship once a month.
 - The NP1 attends regular peer review meetings.
 - The NP1 is provided with an annual professional development allowance to the same level as a primary care medical practitioner. Their study leave allowance should be the same duration/level that would be provided to a medical practitioner. This allows for an NP1 to maintain their professional development and competence in their role and meet their 3 yearly professional development requirements.
 - The NP1's contract includes paid relevant professional membership fees, annual indemnity insurance fees and other relevant clinical resources and or journal subscriptions and/or memberships that are needed to support an NP2 maintaining competence in their role.
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Disclaimer: NPNZ acknowledges that the above recommendations are additional to a standard employment contract.

**Please note: NPNZ is currently developing a Nurse Practitioner Primary Healthcare Residency Program. In the future NP1's will be able to apply for this program, which will work toward NPNZ clinical fellowship endorsement.*



Nurse Practitioner in Primary Healthcare

NP2

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- **An NP2** is a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NP2** has completed their first twelve months of clinical practice experience.
 - **An NP2** is currently working between 13months to 24months of clinical practice.
 - **An NP2** is classified as an autonomous healthcare provider under the Health Practitioners Competence Assurance Act (2003) and is responsible for their own decisions and clinical governance. The NP2 does not require formal medical supervision to deliver healthcare services. However, an NP2 is in their second year of clinical practice as a Nurse Practitioner, and therefore, it is expected that an employer will demonstrate a high level of commitment to providing an NP2 with adequate levels of support. This support should be structured in the workplace in a similar way to how an employer would support a GP2 registrar.
 - **NPNZ recommends that** all employers of NP2's create a supportive environment for the NP2 to be able to continue to consolidate their skills and build their knowledge. We recommend that an NP2 has access to a clinical mentor that is a senior Nurse Practitioner (NP≥3years post NP registration) or a senior medical practitioner.
 - **NPNZ recommends that** all Nurse Practitioners in Primary Healthcare have a professional development plan and annual performance review. We recommend that an NP2's annual performance reviews include a remuneration review that considers not only the NP2's performance and contribution but takes into account their annual generation of revenue for the clinical facility.
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Remuneration guideline:

NP2: Nurse Practitioner with 12 to 24 months of clinical experience post registration

Hourly rate: \$85.00 to \$90.00 per hour



Recommendations for workplaces supporting an NP2:

- The NP2 is employed onto a Nurse Practitioner contract and is incorporated into the clinical medical team's management and reporting lines.
 - The NP2 has access to a clinical mentor onsite who is a senior Nurse Practitioner (≥ 3 years post NP registration) or a senior medical practitioner.
 - The NP2 contract includes funded external professional supervision once a month.
 - The NP2 attends regular peer review meetings.
 - The NP2 is provided with an annual professional development allowance to the same level as a primary care medical practitioner. Their study leave allowance should be the same duration/level that would be provided to a medical practitioner. This allows for an NP2 to maintain their professional development and competence in their role and meet their 3 yearly professional development requirements.
 - The NP2's contract includes paid relevant professional membership fees, annual indemnity insurance fees and other relevant clinical resources and or journal subscriptions and/or memberships that are needed to support an NP2 maintaining competence in their role.
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Disclaimer: NPNZ acknowledges that the above recommendations are additional to a standard employment contract.



Nurse Practitioner in Primary Healthcare

NP3

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- **An NP3** is a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NP3** has completed their first 24 months of clinical practice experience and is within 25 to 36 months of clinical practice.
 - **An NP3** is classified as an autonomous healthcare provider under the Health Practitioners Competence Assurance Act (2003) and is responsible for their own decisions and clinical governance. The NP3 does not require formal medical supervision to deliver healthcare services. However, it is expected that an employer of an NP3 has a commitment to providing an adequate level of support as they would for any other medical team employee.
 - **NPNZ recommends that** all employers of NP3's create a supportive environment for the NP3 to be able to continue to consolidate their skills and build their knowledge.
 - **NPNZ recommends that** all Nurse Practitioners in Primary Healthcare have a professional development plan and annual performance review. We recommend that an NP3's annual performance reviews include a remuneration review that considers not only the NP3's performance and contribution but takes into account their annual generation of revenue for the clinical facility.
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Remuneration guideline:

NP3: Nurse Practitioner with 24 to 36 months of clinical experience post registration

Hourly rate: \$90.00 to \$95.00 per hour



Recommendations for workplaces supporting an NP3:

- The NP3 is employed onto a Nurse Practitioner contract and is incorporated into the clinical medical team's management and reporting lines.
 - The NP3's contract includes funded external professional supervision once a month.
 - The NP3 attends regular peer review meetings.
 - The NP3 is supported by the facilities clinical director to complete their Nursing Council of New Zealand 3 yearly clinical competence review portfolio.
 - The NP3 is provided with an annual professional development allowance to the same level as a primary care medical practitioner. Their study leave allowance should be the same duration/level that would be provided to a medical practitioner. This allows for an NP3 to maintain their professional development and competence in their role and meet their 3 yearly professional development requirements.
 - The NP3's contract includes paid relevant professional membership fees, annual indemnity insurance fees and other relevant clinical resources and or journal subscriptions and/or memberships that are needed to support an NP3 maintaining competence in their role.
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Nurse Practitioner in Primary Healthcare

NP3+

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- **An NP3+** is a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NP3+** has completed 37 months or more of clinical practice experience and is therefore acknowledged as an experienced Primary Healthcare clinician.
 - **An NP3+** has successfully completed their first Nursing Council of New Zealand NP clinical competence audit and had their Nurse Practitioner practicing certificate renewed.
 - **An NP3+** is classified as an autonomous healthcare provider under the Health Practitioners Competence Assurance Act (2003) and is responsible for their own decisions and clinical governance. The NP3+ does not require formal medical supervision to deliver healthcare services. However, it is expected that an employer of an NP3+ has a commitment to providing an adequate level of support as they would for any other medical team employee.
 - **An NP3+** can work in a clinical mentorship role and be a clinical mentor for a Nurse Practitioner Candidate. NPNZ encourages all clinicians working in a mentorship role to complete the NPNZ Professional Mentorship Practice Course, which is a formal qualification in mentorship.
 - **An NP3+** can work in a clinical leadership role and /or become a clinical service director.
 - **NPNZ recommends that** all employers of NP3+'s create a supportive working environment.
 - **NPNZ recommends that that** all Nurse Practitioners in Primary Healthcare have a professional development plan and annual performance review. We recommend that an NP3+'s annual performance reviews includes a remuneration review that considers not only the NP3+'s performance and contribution but takes into account their annual generation of revenue for the clinical facility.
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Remuneration guideline:

NP3+: Nurse Practitioner with 37 months or more clinical experience post registration

Hourly rate: \$95.00 to \$130.00 per hour



Recommendations for workplaces supporting an NP3+:

- The NP3+ is employed onto a Nurse Practitioner contract and is incorporated into the clinical medical team's management and reporting lines.
 - The NP3+'s contract includes funded external professional supervision once a month.
 - The NP3+ attends regular peer review meetings.
 - The NP3+ is provided with an annual professional development allowance to the same level as a primary care medical practitioner. Their study leave allowance should be the same duration/level that would be provided to a medical practitioner. This allows for an NP3+ to maintain their professional development and competence in their role and meet their 3 yearly professional development requirements.
 - The NP3+'s contract includes paid relevant professional membership fees, annual indemnity insurance fees and other relevant clinical resources and or journal subscriptions and/or memberships that are needed to support an NP3+ maintaining competence in their role.
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Disclaimer: NPNZ acknowledges that the above recommendations are additional to a standard employment contract.

**Please note: NPNZ is currently developing specialty pathways for Primary Healthcare NP3+ and above. In the future NP3+ and above will be able to apply for NPNZ clinical fellowship endorsement.*

Experienced Nurse Practitioners ‘new’ to Primary Healthcare

NPRT

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- **An NPRT** is an experienced Nurse Practitioner that has not previously worked in the Primary Healthcare clinical context and is defined as a *Nurse Practitioner in Role Transition: NPRT*.
 - **An NPRT** is a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NPRT** is classified as an autonomous healthcare provider under the Health Practitioners Competence Assurance Act (2003) and is responsible for their own decisions and clinical governance. The NPRT does not require formal medical supervision to deliver healthcare services. However, it is expected that an employer of an NPRT demonstrates a commitment to providing a comprehensive orientation program to the Primary Healthcare context with a detailed professional development plan.
 - **NPNZ recommends that** the NPRT’s professional development plan is comprehensive. It should be developed between the facility’s clinical director, clinical educator and the NPRT and tailored to their individual learning needs. As an NPRT’s is in a transitional role into the Primary Healthcare setting, employers can consider supporting role transition in a similar way to how an employer would support a new GP1 registrar with longer appointment times, access to a clinical mentor onsite and ring-fenced clinical teaching time.
 - **NPNZ recommends that** an employer of an NPRT proactively creates a supportive transitional working environment. This will enable the NPRT to be able develop their knowledge, and build skills needed a role in Primary Healthcare. We recommend this process is supported by a clinical mentor that is a senior Nurse Practitioner (NP≥3years post NP registration) or a senior medical practitioner.
 - **NPNZ recommends that** all Nurse Practitioners in Primary Healthcare have a professional development plan and annual performance review. We recommend that an NPRT’s annual performance reviews include a remuneration review that considers not only the NPRT’s role performance and contribution but takes into account their annual generation of revenue for the clinical facility.
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Remuneration guideline:

NPRT: Nurse Practitioner in Role Transition

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- **An NPRT’s** Primary Healthcare NP remuneration classification is determined by the Nurse Practitioner’s prior level of clinical experience in their previous clinical context and is negotiated between the Nurse Practitioner and their future Primary Healthcare employer on an individual case by case basis.
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Recommendations for workplaces supporting an NPRT:

- The NPRT is employed onto a Nurse Practitioner contract and is incorporated into the clinical medical team's management and reporting lines.
 - The NPRT's contract includes funded external professional supervision once a month.
 - The NPRT attends regular peer review meetings.
 - The NPRT has a dedicated clinical mentor in their workplace.
 - The NPRT is provided with an annual professional development allowance to the same level as primary care medical practitioner and a study leave allowance that is the same duration/level that would be provided to a medical practitioner. This allows for an NPRT to maintain their professional development and competence in their role and meet their 3 yearly professional development requirements.
 - The NPRT's contract includes paid relevant professional membership fees, annual indemnity insurance fees and other relevant clinical resources and or journal subscriptions and/or memberships to support the NPRT maintaining competence in their role.
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Disclaimer: NPNZ acknowledges that the above recommendations are additional to a standard employment contract

**Please note: NPNZ is currently developing a Nurse Practitioner Primary Healthcare Residency Program. In the future NPRT's will be able to apply for this program, which will work toward NPNZ clinical fellowship endorsement.*

LOCUM Nurse Practitioners in Primary Healthcare

NPL

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- **An NPL** is a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NPL** is a Nurse Practitioner who is an experienced Nurse Practitioner in Primary Healthcare and works as a locum contractor in Primary Healthcare. The NPL provides locum service to clinical facilities that maybe contracted on an as when needed basis, on an episodic basis, on a short term or long-term basis.
 - **An NPL** may be formally employed by a recognized locum agency in Aotearoa New Zealand, or work with a clinical facility on a private locum contract that has been established between an NPL and an individual clinical facility.
 - **AN NPL** is able to be employed into a clinical lead care provider role and provide leave cover for a General Practitioner or a Nurse Practitioner in the Primary Healthcare context.
 - **An NPL** is classified as an autonomous healthcare provider under the Health Practitioners Competence Assurance Act (2003) and is responsible for their own decisions and clinical governance. The NPL does not require formal medical supervision to deliver healthcare services. However, it is expected that an employer of an NPL has a commitment to providing an adequate level of support as they would for any other medical team employee.
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Remuneration guideline:

NPL: Locum Nurse Practitioner

Hourly rate: \$130.00 per hour and above.

NPL rates are individually negotiated between a recognized locum agency in Aotearoa New Zealand or with an individual clinical facility.

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- It is acknowledged that the NPL rates reflect the obligations of an NPL providing a locum service as a contractor vs an employee.
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Recommendations for workplaces supporting an NPL:

- The NPL is employed onto a locum contract as a contractor who provides a Nurse Practitioner locum service in the Primary Healthcare context.
 - The NPL is either employed as a locum by a recognized locum agency in Aotearoa New Zealand or is contracted by an individual clinical facility.
 - The NPL has an active annual practicing certificate with the Nursing Council of New Zealand.
 - If an NPL is not employed with a recognized locum agency in Aotearoa New Zealand, it is recommended that an individual clinical facility that is wishing to engage with an NPL complete a formal human resources process prior to onboarding. This includes resume and referee checks that outline the NPL's prior clinical experience over the preceding twelve months.
 - The employer commits to providing a structured clinical orientation to the clinical facility. This may include meetings with key clinical staff, orientation to practice management systems and orientation time working within the clinical facility. We recommend that an NPL has access to a clinical mentor that is a senior Nurse Practitioner (NP≥3years post NP registration) or a senior medical practitioner.
 - An NPL should provide guidance to a clinical facility or recognized locum agency in Aotearoa New Zealand on the model of care that they work within as a locum in General Practice teams e.g. if the NPL's model of care is for 15minute, 20minute or 30minute appointments. Appointment times are negotiated between a potential employer and an NPL.
 - We recommend that any NPL provides their employer with evidence of their active indemnity insurance, professional body membership and their annual professional development plan.
 - We recommend that any NPL is linked in with a regular peer review group in their region.
 - We recommend that any NPL has monthly external clinical supervision with an external provider.
 - As an NPL is a contractor, it is understood that an NPL is responsible for managing and maintaining their own relevant professional membership fees, annual indemnity insurance fees and other relevant clinical resources and or journal subscriptions and/or memberships to support an NPL maintaining competence in their role. This, however, is able to be negotiated further with an employer seeking locum contract services.
 - In some cases, an NPL locum contract may include additional negotiated items between an NPL and a recognized locum agency or clinical facility as required such as on-call requirements, PRIME service expectations, accommodation, travel, vehicle access etc.
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AFTERHOURS LOCUM Nurse Practitioners in Primary Healthcare

NPL: Afterhours

- **An NPLAH** is a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NPLAH** is a Nurse Practitioner who is an experienced Nurse Practitioner and works as a locum contractor in the afterhours setting such as Urgent Doctors or an Afterhours service in Primary Healthcare.
 - **AN NPLAH** can be employed into a clinical lead care provider role and provide leave cover for a General Practitioner or a Nurse practitioner in the Primary Healthcare context.
 - **An NPLAH** typically provides locum services for a medical team and in this clinical context we recommended that an NPLAH is remunerated to the same rate as their General Practitioner or Nurse Practitioner afterhours colleagues.
 - **The NPLAH** provides locum services to clinical facilities that maybe contracted on an as when needed basis, on an episodic basis, on a short term or long-term basis.
 - **An NPLAH** may be formally employed by a recognizes locum agency in Aotearoa New Zealand, or on private locum contracts that have been established between an NPL and an individual clinical facility.
 - **An NPLAH** is classified as an autonomous healthcare provider under the Health Practitioners Competence Assurance Act (2003) and is responsible for their own decisions and clinical governance. The NPL Afterhours does not require formal medical supervision to deliver healthcare services. However, it is expected that an employer of an NPL Afterhours has a commitment to providing an adequate level of support as they would for any other medical team employee.
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Remuneration guideline:

NPL Afterhours:

Hourly rate: \$130.00 per hour and above

Recommendations for workplaces supporting an *NPL Afterhours*:

- Providing afterhours care requires extensive clinical knowledge and experience. We recommend that an NP3 and above are employed into these roles.
 - The NPLAH is employed onto a locum contract as a contractor who provides a Nurse Practitioner locum service in the Primary Healthcare context.
 - The NPLAH is either employed as a locum by a recognized locum agency in Aotearoa New Zealand or is contracted by an individual clinical facility.
 - The NPLAH has an active annual practicing certificate with the Nursing Council of New Zealand and can be found on the website's registration register search.
 - If an NPLAH is not employed with a recognized locum agency in Aotearoa New Zealand, it is recommended that an individual clinical facility that is wishing to engage with an NPL Afterhours complete a formal human resources process prior to onboarding. This includes resume and referee checks that outlines their prior clinical experience over the preceding twelve months.
 - The employer provides a structured clinical orientation to the clinical facility requesting locum contract services. This may include meetings with key clinical staff, orientation to practice management systems and orientation time within the clinical facility. We recommend that an NPLAH has access to a clinical mentor that is a senior Nurse Practitioner (NP≥3years post NP registration) or a senior medical practitioner.
 - An NPLAH should provide guidance to a clinical facility or recognized locum agency in Aotearoa New Zealand on the model of care that they work within as a locum in General Practice teams.
 - We recommend that any NPLAH provides their employer with evidence of their active indemnity insurance, professional body membership and their professional development plan.
 - We recommend that any NPLAH is linked in with a peer review group in their region and attends regularly.
 - We recommend that any NPLAH has monthly external clinical supervision with an external provider.
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- As an NPLAH is a contractor, it is understood that an NPLAH is responsible for managing and maintaining their own relevant professional membership fees, annual indemnity insurance fees and other relevant clinical resources and or journal subscriptions and/or memberships to support an NPLAH maintaining competence in their role. This, however, is able to be negotiated further with an employer seeking locum contract services.
 - In some cases, an NPL locum contract may include additional negotiated items between an NPLAH and a recognized locum agency or clinical facility as required such as on-call requirements, PRIME service expectations, accommodation, travel, vehicle access etc.
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Nurse Practitioner in Aged Residential Care: Primary Healthcare

NPARC

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- **An NPARC** a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NPARC** is classified as working in a role within an Aged Residential Care service and/or owns their own Aged Residential Care service provider businesses.
 - **NPNZ recommends that** all NPARC's role classifications and remuneration scales are the same as our wider Primary Healthcare Nurse Practitioner recommendations as outlined within this document.
 - **NPNZ acknowledge** that an Aged Residential Care facility or service may choose to support the development of a **Nurse Practitioner Candidate** in this clinical context. As such, relevant supports such as advised as above under 'Nurse Practitioner Candidate' should be reviewed and considered against the clinical facility or clinical service.
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**Please note: NPNZ is currently developing specialty pathways for Primary Healthcare NPARC roles. In the future, NPARC's will be able to apply for NPNZ clinical fellowship endorsement.*



Nurse Practitioner in Urgent Care: Primary Healthcare

NPUC

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- **An NPUC** is classified as a Nurse Practitioner Candidate OR a qualified Nurse Practitioner that has the legal authority to work under the Nurse Practitioner Scope of Practice and is registered with the Nursing Council of New Zealand.
 - **An NPUC** is employed into a role within an Urgent Care facility or service and/or own their own Urgent Care businesses.
 - **NPNZ recommends that** all NPUC's role classifications and remuneration scales are the same as our wider Primary Healthcare Nurse Practitioner recommendations as outlined within this document.
 - **NPNZ acknowledge** that an Urgent Care facility or service may choose to support the development of a **Nurse Practitioner Candidate** in this clinical context. As such, relevant supports such advised as above under 'Nurse Practitioner Candidate' should be reviewed and considered against the clinical facility or clinical service.
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** Please note: NPNZ is currently developing specialty pathways for Primary Healthcare NPUC roles. In the future, NPUC's will be able to apply for NPNZ clinical fellowship endorsement.*



CONTACTS



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