

The NNO Group Minutes

National Nursing Organisations Meeting

Tuesday 3 December 2019

Venue: Ruru Room, Level 7, 22 Willeston Street, Wellington

Attendees:

Jenny Carryer, Catherine Byrne, Donna Foxall, Suzette Poole, Memo Musa, Margareth Broodkoorn, Ramai Lord, Stephen Neville, Chrissy Kake, Clare Buckley

The meeting was chaired by Jenny Carryer.

Minutes were taken by Debra Begg.

➤ Apologies

Apologies were received from Lorraine Hetaraka-Stevens, Mereana Rapata-Hanning, Kerri Nuku, Karyn Sangster, Margaret Dotchin

➤ Minutes – Matters Arising

The minutes from 21 August 2019 were confirmed as a true and correct record.

Moved:

Health and Disability Review

Memo confirmed that NZNO have met with Heather Simpson after the interim report was released and thinks it would be good for NNO to meet with her.

There are three themes – leadership, system complexity and equity. System as it currently is constructed makes it hard for nursing leadership to be freed up for policy and service design.

Most discussions were around systems and processes which create barriers, Tier One Primary Care for nursing to be freed up to work independently and as part of inter-professional/multi-disciplinary teams to address issues of equity, unmet need and a focus on prevention, early intervention, whānau ora, kaupapa Māori approaches in communities and whanau/families. Example are Doctor/GP centric service design/systems/processes and funding. If looking at service models or models of care, need nurses involved to identify system issues that might impact on nursing leadership, help reduce system complexity and address issues of equity.

EOL Choice bill

Going to referendum in elections 2020. It will make significant changes to the practice environment and will possibly add pressures to nurses that we haven't had to deal with before. It is important to have agreed key messages as this is likely to be topical during and prior to elections in 2020.

Action: Put on agenda for more discussion in first NNO meeting in 2020

Abortion Reform Legislation

The proposed changes or amendment are contentious – what position should NNO take in light of potential practice environment changes? The first reading of the bill has been held. In 2020, the bill will move to next stages, Select Committee and further hearings.

Action: Put on agenda for more discussion in first NNO meeting in 2020

Cannabis Amendment Act

Due for third reading by Christmas. Suzette has a paper which she will circulate prior to next meeting. She knows of four nurse practitioners in addition that have been following this

Rural NPs – additional funding

Minister Clark has requested four NPs in rural health to be showcased.

Some providers do not have the money to fund the NPs. This initiative was a way to help providers in rural communities. This works best if the NPs are from the communities and return there to practice.

Federation update

GPNZ which is the bulk of the membership is amalgamating into one membership rather than having multiple.

The plan is to carry on with the Federation and get Tier One groups collaborating. A joint paper on the first 1000 days of life going to Heather Simpson as part of their feedback to the Health and Disability Review. It was mostly written by Karen Guilliland and then give to the Federation to review so most of it was midwifery based. It needs to be a high level paper that includes things like where families fall through the cracks and how we can work through the first 1000 days.

The next paper the Federation want to write is on workforce.

Chief Nurse Report and discussion

Surgical Mesh listening circles have all finished and we now await the final report from the Diana Unwin Chair in Restorative Justice team. Prior to this being received there was a workshop held with all the responsible parties and a range of discussions were had. Education and training, informed consent and a register with all implantation devices being just some of the things discussed.

Safe Staffing Accord

Part A – contracting process going through for new grad NEtP funding. EN Support into Practice programme funding also being worked through.

If we want to increase the workforce we need to look at secondary school level to see what more we can do. For example some rural schools don't offer science subjects, they have to be done via correspondence.

Part B – Rhonda's research showed that CCDM won't work in the current health funding and policy environment so how do we go forward.

Part C – Re-entry to practice work with Nursing Council to do a campaign to get nurses back. Need to also work through processes and barriers.

The data shows there have been more IQNs registered with the NCNZ in the last year than NZ educated and registered nurses.

The DoNs have written a paper for the CEs about how things are working – hasn't been shared with the educators.

Action: Margareth B to discuss with Margaret D about having the paper circulated

NPTP RFP went live Friday 29 November. The funding is additional funding on top of what we currently have. Focus on mental health, primary health care, Māori and Pacific. Part of Nursing Council work next year will be how they access the competence of NPs.

2020 International Year of the Nurse – launched this morning. Council of Deans are also part of the Australian initiatives so they will feed back between the two.

Māori Nurses and Nursing Council Hui. Nursing Council is supportive of the equity in regards to governance around the table. They will be placing an equity lens over all of their work. They also had a meeting with Minister Clark and advised him of their support. Work will continue with the ropu and note that medical colleagues are getting ahead of us in the cultural competency and safety areas.

Draft revised TOR

Lorraine and Kerri participated via phone. The group wanted to revisit - how do we reflect our bi-cultural partnership. NNO Māori caucus has been working on reviewing TOR. It is important that we understand the unique way we work in New Zealand.

The new TOR suggests working in a two-house structure reflecting a sharing of decision-making power, supported by different worldviews and a working ethos based on the principles of tino rangatiratanga, partnership, active protection, equity and options. The model provides a practical way to support a treaty world view - Māori view and non Māori view.

This will mean that each organisation will provide a Tangata Tiriti and Tangata Whenua partner which will increase the group up to approx. 22 members.

Some changes to be made to the document:

- Under purpose change the order – bullet point three now becomes bullet point one and the rest stay in the same order
- Strengthen the roles of members to put more expectations on attending meetings and going back to their respective groups with information from the meetings
- In Appendix Two with organisations, the Ministry is part of the group as an organisation so it wouldn't be specifically OCNO
- In Appendix Two - NPNZ to be taken out.

Still to be worked out – what number a quorum will now be.

Chair to be reviewed annually. Ministry to provide secretariat and minute taking functions. Meetings to be held at the Ministry.

Action: Each NNO partner to put forward a chair by start of next year/first meeting.

Planning for Education Think Tank/Consensus Workshop

As there are various things going on in education the College undertook to prepare the paper as a discussion paper to stimulate discussions, questions and thoughts. Looking at holding a Consensus Workshop in new year in May with the goal to agreeing to some points of change to benefit nursing education going forward.

Something similar was held in about 2005 and didn't have the desired outcome as nothing happened from it.

Question also raised as to who in New Zealand has the overall responsibility to the future direction of nursing. Is it Office of the Chief Nursing Officer at the Ministry? Need to make sure we resource programmes that we agree to, how do we all get together as one voice? No strategic Māori nursing workforce plan.

In the consultation work - some good things and some things where the model is broken. Funding mechanisms for students in tertiary, burden of clinical degree etc. Barriers for older students that weren't previously there.

If we had a workshop with approx. six clear directives that we support - have some finite goals and it would then become wider work. Could be simple like scholarships, immediate funding and clinical placements

Lowest number of students enrolled since 2011 in bachelor of nursing. NEtP year is important with target support - for last two intakes the paper was voluntary - 90% have opted in and spread it out over the whole year and tied it in with face to face days. More uptake where the students could see stepping stone as they could see it go on.

Workshop ideas

Cap of 30 people, facilitated by ?

1 1/2 half days – 1st day to be the group with the 1/2 day to be TEC and Health Workforce Attendees could be NNO members, extended DoNs group, PHO nursing leader, Health and Disability sector representative, Aged care representative, NGO/Māori providers, extend mental health?

Action: Debra to look at meeting rooms at Ministry to host and also send a Doodle Poll with some possible dates

Resume conversation on CCDM

After discussions, it was decided to delay this meeting item as nothing further to talk with Rhonda about at this stage.

The group raised the possibility of a return to recognising and promoting a return to Magnet Principles as internationally these have the strongest evidence base for patient safety, nurse retention and some data on cost efficacy

Action: Feed back to Heather Simpson for the Health & Disability Review as she is wanting to know what is being used overseas that is working.

The College will write a brief paper for looking at the research /

Post script the paper is written and with the Chief Nurse for review

(– Suzette will offer some funding to the writing of the paper??)

“Leaders” Conference

Jenny was asked to be a keynote speaker but declined due to the cost for attendees. The group should stand strong that we don't participate. Memo to look into NZNO involvement.

Update Health Workforce (MoH) New Committee and advisory processes

Update from Lorraine partly provided by email due to zoom issues. She has attended two Health Workforce Advisory Board meetings.

The first meeting was mostly introductions of the new members, confirmation of the Terms of Reference and an outline of Health Workforce.

The second meeting was working on a work programme which the board are interested to hear from NNO how best to engage with each other on. Collectively interested in ensuring that they are engaging with NNO and other key stakeholders.

Action: Lorraine to discuss with Judy to attend NNO meeting

The next meeting TBC –Doodle Poll to be arranged.