



Nurse Education in the Tertiary Sector

## **Nurse Education in the Tertiary Sector (NETS)**

Submission in response to

New Zealand Nursing Council

*Consultation document - Review of current fees*

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We appreciate the opportunity to be involved in the consultation process regarding the proposed fees changes. Our comments are provided as below as “bullet points”.

- While we understand the issue of cross subsidisation, what we do not understand is how this has been applied in the absence of any clear information of the principles and premises on which some fee changes have been formulated.
- We agree with the increase in Annual Practising Certificate; however this increase is \$12.00. In comparison with other health professional groups, and other professions, such as teaching, the proposed APC fees for nurses are modest. While we acknowledge Councils sentiment of not wanting to use APC fees from individuals to cross subsidise for example, the costs to institutions for programme audits, these audits in the end are about 'protecting' the quality, credibility and 'marketability' of the programmes which produce the very people needing APCs. Therefore it is appropriate for there to be some cross-subsidisation.
- We also recognise the principles of cost recovery; however we would appreciate transparency for the rationale and justification in the differences between some of the proposed fee increases for monitoring and auditing education programmes. In particular, we cannot understand why there is such a marked difference between undergraduate and postgraduate programmes, and Competence Assessment Programmes.
- Our analysis of the proposed fees for education programmes is that they vary considerably on terms of percentage increases:
  - BN programmes - up 13% first year then a further 13% (total of 26%) second year
  - EN programmes - up 70% first year then a further 70% (total of 140%) second year
  - PG programmes - up 58% first year then a further 58% (total of 116%) second year
  - CAP programmes - up 207%
- We are concerned about the substantial increase in PG programmes audit in relation to undergraduate programmes. An undergraduate programme is three years and a full PG programme is two years. We do not understand the rationale for the difference nor why PG programmes are distinguished as first and second year. A PG certificate is 1 semester, a PG Diploma, 1 year and full Masters, either 18 months or 2 years.
- It would be helpful to have some clarification around fees for auditing/monitoring of Competence Assessment Programmes. For example could there be a reduction of fees or could fees be incorporated in a combined fee when conducted as part of an undergraduate audit. Presumably there are significant cost savings when an audit team are visiting anyway. It would also be useful to know if consideration could be given to a set amount for all accreditation and monitoring visits.
- We also note that there is to be no increase in auditing or monitoring Nurse Entry to Practice Programmes, which must have similar costs to other educational programmes.

- We acknowledge that there is a staged approach to fee increases, however the phasing in time of April/June 11 for some of the fees associated with education programmes is unrealistic given academic budgets are mostly on a January to December timeframe, rather than a July to June timeframe. This means that some education providers are likely to have unbudgeted additional costs for auditing of programmes in the 2011 year.
- It is not reasonable to introduce an increase in the examination fees at 1 July 2011, given that students have been advised of the existing cost for this and will now have to find additional funding. Registration of new nurses is a further area for some cross subsidisation. There are already a number of students who struggle to pay the nursing council fees as they do not have access to student loan or other funds for this purpose. In effect the costs can be recouped once they are registered.
- We are concerned at the proposed fees for application for registration as a Nurse Practitioner. This has doubled, and while we are aware that the cost of the panel assessment is significant, this increased fee may be a deterrent to nurses from advancing their practice.
- Finally, we wonder if there is an alternative to reduce the amount of auditing and monitoring by accrediting an educational institution for all its nursing programmes. We note that in the functions of the Nursing Council under Section 118(a) of the HPCA Act, there seems to be provision for this in the statement ... *“to prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes”*.

We trust you find our comments constructive, and thank you again for the opportunity to comment.