



Nurse Education in the Tertiary Sector

SUBMISSION, from
Nurse Education in the Tertiary Sector (NETS)

Consultation on
Draft Nurse Practitioner Training Programme

November 2010

Contact person Kathy Holloway, National Co-ordinator
kathryn.holloway@whitireia.ac.nz



Nurse Education in the Tertiary Sector (NETS) Response

Thank you for the opportunity to comment on this important document. We agree that the number of Nurse Practitioners in New Zealand is low, and that a funded developmental transition programme may assist with increasing numbers. In principle we support the concept of a funded developmental programme. However, we are concerned that the proposed training programme may, in fact, produce further barriers to prospective nurse practitioners.

1. Do you agree that the entry for NP training programme is a completed clinically focused Master of Nursing degree? Please comment on why or why not:

The existing requirements of the Nursing Council of New Zealand for NP registration include the completion of a clinically focused Master of Nursing degree. A registered nurse on a pathway towards NP registration needs to consolidate, refine and further develop knowledge and skills obtained in a clinical Masters degree. This is particularly important in the area of clinical assessment and diagnostic reasoning, and prescribing under the guidance of a skilled mentor. As this is a developmental programme with a focus on consolidating NP competencies, ideally, it should not include engagement in additional formal academic study within this period.

A possible exception to this could be a candidate who is completing the final advanced practicum paper, for which there is substantial funding from Health Workforce New Zealand. However, since the details of the purchase unit and associated costs for the proposed NP training programme are not yet determined, it is unclear whether this is an appropriate consideration.

**2. Do you think a two year full time programme is realistic and appropriate?
Please give your rationale:**

We are not convinced that a two year programme is either realistic or appropriate. We are concerned that there does not appear to be any rationale or evidence for the stated two years. In the accompanying letter it is stated that there is an existing model in General Practice vocational training. However, this vocational training for medical practitioners does not have a clinical Masters degree as a requirement for vocational registration.

The proposed NP training programme relies heavily on an article *Nurse practitioner education: a research based curriculum structure*, which reports a study by Gardner, Gardner and Proctor (2004). This was a trial of practice with four nurse practitioner candidates in Australia over a twelve month period in 2001/2002. The four candidates in this trial of practice had, or were completing postgraduate study. What is unknown is what this postgraduate study entailed. A comment in this article that “[t]here is a move towards recommending master’s level preparation for nurse practitioner and advanced practice preparation” (Gardner et al, 2004, p. 143), suggests that unlike in New Zealand, there was no clearly identified clinical Masters programmes at that time for nurse practitioner educational preparation.

The areas of study identified in the proposed training programme were identified by Gardner et al (2004) as being components for a nurse practitioner curriculum. The requirements of the Nursing Council of New Zealand for clinical master’s programmes include all these components, and

registered nurses intending to seek registration as a nurse practitioner are counselled to follow a particular educational pathway. We consider, then, that the areas of study in the proposed training programme unnecessarily repeat what is already a requirement of approved clinical Master's programmes in New Zealand.

That being the case, we cannot support the content for the training programme or the timeframe of two years for the proposed NP programme.

3. Please briefly describe how you would envisage this NP training programme being applied in your district and/or practice setting.

Potentially this could be through a district health board as an accredited provider in a similar way to NETP programmes.

4. Do you think there are other components not identified?

No.

5. Is there anything missing from the clinical placement standards?

These are comprehensive. In standard 3 the word "student" should not be used.

6. Please briefly describe how and why whom you see a programme such as this coordinated.

Does there need to be specific coordination? Any developmental programme would be coordinated between the intending NP and her/his clinical supervisor/mentor, and would depend on funding sources.

7. Do you have any other comments?

- On page 1 in the preamble, there is a statement "The registered nurse (RN) entering a Nurse Practitioner training programme must have demonstrated competence as a RN with evidence of meeting Level Four – Expert on the Professional Development Recognition Programme (PDRP)". Would this disadvantage those registered nurses who work in areas with no PDRP?
- On page 2 there is a diagram outlining four components of the nurse practitioner development pathway. Further details about this model and explanation of each component would be helpful.
- On page 3 there is a statement that "[t]raining programme provides for graded responsibilities over the training period". The following statement that "... the NP trainee requires direct supervision of extension of practice in clinical activities outside the registered nurse scope of practice" is concerning as it suggests that a registered nurse will be working outside their scope of practice.