

POLICY REMIT: RECEIVED FROM NZNO Gastroenterology Nurses College (NZgNC)

Proposed amendment to the NZNO Gastroenterology Nurses College Rules 2021.

Policy Remit – Title: Addition of “Networks” to the College Subgroups.

To be read in conjunction with the New Zealand Gastroenterology Nurses College (NZgNC) rules – Clause 15: COLLEGE SUB-GROUPS

Policy Remit – Recommendation:

Reformat the presentation of the rules applying to college subgroups, **and** add in Networks as a group under Clause 15 to:

- Clause 15 A Sub-Specialty groups
- Clause 15 B Networks

To include the introduction of College Networks as well as College Sub-Specialty groups and describe the function and requirements for each.

15. COLLEGE SUB-GROUPS

15 A: Sub-Specialty groups (2023)

- Establishment of a sub-group would consist of those working within the chosen sub-specialty with membership as per the NZgNC rules – Clause 3.
- The maximum number of committee members in a sub-specialty group is six of which priority will be given to ensure Māori and Pasifika representation.
- Each group should formally apply in writing to the NZgNC chair with supporting documentation relevant to that sub-specialty. Minimum requirement for application and supporting documents are:
 - Formal letter – to include rationale for specialty group, any potential funding streams (over and above the NZgNC) and outline how the group will work towards equitable outcomes for all.
 - Terms of Reference – will need to be written once there is agreement for the sub specialty group to form (template available from the NZgNC secretary). Terms of reference should reflect the importance of an equity approach to all work undertaken by the subspecialty and how Māori and Pacific representation might be achieved.
 - Minimum roles – the subspecialty group will include (but not limited to) an appointed chair, secretary and co-chair.
- Sub-specialty groups shall have rules which are consistent with the NZgNC, the constitution of NZNO and support equity to deliver improved health outcomes for all.
- The expectation of a sub-specialty group is that it will raise the profile of that subspecialty and in doing so will develop professional nursing documentation within the first three years of set up, such as Standards of Practice, Knowledge and Skills Frameworks, and Credentialing documents.
- Financial assistance will be provided by the NZgNC for one day's expenses to fly group of three nurses to meet in central location to update KSF's three yearly.
- One nominated member of the sub specialty group will be funded to attend the NZSG/NZgNC annual scientific meeting (funding implies: flights, three nights' accommodation and full registration). The remaining members can apply to NZgNC for funding consideration via normal pathways and requirements.

- The sub-specialty group will contribute to every NZgNC publication (such as the Tube and the Pānui).
- It is encouraged that each sub-specialty group avails of the opportunity to nominate a candidate to apply to the NZgNC when vacancies arise so that there is a clear line of communication. Each group should include how Māori and Pacific nurses will be included to participate in subspecialty work.
 - The sub-specialty group would provide a report of the groups' activities (including financial activity) twice yearly and produce a report yearly for the NZgNC AGM.
- The sub-specialty group holds expertise in their sub-specialty and therefore will be consulted and expected to contribute for relevant advice and input with the NZgNC committee.
- Members of the sub-specialty group are encouraged to attend the NZgNC AGM and participate appropriately in NZgNC business.
- Individual sub-specialty groups will be responsible for their own financial governance and must be transparent in their reporting of activity to the NZgNC. The amount given to each sub specialty group is reviewed yearly and may have a weighting scale applied in the future depending on sub specialty group member numbers.
- The sub-specialty group may also have the opportunity to apply to NZgNC for funding for special projects, education, conference etc.
- At sub-specialty group meetings for voting purposes quorum is 50% plus one.

15 B: Networks (2024)

- The aim of a Network is to connect those working in a common specialty area, share practice ideas, collaborate on projects in a specialty area of practice. A network may be a starting point for developing into a Sub-Specialty group in the future. A Network is a less formal working group than a Sub-Specialty group.
- Membership will consist of NZgNC members as per Clause 3, with an interest in nursing within the Network specialty field.
- There is no maximum/minimum number of members in a Network group and will include as a priority Māori and Pacific representation.
- At a minimum, the Network should assign a Chairperson and moderators (determined by the network, to be agreed upon by the NZgNC committee) and present this to the NZgNC Committee.
- Each new Network group should formally apply in writing to the NZgNC chair with the following:
 - Formal letter with rationale for developing the Network
 - Terms of Reference including how the Network plan to undertake the following minimum group standards:
 1. Maintain Patient, member and members employment/organisations confidentiality.
 2. Appropriate professional communication methods and behaviour when using forums and/or social media platforms.
 3. Understanding of appropriate approvals before sharing of policy/protocols in line with local hospital requirements and permissions.
 4. Understanding of NZgNC college rules.
 5. Issues are escalated and discussed with College Chair at earliest opportunity
- Networks will not have dedicated funding from the NZgNC to undertake business, however members are eligible to apply to the NZgNC Education Fund for consideration.
- The Network group is encouraged to contribute to the NZgNC publication (such as the Tube and the Pānui).

- The Network group will provide a report of the groups' activities in a twice-yearly report to the NZgNC committee.

Rationale:

In Gastroenterology, there are many specialty areas where it is beneficial for healthcare professionals to be able to share knowledge, experience, and practice innovations to improve care provision.

The committee want to encourage collaboration and networking at a range of levels of formality, with oversight of the committee. The development of Networks allows for members to come together in a less formal forum, and require less formalities in terms of governance structure requirements. The Network may in time chose to progress towards forming a Sub-Specialty group and create Knowledge and Skills Frameworks, influence policy, and receive funding to undertake business and provide educational opportunities for its membership.

It is proposed that the content of this remit will replace that of Clause 15 in the NZgNC Rules which will include the Remit presented and approved at 2024 AGM.