

Nursing Education Policy

Purpose

Development of impactful education policy for the nursing workforce is urgently needed. In this policy Tōpūtanga Tapuhi Kaitiaki O Aotearoa (NZNO) proposes long term and sustainable solutions that can influence government and ministry policy settings and funding decisions.

For the purposes of this policy *nursing education* is defined as including:

- Maturanga Māori and cultural development.
- Undergraduate education.
- Postgraduate education including graduate-entry (GEN) programs.
- Simulation, online and kanohi ki te kanohi (face to face) learning.
- Clinical education.
- Continuing professional development.
- Credentialing for Enrolled nurses (EN), Registered nurses (RN) and Nurse Practitioners (NP) scope expansion.
- Short courses.
- Clinical placements and supervision.
- Mentoring, precepting and coaching.
- Training at NZQA levels 1 – 4 for kaimahi and Health Care Assistants (HCAs).

Background

NZNO advocates for nurses' interests and provides professional development opportunities, influencing the educational landscape. There is an opportunity to strengthen our position on nursing education in Aotearoa New Zealand (NZ) and the influence on this sector including:

1. Government and subsequent legislative changes, including the disestablishment of Te Aka Whai Ora and Te Pūkenga.
2. Te Whatu Ora's Health Workforce Plan¹ prediction that to maintain current services as the needs of the growing population change, there will need to be 8000 more nurses than are currently practicing.
3. The health systems failure to actualise Te Tiriti o Waitangi, and disregard of the recommendations of Wai 2575 to address health inequities for Māori.
4. A lack of unified governance, uncoordinated data monitoring and insufficient support for the preparation of a domestic health workforce.²
5. The combination of regulatory, global, immigration, and cultural factors for

¹<https://www.tewhatauora.govt.nz/publications/health-workforce-plan-202324/>

² Brownie, S. and Broman, P. (2024 early, online) 'Growing our own: The abyss of data monitoring and support for New Zealand's domestic nursing workforce pipeline.' *Kaitiaki Nursing Research Journal*

Internationally Qualified Nurses (IQNs) that impact their successful integration into the New Zealand healthcare system³.

Te Tiriti O Waitangi

The influence of Te Tiriti o Waitangi on NZNO nursing education policy is profound and multifaceted, ensuring that nursing education in New Zealand not only produces competent nurses but also culturally competent practitioners who can deliver equitable and respectful care to Māori and all other communities.

NZNO's nursing education policy is deeply rooted in the principles of Te Tiriti o Waitangi, fostering a partnership that prioritizes equity, cultural competence, and the empowerment of Māori nurses. By integrating Māori health models and perspectives into curricula, all nurses are equipped to deliver culturally respectful and effective care. Collective commitment to increasing the Māori nursing workforce, providing robust support systems, and promoting continuous professional development reflects dedication to building a diverse and inclusive healthcare environment.

Through collaborative decision-making and strong community partnerships, NZNO strives to create a nursing education framework that not only meets the highest standards of clinical excellence but also honours and uplifts the unique cultural heritage and health needs of Māori, contributing to a healthier and more equitable New Zealand.

Key education policy concepts

1. All nursing care must be provided by appropriately educated nurses. NZNO expects a coherent and clear national policy to ensure Aotearoa New Zealand has a highly skilled nursing workforce.
2. Kaupapa Māori nursing provides a range of benefits that enhance the effectiveness of healthcare delivery for Māori, improve health outcomes, and support the development of a culturally competent and representative health workforce.
3. NZNO expects cultural safety is embedded in the education of nurses across all programs and that the education of the health workforce should be shaped by Aotearoa New Zealand's health needs.
4. Undergraduate education for nurses leading to a bachelor's level qualification and registration as a Registered Nurse (RN) should have a national unified curriculum to enable a high and consistent quality of graduates. Unification of the assessment requirements and documentation required will promote fair and consistent assessment for Tauria.
5. Nursing education should be delivered by timely, agile, and innovative means that provide equitable and optimal access for participants.
6. Program design, implementation and evaluation should ensure that structures exist for articulation, recognition of prior learning and credit transfer – a pathway/ara for a life-long career for Tauria.

³ <https://www.thepress.co.nz/nz-news/350218787/recruitment-agencies-under-fire-migrant-nurses-left-jobless>

7. Sufficient capacity in nursing programs should be available to meet workplace and community workforce needs; funded in alignment with appropriate workforce planning and include Kaupapa Māori programs.
8. Relevant institutions, services and representatives will collaborate to ensure culturally relevant education which incorporates Māori perspectives and bicultural teaching practices across nursing and midwifery education programs.
9. All Taurira must be supported to develop their understanding of Tikanga Māori and Te Ao Māori.
10. The theoretical, clinical and simulation components of nursing education reflect the needs of and alignment with contemporary practice.
11. NZNO recognises the individual pathways to becoming a Nurse Practitioner, Registered Nurse, Enrolled Nurse, and Health Care Assistant and their contribution to delivering care. A national policy that establishes and funds a pathway/ara for those seeking to progress qualifications and achieve more advanced scopes of practice is fundamental to developing and supporting a sustainable domestic workforce.

Health Workforce Education Funding

1. Funding of education and training for the health workforce must be equitable and sustainable to support a cost-effective workforce with the capabilities to deliver effective care.
2. The student allowance needs updating to enable financial support for Taurira to reduce the considerable financial strain.
3. Funding decisions should support pay equity for practitioners transitioning to education, academic and research roles.
4. Successful 'earn as you learn' workforce initiatives should be replicated in other localities and with other groups⁴.
5. The viability of 'paid placement' proposals will be investigated and costed⁵.

Nursing Education Workforce

The nursing academic workforce is a subset of the nursing education workforce and is essential for ensuring that nurses and students/Taurira are appropriately supported throughout their education. Clear pathways must be developed for nurses working in clinical roles to transition to nursing education roles in the tertiary education sector (polytechnics and universities) that maintain pay parity with clinical roles.

1. Strategies will be implemented to support Māori and Pacific nurse uptake of teaching positions within nursing education. This is essential to support the delivery of Māori and Pacific nursing programs and culturally appropriate cohorts within mainstream nursing diplomas, degrees and graduate entry programs⁶.
2. Nursing academics must be supported during their employment to complete adult teaching qualifications and postgraduate degrees.

⁴ <https://www.nursingpraxis.org/article/74476-from-kaimahi-to-enrolled-nurse-a-successful-workforce-initiative-to-increase-maori-nurses-in-primary-health-care>

⁵ <https://www.paidplacementsaotearoa.org/>

⁶ <https://onlinelibrary.wiley.com/doi/epdf/10.1111/jocn.17205>

3. Nursing academics teaching in post graduate courses require support to complete doctoral level qualifications, and sufficient non-contact time to meet research and publication expectations.
4. Research collaboration should occur across nursing schools and health services to maximize the expertise of this workforce.

Kawa Whakaruruhau

Nursing education acknowledges the additional emotional work that Māori nurses undertake when advocating for Māori patients. Nursing education and curriculum will employ relevant techniques to strengthen the workforce's capability to provide culturally safe care to Māori.

Kawa Whakaruruhau is central to providing clinical services that are culturally safe for Māori.

1. Increasing the number of Māori nurses working in health is a key factor to greater engagement with Māori. Strategies to increase and retain the number of Māori nurses are an important factor in achieving health gain for Māori.
2. The central driver of health gain for Māori is Rangatiratanga. Only when Māori communities can determine the shape and nature of services delivered to Māori will real health gains for Māori be actualised.
3. Kaupapa Māori services are culturally safe, and provide whānau centred care that reflects the needs, concerns, and aspirations of Māori communities.

Success and retention of Tauira

A range of support will be provided to meet the needs of Tauira. This support will be offered proactively.

1. Academic support which includes tutoring and remediation programs that provide tutoring and academic support services, additional instruction and practice opportunities.
2. Offering flexible learning options which meet the learning needs of Tauira, such as part-time study, online courses, and hybrid programs, to accommodate diverse needs and life circumstances.
3. Mentorship programmes must be offered where Tauira Māori are paired with experienced Māori nurses or academic mentors can provide guidance, support, and professional development.
4. Regular academic advising sessions to help Tauira stay on track with their coursework, understand program requirements, and plan their academic careers.
5. Provision of 'safe spaces' on campuses for Tauira Māori so they can be their authentic selves.
6. Financial support including scholarships, grants, earn-as-you learn, paid placements and other forms of financial assistance such as stipends will be made accessible to Tauira.
7. Education facilities are approachable, supportive, and invested in Tauira success and retention.

8. Peer support groups or study groups to create a community and provide opportunities for emotional support and help with academic and clinical placement challenges.
9. Counselling and mental health services to assist in the management of stress, anxiety, and other personal issues that may affect academic performance and overall well-being.
10. Workshops including time management, stress reduction, and self-care to help balance academic responsibilities with personal life demands.
11. Increase the number of quality placements to better include community and rural, kaupapa Māori and Pacific, aged residential care, and private settings and increase practice opportunities for Tairā.
12. Education providers and clinical placement providers collaborate to coordinate placements and align expectations.
13. Develop a database of all potential placement locations and allow for more efficient matching of Tairā to placements across the motu / country.
14. Reduce the administrative burden on education and health providers, increase fairness and free up clinical resources for clinical supervision.
15. A national approach to Dedicated Education Units for Te Whatu Ora Health New Zealand and education providers.

Increasing Māori and Pacific nurse numbers

1. A coordinated approach to achieving a greater number of Māori nurses begins with outreach programs to secondary schools with high numbers of Tairā Māori.
2. A coordinated approach to achieving a greater number of Pacific nurses begins with outreach programs to secondary schools with high numbers of Pacific students.
3. Tairā with interests in health work should be identified and then supported by programs that can provide pastoral care and financial support to undertake and complete nursing training.
4. *Whakarōpū* is a successful example of how to foster flourishing learning experiences for Māori and Pacific nurses. Professional development and cultural growth for Māori and Pacific nurse's needs, connection and dialogue.⁷ Ongoing investment in these programs needs to continue.
5. Commitment to unified nursing curricula, proposed as three discreet programs – Bachelor of Nursing, Bachelor of Nursing – Māori and Bachelor of Nursing – Pacific, seeks to address the Māori and Pacific nursing workforce shortfall⁸.
6. Commitment to Wānanga based nursing programmes.

⁷ <https://www.nursingpraxis.org/article/90845-whakaropu-an-exemplar-fostering-professional-development-and-cultural-growth-with-a-collective-grouping-of-maori-and-pacific-nurses>

⁸ At the time of writing Te Pūkenga announced the decision to deliver Puawānanga Tapuhi Māori BN – Māori in Te Tai Tokerau only.

International Qualified Nurses (IQNs)

1. The principles of the World Health Organisation Global Code of Practice on the international recruitment of health personnel (2010) must be adhered to by employers to ensure a well-trained and sustainable domestic workforce reducing the need for international recruitment.
2. NZNO supports the policy of not actively recruiting nurses from developing countries, which are facing their own critical shortages of nurses unless there is an explicit government-to-government agreement with Aotearoa New Zealand to support managed recruitment activities.
3. Comprehensive onboarding including mentorship and coaching should be provided to, all IQNs aligned with their learning needs. This should include specific input on institutionalised racism and Te Tiriti obligations with the nursing team and employer appropriately resourced to provide this level of induction.
4. IQNs should be provided with an ongoing professional development program to support the needs of the clinical area and career aspirations. This includes support to develop critical thinking skills, leadership skills and communication skills where appropriate aligned with the individuals' learning needs.

Maintaining competence for registration

Ongoing engagement in professional development is both a professional and a legislative requirement.⁹ To demonstrate continuing competence, all registered and enrolled nurses are required to complete a minimum of 60 hours of professional development over three years. Nurse Practitioners are required to complete a minimum of 40 hours professional development per year. Evidence of professional development is audited by the NCNZ. Adequate funding and professional development leave must be provided to enable nurses to meet professional development requirements.

1. Adequate paid professional development leave must be provided and protected in employment agreements to allow these requirements to be met.
2. Courses must be accessible for nurses under Nursing Council of New Zealand processes to demonstrate competence. These courses may include clinical experiences to facilitate peer assessment against NCNZ competencies, and graduate level courses on communication, pharmacology, clinical assessment.

Conclusion

In conclusion, NZNO needs to advocate for processes that support members in their practice environments. This includes initial nursing education through to maintenance of competency and career development. It is essential that Aotearoa New Zealand develops and maintains a sustainable healthcare workforce, underpinned by the principles of Te Tiriti o Waitangi and Kawa Whakaruruhau.

⁹ Registered and enrolled nurses and NPs (nurses) are regulated under the Health Practitioners Competence Assurance Act (2003)

Proposed solutions

1. NZNO supports a coherent clear and comprehensive national policy to ensure Aotearoa New Zealand has a well-trained and sustainable domestic nursing workforce as the foundation of the health sector.
2. NZNO calls for a national forum to develop and implement a funded plan that determines the sector's workforce needs for Aotearoa New Zealand.
3. Te Whatu Ora needs to urgently address the data gaps to inform responses to the high attrition rates in undergraduate programs for nursing.
4. The Government is responsible for delivering a sustainable nursing workforce. Furthermore, they need to ensure adequate financial support for all taura and cultural and pastoral support for Māori and Pacific taura seeking to work in nursing.
5. NZNO supports a unified curriculum and calls on Te Pūkenga, Universities, the Ministries of Health and Education and Te Whatu Ora to deliver it.
6. Nursing workforce planning must consider the impact of new and emerging technologies on nursing practice and the preparedness of the nursing workforce to use technology to benefit those for whom they care¹⁰.
7. NZNO requires a clear professional development plan and pathway for all nurses and that education and training to upskill should be reflected in nurses' remuneration.
8. Every new graduate nurse will have a new graduate program of at least one year to support their developing competence, embed professionalism and build a strong foundation for their emerging nursing career (e.g. Nursing Entry to Practice (NETP) or Nursing Entry to Specialty Practice (NESP)).
9. Collective agreements need to specify and create the capacity for all nurses to have an ability to mentor, coach and be a preceptor to students and new team members.
10. A nationwide comprehensive recruitment to the profession campaign including rebranding nursing as an attractive career option.
11. Beginning practice as a novice registered nurse (new graduate) commencing practice should do so in a dedicated new graduate program and have ready access to an experienced colleague with relevant clinical experience and / or qualifications.
12. Internationally qualified nurses and midwives and those new to a specialty or area of practice have similar support needs.

¹⁰ Honey M, Collins E, Britnell S. The University of Auckland data repository. Auckland, New Zealand; 2018. Guidelines: Informatics for Nurses Entering Practice URL: https://auckland.figshare.com/articles/Guidelines_Informatics_for_nurses_entering_practice/7273037 [accessed 2019-12-02]

13. Preceptors and mentors need appropriate preparation for induction roles and ongoing support to maintain their skills.

Glossary

Health Care Assistant:

Used in this document to refer to any *non-regulated* member of the healthcare team.

Taura:

Used in this NZNO document to refer to anyone who is a student, learner or ākonga.

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Mission statement

NZNO is committed to the representation of members and the promotion of nursing and midwifery. NZNO embraces Te Tiriti o Waitangi and works to improve the health status of all peoples of Aotearoa/ New Zealand through participation in health and social policy development.

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