



# Guide to ENSIPP

September  
2024 intake

**Health New Zealand**  
Te Whatu Ora

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### Appendix:

- 2024 Overview of the ENSIPP year
- ENSIPP Checklist for programme components/completion criteria.

## 1. Introduction

Welcome to the Enrolled Nurse Support into Practice Programme (ENSIPP). This Learning Framework will guide and inform you of the programme and completion requirements.

### Background

In 2010 the New Zealand the Enrolled Nurse (EN) scope of practice changed to enable EN's to make a broader contribution to health services and give greater support to registered nurses (RN's). Subsequently, the employment and orientation of ENs has been variable between regions and organisations within New Zealand.

Having a well-planned and supportive entry to practice programme improves safety for the new graduate, the employer and the communities we serve. Successful transition to practice through a supported entry to practice programme also improves recruitment and retention of the nurse; and has a positive impact on the wider nursing workforce.

### National ENSIPP Specification

The ENSIPP programme Specifications (2020) outline the key components and implementation of the programme.

The programme is supported by the Ministry of Health (MoH), Health New Zealand, Te Whatu Ora and MoH funded providers, Nursing Council of New Zealand (NCNZ), or others by agreement with Health New Zealand – Waitaha Canterbury and partnering organisations, and National and Organisational policies and strategic priorities.

ENSIPP integrates the principles of the Te Tiriti o Waitangi into practice to promote equity of outcomes for Maori. ENSIPP facilitates practice in a culturally safe manner with all client groups<sup>1</sup>.

The Competencies for Enrolled Nurses (2012) interfaced with the key ENSIPP components will enable nurses on the ENSIPP to achieve Competent EN level on the Regional Professional Development and Recognition Programme (PDRP), at the completion of the ENSIPP programme.

#### 1.1 Canterbury ENSIPP Programme Aim

The Canterbury Region ENSIPP programme provides education and learning opportunities. Nurses are employed into a clinical practice environment that is safe and supportive, enabling the ENSIPP EN to consolidate their skills and knowledge; and gain confidence in delivering quality care and integrating cultural awareness into their practice.

The importance of ongoing learning, collaboration, communication and reflection fostered in this programme, will encourage innovation, enthusiasm and a commitment to nursing as a profession.

#### 1.2 Programme Content

The programme consists of:

- a) Orientation to nursing practice in Waitaha Canterbury (formally Canterbury District Health Board)
- b) ENSIPP Clinical component
- c) ENSIPP Theory component
- d) Preceptor support - trained preceptors are provided in each clinical workplace
- e) Ara post graduate Level 5 paper

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<sup>1</sup> Service specification-Enrolled Nurse Supported into Practice Programme (ENSIPP) Feb 2020, p.3

## 2. ENSIPP Programme Requirements

The new graduate enrolled nurse will be required to:

- be working at least 0.8 **full time equivalent** (or no less than 0.6 FTE by prior approval) in an area of nursing
- participate in block **tutorials / study days**
- Submit 6 month Learning goals
- pass their Ara paper or short course (Partner Organisations)
- submit a **Competent Level Portfolio (PDRP)** by the end of the programme
- work closely with trained preceptors, who will provide support and education within the clinical setting and facilitate ENSIPP nurses in meeting the clinical requirements of the programme

## 3. ENSIPP Programme – Clinical Component

ENSIPP nurses will be assigned a preceptor team by their CNM/LM to be available for the 12 months of the ENSIPP programme. The team will consist of a lead preceptor and associate preceptor/s, who, along with the area ENSIPP coordinator and area specific educator, will support and guide the ENSIPP nurse's learning and development throughout the clinical experience. The ENSIPP nurse and at least one of their preceptors should be rostered together to enable consistent support, accurate assessment of practice and to ensure that regular feedback on progress occurs.

**Supernumerary time:** Upon commencement in a clinical workplace, a minimum of 10 shifts supernumerary time is provided (the exact length of time will be determined by the manager) for the purposes of orientation and familiarisation with routines and practise in that area.

ENSIPP nurses are released from workplaces to attend mandatory training, ENSIPP study days, and Ara paper study days/Short course study blocks. These will be within rostered days. If these dates fall on the ENSIPP nurse's days off, other days off will be rostered. It is the ENSIPP nurse's responsibility along with their manager to ensure they are correctly rostered off from their workplace to attend study days.

**Rosters:** ENSIPP nurses are primarily rostered to work across morning and afternoon shifts (and could be required to undertake night shift after 6 months of practice as an EN) alongside their preceptors. Any concerns regarding rosters are expected to be raised with the line manager in the first instance.

ENSIPP ENs may be required to work shifts in other areas to meet urgent consumer and service needs. Other nurses are to be moved before ENSIPP ENs, especially when the latter is newer to the workplace.

### Learning Agreement

Learning agreements are utilised between the ENSIPP EN and the assigned preceptor in each clinical placement to formalise roles within this relationship.

The purpose of a learning agreement is to ensure the preceptor and the ENSIPP EN are aware of the responsibilities and commitment (both personal and professional) associated with this teaching and learning relationship. The Learning agreement will be shared with the ENSIPP EN who will upload onto the healthLearn ENSIPP site.

The learning agreement is to be completed at the start of the ENSIPP ENs programme and shared with the ENSIPP Nurse Coordinator please.

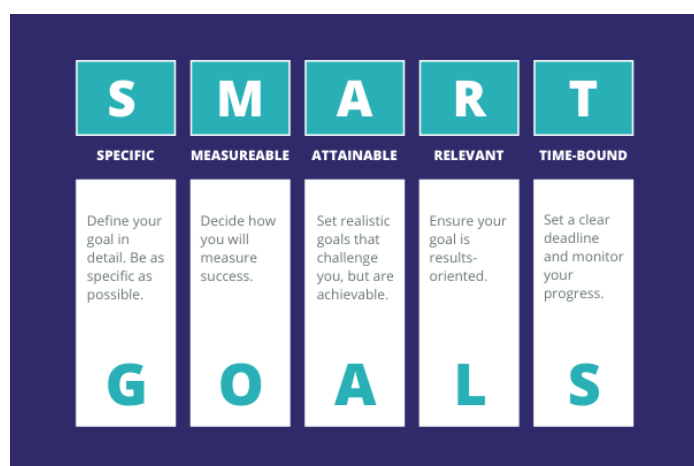
## Goal Setting

The goal setting process is an opportunity to review the progress of the ENSIPP EN and to discuss practice development and learning needs. Goals are to be developed and reviewed in collaboration with the ENSIPP ENs preceptor and CNM/ACNM. Other nursing staff may also provide feedback as appropriate through this process.

All ENSIPP ENs are expected to undertake:

1. Goal setting at 3 months.
2. Goal review and resetting at 6 months (to be submitted on healthLearn).
3. Goal review and resetting at 10-12 months (within Performance Review in PDRP).

Your 3 month and 6 month goals will follow the SMART format:



Align your goals with Nursing Council New Zealand EN Competencies which are available on both the Nursing Council of New Zealand and the Waitaha Canterbury PDRP websites.

Due dates for goals will be included within individual education calendars.

Completed goal forms are to be submitted via the healthLearn ENSIPP Page on the due date specified in the ENSIPP programme calendar. A copy will be saved into your electronic file.

## PDRP Portfolio

The ENSIPP EN will be required to submit a professional nursing portfolio for assessment near the end of their 12-month ENSIPP programme.

The ENSIPP EN must achieve 'Competent Level' on the Te Kāhui Kōkiri Mātanga PDRP to successfully meet the completion criteria for the ENSIPP programme. This is an E-portfolio.

The checklist for the EN Competent PDRP Guidelines includes:

- Copy of current Annual Practising Certificate
- Hours of practice

- Performance Appraisal (which includes a self-assessment and a preceptor/line-manager assessment, assessed against the NCNZ EN competencies)
- Hours of professional development
- Three reflections on professional development.

Further details and information on the PDRP portfolio process are provided during the ENSIPP study days. The application guidelines for PDRP competent level can be found on the PDRP website:

<http://www.cdhb.health.nz/PDRP>

### Performance Appraisal

A performance review against the NCNZ EN competencies is undertaken and submitted as part of an EN competent portfolio. This is a requirement for completion of the ENSIPP programme. The ENSIPP EN and preceptor must give clear examples of clinical practice for each of the NCNZ competencies for the EN scope of practice demonstrating that these are met, as this provides key evidence of nurses' professional competence.

### Submission Process

- Documentation is to be submitted via healthLearn (follow the prompts). This includes the Learning Agreement & 6-month Goal Review.
- Submission of assessment requirements for Ara papers are managed by Ara. However, confirmation of successful completion of the Ara paper will be forwarded to the Nurse Coordinator for ENSIPP by the Ara course facilitator.
- PDRP e-portfolios are submitted via HealthLearn on the Mahara Platform.
- If the ENSIPP EN is unable to submit by the due date for any of above, they must formally apply to the Nurse coordinator -ENSIPP for an extension.
- **Please note:** extensions are only granted when there are clear reasons or mitigating circumstances.

## 4. ENSIPP Programme – Theory Component

### NETP/ENSIPP Study Days

Full attendance at the study days is mandatory. Leave will not be granted at these times and any partial or full absence needs to be conveyed directly to the ENSIPP team immediately.

### Professional requirements

Specified training, including online learning packages, need to be completed as part of the orientation period on the ENSIPP programme and the area you are working for. The responsibility for attendance and completion of this training falls jointly with the ENSIPP EN and their CNM/LM.

All bookings for mandatory training are undertaken in consultation with the CNM/CM. To book these courses please log on to the Healthlearn website and use the login details that would have been provided by email around the time of your employment. Your current work email address must be used for your Healthlearn account. The website is: <https://www.healthlearn.ac.nz/>. Use the codes outlined in the checklist at the end of this document.

## 5. ENSIPP - Preceptorship

Preceptors strengthen the application and use of nursing knowledge in clinical situations. Using constructive feedback, and facilitating critical and reflective practice, preceptors support practice development, clinical reasoning and skill development in the ENSIPP nurse.

Preceptorship is a clinical educational strategy where both the preceptor and preceptee work together in the workplace. The process of preceptorship involves teaching, learning and orientation to the clinical area. The preceptorship experience is an educational relationship that provides role modelling, clinical support, clinical teaching and learning as well as socialisation into the workforce. It is expected that preceptors will help build on the application and use of knowledge in clinical situations.

In addition to the preceptor, support and guidance is provided by the CNM/LM, CNS, Nurse Coach (where available), Nurse Educators and Coordinator and other staff within the area.

A primary preceptor will be identified by the CNM/LM and supported to ensure accountability for negotiating and evaluating learning outcomes and coordination of formal feedback to the preceptee over the course of the programme.

The preceptor role is pivotal to the successful transition of the ENSIPP nurse into their new responsibilities, and therefore they must have regular and consistent time together throughout the clinical placements. This is especially important during the initial orientation which occurs during the first few weeks.

## 6.ENSIPP – Completion Criteria

Successful completion of the Programme involves:

1. All performance reviews completed (6 month goals & full performance appraisal – EN Competent PDRP )
2. Completion of the mandatory and online education and training.
4. A *Pass* grade in the Ara grad cert paper (if applicable).
5. Achievement of a *Competent* level portfolio in the Professional Development and Recognition Programme (PDRP), ensuring presentation for assessment is completed before the programme concludes.

## 7. Employment Matters and Support

### Performance concerns

Performance issues can arise for ENSIPP nurses for a variety of reasons e.g. workplace challenges or private matters that may impact on work and study. The line manager is the usual first port of call if issues do arise.

Competency or safety matters will be responded to as per CDHB and WCDHB policy. An ENSIPP nurse not meeting the clinical requirements and the theory components of ENSIPP will be subject to the organisation's performance management process.

## Resignation from ENSIPP

An ENSIPP nurse intending to resign from employment is encouraged to talk with their Charge Nurse Manager and their Nurse Educator in the first instance. If resignation proceeds the Charge Nurse Manager and the ENSIPP Nurse Coordinator will need to be notified by a formal letter of resignation (in accordance with the collective employment agreement terms).

The return of uniform, security ID cards and keys and completion of an exit form is undertaken with the line manager.

## Study Day expectations

All ENSIPP nurses are bound by the CDHB *Codes of Conduct* and Employment Conditions, which are integral to the programme. Participants must adhere to the following standards and expectations, including at study days. This includes:

### Attendance and Punctuality

- Know when the study days occur and arrive at least ten minutes early, ready to begin on time.
- Advise Nurse Educator/Nurse coordinator of unexpected absence or lateness.
- Sign the attendance register for each session. (so you get paid)

### Code of Conduct, Confidentiality and Privacy

- Adhere to Health New Zealand Waitaha Canterbury Code of Conduct
- Maintain consumer and colleague confidentiality in study day discussions.
- Ensure a respectful and safe environment for information sharing is maintained.

### Dress Code

- Tidy/casual
- Appropriate footwear on clinical component days

### Learning Environment

- Self-responsibility to liaise with CM/CNM to ensure study day release is rostered correctly.
- Respect the views, beliefs and values of others to maintain a culturally safe environment.
- If feedback is sought, please ensure this is provided in a constructive manner.

### Personal Appointments, Childcare, and Leave

- Schedule personal appointments/commitments (including childcare) outside study day hours. Study days are to be given the same priority as rostered and rotating shifts. **Leave will not be approved for days that fall on ENSIPP study days.**

### Guest Speakers

- ENSIPP nurses are expected to respect guest speakers' expertise and knowledge and contribute to interactive discussions. Study day feedback (via discussion or HealthLearn evaluation) is important for providing feedback to speakers and ensures continuous quality improvement.



## Overview of ENSIPP education and training

Week	Clinical & Theoretical Components	
<b>Week 1 -3</b>	<ul style="list-style-type: none"> <li>• <b>Supernumerary Time and clinical area Orientation (minimum of 10 shifts exclusive of the study days).</b></li> <li>• Introduction to the clinical practice setting</li> <li>• Completed clinical department orientation</li> <li>• Commence Healthlearn core competencies training</li> <li>• Submit Learning Agreement to Preceptor and Line Manager (provide copy on Healthlearn -ENSIPP)</li> </ul>	<p><b>ENSIPP study days</b> to be attended over the 12-month ENSIPP Programme.</p> <ul style="list-style-type: none"> <li>• Two - Five days Orientation</li> <li>• 2- 3 study days completing the Ara Level 5 Grad cert Paper</li> <li>• 5 x ENSIPP study days.</li> </ul> <p>Individualised education and training plans with specific dates to be generated.</p>
<b>Weeks 4 - 7</b>	<ul style="list-style-type: none"> <li>• <b>Clinical Load Sharing Time (at the discretion of the CNM)</b> - The ENSIPP EN works alongside the preceptor.</li> <li>• Complete Healthlearn Fluid and medication Foundation 1,2 and 3 courses.</li> <li>• Reflection meetings may take place.</li> </ul>	
<b>Week 8</b>	<ul style="list-style-type: none"> <li>• <b>Rostered shifts with access to preceptor</b></li> <li>• Independent management of light clinical load appropriate to EN scope of practice</li> </ul>	
<b>Week 12</b>	<ul style="list-style-type: none"> <li>• Set 3 month goals to be completed and reviewed at 6 months.</li> <li>• Goals are set in discussion with Preceptor, Nurse Educator, and Line Manager/ACNM.</li> </ul>	
<b>Week 24</b>	<ul style="list-style-type: none"> <li>• Review goals set at 3/12.</li> <li>• Set goals to be completed and reviewed at 10-12 months.</li> <li>• Goals are set in discussion with Preceptor, Nurse Educator, and Line Manager/ACNM. Submit copy of goals to Healthlearn.</li> </ul>	
<b>Week 40</b>	<ul style="list-style-type: none"> <li>• Completed full performance appraisal with Line Manager against each of the Nursing Council Competencies for ENs</li> <li>• Completed the requirements for the EN Competent Level PDRP and submit PDRP Portfolio</li> </ul>	
<b>End of the 12 months</b>	<ul style="list-style-type: none"> <li>• Graduation from the programme</li> </ul>	

**NB: The above is a GUIDE ONLY. Calendars for each ENSIPP EN will be developed and guided by the ENSIPP Nurse Coordinator, the respective Nurse Educator, and clinical areas individual needs.**

## ENSIPP Checklist for programme components:

<b>Completion criteria- ENSIPP</b>		
Clinical orientation to workplace	Learning agreement – Submit to HealthLearn	
6 Month goals	Submit to HealthLearn	
Ara grad cert paper	TBC 100 PD hours.	
Minimum of 10 ENSIPP study days	As per your individual calendar 40 PD hours	
EN competent PDRP e-portfolio.	Performance appraisal	
<b>Face to face training- Booked via HealthLearn</b>		
CANP108	Critical thinking NETP/ENSIPP study day	
CANP106	Wellness in long term conditions NETP/ENSIPP study day	
CANP105	Developing Nursing Leadership study day and Celebration Ceremony.	
<b>Online training - HealthLearn</b>		
RGOR000 & CAEN001	Health system Orientation and new staff information	
CANP101	Enrolled Nurse Support into Practice Programme - ENSIPP	
<b>RGN003 Medication and fluid foundation 3 - 9 courses</b>		
<b>RGCH008 &amp; RGQT006 Violence Intervention Programme Orientation &amp; Communication and De-escalation</b>		
<b>RGPH101 Smoking Cessation- ABCs</b>		
<b>CAIP001 Infection Prevention and control for clinical staff</b>		
<b>RGHS104 Falls Prevention</b>		
<b>RGHS007 Safe Patient Handling</b>		
<b>RGOR014 Safe Moving and Handling</b>		
<b>RGHS008 Restraint Minimisation and safe practice</b>		
<b>RGCL003 &amp; RGMD007 Pressure Injury prevention</b>		
<b>RGIC001 5 moments of hand hygiene</b>		
<b>CAMS5405 New Zealand Early warning score</b>		
<b>RGMD005 ISBAR – Communication Framework</b>		
<b>RGIT003 E-Portfolio</b>		
<b>RGOR004 Legal documentation</b>		
<b>RGMD006 Oxygen therapy administration</b>		
<b>Please be aware these HealthLearn courses equate to 50+ hours of Professional Development</b>		

Please check with your area of work NE/CNM. There may be area specific orientation packages and online courses.

### Other courses on HealthLearn worth completing:

CAMS023 Inpatient Close observations	
CAMD011 Patientrack e-Observations Web application	
CAMD007 Medchart training	
RGQT007 Direction and Delegation	
RGCA001 Understanding Bias in Healthcare RGMD001 Fundamental series : Diabetes	

RGMD009 <b>Fundamental series : Delirium</b>	
RGMD003 <b>Fundamental series : Cardiac</b>	
RGMD002 <b>Fundamental series : Stroke</b>	
RGMD012 <b>Restorative care</b>	
RGIC004 <b>Understanding Multi Drug Resistant Organisms (MDRO)</b>	
RGPH101 <b>Safety 1<sup>st</sup> – Patient and staff incident Reporting system</b>	
RGMS010 <b>Wound care fundamentals.</b>	
RGMS160 <b>Urinary catheterisation and catheter care</b>	
CAAD007 <b>SIPICS Inpatient ward nurse</b>	
CAMD015 <b>TrendCare training</b>	