

Competent Enrolled Nurse Guidelines

Applicant Name:		Practice Area: (Please write out in full)
		Organisation:
Contact Email:		
Mobile number:		
Annual Practising Certificate Expiry date:	Number:	Employee Number:
Ethnicity select which applies	s to you	
☐ Chinese	☐ Māori	☐ Samoan
☐ Cook Islands Māori	\square New Zealand European	☐ Tongan
□ Indian	☐ Niuean	☐ Other (please state)
Please tick which applies	☐ New applicant	Resubmission
Declaration and Consent		
I declare the attached p	ortfolio contains my own work.	
I declare at the time of s	submission of this portfolio, I am	n not the subject of any performance management
process or NCNZ compe	tence review.	
 Confidentiality will be m 	naintained throughout the Portfo	olio to ensure patients, family/whanau,
community, and colleag	ues are not identifiable.	
 I give consent for the as 	sessor(s) to take my portfolio of	f site for the purposes of assessment and
recognise that my portfo	olio may be selected for interna	l/external moderation.
 I understand the assess 	or(s) may need to contact me or	my peers/manager for additional evidence if not
adequately supplied.		
 I understand a timefram 	ne is required for assessment de	pendent on organisation.
I declare that the above state three years practice.	ements are truthful, and this po	ortfolio is an accurate description of my previous
Signature:		Date:
Signed by Line Manager two	weeks prior to submission:	
I support		to apply for EN Competent PDRP.
Line Manager Name:		
Email:		Phone:
Signature:		Date:

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Levels of Practice Definitions: The Competent Enrolled Nurse (EN)

- Under the direction of the RN, contributes to assessment, planning, delivery and evaluation of nursing care.
- Develops partnerships with clients that implement Te Tiriti o Waitangi in a manner which the clients determine is culturally safe.
- Applies knowledge and skills to practice.
- Has developed experiential knowledge and incorporates evidenced-based nursing.
- Is confident is familiar situations.
- Is able to manage and prioritise assigned client care/workload appropriately.
- Demonstrates increasing efficiency and effectiveness in practice.
- Responds appropriately in emergency situations.

Submission Information:

- Please read carefully and ensure that all sections are completed accurately and appropriately.
- Documentation is to be a maximum of three years old except where annual requirements are specifically stated.
- All documentation should be appropriately named, signed, and dated.
- You need to provide one clinical example of practice in your performance appraisal (peer/senior nurse review) against the Nursing Council New Zealand Competencies.
- All evidence submitted should be your own work or if in collaboration, permission and sign off sought from the third party.
- Your portfolio should show examples of 'best practice' at all times.
- Those involved in your portfolio submission may be approached to assist during the assessment process by providing additional evidence or confirmation.

N.B. Should you be practicing in an Expanded Practice Role or in Management, Education, Research or Policy, please access the appropriate supplementary competencies workbook.

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Evi	Evidential Requirements Checklist – Competent EN		
	Applicant Name:	Applicant to complete	Assessor to complete Docs sighted
1	Annual Practising Certificate Printout from NCNZ Website, or copy of current APC (front and back)		
2	Hours of Practice Evidence of 450 hours of practice to be verified by Charge Nurse/Nurse Manager/HR Dept — validated in Performance appraisal or Record of Practice Hours report/form verified (signed and dated) from your organisation.		
3	Performance Appraisal and/or peer appraisal/competence assessment Evidence must be against NCNZ Competencies, on organisational documentation, and completed within the last 12 months. All competencies must have an example of how the nurse meets the competency in day-to-day practice at the level applied. Peer Appraiser is to be a Registered Nurse.		
	Self-Assessment Evidence must be against NCNZ Competencies, on organisational documentation, and completed within the last 12 months and from your current practice area. All competencies must have an example of how the nurse meets the competency in day-to-day practice at the level applied Competencies must be verified by a Registered Nurse who is a designated Senior Nurse; or a peer RN with approval from Line Manager of current workplace.		
4	Professional Development Hours of Professional Development Evidence must be within the last 3 years and show at least 60 hours. This may include organisational mandatory/essential requirements (as per employment agreement). Professional development hours record/evidence of attendance to be verified.		
	Three reflections on Professional Development This is to be related to your practice area. Include either: A short reflection for each course or activity OR three key professional development activities (describing the difference the learning has made to you nursing practice)		
5	Verification that application of Competent Level discussed with Manager or an Equivalent Designated Senior Nurse		
6	I agree for my portfolio and associated documentation to be removed from PDRP office for assessment All steps will be taken to maintain the safety and privacy of the portfolio by the designated assessor. You may request the return of your portfolio at any time.	□ Yes □ No	
7	Returning of your Portfolio Your portfolio will be returned via internal mail for Health NZ/Te Whatu Ora Nurses, otherwise via your regional organisations PDRP Coordinator and mail systems		

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8	Internal and External Moderation of Portfolios The PDRP requires portfolios to be moderated to maintain consistency and objectivity of the process. The portfolio will be reviewed by one of the PDRP Assessors who will moderate the original assessor(s) of your portfolio. The moderation process does not affect the outcome of your assessment.		
	Your portfolio may be selected for this process.	☐ Yes	
	Do you understand and agree to the Moderation Process?	□ No	
9	Practice Discussion if requested by applicant	☐ Yes	
	Applicant may request a practice discussion	□ No	
Ple	ase Note: Incomplete Portfolios may be returned to applicant for amendm Kōkiri Mātanga regional policy	ent as per the ⁻	Ге Kāhui

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Assessment Process

The assessment will be carried out as soon as possible and should take no longer than 10 weeks.

It is not unusual for your assessor(s) to contact you for clarification or for extra evidence before a decision is made. This contact is generally by phone, but you may request a meeting.

When your portfolio assessment has been completed, you will be contacted with the decision, which will be one of the following:

Decisions

Endorsement of Progression

This means criteria for the applied level have been successfully met.

Reserved Decision

This means that the assessor is confident that you are practising at the level you have applied for, but further documented evidence is needed. You are given a timeframe of **6 weeks** to provide this.

Non-Progression

This means that your assessor is confident that the criteria for that level have not yet been met. Guidelines may have not been adhered to or there are clear gaps in evidence that prevent a fair decision. Your assessor will clearly tell you which areas require further development and make some suggestions. If you wish to appeal the decision or the process, this procedure is outlined on the website or in the PDRP Policy.

NCNZ Reporting

Details of your PDRP application are loaded onto our database to assist with our reports to Nursing Council to remove you from their audit process.

Appeals

All applicants will have feedback from their assessment, if you disagree with the decision, you should write a letter of appeal to the PDRP Coordinator. The appeal should be lodged within 7 working days of the decision using an Appeal Notification Form (A6). On receipt of this letter, the PDRP Coordinator will request two new assessors to re-assess the portfolio.

The new assessors will not be told of the original outcome. If the decision by the new assessors is that you have been unsuccessful, you may decide to continue with the appeal. An Appeals Panel will be formed and those present will interview you and the assessors. On completion of this process, a written report outlining recommendations will be sent to you with copies to the PDRP Assessors, PDRP Advisory Committee and the Nurse Coordinator - PDRP.

Reference:

Nurse Executives of New Zealand Inc. (10 April 2017). National Framework and Evidential Requirements. New Zealand Nursing Professional Development & Recognition Programmes for Registered and Enrolled Nurses.

Disclaimer:

- The PDRP EN Guideline document is current at the time of printing and is subject to regular review. It is bound by the constraints of Nursing Council of New Zealand (NCNZ) and NZNO with regard to legislative or employment changes.
- All efforts will be made to publicise significant changes, however any concerns or issues may be raised with the PDRP Advisory Committee.
- Ethnicity Data is only collected for the purposes of Nursing Workforce Development and PDRP. Data will
 not be shared for any other purpose

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Professional Development Record

Contact Details:

You are required to demonstrate at least 60 hours professional development in the previous three (3) years. Please complete this form if you **do not** have an organisational education transcript or if the education is not recorded by your organisation.

Date	Title of Education Activity	Hours	Educator/Manager verification
	Total Hours (over last	3 years)	
	ion of attendance by Nurse Educator or Manager riginal Certificates sighted)		
Signed:		Date:	
Print Name:		Designation:	

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Competencies and Indicators (tick ONE indicator only)

Domain 1: Professional Responsibility

This domain contains competencies that relate to professional, legal, and ethical responsibilities and cultural safety. These include being able to demonstrate knowledge and judgement and being accountable for own actions and decisions, while promoting an environment that maximises health consumer safety, independence, quality of life and health.

Competency 1.1 - Accepts responsibility for ensuring that his/her nursing practice and conduct meet the standards of the professional, ethical and relevant legislated requirements.
\square Demonstrates knowledge of relevant legislation pertaining to the delivery of health consumer care.
\Box Ensures practice is within the scope of practice and adheres to legislated requirements and relevant ethical codes,
policies and procedural guidelines.
\square Accepts responsibility for actions and decision making within the enrolled nurse scope of practice.
☐ Identifies breaches of law that occur in practice and reports them to the registered nurse/manager.
Competency 1.2 - Demonstrates the ability to apply the principles of the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice
☐ Understands the Treaty of Waitangi/Te Tiriti o Waitangi and its relevance to the health of Māori in Aotearoa/New Zealand
☐ Demonstrates knowledge of differing health and socio-economic status of Māori and non-Māori
☐ Applies the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice
Competency 1.3 - Demonstrates understanding of the enrolled nurse scope of practice and the registered nurse responsibility and accountability for direction and delegation of nursing care
☐ Recognises and acts in accordance with the enrolled nurse scope of practice, organisational policy and own level of
competence.
☐ Demonstrates understanding of the registered nurse's role to direct, delegate, monitor and evaluate nursing care.
☐ Consults with the registered nurse to ensure that delegated tasks and responsibilities are commensurate with own
level of competence.
 Seeks guidance from a registered nurse when encounters situations beyond own knowledge, competence or scope of practice.
Competency 1.4 - Promotes an environment that enables health consumer safety, independence, quality of life, and health.
\Box Identifies and reports situations that may impact on the safety of health consumers or staff.
Adjusts the physical and social environment in order to maximize health consumer wellbeing
☐ Adjusts the physical and social environment in order to maximise health consumer wellbeing.
☐ Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure
\Box Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure
☐ Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure area prevention and the administration of medicines.
 Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure area prevention and the administration of medicines. Initiates appropriate interventions in emergency situations.
 □ Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure area prevention and the administration of medicines. □ Initiates appropriate interventions in emergency situations. □ Supports the right of health consumers to maintain independent lifestyles with dignity in their own environment.
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 □ Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure area prevention and the administration of medicines. □ Initiates appropriate interventions in emergency situations. □ Supports the right of health consumers to maintain independent lifestyles with dignity in their own environment. Competency 1.5 - Participates in ongoing professional and educational development. □ Undertakes regular review of own practice by engaging in reflection and identifying ongoing learning needs.
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 □ Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure area prevention and the administration of medicines. □ Initiates appropriate interventions in emergency situations. □ Supports the right of health consumers to maintain independent lifestyles with dignity in their own environment. Competency 1.5 - Participates in ongoing professional and educational development. □ Undertakes regular review of own practice by engaging in reflection and identifying ongoing learning needs. □ Takes responsibility for own professional development and maintenance of competence. □ Takes opportunities to learn with others contributing to health care. Competency 1.6 - Practices nursing in a manner that the health consumer determines as being culturally safe. □ Demonstrates ability to provide culturally safe care to meet health consumers' individual needs, beliefs, and values.
 □ Adheres to standards and procedures related to restraint minimisation, infection control, safe handling, pressure area prevention and the administration of medicines. □ Initiates appropriate interventions in emergency situations. □ Supports the right of health consumers to maintain independent lifestyles with dignity in their own environment. Competency 1.5 - Participates in ongoing professional and educational development. □ Undertakes regular review of own practice by engaging in reflection and identifying ongoing learning needs. □ Takes responsibility for own professional development and maintenance of competence. □ Takes opportunities to learn with others contributing to health care. Competency 1.6 - Practices nursing in a manner that the health consumer determines as being culturally safe. □ Demonstrates ability to provide culturally safe care to meet health consumers' individual needs, beliefs, and values. □ Reflects on own practice and values that impact on cultural safety.

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Domain 2: Provision of Nursing Care

This domain contains competencies related to assessment and provision of nursing care for health consumers when working under the direction of a registered nurse.

Competency 2.1 - Provides planned nursing care to achieve identified outcomes.
☐ Contributes to the development of care plans in collaboration with the registered nurse and health consumers and
clarifies responsibilities for planned care with the registered nurse.
☐ Promotes independence while assisting health consumers to undertake activities of daily living, such as nutrition,
hydration, elimination, mobility, social functioning, and personal hygiene.
☐ Uses nursing knowledge and problem-solving skills when carrying out professional responsibilities.
☐ Prioritises and manages time.
☐ Carries out procedures competently and safely.
 Administers nursing interventions and medications within legislation, codes, scope of practice and according to prescription, established organisational policy and procedures.
Competency 2.2 - Contributes to nursing assessments by collecting and reporting information to the registered nurse. New Competency by Nursing Council - NOT ASSESSED FOR ENS IN RESTRICTED SCOPE
☐ Completes assessment tools as delegated by the registered nurse.
☐ Uses a range of data gathering techniques including observation, interview, physical examination, and measurement.
\square Assists with routine examinations and routine diagnostic investigations.
☐ Applies understanding of the different developmental stages of the life span.
Competency 2.3 - Recognises and reports changes in health and functional status to the registered nurse or directing health professional. New Competency by Nursing Council - NOT ASSESSED FOR ENS IN RESTRICTED SCOPE
☐ Observes for changes in health consumers' health and functional status in the course of nursing practice.
\square Communicates observations to the registered nurse and appropriate members of the health team.
☐ Reports changes in health status in a timely manner and is aware of procedures for responding to concerns which are escalating in the health care setting.
Competency 2.4 - Contributes to the evaluation of health consumer care.
☐ Monitors and documents progress towards expected outcomes.
☐ Contributes to the review of care plans in collaboration with the registered nurse.
Competency 2.5 - Ensures documentation is accurate and maintains confidentiality of information.
☐ Observes, reports, records and documents health status.
☐ Records information in a systematic way that is in line with organisational policy and procedures.
☐ Ensures written communication is comprehensive, logical, legible, clear and concise, using only accepted
abbreviations.
☐ Maintains confidentiality of documentation/records and interactions with others.
Competency 2.6 - Contributes to the health education of health consumers to maintain and promote health New Competency by Nursing Council - NOT ASSESSED FOR ENS IN RESTRICTED SCOPE
☐ Provides accurate and culturally appropriate education to health consumers or groups to maintain or promote
health in consultation with the registered nurse.
\square Determines consumer understanding by seeking feedback on information given.
☐ Demonstrates an understanding of how health and disease are affected by multiple and interconnected factors

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This domain contains competencies related to interpersonal communication with health consumers, their families/whanau and other nursing and healthcare staff.
Competency 3.1 - Establishes, maintains and concludes therapeutic interpersonal relationships.
Establishes rapport and trust with the health consumer and or family/whanau.
☐ Demonstrates respect, empathy and interest in the health consumer.
☐ Is able to establish relationships and communicate effectively and culturally appropriately with health consumers.
☐ Appropriately terminates therapeutic relationships.
☐ Understands therapeutic relationships and professional boundaries.
Competency 3.2 - Communicates effectively as part of the health care team New Competency by Nursing Council - NOT ASSESSED FOR ENS IN RESTRICTED SCOPE
☐ Communicates orally and in writing appropriately and effectively.
☐ Demonstrates understanding of the need for different communication styles and approaches in different situations.
☐ Engages with colleagues to give and receive constructive feedback that enhances service delivery to health
consumers.
Contributes to a positive working environment.
Competency 3.3 - Uses a partnership approach to enhance health outcomes for health consumers. New Competency by Nursing Council - NOT ASSESSED FOR ENS IN RESTRICTED SCOPE
☐ Understands and applies the principles of a recovery centred approach to nursing care within different health care
settings.
Understands the impact of stigma and discrimination on health outcomes for health consumers and is able to
implement nursing interventions that enhance fairness, equality and self-determination.
Understande and was the resources in the health consumer's security to improve health subscribe
☐ Understands and uses the resources in the health consumer's community to improve health outcomes.
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Competency 4.3 - Demonstrates accountability and responsibility within the health care team when assisting or working under the direction of a registered health professional who is not a nurse. New Competency by Nursing Council - NOT ASSESSED FOR ENS IN RESTRICTED SCOPE
Understands the enrolled nurse role and boundaries in relation to the scopes of practice of other registered health professionals.
☐ Practises within legislative requirements, organisation policy and refers issues outside scope to a registered nurse supervisor.
Works under the direction of an identified health professional and reports observations, changes in health status and escalates concerns to that health professional.

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