



Enrolled Nurse Support into Practice Programme

Handbook

Te Whatu Ora Capital Coast and Hutt Valley

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Important Contacts

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Introduction

Congratulations on your new position as an enrolled nurse in the Enrolled Nurse Support into Practice Programme (ENSIPP). On behalf of all of the staff at Te Whatu Ora Capital, Coast and Hutt Valley we would like to extend a warm welcome to you as you begin your graduate year within the ENSIP programme.



Purpose Statement

The goal of the Enrolled Nurse Support into Practice Programme is that enrolled nursing graduates commence their careers in Aotearoa, New Zealand within a well-supported, safe, environment assisting them to become skilled and confident in their clinical practice.

The ENSIP Programme adheres to the principle of working in partnership with nurses to provide quality education whilst promoting the enhancement of professionalism through an on-going supportive learning process. By completing the expected requirements and submitting a professional portfolio, the graduate EN will be able to demonstrate competent practice.

ENSIPP Outcomes

On completion of the Enrolled Nurse Support into Practise Programme the EN will consistently:

1. Demonstrate ability to work in partnership with clients, always implementing Te Tiriti o Waitangi in a manner which the client determines is culturally safe
2. Demonstrate responsibility for ensuring practice and conduct meets ethical and legislated requirements with minimal supportive cues
3. Demonstrate professional conduct/behaviour appropriate to context with minimal supportive cues
4. Demonstrate synthesis of knowledge, skills and clinical judgement to provide safe, prioritised care with minimal supportive cues
5. Demonstrate the ability to utilise evidence-based knowledge/practice to make informed decisions in the delivery of safe care in consultation with an RN and with minimal supportive cues

6. Demonstrate professional communication using multiple techniques with health consumers, colleagues and the healthcare team in a variety of contexts with minimal supportive cues
7. Promote and explore the nursing perspective within healthcare team activities in consultation with the RN and with minimal supportive cues

The learning outcomes will be met through individually set clinically based activities, self-directed learning activities, attendance and participation at workshops/study days and the submission of a professional EN portfolio (Competent level) within 12 months in practice.

Important Information

Annual Practicing Certificate

When practicing as an enrolled nurse you must hold a practicing certificate (APC) from Nursing Council of New Zealand. Your initial APC must be sighted by your Charge Nurse/Manager or Employer. It is likely that your first APC will expire before one year as it is issued according to your birth date. It is your responsibility to know when your APC expires and renew it online before the expiry date. Once you have renewed your APC you are covered to practice and can view your details on the 'Register of Practicing Nurses'. APCs are issued in a one year cycle according to your birthday date. Fees are payable at time of application, but discuss with your manager if you can be reimbursed for this cost.

Salaries

As per the DHBs/ NZNO Nursing and Midwifery Multi-Employer Collective Agreement (MECA) or your employer. Discuss with your Charge Nurse/Manager/Employer about the process for payment.

Annual Leave

Discuss any annual leave requests well in advance with your Charge Nurse/Manager/Employer to allow for safe scheduling of staff. Refer to your signed employment contract, for details of leave entitlement and follow appropriate

processes. If you are not sure how to apply for leave in your clinical area talk to your Charge Nurse/Manager/Employer.

We understand that the transition to practice can be challenging therefore it is strongly recommended that you plan to take annual leave at 6 months and 9 months into your new graduate year.

Sick Leave

If you will not be coming to work due to illness ensure you phone your Charge Nurse/Manager/Employer to inform them with as much notice as possible. If this sick day falls on an ENSIPP study day you must also inform your ENSIPP coordinator. You may be allocated some self-directed learning to make up the content.

Absences

If for some reason you are not going to be at work when rostered or there is some other reason that you are not able to undertake your duties you must contact your Charge Nurse/Manager/Employer. If this falls on an ENSIPP study day you must also inform your ENSIPP coordinator.

As ENSIPP study days are compulsory, any missed study days must be made up in negotiation with the ENSIPP coordinator. Missed clinical hours must be negotiated with your Charge Nurse/Manager/Employer.

Performance

All graduates should receive regular feedback on their practice development. Verbal feedback should be given to all graduates in a timely way, particularly if practice development is required. If despite verbal feedback, the graduate needs more support to achieve the required practice improvements, a Strategies for Success will be implemented.

This process will involve meeting with the EN (and support person if desired), Charge Nurse Manager (CNM), Nurse Educator (NE) of the area, and the ENSIPP graduate programme coordinator. It will include identification of goals and setting timeframes for achievement. Outcomes of the meeting are documented. If the Enrolled Nurse Support

into Practise programme or clinical requirements are not met, a Performance Improvement Plan will be initiated. Professional supervision is available.

Misconduct

The new graduate EN is expected to comply with the Nursing Council of New Zealand Code of Conduct and relevant Professional Boundary and Social Media policies of their employer. If the EN new graduate nurse is involved in anything which constitutes a breach of such codes, the process for correcting this will be followed by the Charge Nurse/Manager and Nurse Educator in conjunction with the Human Resources Department of the employing organisation.

Complaints Process

Complaints received about the practice of an EN on the ENSIP programme will follow the Te Whatu Ora Capital, Coast and Hutt Valley Complaints Policy and Procedures.

Support Available

- Graduate Programme Coordinator/Clinical Coach
- Preceptor
- Charge Nurse Manager/Manager
- Nurse Educator
- Clinical Supervision for those in Mental Health Addictions and Intellectual Disability (MHAIDS)
- Employee Assistance Programme (EAP)

Counselling is available through a hospital funded Employer Assistance Programme (EAP). This programme is completely confidential. The types of issues EAP addresses range from work or personal related stress/burn out, to relationship problems, through to alcohol/drug related problems. Get in touch with Raise: 0800 735 343 (0800 SELFHELP) www.raisementalhealth.co.nz/book-an-appointment

Programme Structure

Programme Completion Requirements

- The graduate will complete 10-12 months of clinical practice in their clinical area
- The graduate will work clinical hours as per contract
- The graduate will attend 2 orientation days (those working in Primary Care or Aged and Residential Care will have their own orientation day) and all 8 ENSIPP study days
- Complete all ENSIPP assessment requirements and submit by the due dates
- Participate in at least 8 clinical visits with the ENSIPP graduate programme coordinator/clinical coach
- Identifies with preceptor, Nurse Educator and Charge Nurse Manager/Manager own areas for learning and engage with learning opportunities
- The graduate will work and liaise with their assigned preceptor/s
- The graduate will achieve competent level on the Professional Development Recognition Programme (PDRP) within the first 12 months of the programme

Orientation

In the first four weeks of commencing the programme graduates will receive an introduction to the a) organisation or company and orientation to the b) practice environment including any mandatory requirements workshops/packages as set by the Charge Nurse Manager/Manager and Nurse Educator.

a) Organisational Orientation

Graduates employed by Te Whatu Ora Capital Coast or Hutt Valley will attend Te Rā Whakatau at Capital Coast or Hutt Valley, a face-to-face 8 hour orientation day. Those graduates employed by MHAIDS will **also** attend a two day orientation Whakamāramatanga. Those graduates employed outside of Te Whatu Ora Capital, Coast and Hutt Valley will not attend Te Ra Whakatau or MHAIDS Whakamāramatanga

but attend the company's own orientation (to be arranged between graduate and Manager/employer).

b) Clinical Orientation

The graduate will receive 4-6 weeks of orientation to the clinical area that they are employed. For a minimum of two weeks the graduate Enrolled Nurse will work side by side with their assigned Enrolled Nurse or Registered Nurse preceptor (the graduate will be supernumerary) to enable the new graduate to observe and experience EN practice. Then the graduate will share a clinical load with their assigned primary preceptor for up to 6 weeks or more if required when working in a highly specialised area or areas requiring a higher degree of independence. The relevant Charge Nurse/Manager will be involved in this decision, to see if additional support is required.

By the beginning of the 6th week of practice the new graduate EN will be working rostered shifts in the practice environment with regular access to their preceptor.

During this clinical environment orientation period graduates will complete all area specific workshops/packages in consultation with their preceptor as set by their Charge Nurse/Manager or Nurse Educator.

Preceptors

Clinical preceptorship is an educational relationship that provides role modelling, clinical support, clinical teaching and socialisation into the work environment. Preceptors strengthen the application and use of knowledge in clinical situations. Preceptors must be Registered or Enrolled nurses who have successfully undertaken preceptorship training as per the accepted national framework for preceptor training. Preceptors must have regular and consistent access to the graduate nurse during clinical practice, especially during the clinical load sharing period.

Preceptorship can be provided by a team. The Preceptorship team may include the Charge Nurse/Team Leader/Nurse Manager, Nurse Educator and other staff in the work environment. Their roles and responsibilities are outlined in the national framework for preceptor training. A named primary preceptor must be identified for each graduate enrolled nurse to ensure accountability for negotiating and evaluating learning outcomes.

Learning

Mandatory Courses

As part of the orientation graduates employed by Te Whatu Ora Capital Coast and Hutt Valley will also attend mandatory in person courses within 4 weeks of starting employment. Those graduates employed outside of Te Whatu Ora will also attend the in person courses as agreed by your employer. See the ENSIPP page on ConnectMe for full details. Please note, you may be enrolled in additional in person courses by your Charge Nurse/Manager or Nurse Educator of your employing clinical area.

E Learning

As a new employee of Te Whatu Ora Capital, Coast and Hutt Valley it is mandatory that you complete mandatory organisational eLearning courses within **4 weeks** of commencing employment. If you are employed to work in Capital, Coast then your eLearning platform is ConnectMe and if you are employed in the Hutt Valley then your eLearning platform is Ko Awatea LEARN. When you commence employment you will be given login details for either of these platforms depending on where your clinical area is located and when you login in you will already be enrolled in these mandatory eLearning courses. Please note, if you complete your eLearning on Ko Awatea your record of learning will be visible on your MyPay. It is your responsibility to complete these during work hours as negotiated with your Nurse Manager as well as in your own time by the due date. Please refer to your learning dashboard on either ConnectMe or Ko Awatea LEARN for your eLearning's.

Please note, you may be enrolled in additional eLearning courses by your Charge Nurse/Manager or Nurse Educator of your employing clinical area. For example, if you are employed into MHAIDS then your will be enrolled in MHAIDS specific eLearning's. These additional compulsory eLearning's are relevant to your clinical area, please confirm with your Nurse Manager or Nurse Educator when those need to be completed by.

Study Days

In addition to orientation study days the graduates will attend in person ENSIPP study days throughout the year. The study days throughout the ENSIP programme are compulsory paid rostered days. Your Charge Nurse/Manager and Nurse Educator will receive a timetable that informs them of your study day dates however, it is your responsibility to ensure that you are rostered on to these. Please also check your roster regularly/as it is released to ensure that you are rostered on the ENSIPP study days. Rostered days off and annual leave do not account for absenteeism from programmed study days.

Information about the study days can be found on your ConnectMe ENSIPP page.

Study Day Outcomes

- Increased knowledge from on-going education will assist in the transition in the first year of practice
- Enhanced practice and confidence in clinical practice through clinically based education
- Ability to critically reflect on own practice through sharing own clinical experiences and debriefing

Considerations for Study Days

- Personal commitment to be punctual, arrive on time and avoid leaving early
- ENSIPP coordinator reports any missed study day attendance or hours missed to the graduates Charge Nurse Manager/Manager
- Learning from the missed study day/s are made up in negotiation with ENSIPP coordinator. Missed study days are taken as sick or unpaid leave
- Abide by organisation Code of Conduct, Nursing Standards and the Privacy Act
- Respect/recognise guest speaker's expertise and willingness to share knowledge; provide constructive interactive feedback/questions
- Ensure patient and colleague confidentiality in classroom discussions
- Maintain respect and a safe environment for information sharing and support those reflecting on their own practice
- Respect individual views, beliefs & values - maintain a culturally safe environment

- Use professional judgment when sharing information, accountable for own actions and contributions
- Non-judgmental positive feedback to facilitate learning
- Cell phones & texting limited to breaks - excluding personal emergency

Assessments

As part of the ENSIP programme the graduate will complete assessments including;

1. Goal Setting
2. Clinical Reflection
3. Mid-Year Self-Assessment & Performance Appraisal
4. Competent Enrolled Nurse Portfolio

It is vital that you take time to adequately prepare and complete assigned pieces of assessment work as these reflect your developing EN practice is accurately. All expected outcomes are met within the set timeframes on the ENSIP programme.

Goal Setting

Within the first 3 months of practice graduates will set 4 comprehensive practice goals to achieve and then set another 4 goals again at 6 months into the programme. The goals set at 3 and 6 months are to be discussed with the Nurse Educator and signed prior to submitting to the graduate programme coordinator. Graduates will use the Enrolled Nurse Support into Practice Programme Goals template (appendix 1) to record the goals to be achieved, specified what skills, actions or knowledge is needed to meet each of these goals, specify how the graduate will obtain the knowledge and skills to meet the goals and record the time frame for completion.

Clinical Reflection

Throughout the programme graduates will need to complete two written reflection pieces using the Tanner's (2006) Clinical Judgement Model (appendix 2) and the Clinical Judgement Template (appendix 3). The clinical reflection needs to be discussed with your Nurse Educator or Charge Nurse Manager/Manger prior to final submission to the Graduate Programme Coordinator.

Mid-Year Self-Assessment & Performance Appraisal

Please talk with your peer assessor and Manager to let them know that you will be submitting a mid-year self-assessment to them for peer assessment. This self-assessment needs to be completed by end of February and then given to your peer assessor. The peer assessment then needs to be completed by end of March and given to your Manager ready for your mid-year appraisal. Please note, the self-assessment needs to be completed on the **Capital, Coast and Hutt Valley ENSIPP Mid-Year Formative Assessment** template provided to you by your graduate programme coordinator or located on the Capital, Coast and Hutt Valley PDRP intranet page.

To complete the mid-year self-assessment all graduates will;

- Answer each key performance indicator of the competencies (written in bold underneath the Nursing Council of New Zealand EN competency) with an example or explanation of how practice meets or achieves the indicator.
- NCNZ requires answers to include an example of how your day to day practice meets the indicator.
- All answers and examples must be from the current area of practice and be less than 12 months of practice.

Once the graduate has completed the mid-year self-assessment and peer assessment is complete, the graduate will have a mid-year appraisal to discuss progress and identify any areas for improvement. It is the graduate's responsibility to have the appraisal before the end of 6 months of practice.

Competent Enrolled Nurse Portfolio

By the end of your graduate year, you will be expected to have developed professional portfolio and must successfully achieve EN competent level on the Professional Development Recognition Plan (PDRP) which meets all Nursing Council of New Zealand Competencies (appendix 4). The PDRP is a clinically focused competency-based programme for nurses. It is a national programme, endorsed by the Nursing Council of New Zealand and the New Zealand Nurses Organisation. You will receive training to support your completion of this.

At Te Whatu Ora Capital Coast the Competent EN portfolio will be presented in paper form and Hutt Valley will now be using e portfolio, more information about the portfolio requirements can be found on intranet PDRP webpage.

Those who work for a health organisation within the Hutt Valley area, such as a PHO, NGO or ARC, will do the e portfolio, an account will be set up for you to do this.

Portfolio Assessors

Competent Level EN Portfolio's are peer assessed by your area nurse educator and a peer assessor assigned to you by your manager. If an extension is required, apply in writing to your Nurse Educator or the PDRP coordinator.

If assessment of PDRP portfolio is unsuccessful

If at the end of the assessment process the enrolled nurse has not met the criteria for the PDRP level being applied for, there are two options:

- Work on areas requiring further evidence/development and re-submission within one month; or
- Appeal the decision –the appeal process for the Competent Level PDRP Portfolio will mirror the PDRP appeal and disputes process as outlined on the PDRP webpage in the handbook for Enrolled and Registered nurses.

Appendix 1: ENSIPP Goal Setting Template

Enrolled Nurse Support into Practice Programme Goals

Goal	What skills, actions or knowledge you need to meet this goal (Bullet Points)	The ways you will get this knowledge/skill to meet your goal (Bullet Points)	Timeframe for completion and support needed to achieve goal
1			
2			
3			
4			
I have discussed these goals with my nurse educator/graduate programme coordinator and have met all goals with the actions, new knowledge and skills and support needed to achieve the goal.			
Graduate Name:		Nurse Educator Name:	
Sign:		Sign:	
Date:		Date:	

Appendix 2: Clinical Judgement Model

Introduction

- Describe a nursing situation you have encountered recently

Background

- Describe your relationship to the patient at the time you noticed the situation (e.g., previous contact with patient and/or family, the quality of your relationship).
- Consider experiences you have had that helped you provide nursing care in this situation.
- Describe your formal knowledge (e.g. Physiology, psychology, and communication skills), previous nursing experience with a similar problem, and/or personal experiences that helped guide you as you worked with the patient.
- Describe your beliefs about your role as the nurse in working on the situation.
- Describe any emotions you had about the situation.

Noticing

- What did you notice about the situation initially?
- Describe what you noticed as you spent more time with the patient and/or family.

Interpreting

- Describe what you thought about the situation (e.g., its cause, potential resolutions, patterns you noticed).
- Describe any similar situations you have encountered in practice before. Describe any similarities and differences you observed when compared with the current situation.

- What other information (e.g., assessment data, evidence) did you decide you needed as you considered the situation? How did you obtain this information? What help with problem solving did you get from your preceptor?
- Your conclusion: What did your observations and data interpretation lead you to believe? How did they support your response to the situation? Include pertinent pathophysiology and/or psychopathology.

Responding

- After considering the situation, what was your goal for the patient, family, and/or staff? What was your nursing response, or what interventions did you do? List all actions that you took.
- Describe stresses you experienced as you responded to the patient or others involved in the situation.

Reflection-in-Action

- What happened? How did the patient, family, and/or staff respond? What did you do next?

Reflection-on Action and Clinical Learning

- Describe three ways your nursing care skills expanded during this experience.
- Name three things you might do differently if you encounter this kind of situation again.
- What additional knowledge, information, and skills do you need when encountering this kind of situation or a similar situation in the future?
- Describe any changes in your values or feelings as a result of this experience.

Appendix 3: Clinical Judgement Model Template

Please use this template. Reflection on Practice (Complete 2 of these by the dates set on Year Planner).

Introduction

Background

Noticing

Interpreting

Responding

Reflection-in-Action

Reflection-on Action and Clinical Learning

Appendix 4: Nursing Council of New Zealand Competencies for EN's

There are four domains of competence for the Enrolled Nurse scope of practice. Evidence of safety to practise as an enrolled nurse is demonstrated when the applicant meets the competencies in the following domains:

Domain one: Professional responsibility

Competency 1.1: Accepts responsibility for ensuring that their nursing practice and conduct meet the standards of the professional, ethical and relevant legislated requirements.

Competency 1.2: Demonstrates the ability to apply the principles of 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.

Competency 1.4: Promotes an environment that enables health consumer safety, independence, quality of life, and health.

Competency 1.5: Participates in ongoing professional and educational development.

Competency 1.6: Practises nursing in a manner that the health consumer determines as being culturally safe.

Domain two: Provision of nursing care

Competency 2.1: Provides planned nursing care to achieve identified outcomes

Competency 2.2: Contributes to nursing assessments by collecting and reporting information to the registered nurse.

Competency 2.3: Recognises and reports changes in health and functional status to the registered nurse or directing health professional.

Competency 2.4: Contributes to the evaluation of health consumer care.

Competency 2.5: Ensures documentation is accurate and maintains confidentiality of information.

Competency 2.6: Contributes to the health education of health consumers to maintain and promote health.

Domain three: Interpersonal relationships

Competency 3.1: Establishes, maintains and concludes therapeutic interpersonal relationships

Competency 3.2: Communicates effectively as part of the health care team.

Competency 3.3: Uses a partnership approach to enhance health outcomes for health consumers

Domain four: Interpersonal health care & quality improvement

Competency 4.1: Collaborates and participates with colleagues and members of the health care team to deliver care.

Competency 4.2: Recognises the differences in accountability and responsibility of registered nurses, enrolled nurses and healthcare assistants

Competency 4.3: Demonstrates accountability and responsibility within the health care team when assisting or working under the direction of a registered health practitioner who is not a nurse.