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Submission to the Nursing Council of New Zealand on the Draft Code of Conduct for Nurses

The National Council of Women of New Zealand/Te Kaunihera Wahine o Aotearoa (**NCWNZ**) is an umbrella organisation representing 51 nationally organised societies and national members. It has 23 branches throughout the country attended by representatives of those societies and some 150 other societies as well as individual members. NCWNZ's function is to represent and promote the interests of New Zealand women through research, discussion and action.

This submission has been prepared by the NCWNZ Employment Standing Committee after consultation with the membership of NCWNZ. We agreed to take part in the preparation of a new code at the request of Carolyn Reed, Chief Executive of the Nursing Council.

The questionnaire, with an abbreviated explanation of each topic, was used in conjunction with the Draft Code of Conduct for Consultation when our members deliberated on the 12 questions below.

Overall NCWNZ members have a high regard for nurses and the nursing profession and wish the Nursing Council of New Zealand/Te Kaunihera Tapuhi o Aotearoa all the very best in preparing a new code of conduct. As you can see there is 100 per cent support from us for the new Code of Conduct.

Values and principles

The Council has used four core values (respect, trust, partnership and integrity) as the basis for the new Code. These values have been used to underpin appropriate professional behaviour.

1. Do you agree with the use of these values to underpin professional conduct or behaviour?

YES

No

3. Do you agree with the focus on the rights and needs of the health consumer?

- YES** No

Comment:

The over arching opinion was that a benchmark is really necessary. And that they need to be enshrined, written down, in a code of conduct such as your council is undertaking.

Words are not enough; there must be a document that people can refer to.

One point raised by members was the right to be cared for by nurses who they could readily understand. Some suggested that part of a nurse's certification might need to involve some language practice.

In discussing the dignity of health consumers, and we are all, even nurses, consumers of health care at different times of our lives, emphasis was placed on how nurses must be conscious of their position of trust in the community.

Cultural Safety

The new Code includes cultural safety as a key component of respecting and working with health consumers. As nurses develop as professionals they must develop a greater understanding of health consumers' values, culture and social context. This enables nurses to have more responsive relationships with health consumers and health consumers to experience 'culturally safe' health care.

This includes respecting the dignity, views about their health and treatment, and beliefs of the consumer, and working in partnership with their family.

4. Do you agree with these standards?

- YES** No

Comment:

Some of our members commented that nurses must first understand their own values and cultures in order to understand those of the people they are treating.

One of our branches, which has several former nursing tutors as members, preferred the words 'cultural competence'.

Maori Health

The health status of Maori continues to be of concern. The new Code requires nurses to work in partnership with Maori to achieve positive health outcomes, improve health status and provide culturally safe care to Maori.

5. Do you agree with the requirement to work in partnership with Maori to improve health outcomes?

YES

No

Comment:

One member suggested that health initiatives in the partnership, which they see as a very good idea, could be partially funded by iwi. This would help to get a real buy-in from the 'clients' and lessen the burden on taxpayers.

Vulnerable health consumers

Some other groups of New Zealanders can have high health needs e.g. people with disabilities, Pacific peoples, children, and older people. The Code requires nurses to use their expertise and influence to protect the health and well being of vulnerable health consumers, communities and population groups. The Council recognises that nurses have a professional obligation to protect the vulnerable and to advocate for, or facilitate others to advocate for, those who cannot represent themselves.

6. Do you agree with the principle on advocating for and protecting vulnerable groups?

YES

No

Comment:

Older members talked of frustration when they have been sick and feeling vulnerable and then not being understood or listened to attentively.

There was a query about how the nurses' code of conduct fits in with respecting the wishes of elderly or sick people who wish to die and not have their lives prolonged with medical intervention.

One member cited an instance where health professionals ignored a living will which had been legally witnessed. Well-being in such cases is not the same as health.

Commercial, personal or other interests

Some nurses have multiple roles within their professional or personal life that can lead to situations where there is a conflict of interest between their obligation to the health consumer or employer and another role or employer. A nurse could also seek to use their professional position to promote their own or others' commercial or personal interests. An example of a conflict of interest would be to promote or sell a particular product.

Standards relating to this topic include: that any advice given on using health products or services, including complementary or alternatives therapies is based on evidence and not influenced by the nurse's interests; refusing any gifts, loans or bequests from the health consumer or their close family; respecting the health consumer's possessions and property.

7. Do you agree with these standards in the Code on conflicts of interest?

YES

No

Comment:

Our members emphasize the 'respecting the health consumer's possessions and property' section of this topic.

Some knew of instances where nurses had suggested alternative treatments; and one member reported an instance of a nurse influencing a sick patient to make a bequest to her.

That said, we are 'conflicted' over gifts. Some of us say nurses must always refuse gifts or favours, but another group felt if patients and their families want to say a special 'thank you' with a gift, then maybe there needs to be some policy, perhaps involving checking its appropriateness with senior staff or the council itself, and that would allay concerns.

Social media

There have been examples of nurses overseas breaching health consumer confidentiality with serious consequences. There is also a potential for breaching professional boundaries through on-line relationships with health consumers.

New standards to incorporate social media demand that as well as protecting the privacy of health consumers social networking should not be used to discuss, identify or contact current or former patients.

Do you agree with these guidelines?

- YES** No

Comment:

We thoroughly agree.

Reporting colleagues and escalating concerns

The Council's first interest is public safety and it wants to support nurses to advocate for health consumers who are at risk of being harmed by the behaviour of other nurses or health professionals or by factors within the health care environment. The Council sees this as an important aspect of professional conduct but recognizes it is not an easy role for nurses to take as employees and team members. The Council has included several standards to support nurses to take appropriate steps.

These include acting immediately when a health consumer has suffered harm, reporting concerns to the appropriate authority and explaining the situation fully to the consumer and their family.

8. Do you agree with the standards on advocating for health consumers at risk of harm and escalating concerns?

- YES** No

Comment:

This drew a resounding yes from our members. They say the patient/health consumer's needs must come first and be paramount over loyalty to one's colleagues. The code provides a clear process and chain of command to follow.

We emphasize if a nurse has any concerns it's important to go to the right person.

Teamwork

Poor communication with peers and other health professionals and lack of teamwork can put the health consumer at risk. The new draft Code contains standards related to how nurses should work with other colleagues *in the interests of the health consumer*. These standards incorporate respect and the obligation to support colleagues, students and other health workers. Other standards emphasise the need to ask for assistance and to evaluate one's practice with colleagues.

11. Do you agree with the need for ethical behaviour as it affects fitness to practice and public confidence?

YES

No

Comment: Again the comment related to perception of a nurse's behaviour. Nurses are held in high regard in the community and the 'down side' of that is the importance of following a high standard of ethical behaviour.

Please comment on any other standards or guidance with the Code.

One concern that we feel needs emphasizing is that in 'the old days', the nursing staff were the stable force in a hospital, around which doctors, technicians and therapists orbited.

Now, with increasing casualisation, it is vitally important that good communication and sufficient time for discussion is allowed when shifts change and patients are handed over to a fresh nursing team.

We feel this work trend may need to be addressed more fully by the council.

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