

# Code of conduct for nurses

Ki te whakarite i nga ahuatanga o nga Tapuhi e pa ana mo nga iwi katoa

Regulating nursing practice to protect public safety



November 2009

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Last amended November 2009

© Nursing Council of New Zealand 2009 ISBN 978-0-908662-24-1

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# Introduction

# Nursing Council of New Zealand

As the statutory authority, the Nursing Council of New Zealand (the Council) governs the practice of nurses. The Council sets and monitors standards in the interests of the public and the profession. The Council's primary concern is public safety.

# Health Practitioners Competence Assurance Act 2003 (the Act)

The principal purpose of this Act is to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise their professions.

The Act seeks to attain its principal purpose by providing for (amongst other things):

- a consistent accountability regime for all health professions; AND
- the determination for each health practitioner of the scope of practice within which she or he is competent to practise; AND
- systems to ensure that no health practitioner practises in that capacity outside her or his scope of practice; AND
- power to restrict specified activities to particular classes of health practitioner to protect members of the public from risk of serious or permanent harm; AND
- certain protections for health practitioners who take part in protected quality assurance activities; AND
- additional health professionals to become subject to the Act.



#### **Protection**

Just as registration aims to ensure the public has access to qualified practitioners, so the Act confers on the Council the right to call into question, withdraw or limit the practice of any nurse whose conduct falls short of the standards, or who has a mental or physical condition that means she or he is unable to practise, or who is not competent to practise.

#### Code of conduct for nurses

The code provides a guide for:

- the public to assess minimum standards expected of nurses
- nurses to monitor their own performance and that of their colleagues.

# **Principles**

Four principles with criteria form the framework for the code. The nurse:

- complies with legislated requirements
- acts ethically and maintains standards of practice
- respects the rights of patients/clients
- justifies public trust and confidence.



# **Principles**

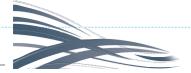
#### PRINCIPLE ONE

The nurse complies with legislated requirements.

## Criteria

- 1.1 The name of the nurse is entered on the register held by the Council.
- 1.2 The practising nurse has a current practising certificate issued by the Council.

- 1.3 practises within her/his scope of practice and any conditions entered on the register
- 1.4 practises within the legislation which impacts on the practice of nursing and the delivery of health and disability services.



#### PRINCIPLE TWO

The nurse acts ethically and maintains standards of practice.

#### Criteria

- 2.1 is guided by a recognised professional code of ethics applied to nursing
- 2.2 uses knowledge and skills for the benefit of patients/clients/community
- 2.3 is accountable for practising safely within her/his scope of practice
- 2.4 demonstrates expected competencies in the practice area in which currently engaged
- 2.5 upholds established standards of professional nursing practice
- 2.6 is responsible for maintaining her/his professional standards
- 2.7 maintains and updates professional knowledge and skills in area of practice
- 2.8 observes rights and responsibilities in the prescription, possession, use, supply, storage and administration of controlled drugs, medicines and equipment
- 2.9 accurately maintains required records related to nursing practice.

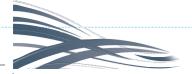


#### PRINCIPLE THREE

The nurse respects the rights of patients/clients.

#### Criteria

- 3.1 acknowledges and allows for the individuality of people
- 3.2 provides information to enable the patient/client to exercise informed choice and consent to the delivery of professional nursing care
- 3.3 respects any privileged access, conferred by professional status, to patients'/ clients' information and their possessions, residences and workplaces
- 3.4 safeguards confidentiality and privacy of information obtained within the professional relationship
- 3.5 helps patients/clients understand their rights and acknowledge their responsibilities related to the delivery of professional nursing
- 3.6 is aware of and guided by codes of rights and responsibilities for patients/ clients and health care providers in area of practice
- 3.7 practises in a manner that is culturally safe
- 3.8 practises in compliance with the Treaty of Waitangi.



#### PRINCIPLE FOUR

The nurse justifies public trust and confidence.

#### Criteria

- 4.1 provides valid identification about her/his professional qualifications and right to practise
- 4.2 offers or provides professional nursing partnerships
- 4.3 uses professional knowledge and skills to promote patient/client safety and wellbeing
- 4.4 reports to an appropriate person or authority, any limitations in professional expertise or personal health status or circumstances that could jeopardise patient/client safety
- 4.5 states any relevant, conscientious objection that could impact on her/his scope of practice
- 4.6 takes care that a professional act or any omission does not have an adverse effect on the safety or wellbeing of patients/clients
- 4.7 respects the trust implicit in the professional nursing relationship
- 4.8 claims benefits or remuneration only as and when appropriate for services rendered
- 4.9 acts in ways that contribute to the good standing of the nursing profession.



# Conduct in question

Some examples of behaviour that could be considered to be a basis for a finding of professional misconduct or imposing a penalty are listed below:

- court conviction for criminal offence that reflects adversely on fitness to practise
- neglect of responsibilities
- lack of care/supervision
- failure to provide safe surroundings
- inadequate observation/documentation
- lack of expected professional knowledge/judgement
- impaired judgement
- lack of skill in delivery of professional nursing practice
- failure to refer to appropriate persons
- violation of patients'/clients' rights
- entering into a sexual or inappropriate intimate relationship with a client or
  ex-client
- maltreatment
- inappropriate use of force; or intimidation
- causing injury or bodily harm
- physical, verbal or sexual abuse

- failure to comply with legislated requirements/ethical principles
- improper disclosure of personal information about patients/clients
- harmful imposition of political, religious or cultural views or health practices/ options
- offer of/acceptance of bribes, or other favours, or sexual advances
- failure to observe fiscal constraints, misappropriating funds or property
- accepting gifts from clients or ex-clients
- failure to declare relevant financial or commercial interests
- seeking to obtain undue preferential consideration
- inappropriate use of qualifications or professional status in promoting commercial products or services
- attempting to defraud, dishonest dealings and/or falsifying records
- misuse of alcohol or drugs
- practising without a practising certificate
- practising outside scope of practice
- breaking conditions on scope of practice.

The Council provides information sheets that explain the complaints and discipline process, the health process and the competence review process. These are available from the publications page of the Council's website or on request.



# Glossary

of New Zealand

Some words and phrases used in this Code have specific meanings:

**Enrolled nurse** means a nurse registered under the enrolled nurse scope of practice.

Ethical activity is thought and action based on the values, moral principles and

ideals of professional practice.

**Legislative** are those requirements laid down by New Zealand Acts and

requirements Regulations.

Nurse means a registered nurse, nurse practitioner, enrolled nurse or nurse

assistant.

**Nurse assistant** means a nurse registered under the nurse assistant scope of practice.

Nurse practitioner means a nurse registered under the nurse practitioner scope of

practice

Nursing Council is the responsible authority for nurses in New Zealand with legislative

functions under the Act.

The Nursing Council of New Zealand governs the practice of nurses by setting and monitoring standards of registration, which ensures safe and competent care for the public of New Zealand.

As the statutory authority, the Council is committed to enhancing

professional excellence in nursing.

Practising Nursing practice is using nursing knowledge in a direct

relationship with clients or working in nursing management, nursing administration, nursing education, nursing research, nursing professional advice or nursing policy development roles,

which impact on public safety.



# Practicing Certificate

means a renewable certificate issued by the Nursing Council of New Zealand, which entitles a nurse to practice for the period specified.

# Professional misconduct

(as defined in the Act) means the nurse has been found guilty of an act or omission that, in the judgement of the Health Practitioners Disciplinary Tribunal:

- (a) was malpractice or negligence in relation to the scope of practice in respect of which the nurse was registered at the time the conduct occurred
- (b) has brought or was likely to bring discredit to the profession that the nurse practised at the time that the conduct occurred

#### Register

refers to the register of nurses maintained by the Nursing Council of New Zealand.

## Registered Nurse

means a nurse registered under the registered nurse scope of practice.

#### Rights

indicates entitlements related to having one's dignity or interests protected from harm.

#### Safety

refers to nursing action to protect from danger and/or reduce risk to patient/client/community from hazards to health and wellbeing. It includes regard for the physical, mental, social, spiritual and cultural components of the patient/client and the environment.

Unsafe nursing practice is any action or omission that endangers the wellbeing, demeans the person or disempowers the cultural identity of the patient/client.

# Treaty of Waitangi

is the founding document for Aotearoa New Zealand signed in 1840 by the Maori people and the British Crown.



# APPENDIX A

## Scopes of practice

#### Registered nurse

Registered nurses utilise nursing knowledge and complex nursing judgement to assess health needs and provide care, and to advise and support people to manage their health. They practise independently and in collaboration with other health professionals, perform general nursing functions and delegate to and direct enrolled nurses and nurse assistants. They provide comprehensive nursing assessments to develop, implement, and evaluate an integrated plan of health care, and provide nursing interventions that require substantial scientific and professional knowledge and skills. This occurs in a range of settings in partnership with individuals, families, whanau and communities. Registered nurses may practise in variety of clinical contexts depending on their education preparation and practice experience. Registered nurses may also use their expertise to manage, teach, evaluate and research nursing practice. There will be conditions placed on the scope of practice of some registered nurses according to their qualifications or experience limiting them to a specific area of practice.

## Nurse practitioner

Nurse practitioners are expert nurses who work within a specific area of practice incorporating advanced knowledge and skills. They practise both independently and in collaboration with other health care professionals to promote health, prevent disease and to diagnose, assess and manage peoples' health needs. They provide a wide range of assessment and treatment interventions, including differential diagnoses, ordering, conducting and interpreting diagnostic and laboratory tests and administering therapies for the management of potential and actual health needs. They work in partnership with individuals, families, whanau and communities across a wide range of settings. Nurse practitioners may choose to prescribe medicines within their scope of practice. Nurse practitioners also demonstrate leadership as consultants, educators, managers and researchers and actively participate in professional activities, and in local and national policy development.

#### Nurse assistant

Nurse assistants assist registered nurses to deliver nursing care to individuals in community, residential and hospital settings. They perform delegated interventions from the nursing care plan to provide care and comfort for individuals and groups, assist and support clients with activities of daily living, observe and report changes in individual/group conditions and behaviours, safeguard dignity and promote independence and health and safety. The nurse assistant does not undertake independent nursing assessments or plan and evaluate nursing interventions. Nurse assistants are required to practise in a specific area based on their areas of focus in their education programmes and designated on their practising certificates.

Enrolled nurses practise under the direction of a registered nurse or midwife to implement nursing care for people who have stable and predictable health outcomes in situations that do not call for complex nursing judgement. The responsibilities of enrolled nurses include assisting clients with the activities of daily living, recognising the changing needs of clients and performing delegated interventions from the nursing or midwifery care plan.



# APPENDIX B

## Legislation

Some of the statutes and regulations that impact on the practice of nurses include:

#### Statutes:

Alcoholism and Drug Addiction Act 1966

Burial and Cremation Act 1964

Care of Children Act 2004

Children, Young Persons and Their Families Act 1989

Commerce Act 1986

Constitution Act 1986

Consumer Guarantees Act 1993

Contraception, Sterilisation and Abortion Act 1977

Coroners Act 2006

Crimes Act 1961

Criminal Justice Act 1985

Criminal Procedures (Mentally Impaired Persons) Act 2003

Fair Trading Act 1986

Food Act 1981

Guardianship Act 1968

Health Act 1956

Health and Disability Commissioner Act 1994

Health and Disabilities Services (Safety) Act 2001

Health and Safety in Employment Act 1992



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Health Practitioners Competence Assurance Act 2003

Health Sector Transfers Act 1993

Human Assisted Reproductive Technology Act 2004

Human Rights Act 1993

Human Tissue Act 1964

Injury Prevention, Rehabilitation and Compensation Act 2001

Intellectual Disability (Compulsory Care & Rehabilitation Act) 2003

Medicines Act 1981

Mental Health (Compulsory Assessment and Treatment) Act 1992

Misuse of Drugs Act 1975

New Zealand Bill of Rights Act 1990

New Zealand Public Health & Disability Act 2000

Official Information Act 1982

Privacy Act 1993

Protected Disclosures Act 2000

Protection of Personal and Property Rights Act 1988

Radiation Protection Act 1965

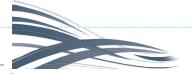
Retirement Villages Act 2003

Social Security Act 1964

Trans-Tasman Mutual Recognition Act 1997

Treaty of Waitangi Act 1975

Tuberculosis Act 1948



# Regulations:

Code of Health and Disability Services Consumers' Rights 1996

Coroners Regulations 2008

Health and Safety in Employment Regulations 1995

Health Practitioners Competence Assurance (Restricted Activites Order 2005)

Health (non seasonal Influenza) Order 2009

Health (Retention of Health Information) Regulations 1996

Intellectual Disability (Compulsory Care & Rehabilitation) Regulations 2004

Medicines (Standing Order) Regulations 2002

Medicines (Designated Prescriber: Nurses Practising in Aged Care and Child

Family Health) Regulations 2001

Medicines (Designated Prescriber: Nurse Practitioners) Regulations 2005

Medicines Regulations 1984

Misuse of Drugs (Changes to Controlled Drugs) Order 2003

Misuse of Drugs Regulations 1977

Tuberculosis Regulations 1951

Venereal Diseases Regulations 1982



# **BIBLIOGRAPHY**

Australian Nursing Council Code of Conduct for Nurses in Australia, 1994

Burgess, M E A Guide to the Law for Nurses and Midwives, Auckland, Longman Paul, 2002

Johnson, S Health Care and the Law, Wellington, Brookers Ltd, 2004

New Zealand Nurses Organisation Code of Ethics, Wellington, NZNA, 1994

New Zealand Nurses Organisation Social Policy Statement, Wellington, NZNO, 1993

New Zealand Nurses Organisation Standards for Nursing Practice, Wellington, NZNO, 1993

Nurses Act 1977

Nurses Amendment Act 1980, 1983, 1985, 1990 and 1994

Nursing Council of New Zealand In the Public Interest, Wellington, NCNZ, 1989

Nursing Council of New Zealand Standards for Registration of Nurses and Midwives in New Zealand, Wellington, NCNZ, 1994

UKCC for Nursing, Midwifery and Health Visiting Code of Professional Conduct, London, UKCC, 1983

