EN Service Establishment Programme

The Enrolled Nurse (EN) Service Establishment Programme is part of a wider Ministry of Health funded programme to deliver a national Nurse Practitioner (NP) Training Programme (NPTP) and to support the establishment of both NPs and ENs in primary health care and community settings, where they deliver (substantively) mental health and addiction services. The Programme is funded through to Dec 2024.

The Programme is being led by the School of Nursing, University of Auckland in partnership with Mahitahi Hauora PHE; The Fono; Victoria University of Wellington; and the University of Otago. Other key partners are Te Rau Ora; Te Ao Māramatanga - NZ College of Mental Health Nurses Inc; NPNZ (Nurse Practitioners New Zealand); and the Enrolled Nurse Section (NZNO). The initial governance structure is Appendix A.

The purpose of the EN Service Establishment Programme is to improve access to mental health and addiction (MH&A) services in primary health care and community settings by supporting ENs (and NPs) into positions with health providers. Equity and achieving equitable outcomes, underpins the Programme.

The specific objectives are to:

- Establish EN positions into PHC and community settings where the ENs have a substantive role in delivering MH&A services
- Promote the contribution of ENs in PHC and community settings to provide mental health and addiction services
- Work in partnership to co-design EN positions in health providers
- Prioritise Māori participation in the workforce and Māori service delivery models
- Increase Pacific participation in the workforce and Pacific service delivery models
- Evaluate the models, including role; how the service has improved access to MH&A services; funding to establish the service
- Share learnings and ideas to increase the success of the Programme through a network of health providers and stakeholders across both North and South islands.

Approach

The Programme will seek expressions of interest from health providers and ENs (or EN students). The National Coordinator (or Regional Coordinators) will work with local stakeholders and health providers to identify, plan, and establish EN positions. The emphasis is on co-design with local Māori and non-Māori stakeholders and the community, anticipating different models being developed for different areas and communities.

Assessing readiness of the placement

Four key areas will be used to assess the readiness of the health provider and the EN to work within their scope of practice

- Readiness of health provider to support EN service and delivery focusing on MH&A services
- Readiness of EN to deliver services MH&A services in PHC/community settings
- Availability of RN (or NP) support and supervision within the health provider
- Availability of peer support (from colleagues both inside and external to the organisation)
- Ability of the health provider to achieve sustainable EN services after the end of the establishment period
The funding to establish the EN position is expected to cover up to a two-year period. The funding may cover:

- A contribution to salary
- Professional development, including Mental Health Credentialling (run by Te Ao Māramatanga)
- Professional &/or cultural supervision
- Clinical supervision

It is expected that each EN position will have different funding needs and different models of care. The MoH see the establishment of these positions as an opportunity to showcase the work of ENs.

Further, we expect the funding contribution to each EN position to reduce over the one- to two-year period, leading to a sustainable permanent EN position, funded through existing funding streams.

Eligibility and priority areas

- Primary health care or community service
- Priority areas include:
  - Māori, and Pacific communities
  - High needs/high deprivation communities
  - Vulnerable and marginalised groups or communities (age, gender, ethnicity, disability, employment)
  - Rural and underserved communities
- Priority workforce: Māori, and Pacific nurses
- Ability (health provider and EN) to provide MH&A (for mild and moderate issues), increasing access to MH&A services in the community.

Proposed role demonstrates:

- Increased access to MH&A within the PHC/community setting and referral pathways to specialist care and other community, social, and NGO resources as appropriate
- How MH&A services integrate with generalist PHC services
- How hauora Māori best practice models and Māori tikanga are embedded in the models of care, addressing issues of equity
- Culturally safe service provision
- Opportunities to network with the community and consumers, to deliver services, including health promotion and prevention programmes
- Work to deliver equitable health outcomes

Sustainability of role requires:

- An identifiable long-term need for this role in the community to meet health needs
- Financial viability of the role and commitment for the role to be supported beyond the position establishment period
- Infrastructure required to support the role, including models of care, peer support, office space, team support

Requirements for the successful implementation of the EN position

- Job description, contract and working arrangements, line reporting, clinical supervision and delegation
- Models of care and relationships within the clinical setting
- Professional development, professional &/or cultural supervision, pastoral support, and other clinical experience for the role to be successful
• Arrangements for oversight and leadership/management of the implementation and evaluation of the role with the Programme coordinator/lead

**Proposed Assessment Framework for EN positions**
Expressions of interest are sought from both the health providers and the EN (or EN student). Preferentially, the health provider and the EN (or EN student) will already have a working relationship, or the intent to work together. Where either the health provider or the EN (or EN student) do not have an existing relationship, efforts will be made to connect health providers with potential NPs EN (or EN students).

**Application Process**
1. Potential health providers and ENs (EN students) will be asked to submit an expression of interest to the National Coordinator of the Programme, Dr Sue Adams. (Forms available from s.adams@auckland.ac.nz or a.crawshaw@auckland.ac.nz)
   - Expression of Interest by **HEALTH PROVIDER** to establish EN position delivering MH&A services
   - Expression of Interest by **EN (or EN student)** to establish EN position delivering MH&A services
   - EN (or EN student) applicants need to also submit a 2-page CV with their EOI.
2. The National Coordinator (or regional coordinator) will then contact the applicants seeking any further information or clarification.
3. The Partners’ Steering Group will be presented with applications for review by the National Coordinator.
4. The application will be assessed in relation to eligibility and readiness of provider and EN (or EN student).
5. The health provider and EN (or EN student) will be notified of the outcome.
6. The health provider and EN (or EN student) will then work with the National or Regional Coordinator, and other local stakeholders as appropriate, to develop a full funding model, implementation and evaluation strategy over the up to two-year period.

**Evaluation and Research**
This Programme will be evaluated. The design of the evaluation for the purposes of the contract is yet to be finalised.
There are opportunities for research related to this Programme. If you or any colleagues are interested in undertaking research, please contact us.
Any research undertaken will conform to the organisation’s research ethics requirements, including human ethics approval, and require informed and written consent.

For further information, please contact: Dr Sue Adams s.adams@auckland.ac.nz
APPENDIX A: Proposed Overall and Initial Governance Structure