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Postgraduate Diploma in Nursing Registered Nurse Prescribing Practicum

Clinical Placement Provider Agreement

Name of Clinical placement provider:
The clinical placement provider agrees that the learning environment for the student undertaking the registered nurse prescribing practicum will include:
 Inter-professional team relationships that enable collaborative practice for prescribing, and access to clinical information and client health records Contracts or policies that ensure diagnostic tests are available to registered nurse prescribers Work arrangements that support expanded nurse roles for prescribing, and 150 hours of protected learning time, including extended consultation time with clients and clinical supervisors Clinical governance systems that support safe prescribing practice, including reporting adverse events, audits and continuing professional development opportunities for staff A work environment culture of trust and openness; Access to authorised prescriber mentors (senior doctors or nurse practitioners) available for consultation and/or advice about prescribing decisions if the patient's presenting health concerns are more complex than the nurse can safely manage independently.
Agreement Date:/ to/ Signed (Representative)
Email:

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Postgraduate Diploma in Nursing

Registered Nurse Prescribing Practicum

NURS806 RN Prescribing Pre enrolment Checklist

Candidates for the Registered Nurse Prescribing pathway must meet specific requirements prior to enrolment in NURS 806 Registered Nurse Prescribing Practicum. Please complete the following checklist and the clinical placement provider agreement.

i)	I have completed three years' equivalent full-time practice in an area of common and long-term conditions in nursing
	Yes □ No □
ii)	I am able to demonstrate up-to-date clinical knowledge relevant to the intended area of prescribing practice and have attained a B grade in NURS801 Integrated Science and Assessment, NURS804 Pharmacology for Nursing Practice, and NURS812 Advanced Practice in Long-term Conditions
	Yes □ No □
iii)	I have a collaborative working relationship within an inter-professional team and will be able to engage the support of a designated, authorised prescriber (DAP), (a vocationally registered medical practitioner or nurse practitioner who has current indemnity insurance) as a mentor who will provide 150 hours of clinical supervision for prescribing practice
	Yes □ No □
iv)	I have professional/personal indemnity insurance.
	Yes □ No □
v)	I am employed within an organisation that enables nurse prescribing through policy, audit, peer review and accessibility of continuing education.
	Yes □ No □
vi)	I have obtained documented approval from the area of clinical practice in which I will undertake the prescribing practicum
	Yes □ No □
Stude	nt signature:
Date:	