



# Registered Nurse Competence Training Scheme

## Level 7

For New Zealand Registered Nurses and Overseas  
Registered Nurses with New Zealand Residency/Citizenship

The Registered Nurse Competence Training Scheme is a full-time, seven week programme that provides a pathway to your professional qualification in nursing. The programme meets the Nursing Council of New Zealand's requirements for overseas registered nurses who wish to gain New Zealand registration or for New Zealand registered nurses who want to return to practice.

Location	Hawke's Bay
Start	January, June and October
Length	Seven weeks full-time
Contact	Sue Jackson Phone: 06 830 1521 Email: <a href="mailto:sjackson@eit.ac.nz">sjackson@eit.ac.nz</a>



TE AHO A MĀUI



Te Pūkenga

# Reignite your nursing career

The Registered Nurse Competence Training Scheme is a Level 7 programme, consisting of two theory weeks and five weeks of practicum. The programme delivery has a mixture of classroom and online teaching.

The aim of the programme is to support registered nurses wanting to obtain New Zealand registration by achieving Nursing Council of New Zealand competencies for the Registered Nurse Scope of Practice.

Each learner is provided with guidance and support while studying. In particular, the programme is designed to:

- Provide an understanding of the New Zealand health care system.
- Provide an understanding of cultural safety in nursing.
- Provide an understanding of the statutes and regulations impacting on the practice of nurses in New Zealand.
- Facilitate appropriate guided clinical placements.
- Provide overseas registered nurses with a Competence Assessment Programme that meets the registration requirements of the Nursing Council of New Zealand.
- Provide a pathway to assist New Zealand registered nurses to return to clinical practice.

In this application pack you will find information about the programme, descriptions of each of the subjects covered and fees and costs associated with this programme.

You are welcome to make an appointment to discuss your study options with our staff and to view our facilities.

## Career and study opportunities

This programme is designed to enable graduates to enter practice with a sound knowledge base of nursing theory and practice within the New Zealand health care context. Nursing is a professional practice that is

an essential part of health care. Nurses are expected to be able to work autonomously and within the multidisciplinary team in a wide range of settings.

Possible jobs and career opportunities can include:

- Public and private hospitals
- Mental health
- Tamariki Ora / Plunket (Well Child Health)
- Independent practice
- Public health
- Nursing education
- Maternity
- Elder health
- Occupational health
- Nurse prescriber
- Nurse practitioner

Employment can be obtained both in New Zealand and overseas.

If you require any further assistance or information at any time please do not hesitate to contact our staff.

## Partnerships

Te Whatu Ora Te Matau a Māui Hawke's Bay, Te Whatu Ora Hauora Tairāwhiti, Napier/Hastings Aged Residential Care providers, Health Hawke's Bay and other community health providers.

We value our partnership with learners and aim to provide high quality education in a supportive environment, encouraging personal growth and professional development.



## 2024 Key dates

### Stream one - January

Programme starts	Monday, 22 January	Programme ends	Friday, 8 March
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### Stream two - June

Programme starts	Tuesday, 4 June	Programme ends	Friday, 19 July
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### Stream three - October

Programme starts	Monday, 21 October	Programme ends	Friday, 6 December
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### Statutory holidays

Waitangi Day	6 February	HB Anniversary	25 October
Matariki	28 June	Labour Day	28 October

## Registered Nurse Competence Training Scheme Level 7, 30 credits



Hawke's Bay campus



Full-time:

Seven (7) weeks\*

\* Two weeks theory on-campus and five weeks clinical placement



Fee:

Visit [fees.eit.ac.nz](https://fees.eit.ac.nz) to see the fees for this programme

## Work-integrated learning

Practicum experiences will be full shifts Monday to Sunday, which may involve shifts between the hours of 0645-1530 hours, 1430-2300 hours, or 2245-0700 hours, completing a total of 25 shifts over five weeks.

Practicum venues could be a regional hospital, aged residential care facility, primary healthcare facility or private practice.

## Timetable

Your study time will be made up of contact time (class times, tutorials, work-integrated learning) and non-contact time (your own individual study time, online learning).

### Contact time

Classes are scheduled between 0830-1630 hours, Monday to Friday, with some optional tutorials after class.

The Registered Nurse Competence Training Scheme is seven weeks in length. The programme is offered at different times in the year and may be cancelled if there are insufficient enrolments.

### Non-contact time

You should plan to spend two hours on individual study for each classroom hour.

## Additional costs

The costs of transport and accommodation are the responsibility of the learner.

## Entry requirements

An interview may be part of the application process.

- The academic entry criteria for the Registered Nurse Competence Training Scheme is a Bachelor degree in Nursing (or equivalent).
- New Zealand registered nurses are required to provide:
  - Evidence of Nursing Council of New Zealand registration;
  - Evidence of most recent Annual Practising Certificate;
  - Evidence of serology results indicating immunity;
  - Current Curriculum Vitae including details of education, qualifications, registration and career summary; and
  - NZ Police Vetting Service Request and Consent Form, which must be received by the Programme Administrator at least two weeks prior to the commencement of the programme.
- Overseas registered nurses are required to provide:
  - Evidence of Nursing Council of New Zealand Nursing Registration/Enrolment Verification form and decision letter recommending completion of a competency-based, integrated theory and practice programme;
  - Evidence of serology results indicating immunity;
  - Current Curriculum Vitae including details of education, qualifications, registration and career summary; and
  - Evidence of a police check from country of origin, as well as any country in which they have worked.

Preferential selection criteria may apply as follows:

- For New Zealand registered nurses, preference may be given to applicants who have been out of practice for fewer than 10 years.

- For overseas registered nurses, preference may be given to applicants who have a minimum of two years' paid registered nurse experience in the last three years.

### Immunological and serology requirements

You are required to supply the following evidence of serology and immunity results:

- Evidence of your COVID-19 vaccinations. It is not compulsory to have a COVID-19 vaccination but please be aware that learners who are not fully vaccinated (2 doses + 2 weeks) for COVID-19 will not have access to Te Whatu Ora Te Matau a Māui Hawke's Bay or Te Whatu Ora Hauora Tairāwhiti clinical placements/settings. This means that if you choose not to be vaccinated, this will have an impact on your ability to be accepted on placement in a healthcare organisation, and this will in turn have an impact on your ability to successfully complete the Registered Nurse Competence Training Scheme programme. Accordingly, all learners applying to enrol on the Registered Nurse Competence Training Scheme are strongly recommended to be fully vaccinated against COVID-19.
- Evidence of having received two MMR (measles, mumps and rubella) immunisations. If you do not have evidence of having received two MMR immunisations, you will need a blood test to show your immunity to Morbilli (measles), Rubella and Mumps.
- A blood test to show your immunity to Varicella or proof of having had chicken pox in the past.
- A blood test to show your Hepatitis B Antigen and Antibody status. You need a Pertussis (whooping cough) vaccine if you cannot provide evidence of having received a Pertussis vaccine within the last ten years.

**Please Note: All medical costs or expenses in providing proof of immunisation are your responsibility.**

New Zealand registered nurses also need to complete the Tuberculosis questionnaire as part of the application process. For overseas registered nurses a Quantiferon Gold test is required.

### English language entry requirements

Applicants for whom English is an additional language must demonstrate an acceptable level of English language fluency prior to acceptance in the programme. Such applicants need to provide evidence of either:

- An IELTS test result with an Academic score of 6 and no band score lower than 5.5 gained within one sitting, or equivalent, and
- Either an IELTS Academic score of at least 7.0 in every band; or an OET score of at least 350 (B) in every band.

Applicants can achieve the minimum score in either English language tests over more than one sitting, however the required score must be met within 12 months of first sitting the test.

An applicant's English language assessment results must be less than three years old at the time they apply

to the Nursing Council of New Zealand for registration, following completion of their Registered Nurse Competence programme.

### Transfers/cross credits

As this is an integrated competency assessment programme, transfer and cross-crediting between institutes is unlikely.

Please note: Fees are not transferable between institutes.

### Facilities

The Clinical Arts and Technology (CAT) Centre is an interactive learning environment designed to facilitate, support and provide opportunities for learners to develop, practice and refine their cognitive, technical and clinical skills. The centre is designed to act as a conduit to bridge the gap between theory and practice. Learners' skill development is facilitated with an emphasis on "hands on" practice.

The CAT Centre is comprised of a fully equipped, hospital-orientated, patient environment. A combination of technological aids such as Audio Visual equipment (video/taping/recording facilities), mannequins, interactive CD ROM, self-directed learning modules and cue cards are available for the learners' use.

The CAT Centre is available to all learners from the Faculty of Education, Humanities and Health Science.

The CAT Centre Coordinator is available to assist your learning.

### Assessments

Assessments include an exam and clinical demonstration of skills.

### EIT is now part of Te Pūkenga

Te Pūkenga brings together New Zealand's Institutes of Technology, Polytechnics, and Industry Training Organisations to build a network of on job, on-campus and online learning. The services we offer not only remain, they are strengthened by being part of the extensive Te Pūkenga network around the country. Your enrolment for study in 2024 will see you enrolling with Te Pūkenga and becoming part of the extensive Te Pūkenga network around the country.

### The experience you need & the support to succeed

When you study at EIT | Te Pūkenga you'll get the kind of experiences that will help you gain the knowledge and skills to get ahead.

You'll also be supported by lecturers and tutors who are here for you, within a learning environment where you are treated as an individual, not just a number.

They'll know your name and you'll receive one-on-one attention to make sure you get the support to succeed.



## Experienced educators

At EIT | Te Pūkenga, you can be confident in the quality of our teaching and your learning experience.

EIT | Te Pūkenga is highly regarded in New Zealand for research excellence due to the quality of our community centred research, our publications and our external grant income provided by funding institutions who have confidence in our research capability. You can be confident your educators use the latest knowledge and research in their field of expertise to inform their teaching, and many are at the forefront of knowledge creation within their discipline area.

Our Nurse Educators are registered nurses with advanced academic and practice qualifications, including areas of special expertise such as midwifery, mental health, child and adolescent health, community health, acute care and care of the older adult. Staff also maintain contacts with other professionals through organisations such as New Zealand Nurses Organisation (NZNO), Nursing Council of New Zealand, Nurse Education in the Tertiary Setting (NETS), and College of Nurses Aotearoa (NZ).

We value our partnership with learners and aim to provide high quality education in a supportive environment, encouraging personal growth and professional development.

Name	Qualification
<b>Alinka Julian</b> <i>Programme Coordinator</i>	PGDipHC, BN

## Programme information

Theoretical components of the programme will be delivered at the EIT | Te Pūkenga Hawke's Bay campus, over a two week period. Access to a device (e.g. laptop) will be required for the theory weeks (computers are also available for use in our Library).

Clinical components of the programme will take place at Te Whatu Ora Te Matau a Māui Hawke's Bay Hospital in Hastings, or other approved health care institutions over a five week period. There is no guarantee of a Te Whatu Ora Te Matau a Māui Hawke's Bay Hospital placement. You are responsible for your own accommodation and/or transport for the entire seven weeks of the programme. Extra clinical time may be required depending on your ability to achieve Nursing Council Competencies.

To complete the Registered Nurse Competence Training Scheme you will be required to complete and pass the two embedded courses:

- CAP7.001 Concepts for NZ Registered Nurses
- CAP7.002 Competence for NZ Registered Nurses

Please Note: Any travel and/or accommodation expenses that are incurred are the responsibility of the student.

By completing and passing the courses within the programme, the graduate will have met the Nursing Council of New Zealand competencies for the Registered Nurse Scope of Practice.

## Course descriptions

Concepts for New Zealand Nursing Practice				
<b>CAP7.001</b>	This course aims to equip learners to transfer existing nursing knowledge and skills to practice in the New Zealand health care system, facilitating their development of new knowledge and skills as required.	7	10	
Competence for New Zealand Nursing Practice				
<b>CAP7.002</b>	This course aims to facilitate learners' transition to nursing practice in the New Zealand health care system by ensuring their competence within each of the Nursing Council of New Zealand domains of practice for the Registered Nurse Scope of Practice.	7	20	



# How to enrol

There is an easy 3-step process to follow when enrolling at EIT | Te Pūkenga.

## Step 1

Check out [eit.ac.nz](https://eit.ac.nz) to see the programmes available for you to study. A copy of the course information for each programme is available on our website.

## Step 2

You can now use your RealMe verified identity to apply for study at EIT | Te Pūkenga. If you use your RealMe verified identity you will no longer be sent a copy of your application form to sign. You also will not need to provide us with a copy of your primary ID.

If you apply online without using RealMe then you will be sent a summary of your enrolment to check and sign. It will also include course selection forms which you need to complete and return. Your enrolment cannot progress until you have sent the summary and forms back to us.

You can also apply using a paper enrolment form. Please call us on 0800 22 55 348 and we will send you one out.

You will receive an acceptance letter from your Faculty with programme information. This will include the start date of your study and any special information regarding your programme. Depending on your chosen programme of study, you may be invited to attend an interview before you are accepted.

## Step 3

Arrangement for full payment of enrolment fees must be made before the start of your programme. You will receive an invoice with payment details.

**Fees-free government scheme:** Tertiary education is fees-free for eligible domestic tertiary students. To check if you are eligible, go to [FeesFree.govt.nz](https://feesfree.govt.nz) and enter your National Student Number (NSN). If you are not eligible you will be responsible for paying your fees.

**Scholarships and grants:** Scholarships and grants make life easier by helping to cover your fees, other costs and living expenses while you study. You don't always need to be an academic high-flyer to qualify. You can find out more about scholarships and other options for paying your fees at [eit.ac.nz](https://eit.ac.nz).

**StudyLink:** If you need to pay for your own study you can choose to apply for your Student Loan and Student Allowance with StudyLink. You should do this early, even if you haven't yet been accepted on your programme. You can change your details later if anything changes. Visit [studylink.govt.nz](https://studylink.govt.nz) to find out more about StudyLink.

## Student services levy

The student services levy is a compulsory non-tuition fee that is charged to students enrolled at EIT | Te Pūkenga. The levy is to contribute to the provision of quality student services that support learning. The funds received by EIT | Te Pūkenga from the levy are ring-fenced, meaning they can only be spent on student services.

## Student loans and allowances

StudyLink is a service of the Ministry of Social Development. Apply well before your programme begins (even if you haven't been accepted yet) so you'll be ready to get your payments when you need them most.

Check out what you qualify for at [studylink.govt.nz](https://studylink.govt.nz).



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## Registered Nurse Competence Training Scheme (Level 7) 2024

### Enrolment Checklist

for New Zealand registered nurses and overseas registered nurses with  
New Zealand residency/citizenship

## Please Note

The following documents need to be completed and returned with  
your Enrolment Form.

Without these documents we are unable to proceed with  
your application.

Please complete and return the following:

- ☐ Enrolment Form
- ☐ Brief Personal Statement including brief CV/Work History
- ☐ MRSA Declaration Form
- ☐ Tuberculosis (TB) Questionnaire
- ☐ Declaration of Health Form
- ☐ Evidence of serology results indicating immunity
- ☐ NZ Police Vetting Service Request and Consent Form
- ☐ Evidence of Nursing Council of New Zealand Registration





## Registered Nurse Competence Training Scheme (Level 7) 2024

for New Zealand registered nurses and overseas registered nurses with New Zealand residency/citizenship

### Brief Personal Statement

Please also include a brief CV / Work History

Applicant name: .....

1. Are you a New Zealand Resident / Citizen? ☐ Yes ☐ No

2. Do you have a current NZ Annual Practising Certificate? ☐ Yes ☐ No

(Please enclose a certified copy of your Annual Practising Certificate with your application)

3. In which country was your Nursing Registration gained?

.....

4. What is your special interest area of practice?

.....

E.g. Med/Surg, Community, Child Health, Maternal Health

5. Have you been enrolled in other competency assessment programmes? ☐ Yes ☐ No

As part of this programme you may have practical experiences with agencies or organisations who may require you to obtain a police vet (police check) including, but not limited to; criminal convictions, criminal history, fines, enforcements or disciplinary action.

6. Have you ever had any of the above? ☐ Yes ☐ No

If yes, please explain below

.....

.....

.....

.....

Please Note: A prior conviction may not necessarily exclude you from acceptance into the programme, however we will need to discuss your conviction with you. Failure to disclose any previous convictions at the time of applying may jeopardise your enrolment in the programme.

Applicant signature: ..... Date: .....



## Registered Nurse Competence Training Scheme (Level 7) 2024

for New Zealand registered nurses and overseas registered nurses with New Zealand residency/citizenship

### MRSA Declaration

All learners must sign a MRSA Declaration form prior to commencing all practicum placements.

Please confirm below that you have met the EIT | Te Pūkenga and Te Whatu Ora MRSA policy requirements.

Learners are not routinely screened for MRSA.

**If you have a skin condition you must be seen by occupational health at Te Whatu Ora Te Matau a Māui, Hawke's Bay or Te Whatu Ora Hauora Tairāwhiti | Gisborne two weeks prior to going on placement.**

The occupational health nurses, Jane O'Kane or Jude McCool, will decide if you need to be swabbed for MRSA. There is no charge for this. They can be contacted on 06 878 8109 ext. 2665 or 2601.

- |  |                          |     |                          |    |
|--|--------------------------|-----|--------------------------|----|
| 1. Do you have eczema or psoriasis?        | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 2. Do you have any flaky skin or dandruff? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

If you have ticked yes to any of these questions, you will need to see the occupational health nurses.

Applicant name: .....

Applicant signature: ..... Date: .....

Please hand this form to your Programme Coordinator prior to your practicum placement.

### MRSA Policy

Learners will now be required to have MRSA swabs in the following circumstances:

- Any learner with eczema or psoriasis.
- Any learner with flaky skin or dandruff.

A copy of this form is available at [www.eit.ac.nz/students/timetable](http://www.eit.ac.nz/students/timetable) under the practicum course sites and on the practicum site. The learner must complete the declaration and then hand these into the Practicum Manager prior to clinical placement.

Please note: Failure to submit a signed declaration will result in students being denied entry to their clinical venue.





# Registered Nurse Competence Training Scheme (Level 7) 2024

for New Zealand registered nurses and overseas registered nurses with New Zealand residency/citizenship

## Tuberculosis (TB) Questionnaire

Risk assessment of Registered Nurse Competence Training Scheme learners.

Surname: ..... First name: ..... DOB: .....

Contact phone number (Home): ..... Mobile: .....

Please tick relevant box.

1. Have you had screening for tuberculosis previously? Yes ☐ No ☐ Unsure ☐
- If yes what test did you have? Mantoux 2 step test ☐ QuantiFERON TB Gold ☐
  - Result: date/s: ..... Negative ☐ Positive ☐
  - Have you ever been told that you should not have any more Mantoux tests because you had a large reaction? Yes ☐ No ☐
  - Have you had a BCG vaccination? Yes ☐ No ☐
  - If yes, give approximated year date: .....
  - Scar visible Yes ☐ No ☐
  - Have you had a chest x-ray in the last three months? Yes ☐ No ☐
  - If yes, what was the result? Please provide report if available. Normal ☐ Abnormal ☐
  - Place x-ray taken: .....
  - Date taken: .....
  - Were you evaluated by a medical practitioner as a result of your TB testing? Yes ☐ No ☐

If yes, give details: .....

2. Have you had/think you have had tuberculosis? Yes ☐ No ☐ Unsure ☐

If yes, give details: .....

Date: .....

- Have you ever been treated for tuberculosis/latent tuberculosis? Yes ☐ No ☐ Unsure ☐

If yes, when? .....

Date: .....

Treatment: What: .....

How long: .....

Additional information: .....

3. Have you ever had an unprotected exposure to anyone with confirmed tuberculosis in your work or home environment in the past two years?

Yes ☐

No ☐

Treatment: What: .....

How long: .....

4. What country were you born in? .....

5. If you are an immigrant, or on a student visa what date did you arrive in New Zealand?

Date: .....

6. Please list the countries you have lived, worked or travelled in for more than three months within the last two years?

7. Are you a smoker

Yes ☐

No ☐

8. Do you have any of the following symptoms?

Yes ☐

No ☐

• A persistent cough or cough most days?

Yes ☐

No ☐

• If answered yes, does your cough produce a lot of sputum (phlegm)?

Yes ☐

No ☐

• Have you ever coughed up blood or bloody sputum?

Yes ☐

No ☐

• Do you wake at night sweating so much you have to change your bed clothes?

Yes ☐

No ☐

• Do you have unexplained fevers?

Yes ☐

No ☐

• Have you lost any weight over the last six months without meaning to?

Yes ☐

No ☐

If yes, how much? (kg) .....

• Any additional information you feel we should have?

9. Do you have any health problems associated with immunosuppression?

Yes ☐

No ☐

Applicant signature: ..... Date: .....

**(Office Use Only)**

Further screening required:

Yes ☐

No ☐

Date: .....

Result: .....

QuantiFERON TB Gold assay (IGRA)

Yes ☐

No ☐

Chest x-ray

Yes ☐

No ☐

Refer to respiratory physician

Yes ☐

No ☐

Comments .....

Nurse/Medical Officer | Signed: .....

Date: .....

## **Registered Nurse Competence Training Scheme (Level 7) 2024**

for New Zealand registered nurses and overseas registered nurses with New Zealand residency/citizenship

### **Immunisations and Serology Testing (NZ applicants)**

You are required to have immunity and serology testing as part of the application process for acceptance into the programme.

You must supply the following evidence of serology and vaccination results:

- Evidence of your COVID-19 vaccinations. It is not compulsory to have a COVID-19 vaccination but please be aware that those who are not fully vaccinated (2 doses + booster + 2 weeks) for COVID-19 will not have access to Te Whatu Ora Te Matau a Māui, Hawke's Bay or Te Whatu Ora Hauora Tairāwhiti | Gisborne clinical placements/settings. This means that if you choose not to be vaccinated, this will have an impact on your ability to be accepted on placement in a healthcare organisation, and this will in turn have an impact on your ability to successfully complete the Registered Nurse Competence Training Scheme programme. Accordingly, all students applying to enrol on the Registered Nurse Competence Training Scheme are strongly recommended to be fully vaccinated against COVID-19.
- A blood test that gives results for Hepatitis B Surface Antigen and Surface Antibody within the last five years. You need this even if you have been immunised against Hepatitis B.
- Evidence of having received two vaccinations of MMR. If you are unable to supply evidence of two vaccinations of MMR you will need to provide evidence of your immunity to morbilli (measles) rubella and mumps.
- You must provide evidence of having had a Pertussis (whooping cough) vaccination within the last ten years. If you cannot provide the evidence you will need a vaccination against Pertussis.
- You must provide evidence of having had immunity or a vaccination to Varicella (chicken pox). If you do not have evidence of having had Varicella. If you are reasonably certain you had Varicella as a child we recommend you having the blood test first prior to having the vaccine.
- You must complete the attached Tuberculosis questionnaire form.

If you have any questions with these requirements please do not hesitate to contact the Programme Administrator, Sue Jackson, phone 06 830 1521 or email [sjackson@eit.ac.nz](mailto:sjackson@eit.ac.nz).





## Registered Nurse Competence Training Scheme (Level 7) 2024 for New Zealand registered nurses and overseas registered nurses with New Zealand residency/citizenship

### Immunisations and Serology Testing (NZ applicants)

Please complete all sections of this form including your signature and your immunisation and serology results and return with your application.

A declaration of an applicant's past and present health is a requirement for entry into the Registered Nurse Competence programme. The information is required for the following reasons:

1. To ensure there are no health problems that could affect your safety or those for whom you are providing care.
2. To provide baseline data for future health care (including immunisations) while undertaking the Registered Nurse Competence programme.
3. If your personal information changes during the course of your study you must inform the Practicum Manager or Programme Coordinator.

This form and its contents will be treated as strictly confidential.

Please note: Before being accepted, you may be required to have a medical examination or provide an attestation statement from an appropriate professional.

In the event of a false declaration, EIT | Te Pūkenga reserves the right to decline an application or remove a learner from the programme.

Applicant name: ..... Date of birth:.....

Address: .....

Email: ..... Phone:.....

#### Section One

1. Have you consulted a doctor within the last five years for other than minor health conditions? If yes, please give details:

☐ Yes ☐ No

2. Have you any chronic/ongoing conditions (e.g. heart disease, asthma, diabetes, epilepsy)? If yes, please give details:

☐ Yes ☐ No

3. Are you on a surgical waiting list? If yes, please give details:

☐ Yes ☐ No

.....

.....

4. Are you taking any medications? If yes, please give details:

☐ Yes ☐ No

.....

.....

## Section Two

Do you have or have you ever suffered from any of the following?

- Back or lower limb trouble that may affect your work performance ☐ Yes ☐ No
  - Any physical disability that may affect your work performance ☐ Yes ☐ No
  - Any mental or emotional illness ☐ Yes ☐ No
  - Use and abuse of addictive substances ☐ Yes ☐ No
  - If yes, please give details below:
- .....
- .....

## Section Three

1. Do you have any skin conditions or skin allergies (e.g. eczema, psoriasis)? If yes, please give details:

☐ Yes ☐ No

.....

.....

2. Have you ever had health problems/allergic reactions, e.g. skin rash, asthma, breathing difficulties related to any substance, (including drugs/chemicals/bee stings/latex etc.)? If yes, what was the name of the substance/drug/chemical?

☐ Yes ☐ No

.....

What was the resulting health problem?

.....

3. Do you have any health conditions that would prevent you from wearing personal protective equipment or clothing (e.g. masks, gloves, closed shoes, safety glasses, lead apron, hearing protection)? If yes, please give details:

☐ Yes ☐ No

.....

.....

#### Section Four

4. Do you have any disability that may have an impact for you? If yes, please give details:

☐ Yes ☐ No

Learning (e.g. dyslexia) .....

Physical (e.g. hearing/vision) .....

Mental health (e.g. depression) .....

Other .....

5. Do you have any other relevant illness or injury not covered in the previous questions? If yes, please give details:

.....

.....

.....

.....

#### Section Five

Pre-enrolment screening requirements for Registered Nurse Competence Training Scheme learners.

Serology (Blood) results and Vaccinations.

Please complete the table below - if unsure please tick appropriately.

Serology and Vaccination results	Yes	No	Unsure
COVID-19 vaccination fully vaccinated (two doses, plus booster, plus two weeks)			
Date received Vaccination 1			
Date received Vaccination 2			
Date received Booster			
Pertussis (Whooping Cough) immunisation in the last ten years			
MMR (Measles, Mumps and Rubella) fully immunised (i.e. two immunisations as a child)			
Rubella immune status (if you do not have evidence of immunisation as a child)			
Morbilli (Measles) immune status (if you do not have evidence of immunisation as a child)			
Mumps immune status (if you do not have evidence of immunisation as a child)			
Varicella (Chicken Pox) immunisation or immunity			
Hepatitis B antibody blood test			
Hepatitis B antigen blood test			
Mantoux two step / QuantiFERON Gold test / Completed Tuberculosis questionnaire			

Where applicable, please provide evidence of the required immunity results (within the last ten years), if you have them. Outstanding results must be provided once your acceptance into the programme is confirmed.

### Permission for release of information

Should any of the above medical conditions present possible concern I agree to the EIT | Te Pūkenga Health Centre and if relevant, the Practicum Manager, School of Nursing, approaching my doctor in strict confidence.

My doctor is: .....

My doctor's number is: .....

### Declaration

I declare the above statements are true and complete to the best of my knowledge and belief.

Applicant signature: ..... Date: .....



## Section 1: Agency to complete

For more information please see the [Guide to PVS Request & Consent Form](https://www.police.govt.nz/advice-services/businesses-and-organisations/nz-police-vetting-service/forms-and-guides)  
(<https://www.police.govt.nz/advice-services/businesses-and-organisations/nz-police-vetting-service/forms-and-guides>)

### 1.1 Name of agency submitting vetting request

EIT / Te Pūkenga

### 1.2 Name of the person being vetted

### 1.3 Description of the role of the person being vetted

*This is a brief description of the role (not the job title). This is used by Police to help decide what type of vet is conducted if it is unclear from the following questions.*

Student - Registered Nurse Competence Training Scheme

### 1.4 Which groups will the person being vetted be working with (select all that apply):

☒ Children/ Young People

☒ Vulnerable Adults

### 1.5 Does the role involve caring for people in the home of the person being vetted?

*This is about whether the person being vetted is providing services out of their own home (that is, are vulnerable children or adults visiting the home of the person being vetted for support).*

☐ Yes

☒ No

### 1.6 Is the person being vetted:

☐ A paid worker

☐ A volunteer

☒ Undertaking vocational or educational training

### 1.7 Is the person being vetted a Children's Worker according to the Children's Act 2014, section 23(1)?

*If the person being vetted is not working with children/ young people (Q 1.4), tick 'No' then skip to question 1.11.  
If the person being vetted IS working with children (Q 1.4) AND is a volunteer (Q 1.6), tick 'No' then skip to question 1.9.*

☒ Yes

☐ No (skip to question 1.9)

### 1.8 Is the role of the person being vetted a core or non-core worker role according to the Children's Act 2014, section 23(1)?

☐ Core worker

☒ Non-core worker

### 1.9 Has the person being vetted previously been Police vetted by your agency?

☐ Yes

☐ No (skip to question 1.11)

1.10 Is the person being vetted still working in the role for which your agency last obtained a Police vet?

*If this request is a renewal of the person's previous vet for this role, please select Yes. Otherwise, answer no.*

☐ Yes

☐ No – the person being vetted is applying for a new role or position

1.11 What is the job title of the person being vetted?

Student

1.12 Evidence of identity (to be completed by agency representative or identity referee)

[See consent form guide for details on how to complete this section](#)

☐ A primary ID has been sighted (mandatory)

☐ A secondary ID has been sighted (mandatory)

☐ One form of ID is photographic (mandatory)

☐ Evidence of name change has been sighted (if applicable)

**OR:** *If your agency is able to accept a verified RealMe identity then:*

☐ An assertion of a RealMe identity has been received (see [consent form guide](#) for further information)

**In making this request, I confirm that:**

- ✓ I have complied and will comply with the [Approved Agency Agreement](#).
- ✓ I am satisfied as to the identity of the person being vetted.
- ✓ I have obtained the authorisation of the person being vetted to submit this vetting request as set out in section 3 of this form.

Agency Representative:

Name:	Sue Jackson	Date:	
Signature:		Electronic signature	<input type="checkbox"/>

## Section 2: Person being vetted to complete and return to agency

*\* Denotes a mandatory field*

### 2.1 Personal Information

*Note the name you are most commonly known by is your primary name*

* Family name (Primary)	
* First/Middle name(s)	
* Gender	
* Date of birth	
Place of birth (Town/ City/ State)	
* Country of birth	
NZ Driver Licence number	

### 2.2 Previous names if applicable

*Please include other alias or alternate names; married name if not your primary name; previous/ maiden/ name changed by deed poll or statutory declaration. Please include ALL names (first, middle and last) for each alias/previous name.*

Family name	First name	Middle names

### 2.3 Permanent residential address

* Flat/ Number/ Street			
* Suburb		Post Code	
* Town/ City			

## Section 3: Person being vetted to complete and return to agency

### 3.1 Consent to release information

1. The New Zealand Police may release **any** information they hold if relevant to the purpose of this vetting request. This includes:
  - a. Conviction histories and infringement/demerit reports.
  - b. Active investigations, charges and warrants to arrest.
  - c. Charges that did not result in a conviction including those that were acquitted (not guilty), discharged without conviction or withdrawn.
  - d. **Any** interaction I have had with New Zealand Police relevant to the role being vetted, including investigations that did not result in prosecution or were resolved by an alternative resolution programme.
  - e. Information regarding family violence where I was the victim, offender or witness to an incident or offence. This is particularly relevant where the role being vetted for takes place in a home environment where exposure to physical or verbal violence could place vulnerable persons at emotional or physical risk.
  - f. Information subject to name suppression where that information is necessary for the purpose of the vet.
2. If I am eligible under the Criminal Records (Clean Slate) Act 2004, my conviction history will not be released **unless**:
  - a. Section 19(3) of the Clean Slate Act applies to this request (exceptions to the clean slate regime).
  - b. Section 31(3) of the Children's Act 2014 applies to this request (safety checks of core children's workers).
  - c. The vetting request is made for the purpose of an overseas visa/work permit and authorises the vetting report to be provided directly to the relevant embassy, high commission, or consulate.

Please see the [vetting website](#) for more information regarding the Clean Slate legislation and what may be released.

3. The Police Vetting Service may disclose newly obtained relevant information to the requesting agency after the completion of the Police vet in the following circumstances:
  - a. The disclosure of the newly obtained information is justified under the Privacy Act 2020 (if it had existed or been available at the time of the Police vet, it would have been disclosed); and
  - b. The Police Vetting Service has taken steps to confirm that the purpose for the Police vet still exists – e.g., that I am employed or engaged in a role that required a Police vet.

The Police Vetting Service will take reasonable steps to notify you prior to the disclosure.

4. Information provided in this consent form may be used to update New Zealand Police records.
5. I am entitled to a copy of the vetting report released to the agency (to be provided by the agency) and can request a correction of any personal information by contacting the Police Vetting Service.
6. Please notify the agency or the Police Vetting Service if you wish to withdraw your consent.

For further information about the vetting process, please see the [vetting website](#).

#### Authorisation of person being vetted:

- ✓ I confirm that the information I have provided in this form relates to me and is correct.
- ✓ I have read and understood the information above.
- ✓ I authorise New Zealand Police to disclose any personal information relevant to my application (as described above) to the agency making this request for the purpose of assessing my suitability.

Name:		Date:	
Signature:		Electronic signature	<input type="checkbox"/>

## Section 4: Applicant to complete for Australian check (if required)

\* Denotes a mandatory field

### Additional Personal Information (for Australian National Police History Check)

#### Last Permanent Australian Residential Address

*Flat/Number/Street:			
*Suburb:		*Post Code:	
*City/Town/Rural District:		*State or Territory:	
*Period of Residence Start date		*Period of Residence End date	
Australian Driver's Licence No: (if applicable)		Issued by:	
Australian Firearms Licence No: (if applicable)		Issued by:	

### General Information for an Australian National Police History Check

#### General Information

Australian Criminal Intelligence Commission (ACIC) is collecting your personal information in this form in order to conduct a National Police History Check (NPHC) on you. Approved Agencies in New Zealand, named in section one, use the personal information collected on this form and the resulting NPHC as part of the assessment process to determine suitability for the position/entitlement/benefit which you are applying for.

Unless statutory obligations require otherwise, the information provided on this form will not be used without your prior consent for any purpose other than in relation to the assessment of your suitability or to maintain the records of ACIC, Australian Police Agencies<sup>1</sup>, or NZ Police.

You will be required to complete another consent form for any future NPHC checks.

#### National Police History Check (NPHC)

A NPHC is an integral part of the assessment of your suitability. Information on this form will be used by ACIC, and Australian Police Agencies for checking action; it will also be used to update records held about you by ACIC, Australian Police Agencies and NZ Police.

Information released may include outstanding charges, warrant information and criminal convictions/findings/pleas of guilt recorded against you that may be disclosed according to the laws of the relevant jurisdiction and, in the absence of any laws governing the release of that information, according to the relevant jurisdiction information release policy.

#### Limitations on accuracy and use of Police History Information

While every care has been taken by ACIC to conduct a search of information held by Australian Police Agencies that relate to the applicant, the accuracy and quality of this NPHC depends on accurate identification of the Applicant (including aliases) according to the information provided in the Request and Consent Form and the comprehensiveness of police records. If the applicant does not complete the information requirements in this form the success and validity of the NPHC will be compromised.

<sup>1</sup> Australian Federal Police, ACT Policing, The New South Wales Police Force, Queensland Police Service, South Australia Police, Victoria Police, Western Australia Police, Northern Territory Police Force, Tasmania Police Service

## General Information for an Australian National Police History Check

If for any reason you do not agree with the results of your NPHC, please notify the Approved Agency that you submitted the check through in the first instance, so that the NPHC dispute process can be initiated.

The release of information by Australian Police Agencies is subject to relevant Spent Convictions, non-disclosure legislation or information release policies.

### Spent Conviction Schemes

The aim of Spent Convictions legislation<sup>1</sup> is to prevent discrimination based on certain previous convictions. Spent Convictions legislation limits the use and disclosure of older, less serious convictions and findings of guilt. Each Australian Police Agency will apply the relevant Spent Convictions legislation/information release policy prior to disclosure.

The following links may be helpful in sourcing information on Spent Convictions in the Australian States & Territories but may not be relied upon. If further information or clarification is required, please contact the individual Australian Police Agencies directly for further information about their release policies and any legislation that affects them.

<b>Commonwealth</b> <a href="http://www.comlaw.gov.au">www.comlaw.gov.au</a>	<b>South Australia</b> <a href="http://www.legislation.sa.gov.au">www.legislation.sa.gov.au</a>	<b>Western Australia</b> <a href="http://www.slp.wa.gov.au">www.slp.wa.gov.au</a>
<b>New South Wales</b> <a href="http://www.legislation.nsw.gov.au">www.legislation.nsw.gov.au</a>	<b>Victoria Police</b> <a href="http://www.police.vic.gov.au">www.police.vic.gov.au</a>	<b>Northern Territory</b> <a href="http://www.nt.gov.au/dcm/legislation/current.html">www.nt.gov.au/dcm/legislation/current.html</a>
<b>Queensland</b> <a href="http://www.legislation.qld.gov.au">www.legislation.qld.gov.au</a>	<b>Tasmania</b> <a href="http://www.thelaw.tas.gov.au">www.thelaw.tas.gov.au</a>	<b>Australian Capital Territory</b> <a href="http://www.legislation.act.gov.au">www.legislation.act.gov.au</a>

### Provision of incomplete, false, or misleading information

An Approved Agency or Applicant must take reasonable steps to ensure that the personal information collected, or disclosed is accurate, complete, and up to date.

You are asked to certify that the personal information you have provided on this form is correct. If it is subsequently discovered, for example as a result of a check of police records, that you have provided incomplete, false or misleading information, you may be assessed as unsuitable.

It is a serious offence to provide false or misleading information in Australia.

<sup>1</sup> Applicable Spent Conviction legislation, as amended from time to time.



## Consent to disclosure (for Australian National Police History Check)

1. I have read the General Information in section 3 of this form and understand that information will be disclosed in accordance with applicable legislation and information release policies (including spent convictions legislation, however described) in the Commonwealth, States and Territories.
2. I understand that the position/entitlement for which I am being considered may be in a category for which exclusions from Spent Convictions legislation may apply.
3. I have fully completed this form, and the personal information I have provided in it relates to me, contains my full name and all names previously used by me, and is correct.
4. I acknowledge that the provision of false or misleading information is a serious offence.
5. I acknowledge that the Approved Agency named in Section 1 of this form is collecting information in this Form to provide to New Zealand Police to provide to ACIC (an Agency of the Commonwealth of Australia) and the Australian Police Agencies.
6. **I consent to:**
  - a. ACIC using and disclosing personal information about me in this form to the Australian Police Agencies.
  - b. the Australian Police Agencies disclosing to ACIC, from their records, Police History information that can be disclosed in accordance with the laws of the Commonwealth, States and Territories and in accordance with the relevant jurisdiction's information release policies.
  - c. ACIC disclosing the information disclosed by the Australian Police Agencies to New Zealand Police.
  - d. New Zealand Police disclosing any criminal history information about me to the Approved Agency named in Section 1 of this form to assess my suitability in relation to my application.
7. I acknowledge that any information provided by me in this form relates specifically to the purpose identified in Section 1 of this form.
8. I acknowledge that any information provided by the Australian Police Agencies or ACIC relates specifically to the purpose identified in Section 1 above.
9. I acknowledge that personal information that I provide in this form may be disclosed to the Approved Agency named in Section 1 of this form (including contractors or related bodies corporate) located in New Zealand or overseas.
10. I acknowledge that it is usual practice for an Applicant's personal information in this form to be disclosed to New Zealand Police and Australian Police Agencies for them to use for their respective law enforcement purposes including the investigation of any outstanding criminal offences.

Note: The information provided in this form will be used only for the purpose stated above unless statutory obligations require otherwise.

### **Applicant's Authorisation:**

☐ I have read and understood the information above and consent accordingly.

☐ ***Signed in electronic form.***

Or Signature: \_\_\_\_\_

Date: \_\_\_\_\_