

# New Zealand Otology Nursing Knowledge & Skills Framework

2022



*Aroha Ana Taringa Tātou*  
*(We love ears)*

## **OUR PHILOSOPHY**

*It is our belief that all people have the right to quality individual health care across the continuum, respecting cultural identity, values, customs, traditions, sexuality, and spirituality.*

*Otology nurses work in collaboration and consultation with patients and their families. Other identified groups enabling specialized ear care with optimal health outcomes are nursing colleagues, medical staff, and allied health teams.*

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## *Foreword*

## *Acknowledgements*

The development of the New Zealand Otolaryngology Nursing Knowledge and Skills Framework has been supported by the New Zealand Nurses Organisation, (NZNO); The New Zealand Society of Otorhinolaryngologists, Head and Neck Surgery Incorporated (NZSOHNS); support from Dr Kathy Holloway, Director, Victoria University of Wellington, school of nursing, Midwifery, and Health practice. The working group acknowledges affiliate members of the Ear Nurse Specialist Group Aotearoa/ New Zealand who have provided valuable input and support for the lengthy process over many years.

## *Background*

In the late 1980's the need was identified to establish a specialised otology nursing group for collegial support, networking and education in the speciality of otology. This was supported by the NZ Otorhinolaryngology (ORL) Society. In the early 1990's the "Ear Nurse Specialist Group" (ENSG) was formally established and the main aim at that time was to achieve excellence in practice and disseminate knowledge and skill in otology for nurses who were predominantly working in a Mobile Ear clinic situation. The 1993 Competency Standards for the New Zealand Ear Nurse (National Working Party, 1993) first defined Otology nursing as a specialised area of nursing practice in New Zealand. A formal Constitution was developed and revised in 1999.

At the 2004 ENSG Annual General Meeting the 1999 National Standards were revised to comply with Nursing Council of New Zealand Standards and Guidelines. This was completed in 2006. Identified at this time was the need to have training of "skilled otology nurses for the future" with a formalised process developed to enable this training requirement. Identifying a formal training strategy led the ENSG to highlight the importance of progressing work on specialty competencies for otology nursing to enable the development of a skilled workforce.

In 2012, an advisory committee was formed to draw up a professional development framework for otology nursing in New Zealand. A need was identified for prospective specialist nurses to be trained and included in ORL outpatient departments based in public hospitals. This training gave a good educational grounding with the aim of offering autonomous nurse led clinics. Later ACC and Veterans Affairs recognised the importance of the role with provider guidelines developed, and treatment for this group of people was able to be provided by qualified otology nurses. The establishment of endorsement criteria and processes by the National Nursing Consortium in February 2009 provided the platform upon which to develop the current framework.

## *Ear Nurse Specialist Group Aotearoa/New Zealand Incorporated*

The ENSG became an incorporated society in 2008 and currently has over 150 members. The executive committee provides professional leadership to its members. The purpose of the ENSG is to achieve excellence in practice and disseminate knowledge and skills in otology for nurses working in the specialty regardless of the seniority of the nurse providing the service. This can be achieved through the provision of a recognised education and training programme. The primary focus is the establishment of national standards of practice and a professional development model for otology nursing practice in New Zealand. Access and membership to national and international annual conferences (NZ-ORL Society, Australian Head and Neck Nurses Society) provides additional support, up-to-date learning and collaborative information sharing.

## *Development Process*

A review of the original 1993 Standards of Practice took place in 1999, with the addition of an accreditation process. This was completed by the ENSG working committee and Training Coordinator and provided certification for a level of practice process ensuring consistent standards of otology practice for those nurses employed in the role in New Zealand. At that time there was no ability to have formal recognition of this training. In 2004 the 1999 Standards of Practice Document was revised to comply with NCNZ standards and guidelines, completed, and was formally accepted by members of the ENSG in 2006.

The formation of a Knowledge and Skills Framework (KSF) Nursing Advisory Group in 2012, led to consultation with professional otology nurses from public hospitals and private otology care services.

The New Zealand Otology Nursing KSF was developed to outline the knowledge and skills related to Registered Nurse's caring for patients with commonly experienced ear conditions amongst child and adult populations. These conditions include treating and managing acute and chronic otitis externa, acute and chronic otitis media, acute mastoiditis, cellulitis of the ear, and recognising signs of sudden hearing loss, assisting patients managing existing conductive and sensorineural hearing loss.

Some nurses at proficient level would be able to detect and manage ear related malignancies, recognise signs of vertigo, and inner ear conditions that should be referred on to secondary care.

(See Definition of Terms, Page11)

This framework was underpinned by Dr Kathy Holloway's model for development of a specialist nursing framework (Holloway, et al., 2009).

## *Development team*

At the 2017 Annual General Meeting a sub- committee was formed from representatives of the ENSG Aotearoa/New Zealand Society Inc

- Margaret Hunt -CNS (Clinical Nurse Specialist)
- Margaret Couillault - CNS
- Jeannie Bruning - CNS
- Theresa Leslie - CNS
- Pip Mitchell – CNS
- Susan Blanchard – Ear Nurse Specialist ENS (Ear Nurse Specialist)
- Linda Akers - ENS
- Jing Feng - ENS (co-opted 2019)

Consultation with members was completed and feedback received and considered (Appendix 2).

## *Future review and development*

The New Zealand Otology Nursing KSF will be reviewed three years after its endorsement in line with the process of recognition as a specialty.

## Introduction

Oto-Rhino-Laryngology is a surgical subspecialty within medicine which deals with the surgical and medical management of the head and neck. Otolaryngology is one specific specialisation in this field of expertise which focuses on the pathophysiology of the ear. There is both a demand and a need for the nursing specialty of otology in the community. Timely aural care can optimise positive outcomes for ear conditions and decrease symptoms that may otherwise hinder daily life. The goal for the nursing management of these patients with aural disorders is to assess, diagnose, treat, and have the skills and education to practice within their scope of practice to enable positive outcomes and know when to refer on for further care. Many adults and children with aural issues will be cared for in Primary Care/After Hours clinics, Emergency Departments, and private nurse led ear clinics, with others referred to secondary care for further assessment and treatment.

To explain, Otolaryngology speciality nursing has developed to become a recognised and valuable specialty in both the primary and secondary healthcare settings. Developed skills, strategy framework and a collaborative approach with other medical professionals will help ensure all patients are provided with the best possible clinical reasoning processes to manage complex conditions using specialist knowledge and experience in aural care (Royal College of Nursing, 2018). Early detection and management of ear disease can and does improve patient outcomes and quality of life.

Standards for New Zealand Otolaryngology nursing practice were first defined in 1993. With the increase in childhood hearing loss and associated ear disease in the 70's, the need was identified by the Ministry of Health, for registered nurses to be trained in early identification and treatment of chronic ear disease and to manage clinical community based mobile ear clinics (Durie, 1989). With the hospital outpatient ORL clinic referral numbers high, a need was then identified for public hospital outpatient clinics to train and run specialist nurse led clinics to enable ORL Consultants to focus on more serious conditions. As a result, there are well established CNS positions in many New Zealand public hospitals, with a growing demand for the specialty.

There are many otology nurses working in autonomous nurse-led clinics throughout New Zealand. At the time of writing the following Outpatient Departments in public hospitals employ these specialised registered nurses in Northland, Auckland, Counties Manukau, Waitemata, Bay of Plenty, Waikato, Lakes, Hawkes Bay, Tairāwhiti, Wellington, Nelson, Christchurch, and Dunedin. These clinics work in collaboration with the ORL specialists and ORL Registrars to optimise patient care. There were also many nurses employed by public hospital community services in Mobile Ear Clinic units across New Zealand (community child health services) in Northland, Auckland, Tauranga, Rotorua, Waikato, Wellington, and Gisborne. Additional to this, there are many privately owned, nurse managed clinics and demand for these clinics is growing.

Originally, there was limited teaching and learning for the speciality of Otolaryngology (Aural Care) nursing. A literature search conducted in November 2018 using the term "otology nurse" "ear nurse" "hearing nurse" separately as keywords, identified books and journals pertaining to otology for nurses. Databases searched included PubMed, Medline, and Index NZ. Otolaryngology nursing is a common and frequently practiced skill in both primary and secondary healthcare settings. This nursing specialty can and does reduce the burden on both the public and private sector. Otolaryngology specialist nurses in all settings must be able to demonstrate relevant knowledge, competence in practice, skill, and experience in the provision of aural care (Whiteford, 2015). To enable good and safe practice for independent otology it is essential

these specialised nurses get recognition of knowledge and skills for this specialty. Specialty nursing practice is based on a core body of nursing knowledge which is being continually expanded and refined. Otology nursing specialisation has evolved to ensure patients with ear disease and its sequelae are provided with the best outcomes (Bonner, 2003).

Specialty expertise is gained through various combinations of experience, formal and informal education (Holloway, 2011). With more demand in this specialty the need for a recognised formal training programme was identified to ensure standards of practice and patient safety are upheld. A nursing framework in otology will assist with developing the required skills and competency to enable the management of aural conditions. Aural Care (Otology) nursing is now a frequently practised skillset in both primary and secondary health care settings (Whiteford, 2015). This practice provides ongoing management of chronic conditions, can prevent hospital admissions, defer referrals with acute exacerbations of chronic conditions in secondary healthcare and free up the ORL consultants to see more acute cases and assess/treat many other acute head and neck conditions.

The ENSG Aotearoa/New Zealand Society Inc. provided such a programme successfully for over 10 years using its most experienced nurse specialists. However, this was never recognised by a formal education provider. There was great support and understanding from Waitemata (North Shore Hospital) Director of Nursing, ORL Outpatient Department and input from the Public Health Community services team. Notably a large percentage of nurses working in the field of Otology did not hold any postgraduate qualification or specialised training formal acknowledgement, hence the identified need for a Knowledge and Skills Framework (KSF) with associated training and qualification guidelines.

This document aims to provide a framework for all nurses who provide appropriate ear treatment/care within the whole population. The Otology KSF acknowledges the diversity of culture in the NZ, with morbidity, and hospitalisation higher for Māori and Pacific people than for non-Māori and Pacific (Styen et al, 2021). The Otology KSF is underpinned by Nursing Council of New Zealand Standards of practice and domains of competence for the RN scope of practice and is linked to appropriate national guidelines (NCNZ, 2022).

The KSF has been developed to assist nurses, employers, and education providers to determine the right skill and knowledge level required by nurses working in the field of Otology. The framework will support and promote best practice for a national training course, national guidelines, and standards of practice. The Open Polytechnic (Te Pukenga) is developing an online otology training course in collaboration with members of the ENSG (subcommittee) and ongoing support from ORL Doctors. This program will become an integral part of the Otology Nursing KSF. The KSF does not replace PDRP programs and should be used as a tool to help the nurse articulate how competencies are being met when preparing their portfolio. It is intended that the Otology Nursing KSF will become an ORL core competency for otology nurses and serve as complimentary to NCNZ competencies.

## Otology Nursing Levels of Practice

### *Competent*

#### **Te Kakano - the seed**

This level of practice is suitable for all RNs who care for people with ear conditions regardless of their practice settings, e.g. practice nurses, general nurses, ED nurses. This level outlines the knowledge and skill that every nurse who encounters someone who needs an ear assessment – beginning level in ear care journey – has basic otoscopy skills and knowledge, and is safe and competent to perform specific activities in their prescribed area of practice, refer to other health professionals as appropriate, and knows where ear nursing fits in the NZ Health Care system.

### *Proficient*

#### **Ti Tipu - young sprout**

This level is about growing from “seed to seedling”. Describes registered nurses who choose to become specialists building on essential skills to further develop practice – primarily provide routine, noncomplex ear care for people with Otological needs. At this level nurses have a wider range of knowledge of ear conditions, are competent with oto-microscopy diagnosis and treatment, with an understanding of how to expand their knowledge and skill. Defined as Ear Nurses – in addition to relevant clinical practice, provision of initial Otological training, these nurses will progress academically to obtain Post Graduate education in the speciality.

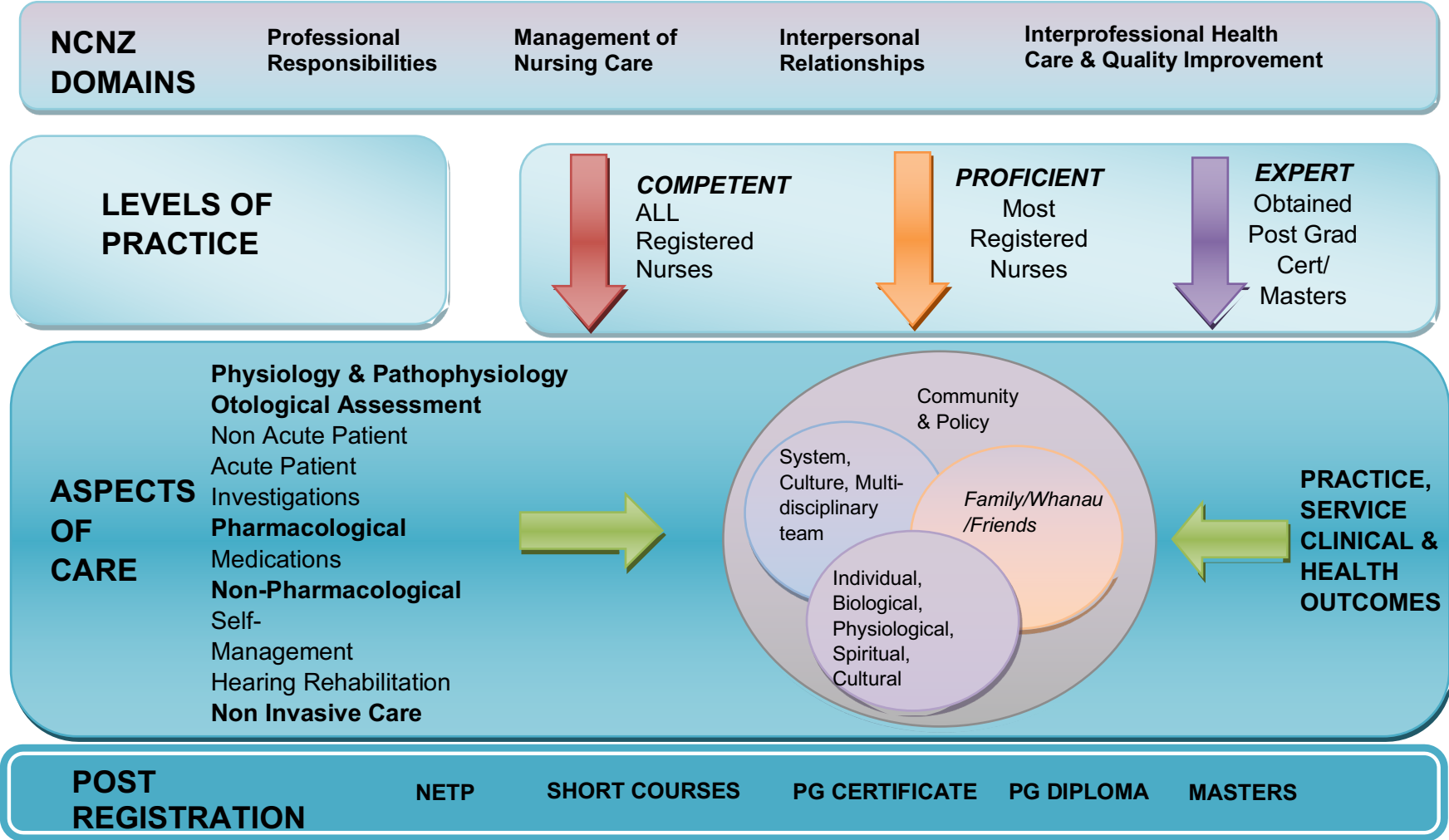
### *Expert*

#### **Te Puawai - the blossom**

At this level the nurse fully blossoms into the Nurse Specialist clinical role. Nurses at this level demonstrate advanced knowledge, skills and leadership applied through experience and post-graduate study. They perform a comprehensive range of activities expertly with a high degree of autonomy, providing complex, specialised Otological care. They demonstrate advanced knowledge, clinical adaptability, leadership, and mentorship. They practise both independently and in collaboration with other health care professionals to promote health, prevent disease, diagnose, assess, and manage people’s health needs. They are experts in otology care, oto-microscopy and instrumentation, therefore able to manage more comprehensive ear disease with a high degree of autonomy. Defined as Nurse Specialists these nurses will progress academically through Post Graduate Diploma and Masters qualifications.

At each level these Nurses meet the NCNZ Domains of practice (figure 1).

Figure 1: Interprofessional Health Care and Quality Improvement Diagram





### *What are the Benefits of the Otology Nursing KSF?*

The *NZ Otology Nursing Skills and Knowledge Framework* describes the knowledge and skill required by nurses to practice in a specialty otology role.

It will benefit otology patients, nurses, and health providers by:

- Assisting with identifying and developing a range of clinical skills.
- Informing best practice guidelines for optimal patient outcomes, reducing risk by establishing a minimum standard of nursing care.
- Providing guidance and clarification of the otology nursing role to administrators, consumers, and other health care professionals.
- Supporting personal development and career progression for nurses progressing to advanced practice roles.
- Providing a framework and reference points for otology nursing training programs with clinical preparation in the practice setting.
- Providing a mechanism for nurses to measure health outcomes and effectiveness of practice.
- Providing a tool to be used in the development of career pathways, job descriptions and appraisals and Nursing Council NZ requirements for ongoing registration and continuing competency.
- Informing curriculum development for undergraduate and post graduate registered nursing programs.
- Providing a platform for nurse-led otology care.

### *How to Use the Otology KSF*

The following section has suggestions on how to get the most benefit from the otology KSF, the nurse must demonstrate or provide evidence that their experiences, and knowledge and skills meet the identified level within the Otology KSF.

- Start at the competent section before moving on to proficient and expert knowledge and skills as appropriate.
- Complete self-assessment to ascertain current knowledge and skill level and identify areas for development.
- Meet with your clinical supervisor or mentor and determine the definitions of terms applicable to your practice.
- Identify the types of evidence required for each Aspect of Care. This will be varied and may include direct observation; case reviews; providing education sessions; post graduate papers; evidence of self-directed learning and demonstrating skills/knowledge learnt.
- Develop a plan for your professional development relevant to your workplace and the skills required. Identify barriers and discuss these with your clinical supervisor or mentor.
- Develop a timeframe to achieve the required knowledge and skills in relation to your plan.

## Criteria for Clinical Competency Evaluation Self-Assessment Score

Self-assessment should be undertaken for each competency, using the following assessment rating system:

### Assessment Ratings

NA = Not applicable. The knowledge and skills within this aspect of care DO NOT apply to me in my current nursing practice.

DEV = Developmental. The knowledge and skill need to be developed because I am NEW to this area of the speciality, or because I may wish to change or expand my professional role and responsibilities, or because I need to improve my knowledge, skills, attitudes and critical judgements.

COM = Competent. I have the knowledge, skills, attitudes, and critical judgments to adequately meet all the requirements. I function independently, providing high quality nursing health services and patient/client care.

MET: RTE = Requirement to Enhance. Even though I am already competent, I would like to/need to further enhance my knowledge, skills, attitudes and critical judgements in this knowledge and skill to become excellent.

EXC = Excellent. I excel and have more than basic knowledge, skills, attitudes and critical judgments related to this area of knowledge and skill. I would be confident to mentor other nurses and nursing students in this knowledge and skill.

(Sourced from: [learning.nurse.com](http://learning.nurse.com))

### Criteria for Clinical Competency Evaluation

#### Who Can Assess the Nurse?

Assessment is part of the teaching and learning process, designed to assist the nurse to evaluate their own progress, facilitate feedback, assist with the identification of learning needs, and establish that the nurse has achieved the required knowledge and skills.

Therefore, it is recommended that the assessor evaluating the nurse against each competency is a Registered Nurse/CNS who has achieved expert level on the NZ Otology Nursing KSF along with recognition as an assessor having completed a recognised assessor's course.

## Definitions of Terms (These definitions are a guide for knowledge and skills in Otology nursing. Select those relevant to your area of practice)

### Ear Anatomy and Physiology

- Understands normal
- External, Middle, Inner Ear
- Ceruminous glands
- Tympanic membrane
- Blood Supply
- Innervation
- Eustachian tube
- Naso-Pharynx
- Chorda Tympani
- Ossicles
- Tensor tympani/Stapedial Reflexes
- Temporal Bone
- Mastoid air Cells
- Cochlea
- Semi-circular canals
- Lymphatics

### Core Otological Conditions

- Otitis Externa
- Occlusive Earwax
- Congenital conditions
- Neoplastic
- Trauma
- Otitis Media
- Eustachian Tube Dysfunction
- Rhinitis
- Allergy
- Otosclerosis
- Hearing Loss
- Vertigo
- Tinnitus

### Other Otological Conditions

- Anotia/Microtia
- Macrotia
- External Auditory Canal Stenosis
- Meatal atresia/stenosis
- Blunt, sharp, chemical, thermal, ultraviolet (UV) radiation
- Foreign Bodies
- Furuncle
- Mastoiditis
- Tonsillitis
- Enlarged Adenoids
- Perichondritis
- Keratosis Obturans
- Impetigo, Herpes Zoster/Ramsay Hunt Syndrome
- Exostoses/osteoma
- Adenoma/papilloma
- Squamous Cell / Basal Cell, and Adenocarcinoma
- Melanoma
- Gouty tophi
- Cholesteatoma (congenital/inflammatory)
- Tympanic Membrane Perforation
- Granular / Bullous Myringitis
- Ossicular dislocation
- Barotrauma
- Temporal bone fractures
- Meningioma
- Glomus Tumour
- Labyrinthitis
- Perinatal labyrinth damage/anoxia
- Presbycusis
- Preauricular Sinus
- Meniere's Disease
- Vasculitis/polyarteritis nodosa. Wegener's granulomatosis
- Round/oval window rupture
- Drug ototoxicity

### Relevant Co-Morbidities

- Depression
- Social Isolation
- Cardiovascular disease
- Diabetes mellitus
- Immunocompromised
- HIV
- Dementia
- Hearing Loss/Cognitive decline
- Speech recognition
- Anaemia
- Hypertension/Stress
- Parkinson's Disease
- Cystic Fibrosis
- Renal Disease
- Obesity
- Sleep Apnoea
- Down syndrome
- Pierre Robin syndrome
- Treacher-Collins syndrome
- Thyroid Diseases
- Vascular disorders
- Chemotherapy

### Health History

- Symptom history
- Deafness/ hearing protection
- Ear discharge, Pain, Itching, Tinnitus, Vertigo
- Surgical history
- Familial ear/hearing history
- Social aspects
- Lifestyle
- Immunisation history
- Anti-coagulants
- Systemic diseases
- Cognitive factors/psychosocial
- Functional capacity
- Medications and allergies/atopy
- Occupational history – noise exposure
- Smoking status
- Diabetes Mellitus
- Anticoagulant treatment
- Breastfed (child)
- Pregnancy History (child)
- 
-

- Surgical trauma
- Benign Paroxysmal positional vertigo/BPPV)

### Physical Assessment

- External ear inspection
- Otoscopy/Microscopy  
Inspection ear canal.
- Tympanic membrane
- Observe for rhinitis/mouth breathing
- Tuning fork testing/Weber/Rinne
- Hearing Evaluation  
Tympanometry/Audiometry (if necessary)

### Otological Medications

- Topical medications
- Systemic medications/analgesia
- Astringents
- Anti-inflammatories/antibiotics

### Other Medications

- Antibiotics
- Anti-inflammatory
- Antiviral agents
- Antihistamines
- Vaccines
- Vestibular Sedatives
- Vasodilator drugs

### Over the Counter Complementary Medications

- Antihistamines
- Analgesia
- Nasal Spray
- Non-steroidal anti-inflammatories
- Topical ear drops (saline, olive oil, almond oil, Hydrogen Peroxide 3% based solutions, acidic based solutions)
- Topical external ointments

### Common Diagnostic Tests

- Audiometry/inner ear function
- Tympanometry/middle ear function
- Speech discrimination

### Other Diagnostic Tests

- Brainstem-evoked response
- Electrocochleography
- Cortical-evoked response
- Otoacoustic emissions
- Stapedial reflexes
- Computerised Tomography (CT)
- Magnetic Imaging Resonance (MRI)

### Assessment Tools

- Allergy testing
- Otoscope exam
- Oto-microscope
- Audiology testing
- Depression assessment
- Cognitive assessment

### Evidence Based Guidelines

- Otitis Media
- Otitis Externa
- Tympanometry
- Audiology/Hearing Loss
- Advanced Care Planning
- Smoking Cessation
- Surgical Intervention
- Immunisation

## The framework as a tool for assessment using PDRP

### Competent (All Nurses)

Objective	Knowledge/Skill (NCNZ Domain)	Date Met	Signature/Comments
Physiology and Pathophysiology	<ul style="list-style-type: none"> <li>- Demonstrate the knowledge of the anatomy and pathophysiology of the outer ear, middle ear, and the inner ear.</li> <li>- Demonstrate basic understand of core Otological conditions, including the common causes of the disease, associated signs and symptoms, as well as safe treatment plan(s).</li> </ul>		
Clinical assessment of the stable and acute ear conditions, including investigations	<ul style="list-style-type: none"> <li>- Demonstrate an awareness of Evidence Based Guidelines for core Otological Conditions. .</li> <li>- Undertake a Comprehensive health history using an appropriate nursing assessment framework and identify risk factors associated with those conditions.</li> <li>- Demonstrate the ability to undertake a comprehensive ear assessment and the knowledge of potential causes of abnormal findings.</li> <li>- Demonstrate appropriate nursing intervention and prescribed treatment for the patient with acute ear conditions including pain management options.</li> <li>- Demonstrate awareness of patients' individual needs, including co-morbidities, cognitive and developmental requirement, and cultural affiliation.</li> <li>- Consult with wider health team when appropriate to achieve optimized individualized care plan.</li> <li>- Demonstrate knowledge of Māori models of health or others as appropriate.</li> <li>- Assess the knowledge base, health literacy and self-management capabilities of the client/whanau/family regarding their condition, perspective of diagnosis, and signs and symptoms as part of a Comprehensive health history</li> </ul>		

	<ul style="list-style-type: none"> <li>- Discuss management options for environmental factors affecting ear conditions</li> <li>- Discuss the role of otoscope/microscope/audiometry in ear assessment, diagnosis, and health monitoring.</li> <li>- Describe referral process and aware self-limitations.</li> <li>- Demonstrate an understanding of the relationship between core otological conditions and hearing loss.</li> <li>- If tympanometry or audiometry is part of the practice setting, discuss with an Audiologist for annual update of practice.</li> </ul>		
Pharmacological Management	<ul style="list-style-type: none"> <li>- Describe topical and oral medications and their intended effects, clinical indications, side effects</li> <li>- Demonstrate the ability to teach, assess, and review a patient using topical ear medications.<sup>1</sup></li> <li>- Understand the clinical signs and symptoms of medication allergy.</li> <li>- Demonstrate the ability to assess the response to medications and treatment outcome.</li> <li>- Understanding of Standing Orders where necessary and appropriate to the nurse's practice (<u>Standing Order Guidelines (2nd edition) - Ministry of Health</u>)</li> <li>- Registered Nurse Prescribing; operating at Specialist level with skills augmented by specific prescribing education and experience (as determined by NZNO)</li> </ul>		
Health promotion	<ul style="list-style-type: none"> <li>- Demonstrate an awareness of the importance of education and individual self- management for a patient with an Otological Condition.</li> <li>- Provide information on ear health when appropriate.</li> <li>- Understand relationship between smoking behaviour and middle ear disease and the beneficial effects of cessation.</li> </ul>		

	<ul style="list-style-type: none"> <li>- Discuss prevalence of conductive hearing loss and middle ear disease from second-hand smoke exposure to children including Māori and Pacific people.</li> <li>- Discuss importance of healthy mucous clearing from nasal cavities and valsalva technique for middle ear aeration.</li> <li>- Discuss the indications and contra-indications for childhood vaccinations, Adult annual influenza vaccination, with Core Otological Conditions.</li> </ul>		
Non-pharmacological Management	<ul style="list-style-type: none"> <li>- Demonstrate knowledge of non-pharmacological medications and strategies to assist the patient with <i>Core Otological Conditions</i> to manage excessive earwax/ impaction, infection, and related symptoms<sup>1</sup></li> <li>- Aware of alternative options and able to refer patient when required.</li> </ul>		

<b>Proficient (some nurses)</b> <b>Objective</b>	<b>Demonstrates</b>	<b>Date Met</b>	<b>Signature/Comments</b>
<b>Aspect of care:</b> Physiology and pathophysiology <ul style="list-style-type: none"> <li>• To demonstrate knowledge of pathophysiology relating to ear disease</li> </ul>	<ul style="list-style-type: none"> <li>• in depth knowledge of pathophysiology relating to acute and chronic disorders</li> <li>• knowledge and understanding of anatomy and physiology of normal ear, nose, and throat</li> </ul>		
<b>Aspect of care:</b> The patient will receive appropriate care and information relating to their ear condition  To demonstrate clinical assessment of patient to assess and determine risk status and health needs  <b>Patient Outcome:</b> The patient will receive appropriate assessment to enable diagnosis	<ul style="list-style-type: none"> <li>• Ability to take a focused health history – nurse led assessment and diagnoses and treatment of simple and intermediate ear conditions and able to consider long term management of chronic conditions</li> <li>• Ability to undertake a physical assessment identifying normal and abnormal findings</li> <li>• knowledge of more complex ear conditions and understands other ear investigations (e.g., audiogram and microbiology) and how they are undertaken</li> <li>• documentation shows an accurate comprehensive assessment of the adult/child ear</li> </ul>		



Objective	Demonstrates	Date Met	Comments
<p><b>Aspect of care:</b> Management and Care of Acute and Non-Acute patient</p> <p>To provide appropriate assessment, management, treatment, and review</p> <p><b>Patient outcome:</b> Patient will receive appropriate assessment, care, treatment, and review when presenting acutely or non-acutely</p>	<ul style="list-style-type: none"> <li>• Ability to access and utilise local, regional, national, and international guidelines relating to Ear conditions and treatments</li> <li>• Uses protocols and guidelines and understands the use of a range of ear treatments</li> <li>• Records a clear plan according to diagnosis/records show relevant investigations implemented in conjunction with other otology professionals</li> <li>• Ability/skills to write a comprehensive letter to other health providers</li> <li>• Have knowledge of appropriate referral pathways (Pharmacological and non-pharmacological)</li> </ul>		

*Expert (few nurses)*

Objective	Demonstrates	Date Met	Signature/Comments
<p><b>Aspect of care:</b></p> <p>Physiology and pathophysiology</p> <ul style="list-style-type: none"> <li>To demonstrate knowledge of pathophysiology relating to ear disease</li> </ul> <p><b>Patient outcome:</b></p> <p>The patient will receive appropriate care and information relating to their ear condition</p>	<ul style="list-style-type: none"> <li>in-depth knowledge and comprehensive understanding of the anatomy, physiology of ear nose and throat, pathophysiology of common ENT conditions plus more complex conditions, as evidenced by completion of post graduate papers</li> </ul>		
<p><b>Aspect of care:</b></p> <p>To demonstrate clinical assessment of patient to assess and determine risk status and health needs</p> <p><b>Patient Outcome:</b></p> <p>The patient will receive an applicable assessment to enable diagnosis</p>	<ul style="list-style-type: none"> <li>Complete a comprehensive, focused health history – ability to provide differential diagnosis and integrate any other existing conditions and relevant co-morbidities</li> <li>Undertakes independent, autonomous nurse led assessment/treatment clinics and can manage a full range of more serious disorders</li> <li>Competently and confidently assess ENT problem whilst recognising deviation from the normal, formulating diagnosis and treatment</li> </ul>		

## Deterioration in pre-existing ear condition

This table provides the knowledge required for each level of practice.

### Competent

- Recognises deterioration and implications for management of same
- Documents clearly, signs of deterioration - referral to ORL team - observes and promptly reports

### Proficient

- Instigates, investigates - treatment applicable to the nature of deterioration
- Adjusts treatment according to local protocols as relevant
- Documentation clearly records instigation of investigations and treatment according to local policies and protocols / evidence based
- Knowledge and understanding of adverse effect of bacteria, virus, fungus, medication, environmental and other triggers of ear conditions
- Understands relevant investigation and treatment regimes
- Understands side effects and complications with treatment
- Ensures appropriate action implemented and adheres to local protocols
- 

### Expert

- Provides advice for unusual/difficult cases/rare or multiple pathology
- Is recognised expert in the field of otology nursing and used as a resource to identify serious ear conditions
- In depth knowledge of all ear conditions and common ORL conditions
- Approachable, guides others / good communicator/ confident/ decisive/ instils confidence in others
- Self-aware – unhindered liaison with ORL Consultants

## Specialist Clinical Intervention

### Competent

- Applies topical medications correctly - as per script - records and documents
- Knowledge and understanding of role – monitoring effect of systemic treatments and who to contact for support/advice/ specialist
- Demonstrate proficient communication skills – ensures treatment applied correctly

### Proficient

- Assesses/adjusts treatment according to needs and protocols
- Documentation clearly shows adherence to local protocols
- Has knowledge of local protocols, systemic treatments
- Confident, observant, safe and knowledgeable

### Expert

- Assesses/adjusts local treatments/ or may be an independent non-medical prescriber – makes autonomous decisions before medical consultation
- Documentation clearly shows correct assessment of condition and resultant treatment regime / or adjustment
- Knowledge of systemic treatments to make informed clinical judgements
- Decisive, safe, timely, confident, and competent

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## Appendix 1 – Glossary of Terms and Abbreviations

ACC	Accident Compensation Corporation
CNS	Clinical Nurse Specialist: is an experienced Registered Nurse who works as a clinical expert in a specialised area of healthcare. A CNS utilises advanced nursing knowledge, evidence-based research and critical thinking to influence nursing practice and improve patient outcomes.
ED	Emergency Department
ENSG Inc	Ear Nurse Specialist Group Aotearoa/New Zealand Society
ENS	Ear Nurse Specialist: Nurses who have specialised in otology nursing, caring for patients with complex, unpredictable specialised otology care needs, provide excellent support to other members of the healthcare team in managing otology patients, lead otology nursing practice and service development
EN	Ear Nurse: Registered Nurses who work within an otology specialty practice setting, providing routine, non-complex care for patients with specialised Otological care needs
GP	General Practitioner
KSF	Knowledge and Skills Framework
NCNZ	Nursing Council of New Zealand
NZNO	New Zealand Nursing Organisation
NZCON	New Zealand College of Nurses
ORL	Otorhinolaryngology
PHO	Primary Health Organisation
RN	Registered nurse
PDRP	Professional Development and Recognition Programme

## Appendix Two: – Consultation and Feedback

In addition to input from members of the Ear Nurse Specialist Group Aotearoa/New Zealand Society Inc., consultation and feedback was sought from the following individuals and groups:

- New Zealand Audiology Society and its members
- Clinical Nurse Specialist Society Inc NZ
- Community services public hospital - Children services
- The New Zealand Society of Otolaryngology ORL Consultants nationwide
- Public ORL outpatient department nurses - nationwide
- Ear Nurse Specialist Group Aotearoa/New Zealand Society Incorporated
- Primary Health practice including General Practitioners and Practice Nurses - nationwide
- Hearing Association NZ
- Professor Kathy Holloway - Director of Graduate School of Nursing and Midwifery – Victoria University; co -chair College of Nurses; on Ministerial Advisory Group; and Nursing Council
- Māori and Pacific Health Organizations - nationwide
- Maureen Morris – Colorectal Nurse Specialist Whangarei Hospital, Chair of original KSF approval committee
- Open Polytech – Te Pukenga
- Ear Nurses in private practice including non ENSG members
- Nursing Council of New Zealand
- NZ Nurses Organization
- ORL Specialist nurses group NZ
- Otorhinolaryngology (ORL) Society NZ
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