

Hospital Play Specialists Registration Council

HOSPITAL PLAY SPECIALIST REGISTRATION HANDBOOK

(Version August 2023)

Registration enquiries: hpsreg@gmail.com



HPSRC is a standing committee of the Hospital Play Specialists Association of Aotearoa New Zealand.

Hospital Play Specialist Professional Registration

The Hospital Play Specialists Registration Council (HPSRC) is a standing committee of the Hospital Play Specialists Association of Aotearoa New Zealand (Inc.) The purpose of the HPSRC is to provide a registration programme for the hospital play specialist profession. Registration is a process by which a professional organisation or association grants recognition to an individual who has achieved competency.

Rationale:

Hospital Play Specialist Registration:

- Fosters consistency in standards of practice and ethical conduct.
- Enhances the status and credibility of the profession.
- Validates professional knowledge and provides a sense of professional pride and achievement.
- Provides assurance for the public that Hospital Play Specialists have achieved professional competency requirements for their profession and are maintaining their professional development.

Hospital play specialist renewal of Registration requires professionals who are considered to be competent to maintain current knowledge and standards in the field, as well as to demonstrate a commitment to continued professional growth.

Goals:

- To establish a process for recognition of hospital play specialists who have achieved professional competencies.
- To provide a mechanism, through renewal of Registration, that holds individual registered hospital play specialists responsible for ethical conduct and continued professional growth and development.

Standards:

Eligibility requirements, and requirements for Registration and renewal of Registration, are established by the HPSRC and approved by the Hospital Play Specialists Association Executive Committee. These requirements are reviewed on an ongoing basis and revised as necessary. Members of the Hospital Play Specialists Association of Aotearoa New Zealand will be advised of any changes well in advance of their implementation.

Categories of Registration:

There are three categories of Registration:

- **Full:** Full Registration. Hospital Play Specialists with Full Registration may put NZHPSReg after their name.
- **Subject to Confirmation (STC)** for those who have held Full Registration and wish to maintain Registration but are unable to meet the requirements for Full Registration. Hospital Play Specialists Registered STC may put NZHPSReg (STC) after their name.
- **Lapsed:** Hospital Play Specialists who do not renew their Registration as required by the HPSRC will be considered to have lapsed and will be recorded as such on the HPSRC register. They may not put NZHPSReg after their name.

Administration of Services:

1. The Registration programme is administered by the Hospital Play Specialist Registration Council. Applications for Registration should be made on the appropriate form, obtainable from the Hospital Play Specialists Association of Aotearoa New Zealand website. www.hospitalplay.org.nz - Registration tab/ Registration process and documents page.
2. The fee for Registration and renewal of Registration is set from time to time by the Executive Committee of the Hospital Play Specialists Association of Aotearoa New Zealand. Information is within the website www.hospitalplay.org.nz – Manage your Registration page.
3. Registration applications and supporting documents will be held as evidence and for audit purposes for the duration of an individual's Registration. Do not send originals of documents such as qualifications, marriage certificates etc. Applications and documents submitted will not be returned to the applicant.

Application closing dates:

5 March, 5 July, 5 November

Applicants are strongly advised to submit applications in sufficient time to ensure that they have time to provide any missing information before the deadline i.e., at least 2 weeks prior to deadline date. An email confirming receipt of a Registration application will be provided.

Applications not received by the appropriate date or where there is outstanding information will be considered at the following HPSRC assessment meeting. Applicants will be informed if this decision is made.

Registration and renewal of Registration applications.

The Hospital Play Specialist Registration Council advise that all **applications are to be scanned** and sent as a **PDF** to hpsreg@gmail.com

The email subject line to have applicant's name, type of Registration and Registration date e.g.

- Mary Jones, NZHPSReg No. 10099/09 Renewal of Registration Application 5/3/2019.
- Mary Jones Initial Registration Application 5/3/2019

The referees report email subject line is to be titled e.g.

Mary Jones. Confidential Referee Report. 5/3/2019.

Clinical practice portfolio content to be clearly identified in a footer e.g.

- Mary Jones. 5/3/2019. Case study child under 5 years.
- Pages are to be numbered.

The record of professional development is to be completed in a sequential format:

- By year e.g., 2016-2017-2018. Please add separately the total for each year.
- Please label the PD as either traditional or independent hours
- The record of professional development must be verified by the team leader, charge nurse manager or person at similar management level
- Possible evidence: see Appendix E for possible evidence of professional development hours completed. **From 2024**, personal notes will no longer be accepted as evidence of completed professional development hours.

Website resources: HPSRC evidence templates are now available on the website www.hospitalplay.org.nz.

Payment of Registration Fees

Fees for an application for Registration must be paid prior to assessment. Payment is direct through the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz – Manage your Registration page. Please ensure the code REG identified on a Registration application form in the payment section is included as a reference with any payment for Registration.

Website Resources

The Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz within the Registration pages provide a wide selection of Registration information, documents and resources. The specific resources are identified in italics throughout the various sections of the Registration Handbook.

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1.0 Requirements for Full Registration (NZHPSReg)

Registration, once granted, is valid for 3 years.

Applicants for Registration by the Hospital Play Specialists Association of Aotearoa New Zealand shall:

- 1.1 Pay the required fee. Must be paid prior to assessment direct through the website www.hospitalplay.org.nz Manage your Registration page. Please ensure code REG is noted as payment reference.
- 1.2 Be currently employed by Te Whatu Ora Health New Zealand or similar health provider as a hospital play specialist.
- 1.3 Have completed **3000** employment hours within a hospital play specialist role in the five years prior to application.
- 1.4 Be current members of the Hospital Play Specialists Association of Aotearoa New Zealand at the time of application.
Note: Registered hospital play specialists are required to maintain current membership of the professional body (HPSAANZ) throughout each year of Registration. If they do not, applications for renewal of Registration under Section 2.0 will not be accepted. For this purpose, membership must be paid by **28 February in each year**.
- 1.5 Hold a minimum three-year tertiary qualification Level 7 or above on the NZQA framework. This will most commonly be a Diploma in Teaching (ECE), or equivalent as approved by the NZQA, and/or a B.Ed (EC teaching).

Other qualifications at level 7 will be considered on application, but such applicants must provide evidence demonstrating that their qualification has a relevant core focus such as education, play, and child and adolescent development.

Where an applicant's base degree qualification does not have a relevant core focus, they may apply for special consideration based on documentation of relevant additional completed qualifications. e.g. a Bachelor degree in Social Work, together with a NZ Playcentres Federation Diploma in Early Childhood and Adult Education (NZQA accredited Level 6).

All applicants must attach certified copies¹ of their qualifications. If you have changed your name since the award of your qualification then you must provide evidence of the change, e.g. certified copy of a marriage certificate.

¹ The following people are authorized to certify documents:

- A Lawyer
- A Notary Public
- A Justice of the Peace
- A Commissioner of Oaths
- A Court Registrar or Deputy Registrar
- A Member of Staff at a New Zealand Embassy

The authorised person must note on the copied document:

1. "Certified true copy" (in English)
2. Their authority (in English)
3. Their name
4. Their signature
5. Their official stamp

*Note: Application forms and supporting documents will be retained by the HPSRC. It is advised that applicants keep a copy of their application. Do **not** send originals of documents such as qualifications, marriage certificates etc.*

- 1.6** Complete the transition pathway mandatory requirements as set out in Appendix G
or
have completed all six transition seminars provided by the Hospital Play Specialists Association of Aotearoa New Zealand. (Valid until **5th November 2024** assessment intake)
- 1.7** Complete an approved seminar (minimum 6 hours) on working with young people. Seminars to include a component on youth development.
If you are unsure whether a course is suitable, please check with the HPSRC prior to enrolment.
Contact hpsreg@gmail.com.
- 1.8** Complete a professional portfolio comprising all items set out in Appendix A.
This should include relevant ongoing professional development amounting to **a minimum of 10 hours within the year before making the application for Registration**. This must be over and above the youth health seminar and the mandatory requirements in the transition pathway in Appendix G.
Note: The verified² record of professional development must record the required professional development hours and the relevant information on the transition pathway mandatory requirements.
A brief PD plan/statement of intent with regard to future professional development goals over the next three years. (See *Guidelines, Appendix E*)
Website resources: *Guidance sheets, templates and exemplars are on the website www.hospitalplay.org.nz within the Registration Resources page.*
- 1.9** Provide a confidential Referee Report and accompanying Endorsement, attesting to the applicant's competence, good character and ability to carry out the duties of a hospital play specialist safely and satisfactorily. (See *example Referee Reports form, Appendix F.*)

*Website resources: The Referee Report form can be downloaded on website www.hospitalplay.co.nz – Registration Process and Documents page.
Let's talk about...Referee Reports for Registration*
- 1.10** Sign an agreement that you have read, understood and agree to abide by the Code of Ethics of the Hospital Play Specialists Association of Aotearoa New Zealand.

Note:

Applicants need to demonstrate competence across all age groups. Please ensure that your application documents provide evidence of your knowledge and skills in working with infants, children and young people in healthcare settings. Evidence may come from a mixture of your qualifications, professional development, observations, case studies.

Record of professional development

From 2024 HPSRC evidence templates will replace personal notes as evidence of professional development undertaken.

² The following people are approved to verify documents for HPS Registration:

- Team leader of HPS Service,
- Charge nurse manager if HPS Service has no team leader,
- Line manager for the HPS Service or person at similar management level.

2.0 Renewal of Full Registration

Renewal of Registration will be required every three years, except in special circumstances (see Section 3.0). All applicants for renewal of Registration shall:

- 2.1 Pay the required fee. Must be paid prior to assessment direct through the website www.hospitalplay.org.nz - Manage your Registration page. Please ensure code REG is noted as payment reference.
- 2.2 Provide verified evidence of current employment as a hospital play specialist, in a position using the skills and competencies as outlined by the Hospital Play Specialists Association of Aotearoa New Zealand and/or in a leadership or education role with hospital play specialists.
Where employment is not within Te Whatu Ora Health New Zealand or the Hospital Play Specialists Association of Aotearoa New Zealand a signed Ministry of Justice Form Priv/F2 authorising Request by a Third Party under the Official Information Act 1982 for a copy of an individual's Criminal Conviction held on the Ministry of Justice's computer system must be submitted with the application.
(See www.justice.govt.nz/services/criminal-records/form/request-by-third-party.pdf)
(Please note the time frame for the return of a third-party request is a minimum of 20 days. The HPSRC advise hospital play specialists to submit applications a month before their required Registration application date to allow for the required Ministry of Justice checks to be completed before a renewal of Registration assessment can commence.)
- 2.3. Applicants must have maintained membership of the Hospital Play Specialists Association of Aotearoa New Zealand throughout each of the years since previous Registration. If they do not, applications for renewal of Registration under this category will not be accepted. *Note:* For this purpose, membership must be paid by 28 February in each year.
- 2.4 Professional Development:
 - 2.4.1 Provide a verified³ record of professional development (PD) relevant to professional role and PD goals amounting to a minimum of **40 hours within the 3-year period**, with a **minimum of 5 hours in any one year**. This should include a brief statement of how the professional development undertaken has related to the goals previously identified and/or why these may have changed. (See *Guidelines, Appendix E.*)
*Website resources: Two guidance sheets are available on website www.hospitalplay.org.nz - Registration Resources page in the guidance sheet section. These are:
Let's Talk about... Evidence of Professional Development Hours
Let's talk about...Renewal of Registration: What's the right PD for me.
An Exemplar of a Record of Professional Development can be downloaded within the Registration Resource page in the exemplar section.*
 - 2.4.2 Provide a brief PD plan/statement of intent with regard to future professional development goals over the next three years. (See *Guidelines, Appendix E*)
Website resources: Exemplars are available on www.hospitalplay.org.nz -within Registration Resources page in the exemplar section.
 - 2.4.3 Provide a confidential Referee Report and accompanying Endorsement, attesting to the applicant's competence, good character and ability to carry out the duties of a hospital play specialist safely and satisfactorily. (See *Referee Reports form, Appendix F.*)

³ See previous page for people who are approved to verify documents for HPS Registration.

Website resources: The Referee Reports form can be downloaded on website www.hospitalplay.org.nz within Registration Process and Documents page.

- 2.5 Where applicants are in regional isolation and do not have a fully Registered Hospital Play Specialist to observe their practice and attest to their competency, the applicant may request consent from the HPSRC to have Section A of the Referee Report signed by a health colleague who holds professional Registration within their profession and has close contact with the applicant. In addition to the referee report the applicant must provide a statement (under 500 words) of how they are regularly maintaining professional networks and communication within the hospital play specialist profession.
- 2.6 Include a self-care plan (See Guidelines, Appendix A). Must include statement on supervision.
- 2.7 Sign an agreement that you have read, understood and agree to abide by the Code of Ethics of the Hospital Play Specialists Association of Aotearoa New Zealand.
- 2.8 If you have changed your name since your previous application for Registration, then you must provide a certified copy as evidence of this.

Note: Hospital play specialists who do not meet these requirements at the time their Registration is due for renewal, or whose Registration has lapsed but who wish to again become fully Registered, may apply to the HPSRC for Registration 'Subject to Confirmation' (see Section 4.0) or re-apply for Full Registration as outlined in Section 1.0

3.0 Application to Defer Renewal of Full Registration: Special Circumstances

Where a hospital play specialist with Full Registration is granted leave from their employment. (e.g., for parental leave, serious illness, secondment) and is unable for this reason to meet the requirements for renewing Full Registration, an application may be made to the HPSRC for a 'grace period'. If granted, Full Registration will be deferred for a limited period. Any remaining time of valid Registration will be resumed after the agreed period.

A special circumstances application to defer renewal of Full Registration may be requested on more than one occasion, but the total period for which Registration will be deferred is two-years within any five-year period.

HPS granted a section 3.0 period of grace must maintain current membership of the professional body (HPSAANZ) throughout the period of grace.

All applicants for deferment of renewal of Registration under Section 3.0 shall:

- 3.1** Advise the HPSRC by email at least 2 weeks **in advance of the expected commencement** of leave, supported by evidence from their employer that leave has been granted. In this initial advice, applicants must give an expected date of resuming employment.
Note: Making a late section 3.0 application for planned leave will be a factor considered within the period of grace approved.

On return to work, it is the responsibility of the applicant to immediately advise the HPSRC of the date of their resumption of employment. The HPSRC will then provide a new date for Renewal of Registration, based on the length of leave.

- 3.2** Hospital Play Specialists who have had HPSRC approval for their renewal of Registration to be deferred may continue to use NZHPSReg.

4.0 Renewal of Registration Subject to Confirmation NZHPSReg (STC)

This section applies to:

-previously registered hospital play specialists who do not meet the requirements for renewal of Full Registration under section 2.0

-hospital play specialists who currently hold Registration STC and wish to apply for renewal of Registration STC for a further three years

Note: limit of three applications (making a maximum period of 9 years)

-hospital play specialists whose Registration has lapsed and are applying to return to Full Registration under a section 7.0 application.

4.1 Application for Renewal of Registration Subject to Confirmation

Where a hospital play specialist with full Registration is unable to meet the requirements for renewal of Registration under section 2.0 as

-unable to meet professional development hours required within the last three years

or

-membership of the Hospital Play Specialists Association of Aotearoa New Zealand (HPSAANZ) had lapsed

or

-not currently employed or current employment is not in HPS role (*Provide signed Ministry of Justice form details in 4.2.1 or a verified copy of the police report held by your employer*)

they may apply for Registration, subject to confirmation. If approved, they must maintain the requirements for Registration (STC) as outlined in section 4.2.1 below.

4.2 Renewal of Registration (STC)- for hospital play specialists who currently hold NZHPSReg (STC)

Hospital play specialist who holds Registration Subject to Confirmation (STC) may re-apply for renewal of their Registration STC every 3 years, with a limit of three applications (making a maximum period of 9 years) providing they comply with the requirements in 4.2.1 below. Applicants for renewal of Registration (STC) shall:

4.2.1 Pay the required fee direct through the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz –Manage my Registration. Please ensure code REG is noted as payment reference.

- Complete the declarations on the required application form, including agreement that they have read, understood and agree to abide by the Code of Ethics of the Hospital Play Specialists Association of Aotearoa New Zealand.

Submit evidence of continuing membership of the Hospital Play Specialists Association of Aotearoa New Zealand during the past three years. Failure to maintain annual membership by the 28th February annually will result in Registration STC being considered lapsed at the March assessment meeting of the Registration Council.

- Provide evidence of employment by Te Whatu Ora Health New Zealand or similar health provider as a hospital play specialist. **Where employment is not within Te Whatu Ora Health New Zealand or the Hospital Play Specialists Association of Aotearoa New Zealand** applicants to provide a verified copy of their employer's police check **or** a signed Ministry of Justice Form Priv/F2 authorising Request by a Third Party under the Official Information Act 1982 for a copy of an individual's Criminal Conviction held on the Ministry of Justice's computer system must be submitted with the application. (See www.justice.govt.nz/services/criminal-records/form/request-by-third-party.pdf)

(Please note the time frame for the return of a third-party request is a minimum of 20 days. The HPSRC advise hospital play specialists to submit applications a month before their required Registration application date to allow for the required Ministry of Justice checks to be completed before a renewal of Registration assessment can commence.)

- Submit a verified⁴ record of professional development showing that a minimum of **10 hours professional** development annually across the three years has been completed. (See Appendix E.)

Website resources: A record of professional development form can be downloaded on www.hospitalplay.org.nz -within Registration Process and Documents page.

An example of a completed record of professional development is within the Registration resources page in the exemplar section.

- Submit a PD plan/ statement of intent.

Website resources: Exemplars are on www.hospitalplay.org.nz-within Registration Resources page.

- Provide a self- care plan and statement of supervision (*if employed*).

Hospital play specialists with Registration (STC) in the above two categories may apply for return to Full Registration at any time within a three-year period. See Section 5.0 for requirements.

4.3 Application for Registration (STC) under section 7.0 Return from Lapsed to Full Registration.

Hospital play specialists whose Registration has lapsed and are applying under section 7.0 to commence the process for a return to full Registration are required to apply in the first instance for Registration (STC).

Applications for Registration (STC) under section 7.0 must:

- Pay the required **FULL** Registration fee direct through the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz –manage my Registration page. Please ensure code REG is noted as payment reference.

- Be a current member of the Hospital Play Specialists Association of Aotearoa New Zealand

- Complete the application form for Renewal of Registration- subject to confirmation to start the process of return to Full Registration

- Include in the application evidence of current employment by Te Whatu Ora Health New Zealand or similar health provider as a hospital play specialist.

The additional requirements for application to return to FULL Registration from STC within a section 7.0 application must be completed within 12months from the date of the approval of NZHPSReg (STC).

See section 7.0 for requirements to move from Registered STC to Full Registration.

- **4.4** Hospital play specialists with Registration STC may use the designation NZHPSReg (STC) but may **not** use NZHPSReg.

- **4.5** If you have changed your name since your previous renewal, you must provide a certified copy as evidence.

⁴ The following people are approved to verify documents for HPS Registration:

- Team leader of HPS Service,
- Charge nurse manager if HPS Service has no team leader,
- Line manager for the HPS Service or person at similar management level.

In circumstances where a record of professional development cannot be verified by one of the authorised persons the applicant will provide copies of the evidence held.

5.0 Returning to Full Registration following Subject to Confirmation (STC)

Applicants who hold Registration 'Subject to Confirmation' may apply at any point within the three-year period to again be fully Registered after they have completed the following requirements:

- 5.1 Pay the required fee. Must be paid prior to assessment direct through the website www.hospitalplay.org.nz - Manage your Registration page. Please ensure code REG is noted as payment reference.
- 5.2 Provide verified evidence of current employment as a hospital play specialist, in a position using the skills and competencies as outlined by the Hospital Play Specialists Association of Aotearoa New Zealand, and/or in a leadership or education role with hospital play specialists. **Where employment is not within Te Whatu Ora Health New Zealand or the Hospital Play Specialists Association of Aotearoa New Zealand** applicants to provide a verified copy of their employer's police check **or** a signed Ministry of Justice Form Priv/F2 authorising Request by a Third Party under the Official Information Act 1982 for a copy of an individual's Criminal Conviction held on the Ministry of Justice's computer system must be submitted with the application.
(See www.justice.govt.nz/services/criminal-records/form/request-by-third-party.pdf)
(Please note the time frame for the return of a third-party request is a minimum of 20 days. The HPSRC advise hospital play specialists to submit applications a month before their required Registration application date to allow for the required Ministry of Justice checks to be completed before a renewal of Registration assessment can commence.)
- 5.3 Be current members of the Hospital Play Specialists Association of Aotearoa New Zealand at the time of application and have maintained membership throughout their time 'Subject to Confirmation'.
- 5.4 Completed a minimum of **10 hours professional development hours** within the year prior to the date of application for Full Registration. (See Guidelines, Appendix E.)
Website resources: The Record of Professional Development form can be downloaded on www.hospitalplay.org.nz -within the Registration Process and Documents page.
An example of a completed Record of Professional development is within the Registration resources page in the exemplar section.
- 5.5 Complete a professional portfolio comprising the items below as set out in Appendix A,
 - Three case studies
 - Verified record of professional development completed
 - Self-care plan and statement of supervision
 - a brief PD plan/statement of intent with regard to future professional development goals over the next three years. (See Guidelines, Appendix E.)*Website resources: Exemplars for a Statement of Intent are available on www.hospitalplay.org.nz within the Registration Resources page.*
Applicants are not required to again attend the professional development on adolescence or complete the procedural accompaniments and professional observations.
- 5.6 Provide a confidential Referee Report and accompanying Endorsement, attesting to the applicant's competence, good character and ability to carry out the duties of a hospital play specialist safely and satisfactorily. (See Referee Reports form, Appendix F.)
Website resources: The Referee Report form can be downloaded from website www.hospitalplay.org.nz -within the Registration Process and Documents page
- 5.7 Sign an agreement that you have read, understood and agree to abide by the Code of Ethics of the Hospital Play Specialists Association of Aotearoa New Zealand.
- 5.8 If you have changed your name since your previous application, you must provide a certified copy as evidence.

6.0 Lapsed Registration

- 6.1** Registered hospital play specialists who have not renewed their Registration by their required expiry date may apply in the next assessment of Registration date, effectively giving a period of grace. Hospital play specialists in this category will be recorded as “pending lapsed” on the HPSRC register and on the HPSAANZ website Register of NZHPSReg.
- 6.2** If application for renewal has not been made as stated above, Registration will be regarded as lapsed and recorded as such on the HPSRC register. Their name will be removed from the Directory of NZHPSReg on the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz.

7.0 Returning to Full Registration for those whose Registration has lapsed

Applicants whose Registration (either Full or STC) has lapsed may apply to the HPSRC for renewal of Registration as below. There are two pathways for this:

1. Apply as per Section 1.0 (but with exemption from repeating the seminar on youth health/working with young people). They will be required to complete the transition pathway mandatory requirements.
2. Applying as below. *Note:* The requirements under this section must be completed within 12 months from the date of approval by the HPSRC of the application under section 7.0.

Applications under Section 7.0 to commence the process must:

- Pay the required application fee for **Full** Registration. Must be paid prior to assessment direct through the website www.hospitalplay.org.nz - Manage your Registration page. Please ensure code REG is noted as payment reference.
- Be a current member of the Hospital Play Specialists Association of Aotearoa New Zealand
- Provide evidence that that are currently employed by Te Whatu Ora Health New Zealand or similar health provider as a hospital play specialist. **Where employment is not within Te Whatu Ora Health New Zealand** applicants to provide a verified copy of their employer’s police check or provide a signed Ministry of Justice Form Priv/F2 authorising Request by a Third Party under the Official Information Act 1982 for a copy of an individual’s Criminal Conviction held on the Ministry of Justice’s computer system must be submitted with the application.
(See www.justice.govt.nz/services/criminal-records/form/request-by-third-party.pdf)
- Complete the Renewal of Registration STC application form to start the process of return to Full Registration

In the first instance, applicants will be issued with NZHPSReg (STC) Registration to cover the 12month period until they are able to complete the requirements for Full Registration.

In order to regain Full Registration, in addition to the above, applicants must within 12 months from the date of approval of Registration STC submit an application form for Full Registration (*no further fee required*⁵) and meet the requirements below:

⁵In the application form for full Registration in the payment section advise the date that the Full Registration fee was previously paid.

- 7.1 Provide verified evidence from their employer of having completed 700 employment hours⁶ as a hospital play specialist in the 12 months following approval of the Registration – subject to confirmation.
- 7.2 Provide a verified⁷ record of professional development that the minimum of **10 professional development hours** within the time taken to complete Full Registration requirements as well as the transition pathway mandatory requirements have been completed. *(See Guidelines, Appendix E.)*
- Website resources: A HPSRC Professional Development Record form can be downloaded from the website www.hospitalplay.org.nz on the Registration Process and Document page. An online example of a completed Record of Professional Development is available within the Registration Resource page in Exemplar section.*
- 7.3 Complete a professional portfolio comprising all items set out in Appendix A (with exemption from repeating the seminar on youth health/working with young people). This should include a brief PD plan/statement of intent with regard to future professional development goals over the next **two years** and a self-care plan which includes a statement of supervision.
(See Guidelines, Appendix E.)
- Website resources: An exemplar of a PD plan/statement of intent can be downloaded from the website www.hospitalplay.org.nz on the Registration Resources page within the Exemplar section.*
- 7.4 Provide a confidential Referee Report and accompanying Endorsement, attesting to the applicant's competence, good character and ability to carry out the duties of a hospital play specialist safely and satisfactorily. (See Referee Reports form, Appendix F.)
- Website resources: The Referee Reports form can be downloaded on website www.hospitalplay.org.nz on the Registration Process and Document page.*
- 7.5 Sign an agreement that you have read, understood and agree to abide by the Code of Ethics of the Hospital Play Specialists Association of Aotearoa New Zealand.
- 7.6 If you have changed your name since your previous Registration, you must provide a certified copy as evidence.

⁶ Calculated on the basis of a 30 hour week over 6 months

⁷ The following people are approved to verify documents for HPS Registration:

- Team leader of HPS Service,
- Charge nurse manager if HPS Service has no team leader,
- Line manager for the HPS Service or person at similar management level.
- In circumstances where a record of professional development cannot be verified by one of the authorised persons the applicant will provide copies of the evidence held.

8.0 Revoking of Registration

Hospital Play Specialist Registration may be revoked by the HPSRC for any reason the Hospital Play Specialists Association of Aotearoa New Zealand Executive Committee deems appropriate, including, but not limited to, the following:

- 8.1 Falsification of the Registration application.
- 8.2 Falsification of any information requested by the Hospital Play Specialists Association of Aotearoa New Zealand.
- 8.3 Violation of the Hospital Play Specialists Association of Aotearoa New Zealand Code of Ethics.
- 8.4 Participation in illegal conduct or impropriety which may compromise or impede the fulfilment of an individual's professional responsibilities or bring the profession into disrepute.

Vulnerable Children's Act: Police Checks

The HPSRC is aware of their responsibility to ensure that all Registered HPS are safe to work with children. Full safety checks are the responsibility of the employee and employer.

Applicants for Hospital Play Specialist Registration are required to sign the declaration on the Hospital Play Specialists Association of Aotearoa New Zealand Registration application form regarding convictions.

Within the Hospital Play Specialists Registration Council (HPSRC) Registration application processes applicants are required to provide evidence of employment by Te Whatu Ora Health New Zealand or similar health provider as a hospital play specialist.

Where employment is not within Te Whatu Ora Health New Zealand or the Hospital Play Specialists Association of Aotearoa New Zealand applicants are required to provide a verified copy of their employer's police check or provide a signed Ministry of Justice Form Priv/F2 authorising Request by a Third Party under the Official Information Act 1982 for a copy of an individual's Criminal Conviction held on the Ministry of Justice's computer system must be submitted with the application.

(See www.justice.govt.nz/services/criminal-records/form/request-by-third-party.pdf)

9.0 CHECKLIST

NOTE:

“Certified evidence” is defined in Section 1.0, p. 4

“Verified evidence”: Verification can be done by the HPS Service team leader, or where there is no HPS Service team leader by the charge nurse manager or someone at a similar management level. Verification means the person must sight the original of the evidence provided and sign off with their name, title, and signature and date document verified.

Registration And Renewal of Registration Applications.

The Registration Council advise that all **applications are to be scanned** and sent as a **PDF** to hpsreg@gmail.com .

The email subject line to have applicant’s name, title of Registration and registration date e.g.

- Mary Jones NZHPSReg 10099/09. Renewal of Registration Application 5/3/2019.
- Mary Jones Initial Registration Application 5/3/2019

The referees report email subject line is to be titled e.g,

- Mary Jones. Confidential Referee Report. 5/3/2019.

Clinical Practice Portfolio content to be clearly identified in a footer e.g.

- Mary Jones. 5/3/2019. Case study child under 5 years. Pages are to be numbered.

The Record of Professional development is to be completed in a sequential format:

- By year e.g., 2016-2017-2018. Please add up the totals for traditional and independent PD for each year.
- Ensure the traditional and independent hours of PD are in the separate lines within the record.
- The record of professional development must be verified by either the HPS Service team leader, or where there is no HPS team leader by the charge nurse manager, or person at similar management level.

Section 1.0 Applicants for Full Registration:

- Are you a current member of the Hospital Play Specialists Association of Aotearoa New Zealand (HPSAANZ)? (If not, you cannot apply for Registration.)

Have you provided?

- The required fee- must be paid prior to assessment direct through the website www.hospitalplay.org.nz
- Referee Report and Endorsement (to be sent direct as PDF document to the HPSRC by the Referees)
- Completed application form, including agreement to abide by the Hospital Play Specialists Association Code of Ethics

*Have you included **certified** copies of the following?*

- Relevant three-year tertiary qualification (Refer Section 1.5)
- Name change (if relevant)

*Have you included **verified** evidence of the following?*

- Current employment as a hospital play specialist in Aotearoa New Zealand (Refer Section 1.2)
- Sufficient employment hours (Refer Section 1.3)

Have you included evidence of the following?

- Completion of the transition pathway mandatory requirements or evidence that completed transition workshops provided by the Hospital Play Specialists Association of Aotearoa New Zealand (*transition workshop attendance option valid only until November 2024 application intake*)
- Completion of approved seminar(s) on working with young people (minimum 6 hours)
- Clinical practice, contained in a professional practice portfolio (see Appendix A for requirements)
- Statement of Intent for professional development

Relevant ongoing professional development amounting to a **minimum of 10 hours** within the year before making the application for Registration. This must be over and above the transition mandatory requirements and youth health seminar.

Section 2.0 Applicants for renewal of Registration:

Are you a current member of the Hospital Play Specialists Association of Aotearoa New Zealand? You must have maintained your membership throughout each year of Registration. If not, you cannot apply for renewal of Registration under section 2.0.

Have you provided?

- The required fee- must be paid prior to assessment direct through the website www.hospitalplay.org.nz
- Referee Report and Endorsement (to be scanned and emailed direct to the HPSRC by the Referees)
- Completed application form, including agreement to abide by the Hospital Play Specialists Association Code of Ethics
- A self-care plan which includes statement of supervision
- PD Plan/statement of PD intent
- A *certified* copy of a change of name, if relevant.

*Have you included **verified** evidence of the following?*

- Current employment as a hospital play specialist or in a related role (e.g. team leader, professional development role with hospital play specialists) within Te Whatu Ora Health New Zealand or similar health provider **or a verified copy of your employers police check** or provided signed Ministry of Justice form
- Relevant ongoing professional development amounting to a **minimum of 40 hours** within the three year period, and with at least **5 hours in any one year**. (See Guidelines Appendix E.)

Section 4.0 Renewal of Registration ‘subject to confirmation’:

4.1 Apply for Renewal of Registration Subject to Confirmation. *For HPS who currently hold full Registration*

- Paid the required fee- must be paid prior to assessment direct through the website www.hospitalplay.org.nz
- Completed Renewal of Registration STC application form, including agreement to abide by the Hospital Play Specialists Association of Aotearoa New Zealand Code of Ethics

- ❑ Provide **verified evidence of the following-**
Current employment as a hospital play specialist or in a related role (e.g. team leader, professional development role with hospital play specialists) within Te Whatu Ora Health New Zealand or with similar health provider or verified copy of your employers police checks or provided the signed required Ministry of Justice form
- ❑ Verified record of the professional development hours completed in past three years
- ❑ Provided a *certified* copy of a change of name (if relevant).
- ❑ Provide a self-care plan and statement of supervision (if employed)

4.2 For HPS who currently hold Registration STC and are applying for renewal of NZHPSReg STC.

- ❑ Evidence that annual membership of the Hospital Play Specialists Association of Aotearoa New Zealand has been maintained throughout each year of Registration “Subject to Confirmation”.

Have you?

- ❑ Paid the required fee- must be paid prior to assessment direct through the website www.hospitalplay.org.nz
- ❑ Completed Renewal of Registration STC application form, including agreement to abide by the Hospital Play Specialists Association Code of Ethics
- ❑ Verified record of the professional development hours that a **minimum of 10 hours** professional development annually across the past three years has been completed.
- ❑ Provided a *certified* copy of a change of name (if relevant).
- ❑ Provide **verified evidence of the following-**
Current employment as a hospital play specialist or in a related role e.g., team leader or professional leader within Te Whatu Ora Health New Zealand or with similar health provider or verified copy of current employer’s police check or provided the signed required Ministry of Justice form.

Section 5.0 Application for full Registration following Registration STC:

- ❑ Are you a current member of the Hospital Play Specialists Association of Aotearoa New Zealand?
- ❑ Have you maintained your membership throughout the time you have been Registered ‘subject to confirmation’?

Have you provided?

- ❑ The required fee- must be paid prior to assessment direct through the website www.hospitalplay.org.nz
- ❑ Referee Report and Endorsement (to be scanned and emailed direct to the HPSRC by the Referees)
- ❑ Completed application form, including agreement to abide by the Hospital Play Specialists Association of Aotearoa New Zealand Code of Ethics
- ❑ A *certified* copy of a change of name (if relevant)

*Have you included **verified** evidence of the following?*

- ❑ Current employment as a hospital play specialist or in a related role (e.g. team leader, professional development role with hospital play specialists) within Te Whatu Ora Health New Zealand or with similar health provider or provided the signed required Ministry of Justice form
- ❑ Minimum of 480 employment hours within the year prior to application for full Registration under Section 5.0
- ❑ Relevant ongoing record of professional development amounting to a **minimum of 10 hours** in the year prior to applying for full Registration. (See Guidelines, Appendix E.)
- ❑ PD Plan/ statement of intent
- ❑ A self-care plan which includes statement of supervision

Have you included?

- Clinical practice, contained in a professional portfolio (see Appendix A for requirements)

Section 7.0 Returning to Full Registration for those whose Registration has lapsed

NB. This applies to those HPS applying under Section 7.0, pathway 2 (refer p. 1). You must previously have gained approval from the HPSRC to return to Registration STC under this pathway.

To start the section 7.0 process, you must

- Provide evidence that you are a current member of the Hospital Play Specialists Association of Aotearoa New Zealand?
- Have paid the FULL Registration application fee - must be paid direct through the website www.hospitalplay.org.nz manage your Registration prior to making application for Registration STC.
- Have completed Registration STC application form to start the process of return to Full Registration
- Confirmation of current employment as a hospital play specialist by Te Whatu Ora Health New Zealand or a similar health provider

Requirements within 12 months of STC application to return to Full Registration

Have you provided?

- Completed application form for FULL Registration, including agreement to abide by the Hospital Play Specialists Association of Aotearoa New Zealand Code of Ethics. In the payment section advise date that the fee was paid to commence the section 7.0 process with the application for Registration STC.
- Referee Report and Endorsement (to be sent by email as PDF file direct to the HPSRC by the Referees)
- A *certified* copy of a change of name (if relevant)
- Professional development plan for the next two years
- Statement of selfcare which includes statement of supervision

*Have you included **verified** evidence of the following?*

- Minimum of 700 employment hours in the 12 months following approval of your application STC
- Verified professional development record for minimum of **10 professional development hours** within the time taken to complete Full Registration requirements. The record of professional development should also include date for the completion of the transition pathway mandatory requirements

Have you included?

- Clinical practice, contained in a professional portfolio (refer section 7.3)

APPENDIX A: PROFESSIONAL PORTFOLIO

Note: It is not intended that this portfolio involve the applicant in significant amounts of work additional to that which is desirable as a part of the applicant's usual practice. In services where the applicant is required to meet similar requirements (e.g., as part of a preceptor programme or learning programme process or accountability process), the applicant may submit this same work for Registration purposes, provided that it is in the required format and that confidentiality of children, young people and families is protected. A professional portfolio needs to be planned and organized to illustrate the applicant's professional qualities and practices. It is important to follow the suggested structure contained in this Handbook for writing up case studies, observations and procedural accompaniments.

Website resources

HPSRC cover sheets for verification of practice observations can be downloaded from the website Registration and resources page

HPSRC guidance sheets and exemplars are available on the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz within the Registration Resources page.

The portfolio must contain:

1. **Three case studies.** (See Appendix B for guidelines)
 - a. One child under 5 years
 - b. One child 5-11 years
 - c. One young person 12 years or older
2. **Three procedural accompaniments of procedures relevant to your workplace.** (See Appendix C for guidelines).

Accompaniment must be verified by an appropriate person (e.g. hospital play specialist, charge nurse, doctor). Appropriate examples might include:

 - Theatre visit incorporating observation of anaesthesia induction and recovery
 - IV insertion or blood test
 - X-ray and/or other scanning procedure such as CT or MRI
 - Sibling visit to neonatal unit/intensive care unit
 - Rehabilitation treatment
3. **Professional practice observations** (see Appendix D for guidelines)
 - Written observation of at least one healthcare play session conducted by a Registered hospital play specialist
 - Written observation of at least one preparation session conducted by a Registered hospital play specialist.

Where possible, the children involved should be of different age groups. Applicants are strongly advised to seek opportunities to observe the practice of a variety of experienced colleagues and to receive constructive feedback from colleagues on their own practice, with regard to healthcare play and preparation.
4. **A PD plan/statement of intent** (See Appendix E)
5. **Verified record of professional development hours (PDH).** (See Appendix E)

For **first time applicants**, this must amount to a minimum of **10 professional development hours (PDH)** in the one year prior to application. These are in addition to the transition pathway mandatory requirements and seminar on young people requirements.

Renewal of Registration requires **40 PDH across the three years**, with a **minimum of 5 hours annually**. Applicants for renewal of Registration should refer to the relevant requirements, as set out in Sections 2.0 and Section 5.0.
6. **Self-care plan which includes statement of supervision** (a statement of how the applicant manages work-related (and/or personal) stress which may impact on their professional role), including how they obtain professional support and supervision of their practice.

APPENDIX B: CASE STUDY

Each case study should be written up under the following headings. The assessment criteria which will be used by the Registration Council in evaluating the case studies is indicated in italics. Applicants need to show evidence of their assessment, planning, and intervention. It is expected that the case studies will demonstrate critical self-reflection on applicant's own practice and how this might influence their future practice. (Note: Ensure that no information is provided which might identify the child/young person or family)

An HPSRC guidance sheet **Let's Talk about ...a framework for a case study** is available on the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz on the Registration resource page.

Brief background information

Assessment Criteria:

- Documents the reason for hospital play specialist involvement.

Assessment

Assessment Criteria:

- Demonstrates that a range of information about the child/young person and/or family has been sought for assessment purposes.
- Identifies the sources of assessment information
- Identifies and discusses the developmental, social, environmental and cultural factors that may influence or impact upon the actions and responses of the child/young person and family.
- Identifies any likely stress points for this child/young person (and family)
- Identifies any stress points for healthcare providers within this case study

Document sources of information used in hospital play specialist assessment and planning, i.e. observations/ discussion with child/young person, family and other professionals, medical records.

Plan of Care

Assessment criteria

- States desired outcomes within a plan of care for child/young person and family as a result of the assessment and any identified stressors

Intervention

Assessment Criteria:

- Documents the hospital play specialist intervention(s) and links to assessment/plan of care.
- Explains reasoning behind hospital play specialist decision making.
- Identifies play/recreation opportunities.
- Outlines the involvement/action of others (child/young person/family/other professionals).

Reflective evaluation

Assessment Criteria:

- Critically reviews and evaluates the hospital play specialist intervention(s) provided. (The focus should be on your own role and practice: you may like to use a recognized model of critical reflection⁸ as a framework.) Consider the goals within the plan of care. Consider the outcomes achieved and the value added within the model of care.
- Discusses implications for future practice in relation to self, child/young person/family/other professionals where appropriate.
- Records evidence of feedback from others (child/young person, family other professionals).

⁸ Examples in: O'Connor, A., and Diggins, C. (2002). *On reflection: reflective practice for early childhood educators*. Lower Hutt: Open Mind Publishing.

Smyth J (1989): Developing and sustaining critical reflection in teacher education. *Journal of Teacher Education* **40**(2) 2-9

3. Documentation in clinical notes/medical records.

Assessment Criteria:

- Provides a charting note (not a sticker) relating to the case study, such as would be recorded in the clinical notes/medical record. Identifies analysis of their assessment, the HPS Service plan of care, interventions made by HPS and evaluation.

Examples

Comprehensive charting note relating to assessment and to the HPS Service plan of care

or

Intervention charting note which includes the plan, intervention provided and outcomes observed i.e. changes in behaviours as result of intervention

or

Comprehensive discharge note outlining HPS plan of care, HPS interventions provided and outcomes observed.

- Must demonstrate understanding of legal requirements for documentation/charting.

-

APPENDIX C: PROCEDURAL ACCOMPANIMENT

*The hospital play specialist's role for this purpose is as an **observer** only. You should not be actively involved in supporting the child, young person or family.*

It is expected that the observation will be discussed with the hospital play specialist/ or health professional being observed following the observation and **prior** to verification.

The cover sheet shown on next page to document points of discussion and gain verification for a procedural accompaniment observation can be downloaded from the HPSAANZ website www.hospitalplay.org.nz Registration Process and documents page.

Include the following information with each procedural accompaniment:

Hospital Play Specialist name:

Date:

Procedure:

Child/young persons age(s)

Accompaniment verified by:

Name (Please print):

Designation:

Signature:

Ensure your written observation includes brief notes on the following (3-4 pages maximum):

- Family members present
- Previous preparation/information provided to child/young person and/or family
- Describe what happened when the child/young person had the procedure. Include:
 - environment
 - sensory details
 - explanations given
 - people present and/or involved
 - significant details and/or stress points for child/young person, family member or staff
 - child/young person's perspective: what s/he said, or did and what you observed of his/her behaviour.
- Evaluation/reflection. What collaboration /common knowledge was evident within the multi-disciplinary team (MDT) in the procedure?
- Identify stress points, interventions and coping strategies utilised for these stressors for child/young person and family and staff
- Reflect on the procedure from the child/young person and family member perspective.
- What follow-up (post-procedural play, discussion, or other action) might be appropriate?
- Reflect on any discussions with HPS /MDT member being observed. How might your reflections on this observation affect your own practice in future?
- Reflect on possible developments within your service/or area of responsibility from this observation that you would consider.

**HOSPITAL PLAY SPECIALIST REGISTRATION COUNCIL
COVER SHEET**

RECORD OF PROCEDURAL ACCOMPANIMENT OBSERVATION

Name:

(Print full name of HPS applying for Registration)

Number of pages in observation submitted:

Please ensure there is a footer note with your name, type of observation and date of the registration application on each page in the written observation.

Note: It is expected that the observation will be discussed with the hospital play specialist/ or healthcare professional being observed following the observation and prior to verification.

Provide the following information with your procedural accompaniment observation:

Date:

Hospital:

Number of children/young people participating:

Age(s)

Accompaniment verified by:

Full Name: (please print)

Designation:.....

Signature:.....Date:.....

Notes of reflective discussions with HPS/MDT member being observed:

APPENDIX D: RECORD OF PROFESSIONAL PRACTICE OBSERVATION

The hospital play specialist's role for this purpose is as an **observer** only. You should not be actively involved in supporting the child, young person or family.

Note: It is expected that the observation will be discussed with the hospital play specialist facilitating the healthcare play or preparation session following the observation and **prior** to verification.

The cover sheet shown on the next page to document points of discussion and gain verification for an observation of professional practice can be downloaded from the HPSAANZ website www.hospitalplay.org.nz Registration Process and documents page.

Include the following information with your healthcare play observation and preparation observations:

Date: Hospital:

Number of children/young people participating: Age(s)

Verified by currently Registered hospital play specialist providing the play session as to the content of the observation and the reflective discussion

Full Name: (please print)

Current HPS Registration number (required):

Signature:

Ensure each record includes brief notes on following:

- **A description of the observation**
 - environment
 - sensory details
 - explanations given
 - people present and/or involved
 - significant details and/or stress points for child/young person, family member or staff
 - child/young person's perspective: what was stated or what behaviours you observed.
 - collaboration of health professionals/common knowledge within MDT
- **Reflective comments identifying**
 - potential HPS intervention/ advocacy
 - possible follow up for child, young person and family and MDT to procedure
 - implications from observation for own future practice, future learning requirements
 - possible service development within HPS Service or area of responsibility
 - areas of discussions with NZHPSReg

**HOSPITAL PLAY SPECIALIST REGISTRATION COUNCIL
COVER SHEET**

RECORD OF PROFESSIONAL PRACTICE OBSERVATION

Name:

(Print full name of HPS applying for Registration)

Number of pages in observation submitted:

Please ensure there is a footer note with your name, type of observation and date of the registration application on each page of the written observation.

Note: It is expected that the observation will be discussed with the hospital play specialist facilitating the healthcare play or preparation session following the observation and *prior* to verification.

Provide the following information with your healthcare play observation and preparation observations:

Date:

Hospital:

Number of children/young people participating:

Age(s)

Verified by currently Registered hospital play specialist providing the play session as to the content of the observation and the reflective discussion.

Full Name: (please print)

Current HPS Registration number (required):

Signature:

Notes of reflective discussion with HPS/MDT member being observed:

APPENDIX E: PROFESSIONAL DEVELOPMENT (PD) ACTIVITIES

Guidelines for Recording Evidence of Professional Development

A record of professional development form can be downloaded from the HPSAANZ website www.hospitalplay.org.nz - Registration Process and Document page

Hospital Play Specialists seeking Registration or renewal of Registration must submit along with their application:

- (i) A summary of participation in professional development activities and PD hours (PDH) claimed,

AND

- (ii) A **brief** (300-500 word) professional development plan/statement of intent

Hospital play specialists making application for renewal of their Registration must include a brief PD plan/ statement of intent regarding future professional development goals over the next 3 years. (See exemplar on the Registration tab on the HPSAANZ website www.hospitalplay.org.nz). The plan should identify:

- Your current role
- Your key PD goal(s)
- How these goal(s) link to your role and its effectiveness over the next 3 years.

It's understood that your role and/or your PD goals may very well change over time. If so, when you submit your PD record, just include a brief statement about changes that have occurred since you first wrote the PD plan.

There are two ways in which PD hours may be gained (see explanations below):

- a. Professional development hours (up to 100% of claimable PD hours over 3 years) – See details in Item 1 below.
- b. Independent learning (up to 50% of claimable PD hours over 3 years) – See details in Item 2 below.

It is important that any study undertaken is relevant to the hospital play specialist's current employment and individual career. Study subjects might include: therapeutic play, clinical topics, child protection, management, Information Technology (IT) skills, psychology/counselling, participating in research or audit, carrying out a literature review, cultural and linguistically diverse healthcare environments, early childhood education/teaching, leadership.

The sample record of professional development is provided as a way of recording a summary of your participation in formal study and/or in professional development, but you do not have to record it in this way, e.g. If your organization has some other format for recording professional development then you may copy this for Registration purposes, but you must be sure to include all the information asked for. It is highly recommended that you maintain a professional portfolio throughout your career. Please only include the hours relating to your application (not all hours that have been completed in the professional portfolio)

NB First time applicants:

PDH Hours - The minimum of **10hours** in the year prior to your application of professional development hours must be over and above the required Hospital Play Specialists Association of Aotearoa New Zealand transition pathway mandatory requirements and required youth health PDH hours (minimum of six hours).

Transition Pathway Mandatory Requirements

Record on the record of professional development being submitted that the transition pathway mandatory requirements have been completed with the date of completion. Attach the verified HPSRC transition pathway checklist (form two and *ensure verified by team leader or person at similar management level*). This

checklist must be included with the record of professional development hours submitted in the digital application.

- **Verification of the Record of Professional Development:** The record of professional development must be verified either by the team leader, or where there is no team leader by the charge nurse manager or person at similar management level. This must be done on the professional development record prior to this being submitted for with any application for Registration. In circumstances where a record of professional development cannot be verified by one of the authorised persons the applicant will provide copies of the evidence held.
 - a. You do not have to submit copies of attendance certificates if you are working in a setting where a team leader can attest to sighting evidence of participation
 - b. However, if you are not in a situation where you have a team leader or other person authorised to verify registration documents, then you should ensure you provide sufficient information and evidence to the HPSRC (including copies of attendance certificates, if any).
- **Do not send in originals;** however, the HPSRC may request to sight these.
- In order for you to track the relevance of your professional development participation, it may be helpful to indicate links to Hospital Play Specialist Competencies.
- **NB:** The HPSRC will audit a 20% random sample of applications for Registration or Renewal of Registration. If you are audited you will need to provide copies of the evidence that was verified, e.g. certificates of course attendance/completion, personal notes on attendance or completed HPSRC templates relevant to the PDH undertaken, personal notes, etc. You should therefore maintain documentation of professional development participation for at least three years following your approval for Registration or Renewal of Registration. All evidence must have the required information to enable assessment of relevance to current or future role.

From 2024, personal notes will no longer be accepted as evidence of completed professional development hours. HPSRC evidence templates are available within website resources. Personal notes for PDH for years prior to 2024 are still accepted as evidence of PDH completed.

Professional development hours

These may be gained by **evidence**⁹ of participation in and completion of professional development opportunities **relevant to Hospital Play Specialists Association of Aotearoa New Zealand Competencies**. There are two ways in which PD hours may be gained:

1. Traditional Learning

Papers successfully completed through a tertiary institution (university or similar) or attendance at relevant workshops and conferences *calculated by the actual hours of attendance*. Up to 100% of PD hours over the 3-year cycle may be gained in this way.) Examples of appropriate activities include:

- tertiary papers where there is an attendance component,
- professional development workshops and seminars relevant to HPS practice or current role,
- Sessions attended at conferences of professions in similar fields, e.g., Australian Child Life Therapists Assn, UK Health Play Specialists Association. (Individual sessions attended must be specified and verified.)

⁹ Evidence could include: Verified copies of attendance certificates or certificates of course completion; notes taken at workshops; written reflection on, for example, links between professional development attendance and practice; verification by professional leader of verbal reporting back on professional development attendance.

NOTE: From 2024 HPSRC evidence templates will replace personal notes as evidence of professional development hours undertaken for HPS Registration.

- Inservice programmes offered by Te Whatu Ora Health New Zealand or other employing bodies (other than facility tours and induction/orientation programmes or mandatory training, e.g., Fire and Emergency, CPR),

Activities that will NOT be accepted

Please note that the following activities **will not be accepted** for professional development hours:

- Patient care activities
- Meetings
- Networking sessions
- Facility tours and induction/orientation programmes or mandatory training, e.g. Fire and Emergency, CPR

2. Independent learning.

PD hours for independent learning are *calculated as set out in the chart below*. A maximum of 50% of PD hours within the 3-year PD cycle may be gained in this way. Examples of appropriate activities include:

- Presentations
- Papers passed as part of tertiary qualifications where there is no attendance component
- Publishing
- Professional service/leadership
- Providing support for HPS internship/preceptorship supervision/guidance
- Service development projects
- HPS Preceptoring package- requires transcript and certificate/ letter of completion on employer's letterhead
- Post graduate study- completion required and transcript on provider letterhead
- Online learning- there are two independent online PD activities
 1. Through Independent learning via online learning with a quiz or certificate
 2. Learning online without quiz/certificate. Evidence can be submitted within the article review criteria with the required HPSRC template.

Website Resources

Relevant resources are available within the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz - Registration Resource page.

These include

- two HPSRC guidance sheets
 - Let's Talk about...Evidence of Professional Development Hours*
 - Let's Talk about...Renewal of Registration: What's the right PD for me.*
- Selection of HPSRC templates for documenting the required evidence for completed professional development.
 - HPSRC template -Literature review and presentation for NZHPSReg PD requirements.*
 - HPSRC template-Article of interest for NZHPSReg PD requirements*
 - HPSRC template- Workshop/ seminar attendance for NZHPSReg PD requirement*
 - HPSRC template - Professional and Service Development Projects for PD requirements*
- HPSRC Exemplar
 - Overview of PD Plan/ Statement of Intent*
 - Example of a completed record of professional development*

Independent Learning (Maximum 50% of required PD over 3 years)- weighting for PD hours

<i>PD criteria considered</i>	<i>Possible evidence ¹⁰</i>	<i>Weighting for claimable PD hours</i>
<p>Article review Case study presentation Preparing and presenting an article review and/or case presentation to staff (one time presentation per topic)</p> <p>Online learning where there is no quiz or certificate of completion may be considered as an article being reviewed</p>	<p>Presentation notes and/or verification from professional leader/manager</p> <p>Submit completed HPSRC evidence template for article review</p>	<p>1 article review/presentation = 1 PD hour claim</p>
<p>Literature review (See example template on HPSRC tab on HPSAANZ website) Undertaken literature/textbook review and reported back/presented identified links to PD profile/or for service development</p>	<p>Search criteria, number of articles reviewed and notes for report back/ presentation, with verification from professional leader/manager or submit HPSRC literature review template</p>	<p>1 report back = 2 PD hr claim</p>
<p>Independent learning via</p> <ul style="list-style-type: none"> • Multi-media package with a graded quiz • Video/internet learning with a completion certificate component • Self-study with a graded quiz <p><i>Online courses with an interactive component (with an instructor and/or other applicants) or which have a standardised, post-completion assessment (quiz/test) meet the required criteria</i></p>	<p>Organisation's documentation of completion; evidence of pass from the course provider</p>	<p>1 quiz = 1 PD hr claim</p>
<p>Papers successfully completed through a tertiary institution (university or similar) where there is no attendance component.</p> <p>HPS Preceptor learning modules</p>	<p>Evidence of pass (e.g. transcript of results) in the paper(s) from the institution</p> <p>Transcript and employer certificate/ letter of completion</p>	<p>½ year paper = 10 PD points Full year paper = 20 PD points</p> <p>1 module = 1PDH</p>
<p>PRESENTATIONS (First time only presentations on a topic can be claimed. Time on preparation cannot be included.)</p>		
<p>Presenting or co-presenting a professional inservice training, or guest lecture for HPS or related professionals in hospital or their workplace for local organisation, association or group on practice related topic</p>	<p>Copy of presentation abstract or copy of programme listing presenter's name, date, length and location of presentation and contact details for organisation</p>	<p>½ hr presentation time = 1 PD hr 1+ hrs presentation time = 3 PD hrs</p>

¹⁰ From 2024 HPSRC evidence templates will replace personal notes as evidence of professional development undertaken.

<p>Presenting/co-presenting a poster session on practice related topic for local organisation, association or group, professional association</p>	<p>Copy of presentation abstract or copy of programme with details listing presenter's name, date, length, location and contact details for organisation.</p>	<p>1 poster presentation = 2 PD hrs</p>
<p>Presentation at national/international conference. Presenting or co-presenting a professional workshop, seminar or session at a national/international conference</p>	<p>Presentation abstract plus evidence of acceptance; or copy of the programme with details listing presenter's name, date, length, location and contact details for organisation</p>	<p>< ½ hr presentation = 2 PD hrs ½ hr -1.5 hr presentation = 3 PD hrs ½ day presentation = 4 PD hrs</p>
<p>PUBLISHING</p>		
<ul style="list-style-type: none"> - Publishing an article relevant to HPS role/profession in a professional journal - Publishing a peer reviewed article relevant to HPS role/profession in a professional journal - Publishing a book/chapter on topics related to HPS role/profession 	<p>Copy of article, title page or table of contents</p>	<p>One article = 4 PD hours</p> <p>One article = 5 PD hours</p> <p>6 PD hours per chapter</p>
<p>PROFESSIONAL SERVICE</p>		
<ul style="list-style-type: none"> - Serving on HPSAANZ executive, task force or working group - Service on professional board or committee relevant to HPS role/psychosocial care or children and young people in hospital/healthcare - Representing the HPSAANZ on another professional body (e.g. Allied Health, Early Education Federation, Early Childhood Advisory Committee, Ministry of Health or Ministry of Education working parties. 	<p>Verification from Executive / Board</p> <p>Minutes of meetings</p>	<p>Appointment – 3 PD hrs per year (Maximum of 9 PD hrs per 3 year cycle)</p> <p>1 PD hr per meeting attended with a maximum of 9 PD hrs over 3 year cycle.</p>
<p>PROFESSIONAL AND SERVICE DEVELOPMENT PROJECTS</p> <p><i>NOTE: Only the 1st time of participation in this activity can be claimed for PD hours. They should be of a nature that demands new learning or professional "stretch". Where this activity is a component of an HPS's primary role this work is not claimable under this PD criteria.</i></p> <p>HPSRC template can be downloaded for documenting required information</p>		
<p>Direct guidance and support/mentor role for HPS/students within an HPS service, e.g.</p> <ul style="list-style-type: none"> - Internship/learning modules - Entry/return to work HPS orientation programme - Associate Teacher role supporting students on practicum 	<p>Verification by team leader/employer</p>	<p><i>Minimum 10 hours of HPS/student supervision = 3 hrs</i></p>

<ul style="list-style-type: none"> - Research/studies/projects that contribute to the quality of HPS service practice within their service or the HPS profession, e.g. development or implementation of clinical audit tools; development of policy, protocol and guidelines documents; development/review learning materials for staff. 	<p>Summary of project/outline of HPS role and actions achieved. Verified by team leader.</p>	<p>Each project = 2 PD hrs</p>
<ul style="list-style-type: none"> - Projects that contribute to the delivery of psychosocial services, e.g., development and/or audit of clinical protocols/guidelines; involvement in clinical audits; development or audit/review of care plan discussion/guidance documents, policy and position papers; or family information. 	<p>As above</p>	<p>Each project = 2 PD hrs</p>

NOTE: From 2024 HPSRC evidence templates will replace personal notes as evidence of professional development undertaken. *Personal notes for PDH for years prior to 2024 are still accepted as evidence of PDH completed.*

Website resources

Relevant resources are available within the Hospital Play Specialists Association of Aotearoa New Zealand website www.hospitalplay.org.nz - Registration Resource page.

These include

- two HPSRC guidance sheets
 - Let's Talk about...Evidence of Professional Development Hours*
 - Let's Talk about...Renewal of Registration: What's the right PD for me.*
- Selection of HPSRC templates for documenting the required evidence for completed professional development.
 - HPSRC template -Literature review and presentation for NZHPSReg PD requirements.*
 - HPSRC template-Article of interest for NZHPSReg PD requirements*
 - HPSRC template- Workshop/ seminar attendance for NZHPSReg VPD requirement*
 - HPSRC template - Professional and Service Development Projects for PD requirements*
- HPSRC Exemplar
 - Overview of PD Plan/ Statement of Intent*
 - Example of a completed record of professional development*

EXAMPLE of RECORD OF PROFESSIONAL DEVELOPMENT – download form website www.hospitalplay.org.nz - Registration Process and Document page

NB: Please read the guidelines and example before you complete this form. The hours of professional development provided will be assessed and only attributed towards the total required if they are clearly applicable to the relevant Hospital Play Specialists Association Competencies. Use as many sheets as you need. Please ensure you add up PD hours yearly within the traditional and independent columns.

Personal details (Please print in capital letters):

Name: Surname: JOHANSEN First name(s): MIRIAM MAISIE

Current HPS Registration number (if applicable): 10003/21

Date(s) of attendance (d/m/year)	Details of professional development undertaken ¹¹ (Include presenter information, if applicable)	HPS Comp's ^{6,12}	Name of PD provider ¹³	No of hours claimed as traditional PD	No. of hours claimed as independent learning	Type of Evidence ie HPSRC evidence templates, certificate, observed and signed off	Evidence of attendance sighted/verified ¹⁴ and signed
21/0/12	<i>The philosophical baby:</i> Alison Gopnik University of California, Berkeley, USA. (Detailed look at early brain development and impact of social interactions – what is it like to be a baby?)	1	Robb Lecture at Auckland University	1 hr.		HPSRC evidence template with presenter, date and number of hours identified.	Initials of Jane Smith
31/3/12	<i>Case Study: A reflection of practice:</i> Nicky Woollaston, Practice Supervisor, Starship	2,4,6	NZHPSAANZ Conference 2012	1 hr		Evidence of registration and session notes	Initials of Jane Smith
20/6/12	"Grand Round" on improving inter-professional communication in order to ensure better support for families, presented by Social Work team (Kiri Smith, Paul Jones and Mary White)	5	Waitaki District Health Board	1 hr		Observed verbal presentation of content to HPS team meeting and sighted HPSRC workshop/seminar evidence template	PAMELA JONES Practice Supervisor, HPS Service 25/5/12 P. M. L. Jones
1 st Semester (Feb-June) 2012	MHSc paper, <i>Professional Supervision</i> , 589640. (30 points). Course description: "Develops nursing and other health professionals as supervisors in their selected work areas. Identifies personal learning needs in relation to professional supervision of those involved in health care practice. Facilitates the application of enhanced critical analysis skills required of a professional supervisor."	5, 6	AUT University, Auckland, Faculty of Health Science	20 weeks, part-time PD Hrs claimed		Sighted copy of course descriptor from the organisation; Sighted copy of result sheet and grade pass	Initials of Jane Smith
10/ 10/21	<i>Online Course with no quiz/certificate– CPPD 2: Ethnicity and Culture</i>	3,5	<i>Southern University</i>		1PDH	HPSRC Template with details, learning outcomes, signed by team leader	Initials Jane Smith

If the same person is able to verify each component, then they may initial each item and sign at the bottom of the page as follows:

Verification of evidence held for the PD hours submitted within the professional development record either by provider, ;professional leader, Team leader or Charge Nurse

Name in capitals: JANE SMITH

Title /Position held: Manager, Women and Children's Health

Date: 25/5/12

Signature of Jane Smith

¹¹ Include enough information to show how the content relates to the HPS Competencies and/or attach copies of information about the course/workshop, and, where applicable, the name and title of the individual(s) presenting the professional development

¹² Including specific links to the HPS Competencies is optional, but you may find it helpful

¹³ The organization, / institution providing the professional development

¹⁴ The person verifying your participation must include their name (in capital letters), title/designation, and signature.

APPENDIX F: REFEREE REPORTS - CONFIDENTIAL

Document can be downloaded from the HPSAANZ website www.hospitalplay.org.nz in the Registration Process and Document page

There are **two** sections to this report - *Section A: Statement of Recommendation*, and *Section B: Endorsement*:

- *Section A* is to be completed by a fully Registered hospital play specialist who **has observed, and can attest to**, the applicant's competency.
- *Section B* comprises an **endorsement of Section A: Statement of Recommendation**. It must be completed by the applicant's team leader or direct line manager **who is familiar with the applicant's good character and professional practice**.

NB. This form should not be returned to the applicant. The person completing Section A should pass the form to the professional leader nominated by the applicant, for his or her endorsement, before being scanned and emailed direct to the Hospital Play Specialists Registration Council: hpsreg@gmail.com

Section A: Statement of Recommendation

This section is to be completed by a **fully Registered** hospital play specialist who has known the applicant for at least 6 months, has had opportunities to observe the applicant's practice, and is sufficiently familiar with their professional practice to verify their competence or otherwise.

Consider the applicant's competence in terms of evidence¹⁵ of each of the following criteria. Indicate (Y, Yes; N, No; P, Partial) that the hospital play specialist has met each of the criteria listed. (If you need to add comments, please do so at the end of each section, or attach a separate letter.)

NAME OF APPLICANT:

Competency 1: Professional Knowledge and Practice	Met Y/N/P
Criteria:	
1.1 Provides activities and programmes that support learning and development in children/young people	
1.2 Creates an environment where stress and anxiety are reduced	
1.3 Advocates for the value of play and of practices that are supportive of the well-being of children/young people, families and whanau	
1.4 Helps children/young people express feelings and concerns	
1.5 Assesses and responds to children/young person's strengths, needs and interests	
1.6 Provides therapeutic play and preparation, coping strategies and other interventions to enhance understanding and help children/ young people, families and whanau manage illness, hospitalisation and treatment	
1.7 Supports families, including siblings, and enhances family and whanau involvement in their child's care and education	
1.8 Contributes to clinical decision making	
Comments:	

¹⁵ Evidence would include direct observation of applicant's practice, contribution to professional discussions, feedback from other staff and/or families, chart notes and other documentation, contribution to team functioning, etc.

Competency 2: Safe, Ethical and Legal Practice	Met Y/N/P
Criteria:	
2.1 Complies with the Hospital Play Specialists Association of Aotearoa/NZ Code of Ethics	
2.2 Complies with relevant legislation, regulations, codes, service standards, policies, procedures and professional guidelines, e.g. Ministry of Education Early Childhood Regulations	
2.3 Develops and maintains a safe environment and manages potential risks	
2.4 Demonstrates professional accountability by documenting and reporting information effectively	
2.5 Uses ethical reasoning to make and justify decisions on challenging issues	
2.6 Maintains professional boundaries	
2.7 Demonstrates an awareness of the scope and limitations of hospital play specialist practice and of own personal knowledge and skills	
2.8 Understands operational structures, priorities and objectives of the workplace	
2.9 Manages workload and meets responsibilities in a timely manner	
2.10 Attends to self-care	
Comments:	
Competency 3: Culturally Safe Practice	Met Y/N/P
3.1 Identifies personal and professional cultural values, beliefs, attitudes and prejudices and understands their potential impact on practice	
3.2 Is respectful of the values, beliefs, attitudes and practices of children/ young people, families, whanau and colleagues	
3.3 Acknowledges the uniqueness of the child/young person in the context of their family, whanau and the wider community	
3.4 Has knowledge of the Treaty of Waitangi and works effectively within the bicultural context of healthcare settings to address aspirations of Māori	
3.5 Shows ongoing commitment to increasing knowledge base and skills relating to culturally safe practice	
Comments:	
Competency 4: Communication	Met Y/N/P
4.1 Adapts style and method of communication to suit the individual child/young person, family and whanau	
4.2 Assists the child/young person, family and whanau to identify and communicate their own needs	
4.3 Addresses cultural and language differences and their potential impact on communication	
4.4 Responsibly shares knowledge and communicates all relevant information to colleagues and families in a timely and professional manner	
4.5 Manages conflict effectively and works actively to achieve resolution	
4.6 Utilises a range of media and ICT to communicate effectively	
Comments:	
Competency 5: Professional Relationships	Met Y/N/P
5.1 Develops effective and collaborative relationships to ensure best outcomes for children/young people, their families and whanau	
5.2 Articulates and demonstrates the role and function of a hospital play specialist	
5.3 Uses feedback, supervision, support and guidance to improve practice through critical reflection	
5.4 Provides appropriate support and guidance to colleagues, students and volunteers	
5.5 Develop relationships with local institutions and community groups	
Comments:	

Competency 6: Professional Development and Leadership	Met Y/N/P
6.1 Maintains knowledge of current hospital play specialist- related theories and practice	
6.2 Maintains knowledge and skills required for specific settings	
6.3 Demonstrates commitment to critical inquiry and problem-solving in professional practice	
6.4 Engages in regular and/or ongoing supervision	
6.5 Contributes to the hospital play specialist body of knowledge by sharing knowledge and skills with others, both formally and informally	
6.6 Demonstrates an understanding of research processes and the interpretation of results	
6.7 Actively participates in performance development and review processes	
6.8 Contributes to team functioning and to the wider professional learning community	
6.9 Is proactive in seeking opportunities for responsibility and leadership	
6.10 Demonstrates an awareness of the impact of social and political factors on HPS services	
Comments:	

DECLARATION:

I have known the applicant for a period of (not less than 6 months)

- I consider that the applicant is a person of good character and repute and has the personal attributes that indicate they are fit to practise as a hospital play specialist.
- I know of no employment, professional or other issues which might affect the applicant's ability to carry out the relevant duties of a hospital play specialist safely and satisfactorily.
- To my knowledge, the applicant has not been convicted of an offence against the law (in any country) or dismissed from a teaching position or hospital play/child life specialist position (in any country)
- I am not a partner of or related to the applicant by birth or marriage.

Name (please print):

Hospital Play Specialist Registration Number:

Designation/title:

Telephone No. (day):

Email address:

Signature:

Date:

When you have completed this form, please pass it to the applicant's team leader or direct line manager for endorsement. (See Section B, next page).

If you wish to discuss this reference, please e-mail the Hospital Play Specialists Registration Council, hpsreg@gmail.com

Cont. ...

Section B: Endorsement of Referee Report

This section to be completed by applicant's team leader, or direct line manager who must be familiar with the applicant's good character and professional practice and endorses the Referee Report.

NAME OF APPLICANT:

I have known the applicant for a period of

- I endorse the Statement of Recommendation in Section A above, which attests to the competency of the applicant as a hospital play specialist.
- I consider that the applicant is a person of good character and repute and has the personal attributes that indicate they are fit to practise as a hospital play specialist.
- I know of no employment, professional or other issues which might affect the applicant's ability to carry out the relevant duties of a hospital play specialist safely and satisfactorily.
- To my knowledge, the applicant has not been convicted of an offence against the law (in any country) or dismissed from a teaching position or hospital play/child life specialist position (in any country)
- I am not a partner of or related to the applicant by birth or marriage.

Comments I wish to make about the applicant:

Name (Please print):

Designation/title:

Employing hospital:

Telephone No. (day):

Email address:

Signature:

Date:

If you wish to discuss this reference, please email the Hospital Play Specialists Registration Council, hpsreg@gmail.com

Do not return this form to the applicant.

Please scan and email to the Hospital Play Specialist Registration Council hpsreg@mail.com

In the email subject heading place the name of the applicant, confidential referee report and the date

APPENDIX G: TRANSITION PATHWAY- MANDATORY REQUIREMENTS

1.0 INTRODUCTION

Effective from **November 2023** to apply for HPSAANZ Registration HPS must provide evidence that they have completed an orientation and induction programme / specific HPS learning programme provided by their respective HPS Service that includes the mandatory requirements required within the new HPS Transition Pathway. These being:

1. Mandatory readings selected by the HPSRC.
2. Two professional development (PD) workshop/in-service –Tikanga Māori and a six-hour youth health which incorporates youth development.
3. Attendance at a one-day HPSAANZ endorsed professional development (PD) opportunity on HPS clinical practice i.e., HPSAANZ bi-annual professional conference or a regional kotahitanga HPS cluster meeting. If an endorsed HPSAANZ PD opportunity has not been available a one-day professional visit to one of four regional centres will be accepted as meeting this mandatory requirement (*conditions apply to this option*).

1.1 Transition Pathway evidence requirements in HPS Registration process

The HPSRC transition pathway checklist (transition pathway form one) is for recording the completion of all mandatory requirements for Registration which must show the date of completion, what evidence is held e.g., reflection for reading, attendance certificate for in-service. All requirements must be verified as completed by the team leader/direct manager as part of the HPS orientation and induction programme or a HPS specific learning programme. Note: *This form must be retained, and evidence held as these may be requested in the event that an individual's application for HPS Registration is audited as part of the Registration annual review of 20% of applications.*

Transition pathway verification of PD log evidence (transition pathway form two) is to be completed and submitted with the applicant's verified record of professional development. All evidence held for the transition pathway mandatory requirements must be verified by the team leader/ direct line manager who is verifying the record of professional development in the application for HPS Registration.

1.2 Verification by Team Leader/ Direct Line Manager

The transition pathway evidence log (form two) and the evidence held for each requirement being met must be sighted by the team leader/ direct line manager as part of the verification of the record of professional development process for an HPS Registration application.

HPSRC resources: Registration Handbook (2023) Appendix E: Professional Development (PD) Activities

HPSRC guidance sheet Let's talk about...Evidence of professional development hours.

Both these resources are available on the website www.hospitalplay.org.nz within the Registration tab

1.3 Annual review of HPSAANZ Registration Programme

Each year 20% of all Registration applications are audited. In the event that an application includes the transition pathway mandatory requirements within the of record of professional development then the transition pathway checklist (form one) and evidence held for the mandatory requirements must be submitted.

Note: Please hold transition pathway mandatory requirements checklist and evidence held as part of the initial application for full Registration for 3 years after approval of Registration.

2.0 TRANSITION PATHWAY MANDATORY READINGS

The mandatory readings provide an overview for newly employed HPS on the clinical knowledge and skills to be developed for the HPS role. These link to the HPSAANZ professional competencies. Planning for making an application for full Registration involves establishing a guidance and support process with a Registered Hospital Play Specialist (NZHPSReg) and engaging in observations and reflective discussions. As a developing HPS there is value in having discussions as part of the orientation and induction programme on how you can plan to achieve professional Registration.

MANDATORY READINGS as at August 2023

HPSAANZ Professional Competencies	TEXTBOOKS
<p>1. Professional knowledge in practice.</p> <p>Outcome: Facilitates educational and therapeutic programmes for children and young people.</p>	<ul style="list-style-type: none"> ➤ L. Gaynard, J. Wolfer, J. Goldberger, R. Thompson, L. Redburn, & L. Laidley (Eds., 1998) Psychosocial Care of Children in Hospitals: A Clinical Practice Manual from the ACCH Child Life Research Project- <i>identified as Clinical Practice Manual in the evidence checklist</i> ➤ R.H. Thompson (Ed.), (2009) The Handbook of Child Life: A Guide for Psychosocial Care. Springfield, IL: Charles C. Thomas - <i>identified as The Handbook of Child Life in the evidence checklist. The 2nd print of this text may have variance in the page numbers identified.</i> ➤ Opai, Keri (2021) Tikanga: An introduction to te ao Māori. <ul style="list-style-type: none"> ➤ Paradigms of play. Jessee, P.O. & Gaynard, L. In R.H. Thompson (Ed.), (2009) <i>The Handbook of Child Life: A Guide for Psychosocial Care.</i> (Chapter 8, pp. 136-159.) ➤ Planning child life care. In L. Gaynard, J. Wolfer, J. Goldberger, R. Thompson, L. Redburn, & L. Laidley (Eds., 1998) <i>Psychosocial Care of Children in Hospitals: A Clinical Practice Manual from the ACCH Child Life Research Project</i> (Chapter 4, pp. 39-46) ➤ Interactions Addressing Separation Issues. In L. Gaynard, J. Wolfer, J. Goldberger, R. Thompson, L. Redburn, & L. Laidley (Eds., (1998) <i>Psychosocial Care of Children in Hospitals: A Clinical Practice Manual from the ACCH Child Life Research Project (Chptr 8 pp 85-90)</i> ➤ Assessment and documentation in child life. Hollon, E. & Skinner, L. (2009) In R.H. Thompson (Ed.), <i>The Handbook of Child Life: A Guide for Pediatric Psychosocial Care</i> (Chapter 7, pp. 117-135) ➤ Psychological preparation and coping. In Goldberger, J., Mohl, A. L. & Thompson, R. H. In R.H. Thompson (Ed.), (2009) <i>The Handbook of Child Life: A Guide for Psychosocial Care</i> (Chapter 9, pp. 160-198)
<p>2. Safe ethical and legal practice</p> <p>Outcome: Practices safe, ethically and in conformance with legal and professional requirements</p>	<ul style="list-style-type: none"> ➤ Theoretical foundations of child life practice. Turner, J. (2009). In R.H. Thompson (Ed.), <i>The Handbook of Child Life: A Guide for Pediatric Psychosocial Care</i> (Chapter 2, pp. 23-35) ➤ Sighted: Relevant Te Whatu Ora Health New Zealand and the Hospital Play Specialist Service's policy and guidelines ➤ Sighted: HPSAANZ Official documents: HPS Professional Competencies; Code of Ethics, Guiding Principles, Registration Handbook

<p>3. Culturally safe practice</p> <p>Outcome: Recognises and is respectful of individual families and cultural values of children, young people, their families and others</p>	<ul style="list-style-type: none"> ➤ Family centred care and implications for Child Life - Bell, J.L, Johnson, B.H, Desai, P.P, McLeod, S.M. <i>The Handbook of Child Life: A Guide for Pediatric Psychosocial Care.</i> (Chapter 6. pp 95-115) ➤ Te Whare Tapa Whā- Māori Health Model. www.health.govt.nz ➤ Keri Opai (2021) Tikanga: An introduction to te ao Māori. ➤ Emotional safety in Pediatrics. Assn of Child Life Professionals. www.childlife.org
<p>4. Communication</p> <p>Outcome: Communicates effectively with children, young people and families, with colleagues and with others</p>	<ul style="list-style-type: none"> ➤ Therapeutic relationships in child life. McCue, K. (2009). In R.H. Thompson (Ed.), <i>The Handbook of Child Life: A Guide for Pediatric Psychosocial Care.</i> (Chapter 4, pp. 57-77) ➤ Communication in child life. Klinzing, D.G. & Klinzing, D. (2009). In R.H. Thompson (Ed.), <i>The Handbook of Child Life: A Guide for Psychosocial Care.</i> (Chapter 5 pp78-94) ➤ Talking with children and families about health care experiences. In L. Gaynard, J. Wolfer, J. Goldberger, R. Thompson, L. Redburn, & L. Laidley (Eds., 1998), <i>Psychosocial Care of Children in Hospitals: A Clinical Practice Manual from the ACCH Child Life Research Project.</i> Chapter 6. pp. 57-66. ➤ Interactions addressing separation issues. In L. Gaynard, J. Wolfer, J. Goldberger, R. Thompson, L. Redburn, & L. Laidley (Eds., 1998), <i>Psychosocial Care of Children in Hospitals: A Clinical Practice Manual from the ACCH Child Life Research Project</i> (Chapter 8, pp. 86-91)
<p>5. Professional relationships</p> <p>Outcomes: Relates to others in a professional, collaborative, collegial and supportive manner.</p>	<ul style="list-style-type: none"> ➤ Looking Back to Move Forward (2023) HPSRC Orientation handout: Brief background to developments within the HPS profession in Aotearoa New Zealand. ➤ Border Crossings: Early Childhood Teachers' Experiences in Healthcare Settings. Kayes, Marianne (2007) <i>NZ Research in Early Childhood Education, Vol 10.2007</i> ➤ Interprofessional work with young children in hospital: the role of 'relational agency', Joce Nuttall, Early Years (2013): <i>Early Years: An International Research Journal</i>, DOI:10.1080/09575146.2013.830283- ➤ The Value of Certified Child Life Specialists: Direct and downstream Optimization of Paediatric Patient and Family Outcomes. Jan 2020 <i>Association of Child Life Specialists.</i> www.childlife.org
<p>6. Professional development and leadership</p> <p>Outcome: Continually develops professional knowledge and practice and seeks and uses opportunities to show leadership.</p>	<ul style="list-style-type: none"> ➤ Wilson, JM and Cross, J. Program Administration and Supervision. In R. H. Thompson (Ed.), <i>The Handbook of Child Life.</i> (Chapter 10, pp. 199-219) ➤ Sighted: HPSAANZ HPS Professional Progression framework. (2003- update in progress August 2023) ➤ Sighted Te Whatu Ora Health New Zealand Allied and Public Health Career Framework for regional area.

	<ul style="list-style-type: none"> ➤ Sighted: New Zealand PSA/Allied Health, Public Health & Technical Collective- Professional expectation of practice for allied health professionals ➤ -Sighted HPSRC Registration Handbook and support resources. http://www.hospitalplay.org.nz/Registration/registrationresources
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Additional professional readings of interest: For the purposes of establishing base mandatory readings within the transition pathway the decision was made to limit the number of text books. Attention is drawn to the references within these mandatory readings as they provide a rich source of other readings that can be used within a self- directed or in an employer supported HPS learning programme to strengthen the knowledge and skills for HPS clinical practice.

The HPSRC flyer “UPDATES” sent out tri annually, has a section sharing information on resources relevant to the HPS role and workforce development.

Registration Resources: Within the HPSAANZ website Registration resource page are guidance sheets, exemplars, templates for PD evidence and HPSRC assessment framework resources to assist the transition into the HPS role.

Evidence requirement for mandatory readings

Provide a reflection record using HPSRC evidence templates available of the required readings within a competency. Evidence must be submitted using an HPSRC evidence template for an individual reading or template as a literature review i.e., grouping the readings within a specific competency section.

The evidence record will provide information on the reading(s), date of reading, learning outcomes and reflection on relevance to current clinical practice competency. An example of the HPSRC evidence templates available on the HPSAANZ website has been included.

<http://www.hospitalplay.org.nz/Registration/registrationresources>

3.0 TRANSITION PATHWAY- MANDATORY PD REQUIREMENTS

3.1 Professional development -Tikanga Māori

Complete Te Whatu Ora Health New Zealand employee Tikanga Māori inservice. Minimum requirements of four hours.

Evidence required: Provider certificate of attendance or completion of an HPSRC evidence template for a workshop or seminar attendance.

3.2 Professional development – youth health

Complete an approved seminar (minimum 6 hours) on working with young people. Seminar must include a component on youth development. If you are unsure whether a course is suitable, please check with the HPSRC prior to enrolment. Contact hpsreg@gmail.com

Evidence required: Provider certificate of attendance or completion of the HPSRC evidence template for a workshop.

3.3 Professional Development - professional identity and regional networking

In common with colleagues internationally in similar fields many newly employed into the hospital play specialist role in Aotearoa New Zealand have identified early challenges in gaining a sense of their profession identity and professional respect within healthcare teams.¹⁶ The 2022 feedback in the HPSRC review of the transition seminars¹⁷ the participants indicated the value the face to face

¹⁶ Kayes, Marianne (2007) Border Crossings: Early Childhood Teachers’ Experiences in Healthcare Setting. NZ Research in Early Childhood Education, Vol 10, 2007

¹⁷ HPSRC Report (March 2022) Planning Forward www.hospitalplay.org.nz Registration / annual reports

opportunities had in transitioning newly employed HPS into their professional role locally and regionally, and within the development of their professional health networks nationally.
Mandatory requirement - Attendance of one day (6 hours) at a HPSAANZ endorsed professional development (PD) event on clinical practice i.e., HPSAANZ bi-annual professional conference or a regional kotahitanga cluster meeting.

Evidence required: Reflection provided to team leader/ line manager on learning outcomes as a developing HPS and professional networking made.

Note: Specific clinical presentations attended may be claimed within PD requirements in the record of professional development submitted for full registration.

If the above PD opportunities have not been available, a professional visit to one of four regional centres will be accepted for this mandatory requirement for Registration purposes. Initially the HPS Services approved by the HPSRC for meeting HPS transition pathway mandatory requirements will be HPS Service at Starship, Kidz First, Waikids and Christchurch.

Conditions apply to this option and a written request for HPS visit to be initiated by team leader (see *transition pathway form three: Request for HPS Professional practice visit*). Request to include:

- professional profile of the HPS seeking visit to regional or national HPS Service
- current area of professional practice
identified focus areas for the visit i.e., observations of HPS clinical practice within a specific focus; opportunity to sight HPS Service policies and procedures/ HPS Services models of care or scope of practice documents.
- confirmation that mandatory readings within competency 1.0 (Professional knowledge and practice) and competency 5.0 (Professional relationships) have been completed.

Evidence of professional visit required: Reflection provided to team leader on learning outcomes as a developing HPS and the professional networking made.

Note: Visits to HPS Services are not accepted for the required professional development of 10 hours within the year before an application for full Registration.

Transition pathway form one

HPSRC TRANSITION PATHWAY CHECKLIST

(Please retain as this checklist and evidence held must be submitted if the HPS Registration application is audited)

Mandatory requirements for full HPS Registration		Applicant: Date completed, and evidence held. *Signature of person verifying evidence held
	<p>NAME</p> <p>Date employment commenced.....</p> <p><i>Requires verification of the completion date of each competency's mandatory requirements and of the evidence the HPS holds.</i></p>	
1. Professional knowledge in practice.	<ul style="list-style-type: none"> ➤ Planning child life care. <i>Clinical Practice Manual</i> (Chapter 4, pp. 39-46) ➤ Interactions Addressing Separation Issues <i>Clinical Practice Manual</i> (Chapter 8 pp 85-90) ➤ Paradigms of play. <i>The Handbook of Child Life: (Chapter 8, pp. 136-159)</i> ➤ Assessment and documentation in child life. <i>Handbook of Child Life: (Chapter 7, pp. 117-135)</i> ➤ Psychological preparation and coping. <i>The Handbook of Child Life: (Chapter 9, pp. 160-198)</i> ➤ Mandatory PD requirement: Youth Health PD- 6 hrs. <p>*Verification of evidence sighted</p>	
2. Safe ethical and legal practice	<ul style="list-style-type: none"> ➤ Theoretical foundations of child life practice. <i>Handbook of Child Life: (Chapter 2, pp. 23-35)</i> ➤ Sighted HPSAANZ Official documents (Available on www.hospitalplay.org.com) HPS Professional Competencies; Code of Ethics; Guiding Principles; Registration Handbook. ➤ Sighted: HPS Service's policies and guidelines; Expectations of practice and career framework for allied health professionals <p>*Verification of evidence sighted</p>	
3. Culturally safe practice	<ul style="list-style-type: none"> ➤ Family centred care and implications for Child Life (2009) <i>Handbook of Child Life: (Chapter 6. pp 95-115)</i> ➤ Building supportive relationships with children and families. <i>Clinical Practice Manual Chapter 5. pp. 47-56).</i> ➤ Te Whare Tapa Whā- Māori Health Model. www.health.govt.nz ➤ Tikanga: An introduction to Te Ao Māori. Opai Keri (2021) ➤ Mandatory PD requirement: Te Whatu Ora New Zealand Health tikanga Māori inservice- minimum 4 hrs. <p>*Verification of evidence sighted</p>	

4. Communication	<ul style="list-style-type: none"> ➤ Therapeutic relationships in child life. <i>Handbook of Child Life: (Chapter 4, pp. 57-77)</i> ➤ Communication in child life. <i>Handbook of Child Life. (Chapter 5 pp 78-94)</i> ➤ Talking with children and families about health care experiences. <i>Clinical Practice Manual Chapter 6. pp. 57-66.</i> <p>*Verification of evidence sighted</p>	
5. Professional relationships	<ul style="list-style-type: none"> ➤ HPSRC Looking Back to Move Forward (2023) Brief background to developments within the HPS profession in Aotearoa New Zealand. ➤ Border Crossings: Early Childhood Teachers’ Experiences in Healthcare Settings. <i>Kayes, Marianne (2007)</i> ➤ Interprofessional work with young children in hospital: the role of ‘relational agency’, <i>Joce Nuttall, Early Years (2013) Early Years: An International Research Journal, DOI:10.1080/09575146.2013</i> ➤ Emotional safety in pediatrics. Assn of Child Life Professionals (ACLP) www.childlife.org ➤ -Mandatory PD attendance- one day HPS specific PD at HPSAANZ professional conference/cluster meeting or a one-day professional visit to identified HPS Service <p>*Verification of evidence sighted</p>	
6. Professional development and	<ul style="list-style-type: none"> ➤ Program Administration and Supervision. <i>Handbook of Child Life. (Chapter 10, pp. 199-219)</i> ➤ The Value of Certified CLS. Direct and Downstream Optimization of Pediatric Patient and Family Outcomes (2022) Assn of Child Life Professionals. www.childlife.org <p>*Verification of evidence sighted</p>	

Verification by team leader/direct line manager of HPS Service that all transition pathway mandatory requirements have been met and evidence indicated on transition pathway checklist form sighted.

**If the same person is able to verify each HPS competency requirements, then they may initial each competency section and complete the verification section below See footnote ¹⁸ below.*

Date transition pathway mandatory requirements completed.....

Verified by: Print

Name.....Signed.....

Title Date

¹⁸ NOTE: In event an HPS changes employment before completing ALL transition pathway mandatory requirements the HPS will need to have the team leaders at the respective HPS Services verify mandatory requirements completed within their service. This will require a transition pathway checklist for each of the respective HPS Service.

Transition pathway form two	
TRANSITION PATHWAY: VERIFICATION of PD LOG EVIDENCE	
<i>For HPS Registration purposes evidence held on all mandatory requirements to be verified by team leader/line manager¹⁹</i>	
<i>This section of the transition pathway log to be submitted within PD log in an initial application for HPS Registration.</i>	
NAME HPS Employment commenced	Applicant: Provide date completed and evidence held for each competency. Transition pathway checklist and evidence held to be sighted by person verifying PD log evidence.
HPS COMPETENCY	
1. Professional knowledge in practice – five readings Mandatory PD: Youth Health – 6 hrs. requirement	
2. Safe ethical and legal practice – one reading Professional documents sighted – see list below	
3. Culturally safe practice - three readings Professional documents sighted – see list below Mandatory PD: Te Whatu Ora Tikanga Māori in-service (min 4hrs requirement)	
4. Communication – four reading	
5. Professional relationships – four readings Mandatory PD attend HPS clinical practice - 6 hrs	
6. Professional development and leadership – three readings Professional documents sighted see list below:	
Professional documents sighted by applicant: <ul style="list-style-type: none"> ➤ -HPSAANZ Official documents, <li style="padding-left: 20px;">-HPSRC Registration Handbook and website resources ➤ Allied and Public Health Career Framework for Te Whatu Ora Health New Zealand region ➤ New Zealand PSA/Allied Health Professional Expectation of Practice ➤ Employer & HPS Service’s policies and guidelines 	Signature of applicant and date sighted.

Verification: transition pathway checklist for mandatory requirements and the evidence held sighted

Name:

Print *Title:*.....

Signed:.....

Date:.....

¹⁹ In HPS Services where an individual HPS has no HPS team leader, the person who is their direct line manager should verify the transition pathway log.

REQUEST FOR HPS PROFESSIONAL PRACTICE VISIT	
REQUEST TO: <i>(print HPS Service name)</i>	
REQUEST FROM: <i>(print HPS Service name)</i>	
REQUEST FOR <i>(print name of HPS seeking professional visit)</i>	
PROPOSED DATE FOR PROFESSIONAL VISIT <i>advise date/ day / time being proposed</i>	
HPS Team leader or person making request and their title	
Contact details for follow up- <i>advise title i.e. HPS, team leader or other and email or telephone details</i>	
Confirm mandatory readings for competency one and five completed.	
BRIEF PROFILE OF THE HPS SEEKING VISIT: <i>Qualifications, experience relevant to HPS role, date of employment into HPS role, current clinical practice area.</i>	
FOCUS AREAS WITHIN VISIT <i>i.e. Observation of HPS clinical practice (advise any specific interest area) Opportunity to sight HPS Service policies and procedures, operational manuals, scope of HPS Service and clinical programmes. Sight HPS Service's models of care and HPS Service HPS scope of practice documents Documentation / planning and assessment / evaluation EC programme Korero with experienced HPS or HPS resource person re specific area of interest</i>	List focus areas
APPROVAL/ DECLINED/ POSTPONED. Comments	

EXAMPLE OF HPSRC EVIDENCE TEMPLATE

Download www.hospitalplay.org.nz/Registration tab in Registration resources

HOSPITAL PLAY SPECIALIST REGISTRATION COUNCIL EVIDENCE TEMPLATE

Article of Interest reviewed for NZHPSReg PD requirements

(This template is provided as guidance for the evidence that should be held within a professional portfolio for verification of your record of professional development prior to being submitted for Registration)

Please provide the following information to illustrate your understanding of the content and how this relates to your current learning or objectives

Article Reference *(include authors, title, publication, page numbers and date)*

Example

Mahanjan, L., Wylei,R., Steffan, R., Kay, M., Kitaoka, G., Dettorre,J., Samra, S. & McCue,K (1998). The effects of a psychological preparation program on anxiety in children and adolescents undergoing gastrointestinal endoscopy. *Journal of Paediatric Gastroenterology and Nutrition*. 21, 161-165

Summarise the reason for selecting this reading *(how does it link to current learning needs/goals/role and the significance to your practice)*

Summary of the key points/findings/new knowledge *(provide at least three points of interest)*

Illustrate how this reading may influence your practice *(does it support your current knowledge / way of working or has it highlighted a potential change in practice? Link this to current role and goals)*

Presented to:

Date:

Verification by professional leader/team leader:

Signature

(print name/role)