

Review of Registered Nurse Accreditation Standards

Consultation paper 3

Owner: Accreditation

Audience: For stakeholders

Date of Issue: January 2019

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Executive summary

The proposed Registered Nurse Accreditation Standards (RNAS) have undergone significant revision as a result of the second consultation. This consultation paper presents the proposed RNAS for a final round of consultation. Upon completion of consultation stage three, the RNAS will be presented to the ANMAC board for ratification prior to being presented to the Nursing and Midwifery Board of Australia (NMBA) for approval.

Aim of the review

The aim of this review is to develop a revised set of standards that are:

- contemporary and aligned with emerging research, policy and best practice
- able to ensure registered nurses are suitably educated and qualified to practice in a competent and ethical manner to the NMBA Registered Nurse standards for practice
- acceptable to the profession and relevant stakeholders
- able to support continuous development of a flexible, responsive and sustainable Australian health workforce
- supportive of innovation in the education of registered nurses
- supportive of safe accessible quality care for consumers and the community

Review process

ANMAC, as an independent accrediting authority, must comply with Health Practitioner Regulation National Law Act 2009 (the National Law) when reviewing and developing accreditation standards. The National Law states in section 46 (2):

In developing an accreditation standard for a health profession, an accreditation authority must undertake wide-ranging consultation about the content for the standard.

ANMAC's review process ensures stakeholder feedback, expert opinion, relevant national or international benchmarks, and the best available evidence is used in developing standards. The iterative process for stakeholder consultation provides ANMAC with an opportunity to:

- validate whether revised accreditation standards are accurate and relevant for a contemporary Australian healthcare system and education environment
- evaluate whether the expectations upon education providers to meet revised standards are reasonable in terms of benefits and burdens.

Stakeholder-identified benefits and burdens are considered by the Office of Best Practice Regulation, Department of the Prime Minister and Cabinet, during the preliminary assessment of the regulatory impact of the revised standards.

A robust review process is essential if ANMAC is to assure the NMBA and community that a graduate of an accredited registered nurse program is eligible for registration and can practice in a safe and competent manner.

Purpose of Consultation Paper 3

The consultation paper contributes to stage 3, the final stage of consultation undertaken by ANMAC to gather feedback from stakeholders. On completion of this stage, the proposed standards will be presented

to the ANMAC Board for ratification prior to presentation to the NMBA for approval. The RNAS will be published 30 days after approval from the NMBA.

Consultation process

ANMAC's Chief Executive Officer (CEO) convened a Professional Reference Group to work with the Director of Accreditation Services and guide the review. Membership comprised key stakeholders and nursing professionals who could share insights into regulation, education, health policy and practice. Members were selected after the CEO reviewed expressions of interest. The Professional Reference Group reports and provides advice to the CEO.

Members are:

- Professor Amanda Henderson, School of Nursing and Midwifery, Griffith Health, Griffith University
- Professor Melanie Birks, Head of School of Nursing, Midwifery and Nutrition, College of Healthcare Science, James Cook University
- Dr Lynne Stuart, Senior Lecturer in Nursing, School of Nursing and Midwifery, Faculty of Science, Health, Education and Engineering, University of Sunshine Coast
- Ms Kathryn Riddell, Executive Director, Learning and Teaching, Nursing and Midwifery, Eastern Health
- Adjunct Associate Professor Kim Ryan, Chief Executive Officer, Australian College of Mental Health Nurses
- Ms Ann Maree Keenan, Chief Nurse and Midwifery Officer, Department of Health and Human Services, Victoria
- Ms Bronwyn Clark, Chief Executive Officer, Australian Pharmacy Council
- Ms Julie Reeves, Federal Professional Officer, Australian Nursing and Midwifery Federation
- Professor Donna Waters, Head of School and Dean, The University of Sydney Susan Wakil School of Nursing and Midwifery (Sydney Nursing School)
- Mr Ethan Althofer, Senior Project Coordinator, Campus Development, University of Canberra
- Professor Phillip Della, Head of School, School of Nursing, Midwifery and Paramedicine, Curtin University
- Ms Petrina Halloran, Policy Manager, Strategy and Policy, NMBA, Australian Health Practitioner Regulation Agency
- Dr Wendy Penney, ANMAC, Associate Director
- Dr Margaret Gatling, ANMAC, Director of Accreditation Services

(Is currency as a practicing RN a requirement for this panel?)

How stakeholders can participate

Stakeholders are invited to provide feedback on the final proposed Registered Nurse Accreditation Standards (RNAS) via written submission. Written submissions must include the stakeholder's name and contact details (phone number, email and address).

Submissions can be emailed to ANMAC: standardsreview@anmac.org.au or

posted to:

Standards Review

Australian Nursing and Midwifery Accreditation Council
GPO Box 400
Canberra City ACT 2601

Unless specified otherwise, all written submissions will be published on ANMAC's website. If material is supplied in confidence, it should be clearly marked 'In confidence' and be provided as a separate attachment to non-confidential material. Information that is confidential or submitted in confidence will be treated as such.

A summary of feedback to this consultation paper will be published on ANMAC's website and a link emailed to stakeholders.

Background

The proposed Registered Nurse Accreditation Standards (RNAS) have undergone significant revision by ANMAC and the PRG as a result of the feedback received from consultation paper two. Synthesis of the feedback is presented on the ANMAC website along with the publishable responses received. Many responses provided criterion specific feedback and as a result, most criterion have changed.

Several responses addressed the minimum 800 hours of professional experience placement stating that it is insufficient to address expected graduate outcomes. There is limited quality evidence to support a change to the number of hours however, the Council of Deans of Nursing and Midwifery are undertaking projects looking at professional experience placements. The Chief Nursing and Midwifery officer is also managing a review of nursing education in 2019. ANMAC looks forward to the outcomes of these projects as evidence to support a change to the number of hours for professional experience placements in the RNAS in the future. The 800 hours stated in the proposed standards is a minimum requirement and education providers can offer more hours if placements can be secured.

The evidence guide which will partner the RNAS, will be developed in conjunction with education providers and stakeholders at an invitational workshop in February 2019.

The proposed Registered Nurse Accreditation standards are presented in table 1.

Table 1: Proposed Registered Nurse Accreditation Standards

Standard 1: Safety of the public
1.1 The program’s guiding principle is safety of the public.
1.2 The program is delivered in Australia to prepare graduates for safe and ethical practice.
1.3 The education provider ensures that organisations in which students undertake professional experience placement have: <ul style="list-style-type: none"> a) evidence-based quality and safety policies and processes that meet relevant jurisdictional requirements and standards b) registered nurses who are prepared for the role and are able to supervise and assess students during all professional experience placements Do the mentors/ supervisors require Bachelor of Nursing or higher qualifications and their Cert IV TAE? This is a key issue particularly for the Diploma of Nursing courses (due to challenges with ASQA practical assessment requirements in at least four HLTENN units). c) inter-professional practice settings where teaching and learning can be in collaboration with other relevant registered health practitioners. An open ended statement- may need further clarification about specific qualifications. A footnote could be added here.
1.4 Students are registered with the Nursing and Midwifery Board of Australia (NMBA) prior to commencing their first professional experience placement ¹ .
1.5 The education provider undertakes screening and management of students who present with an impairment ² and reports to the NMBA as required. (does the RTO or education provider also have a duty of care to disclose their concerns in these circumstances?)
1.6 Program admission requirements are fair, equitable and transparent. Before accepting an offer of enrolment applicants must: <ul style="list-style-type: none"> a) meet the program’s inherent requirements b) provide evidence of meeting the NMBA’s English language skills registration standard³ c) be informed of NMBA registration requirements⁴.
1.7 Program progression policies allow student access to professional experience placement where the student is deemed competent to attend.

¹ Student registration: Nursing and Midwifery Board of Australia, 2017. Available from: <https://www.nursingmidwiferyboard.gov.au/Registration-and-Endorsement/Student-Registration/Fact-sheet-education-providers.aspx>

² Definition available from: <https://www.ahpra.gov.au/Registration/Graduate-Applications-for-Registration-FAQs/Registration-Standards-FAQs.aspx#impairment>

³ Registration standard: English language skills. Nursing and Midwifery Board of Australia, 2019. Available from: <https://www.nursingmidwiferyboard.gov.au/Registration-Standards/English-language-skills.aspx>

⁴ Registration Standards: Nursing and Midwifery Board of Australia. Available from: <https://www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx>

Standard 2: Governance

2.1 Academic governance arrangements for the program of study includes:

- a) current registration by the Tertiary Education Quality and Standards Agency as an Australian university or other higher education provider
- b) mechanisms to meet relevant national or state regulatory requirements
- c) listing on the Australian Qualifications Framework National Registry for the award of a Bachelor Degree as a minimum.

2.2 The governance structure for the provider and the school conducting the program ensures the:

- a) academic oversight of the program and promotes high-quality teaching and learning experiences for students to enable graduate competence
- b) Head of Discipline is a registered nurse with the NMBA, without conditions on their registration relating to conduct, and holds a relevant post-graduate qualification.

2.3 Relevant input to the design and ongoing management of the program exists from external representatives of the nursing profession, including Aboriginal and/or Torres Strait Islander peoples, consumers, students, carers and other relevant stakeholders.

2.4 All entry pathways for which students receive block credit or advanced standing (other than on an individual basis) are identified and allow graduates to meet the Registered Nurse standards for practice.⁵

2.5 Program quality improvement mechanisms addresses:

- a) risk assessment of student learning environments
- b) student evaluations
- c) internal and external academic and health professional evaluations
- d) evidence-based developments in health professional education
- e) evidence-based developments in health and health care.

Standard 3: Program of study

3.1 The curriculum document articulates the educational philosophy and how it is practically implemented into the program of study.

3.2 Teaching and learning reflects contemporary practices in health and education, and responds to emerging trends based on research, technology and other forms of evidence. No more than one semester of the program is completed outside Australia.

⁵ <https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/registered-nurse-standards-for-practice.aspx>

3.3 Program content and unit learning outcomes ensures:

- a) achievement of the Registered Nurse Standards for Practice¹
- b) recognition of regional, national and global health priorities
- c) recognition of safety and quality standards as they relate to healthcare
- d) integrated knowledge of care across the lifespan, including aged care, primary health care and digital health.

3.4 Program content and subject learning outcomes embeds principles of interprofessional and intra-professional learning and practice.

3.5 Program content and subject learning outcomes integrates cultural diversity and cultural safety.

3.6 Program content and subject learning outcomes supports the development of research skills that include searching and reviewing research and other evidence for translation into practice.

3.7 Program content and subject learning outcomes prepares students to supply under a structured prescribing arrangement.

3.8 The program includes:

- a) Aboriginal and Torres Strait Islander peoples' history, culture and health taught from an Indigenous perspective as a discrete unit of study and based on the Nursing and Midwifery Aboriginal and Torres Strait Islander Health Curriculum Framework⁶
- b) content relevant to health outcomes of Aboriginal and Torres Strait Islander peoples embedded throughout the program.

3.9 The program includes:

- a) a discrete unit addressing mental health taught by a registered nurse with a formal qualification in mental health
- b) mental health content embedded throughout the program.

3.10 The program includes:

- a) a minimum of 800 hours of professional experience placement, exclusive of simulation and not exceeding 130 hours (one-sixth) undertaken outside Australia
- b) **a minimum of 400 hours of professional experience placement for Diploma of Nursing programs**
- c) professional experience placements underpinned by contractual arrangements between education providers and placement providers.

⁶ Available from: <https://www.linmen.org.au/project/nursing-and-midwifery-aboriginal-and-torres-strait-islander-health-curriculum-framework/>

3.11 Program resources are sufficient to facilitate support student achievement of the Registered Nurse Standards for Practice, with attention to human, physical and financial resources supporting all teaching and learning environments, including simulated practice and professional experience placements.

3.12 Staff teaching into the program:

- a) are qualified and experienced to deliver the units they teach
- b) are registered nurses when the subject relates to nursing practice
- c) hold one qualification higher than the program of study being taught. (this may need to be more explicit. E.g. taking in consideration the hospital trained RNs versus Bachelor of Nursing RNs)

Standard 4: Student experience

4.1 Program information provided to students is relevant, timely, transparent and accessible.

4.2 The education provider identifies and supports the academic learning needs of students.

4.3 Students are informed of, and have access to, effective grievance and appeals processes.

4.4 Students are informed of, and have access to, pastoral and/or personal support services provided by qualified personnel.

4.5 Students are represented on program advisory and decision-making committees.

4.6 Principles of equity and diversity are evident in student and/or staff interactions and teaching and learning materials.

4.7 Student experiences across all teaching and learning environments are monitored and evaluated regularly with outcomes informing program quality improvement.

Standard 5: Student assessment

5.1 Program learning outcomes and assessment strategies are aligned.

5.2 Unit learning outcomes, with associated unit assessments, are clearly mapped to the Registered Nurse Standards for Practice.

5.3 Validated assessment tools, modes of assessment, sampling and moderation are used to ensure integrity in theoretical and clinical assessments.

5.4 Assessments include the appraisal of competence in pharmacokinetics, pharmacodynamics and the quality use of medicines.

5.5 Formative and summative assessments are used across the program to enhance learning and inform student progression.

5.6 The education provider is ultimately accountable for ensuring students are supervised and assessed by a registered nurse while on professional experience placement.

Glossary

AHPRA – Australian Health Practitioner Regulation Agency, is the organisation responsible for the implementation of the National Registration and Accreditation Scheme across Australia.

ANMAC – Australian Nursing and Midwifery Accreditation Council, independent accrediting authority for nursing and midwifery education under Australia's National Registration and Accreditation Scheme.

ANZCCNMO – Australian and New Zealand Council of Chief Nursing and Midwifery Officers.

Competence – the combination of skills, knowledge, attitudes, values and abilities underpinning effective and /or superior performance in a profession or occupational area.

Education provider/program provider – university, or other higher education provider, responsible for a program of study leading to the award of a Bachelor Degree in nursing as a minimum.

Governance – framework, systems and processes supporting and guiding the organisation towards achieving its goals and the mechanisms by which it, and its people, are held to account. Ethics, risk management, compliance and administration are all elements.

Individual basis – refers to applicants for a program of study that are applying for recognition of prior learning outside of an accredited pathway.

Health Practitioner Regulation National Law Act 2009 (the National Law) – legislation contained in the schedule to the Act, which provides for the full operation of the National Registration and Accreditation Scheme for health professions from 1 July 2010. It covers the more substantial elements of the national scheme, including registration arrangements, accreditation arrangements, complaints, conduct, health performance arrangements and privacy and information – sharing arrangements. The purpose is to protect the public by establishing a national scheme for regulating health practitioners and students undertaking programs of study leading to registration as a health practitioner.

Inter-professional learning – when two or more professions learn with, from and about each other to improve collaboration and the quality of care.

Intra-professional learning – when learners from the one or similar profession learn about, from and with each other to enable effective collaboration and improved outcomes.

NMBA – Nursing and Midwifery Board of Australia, functions of the Board include:

- registering nursing and midwifery practitioners and students
- developing standards, codes and guidelines for the nursing and midwifery profession
- handling notifications, complaints, investigations and disciplinary hearings
- assessing overseas trained practitioners who wish to practise in Australia
- approving accreditation standards and accredited courses of study.

Registered nurse – a person with appropriate educational preparation and competence for practice, who is registered by the NMBA as a registered nurse to practise nursing in Australia.

Simulated learning – refers to a variety of activities using patient simulators, including devices, trained persons, lifelike virtual environments, and role-playing. SBE experiences strengthen, mimic or replace real-life clinical situations. SBE aims to enable students to reason through a clinical problem and make decisions, without compromising patient wellbeing.

Standard – level of quality or attainment.

Student – any person enrolled in a program from which graduates are eligible to apply for registration to practice as a registered nurse.

Supervision – can be direct or indirect:

Direct supervision - is when the supervisor is present and personally observes, works with, guides and directs the person being supervised.

Indirect supervision - is when the supervisor works in the same facility or organisation as the supervised person but does not constantly observe their activities. The supervisor must be available for reasonable access. What is reasonable will depend on the context, needs of the person receiving care and the needs of the person being supervised.

Professional experience placement – involves placement, for a set period, in clinical settings across health facilities. During this period, students apply theoretical knowledge in the healthcare setting, develop practice skills and become socialised into the nursing profession.

Program or program of study – full program of study and experiences that must be completed before a qualification recognised under the AQF, such Bachelor or Master of Nursing, can be awarded.

