



Australian
Nursing & Midwifery
Accreditation Council

Re-entry to practice Enrolled Nurse Accreditation Standards

2020

© ANMAC 2020

This work is copyright. You may download, display, print and reproduce this material in unaltered form only (retaining this notice) for your personal, non-commercial use or use within your organisation. Apart from any use as permitted under the Copyright Act 1968, all other rights are reserved. Requests and inquiries concerning reproduction and rights should be addressed to Copyright, ANMAC, GPO Box 400, Canberra ACT 2601

Published by the Australian Nursing and Midwifery Accreditation Council (ANMAC), Canberra, 2020.

This document is online at
<https://www.anmac.org.au/search/publication>

Contents

Acknowledgements	2
1. Introduction	3
2. Background	4
2.1 Review of the Re-entry to practice Enrolled Nurse Accreditation Standards	4
2.2 Consultation	5
2.3 Glossary	5
3. Re-entry to practice Enrolled Nurse Accreditation Standards	6
Standard 1: Governance	6
Standard 2: Curriculum conceptual framework	7
Standard 3: Program development and structure	8
Standard 4: Program content	9
Standard 5: Student assessment	10
Standard 6: Students	11
Standard 7: Resources	12
Standard 7: Management of professional experience placement	13
Standard 9: Quality improvement and risk management	14
References	15

Acknowledgements

The Board of the Australian Nursing and Midwifery Accreditation Council (ANMAC) gratefully acknowledges the expertise, time and commitment contributed by each member of the Education Reference Group (ERG) and ANMAC staff, to review and update these Re-entry to practice Enrolled Nurse Accreditation Standards.

ERG membership comprised:

- Professor Melanie Birks
- Ms Julie Fereday
- Ms Robin Girle
- Ms Susan Hopkins
- Ms Gabrielle Koutoukidis
- Ms Kate McCluskey
- Ms Corinne op't Hoog
- Ms Virginia Stanley
- Dr Margaret Gatling.

ANMAC staff:

- Ms Frances Rice
- Ms Jackie Doolan.

ANMAC also acknowledges individuals and organisations who participated in the consultation.

ANMAC commends these accreditation standards to the Nursing and Midwifery Board of Australia (NMBA) and acknowledges the support of the NMBA in their review and revision.

1. Introduction

The Re-entry to practice Enrolled Nurse Accreditation Standards (the standards) are used to accredit and assess programs of study offered to previously registered enrolled nurses who no longer meet the NMBA's Registration standard: Recency of practice (1). The standards allow education providers to support students to meet the NMBA Enrolled nurse standards for practice (2) by way of an ANMAC accredited program approved by the NMBA as an approved program of study. This ensures graduates of these programs can practise safely and competently. Completion of this program allows graduates to re-enter the register as an enrolled nurse.

The *Health Practitioner Regulation National Law Act 2009* (National Law) (3) legislates the National Registration and Accreditation Scheme for health practitioners. Section 4(3)(2) sets out the National Law's six objectives, which are:

- a. to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered; and
- b. to facilitate workforce mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction; and
- c. to facilitate the provision of high-quality education and training of health practitioners; and
- d. to facilitate the rigorous and responsive assessment of overseas-trained health practitioners; and
- e. to facilitate access to services provided by health practitioners in accordance with the public interest; and
- f. to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners (3).

These objectives, particularly a, c and f, and the Australian Health Practitioner Regulation Agency (Ahpra) Procedures for developing accreditation standards (4) were used in this review of these standards.

Wide-ranging consultation was undertaken during the review. Stakeholders had the opportunity to provide written submissions during consultation. Feedback was then reviewed by the ERG before the standards were finalised.

The draft standards were presented to the Office of Best Practice Regulation (OBPR) for review. OBPR determined that a regulatory impact statement was not required.

2. Background

2.1 Review of the Re-entry to practice Enrolled Nurse Accreditation Standards

ANMAC reviews accreditation standards based on:

- its Protocol for the review and development of accreditation standards (5)
- Ahpra's Procedures for the development of accreditation standards (4) which includes the Council of Australian Government's (COAG) Best Practice Regulation principles (6).

Principle 6 requires a review of regulations from time-to-time to ensure they remain contemporary. The current Enrolled Nurse Accreditation Standards (7) were published in 2017 after approval by the NMBA; however the Accreditation Standards for re-entry to practice programs for former enrolled nurses whose registration had lapsed, date from 2010 (8) and needed to be reviewed to maintain currency.

An ERG (members listed in acknowledgements) was convened to oversee and provide advice to ANMAC's Chief Executive Officer. The ERG provided advice on standard development, stakeholder engagement and synthesis of feedback.

The Re-entry to practice Enrolled Nurse Accreditation Standards align with the key focus areas of the Enrolled Nurse Accreditation Standards (7); that is, the re-entry program is underpinned by clearly defined curriculum requirements that prepare students to meet the Enrolled nurse standards for practice. Like the Enrolled Nurse Accreditation Standards, the Re-entry to practice standards ensure that professional experience placements (PEPs) are of high quality. This is demonstrated by the requirement for:

- constructive relationships and clear contractual arrangements with all health services where professional placement experience occurs
- appropriate clinical supervision and assessment arrangements
- opportunities for student intraprofessional and interprofessional learning for collaborative practice
- students provided with appropriate, quality PEPs reflecting the major health priorities and broad landscape of enrolled nurse practice which facilitate students meeting the Enrolled nurse standards for practice.

The review complied with Section 46(2) of the National Law, which states 'in developing an accreditation standard for a health profession, an accreditation authority must undertake wide-ranging consultation about the content of the standard' (3). To this end, a list of stakeholders was developed in consultation with the ERG and invitations for participation were sent.

Consultation was conducted, offering opportunities for stakeholders to provide written submissions. The consultation included publishing a consultation paper on ANMAC's website. Consultation periods were 20 business days.

Public submissions for the consultation were published on ANMAC's website.

2.2 Consultation

The Re-entry to practice Enrolled Nurse Accreditation Standards were consulted on in one round as opposed to the three rounds stipulated in ANMAC's protocol (5). This was due to their similarity to the Enrolled Nurse Accreditation Standards 2017 (7).

During the consultation, stakeholders were asked to review the standards and provide written feedback. Six written submissions were received. Feedback received was criterion specific and related to the contemporary rewording of certain criteria. The feedback further ensured the standards aligned with similar re-entry to practice standards such as the Re-entry to the Register Midwife Accreditation Standards 2016 (9).

Overall, stakeholders were satisfied with the standards which enable graduates to meet the NMBA's Enrolled nurse standards for practice.

2.3 Glossary

Glossary terms in the Re-entry to practice Enrolled Nurse Accreditation Standards appear in ANMAC's online glossary. It is available on ANMAC's website (<https://www.anmac.org.au/glossary>).

3. Re-entry to practice Enrolled Nurse Accreditation Standards

Standard 1: Governance

The education provider has established governance arrangements for the nursing program of study that develop and deliver a sustainable, high-quality education experience for students, to enable them to meet the Nursing and Midwifery Board of Australia's (NMBA) Enrolled nurse standards for practice (2).

The education provider must provide evidence of:

- 1.1 Current registration with the Australian Skills Quality Authority, or other state regulator¹ as an Australian education provider offering a NMBA approved entry-to-practice enrolled nurse program.
- 1.2 Current NMBA approved entry-to-practice enrolled nurse program of study.
- 1.3 A program of study equivalent to Australian Qualification Framework minimum Level 5 program and issuance of a statement of completion or attainment by the education provider.
- 1.4 Current documented academic governance structure for the program provider that illustrates academic oversight of the Re-entry to the Register Enrolled Nurse program and promotes high-quality teaching and learning, scholarship, research and ongoing evaluation across all learning settings.
- 1.5 Terms of reference for relevant program advisory committees demonstrating partnerships with key stakeholders, including partnerships with Aboriginal and Torres Strait Islander health professionals, consumers and communities.
- 1.6 Staff delegations, reporting relationships and the role of persons or committees in making decisions related to the program.
- 1.7 Governance arrangements that ensure responsiveness to accreditation requirements for ongoing compliance with accreditation standards.
- 1.8 Credit transfer or the recognition of prior learning is not available to students seeking entry into the program.
- 1.9 Governance arrangements between the education provider and health service providers to monitor students' learning and teaching when undertaking professional experience placement (PEP) including, but not limited to, clinical teaching, supervision and assessment.

¹ Victorian Registration and Qualifications Authority or Training Accreditation Council Western Australia.

Standard 2: Curriculum conceptual framework

The program provider makes explicit and uses a contemporary conceptual framework for the program of study that incorporates an education philosophy and a philosophical approach to enrolled nurse practice.

The program provider must demonstrate:

- 2.1 A clearly documented and explained conceptual framework for the program, including underpinning educational and professional nursing philosophies.
- 2.2 Incorporation of contemporary Australian and international best practice teaching, learning and assessment methodologies and technologies to enhance the delivery of program content, accommodate differences in student learning styles and stimulate student engagement and learning.
- 2.3 A program of study congruent with contemporary and evidence-based approaches to enrolled nurse practice and education that are underpinned by principles of safety and quality in health care.
- 2.4 Learning and teaching approaches that:
 - a. enable achievement of stated learning outcomes
 - b. facilitate the integration of theory and practice
 - c. scaffold learning appropriately throughout the program
 - d. encourage the development and application of reflective and analytical practice
 - e. engender deep rather than surface learning
 - f. encourage students to become self-directed learners
 - g. embed recognition that graduates take professional responsibility for continuing professional development and life-long learning
 - h. instil in students the desire and capacity to continue to use and learn from research and implement evidenced-based care throughout their careers
 - i. promote emotional intelligence, communication, collaboration and teamwork, cultural safety and ethical practice, all of which are expected of an enrolled nurse
 - j. incorporate an understanding of, and engagement with, intraprofessional and interprofessional learning for collaborative practice.

Standard 3: Program development and structure

The program provider develops programs of study in collaboration and consultation with key stakeholders. Programs of study reflect contemporary trends in education and professional nursing, comply with the length and structure of the Australian Qualifications Framework for the qualification offered and enable graduates to meet the NMBA's Enrolled nurse standards for practice. PEPs are sufficient to enable safe and competent enrolled nursing practice by program completion.

The program provider must demonstrate:

- 3.1 Consultative and collaborative approaches to program design and program organisation between teaching staff, those working in health disciplines, students, consumers and other key stakeholders, including Aboriginal and Torres Strait Islander health professionals and communities.
- 3.2 Contemporary enrolled nursing and education practice in the program's development and design.
- 3.3 A map of units against the NMBA's Enrolled nurse standards for practice which clearly identify links between learning outcomes, assessments and required graduate outcomes.
- 3.4 Descriptions of program content and the rationale for extent, depth and sequencing in relation to the knowledge, skills and behaviours expected of students.
- 3.5 Opportunities for student interaction with other health professions to support understanding of the multi-disciplinary health care environment and facilitate intraprofessional and interprofessional learning for collaborative practice.
- 3.6 A minimum program of study length of three months full-time equivalent. Incorporation of a minimum of 160 hours of successfully completed PEP, not inclusive of simulation activities.
- 3.7 Content and sequencing of the program of study, as well as the incorporation of simulated learning opportunities, that prepare students for PEP.
- 3.8 PEP, undertaken in Australia, to consolidate the acquisition of competence and facilitate transition to practice. A summative assessment made at this time against the NMBA's Enrolled nurse standards for practice in the clinical setting.
- 3.9 Equivalence of unit outcomes for programs taught in Australia in all delivery modes in which the program is offered (units delivered on-campus or in mixed-mode, by distance or by e-learning methods).

Standard 4: Program content

The program provider delivers content that comprehensively addresses NMBA's Enrolled nurse standards for practice and incorporates Australian best practice perspectives on enrolled nursing as well as existing and emerging international, national and regional health priorities.

The program provider must demonstrate:

- 4.1 A comprehensive program content document structured around the conceptual framework that includes:
 - a. program structure and delivery modes
 - b. unit outlines that detail content, objectives, learning outcomes and associated assessment
 - c. links between unit learning outcomes and their assessment and the NMBA's Enrolled nurse standards for practice
 - d. learning and teaching strategies
 - e. PEP plans demonstrating opportunities to meet the NMBA's Enrolled nurse standards for practice.
- 4.2 The central focus of the program is enrolled nursing practice, comprising core health professional and specific enrolled nurse knowledge and skills and incorporating national and regional health priorities, health research, health policy and reform.
- 4.3 Research and evidence-based inquiry underpinning all elements of program content and delivery.
- 4.4 Program content supporting the renewal of knowledge and application of skills in:
 - a. person-centred care
 - b. evidence-based care
 - c. analytical and reflective practice
 - d. legal, regulatory and ethical requirements for contemporary practice
 - e. quality and safety principles
 - f. health informatics and health technology
 - g. cultural safety
 - h. pharmacokinetics, pharmacodynamics and the quality use of medicines relevant to the enrolled nurse legislated scope of practice.
- 4.5 Inclusion of subject matter that builds student appreciation for the diversity of Australian culture, develops their knowledge of cultural respect and safety, and engenders the appropriate skills and attitudes to enable culturally safe practice.
- 4.6 A discrete subject covering Aboriginal and Torres Strait Islander peoples', history, culture and health and taught from an Indigenous perspective. The program embeds health outcomes relevant to Aboriginal and Torres Strait Islander peoples.
- 4.7 The program is delivered within Australia, including PEP. Other learning experiences gained outside Australia are not included in unit objectives, learning outcomes or assessment.

Standard 5: Student assessment

The program provider incorporates various approaches to assessment that suit the nature of the learning experience and robustly measure achievement of required learning outcomes, including a summative assessment of student performance against the NMBA's Enrolled nurse standards for practice.

The program provider must demonstrate:

- 5.1 Ultimate accountability for assessing student PEPs.
- 5.2 A consistent approach to student assessment across teaching sites and modalities that is periodically reviewed and updated.
- 5.3 Clear statements about assessment and program progression requirements provided to students at the start of the program and the start of each unit.
- 5.4 The level, number and context of assessments are consistent with determining the achievement of stated learning outcomes.
- 5.5 Both formative and summative assessment types and tasks exist across the program to enhance individual and collective learning as well as inform student progression.
- 5.6 Various assessment approaches across a range of contexts to evaluate competence in the essential knowledge, skills and behaviours required for enrolled nurse practice.
- 5.7 Validated instruments are used in PEP assessment to evaluate student knowledge, skills, behaviours and achievement of the NMBA's Enrolled nurse standards for practice.
- 5.8 Assessments include the appraisal of competence in pharmacokinetics, pharmacodynamics and the quality use of medicines relevant to the enrolled nurse legislated scope of practice.
- 5.9 Evidence of procedural controls, fairness, reliability, validity and transparency in assessing students.
- 5.10 Processes to ensure the integrity of assessment across all modes.
- 5.11 Collaboration between students, health service providers and teaching staff in selecting and implementing assessment methods.
- 5.12 Summative assessment of student achievement of the NMBA's Enrolled nurse standards for practice conducted by a registered nurse in an Australian clinical context close to program completion.

Standard 6: Students

The program provider's approach to attracting, enrolling, supporting and assessing students is underpinned by values of transparency, authenticity, equal opportunity and an appreciation of social and cultural diversity.

The program provider must demonstrate:

- 6.1 Applicants are informed of the following before accepting an offer of enrolment:
 - a. the need to provide a current NMBA letter of referral stating eligibility for a re-entry program when applying
 - b. modes for program delivery and location of PEP
 - c. requirement to provide evidence of sufficient language, literacy and numeracy skills to successfully undertake the program's academic and PEP requirements, before starting
 - d. that education providers will, under *Health Practitioner Regulation National Law Act (2009)*, register students with the NMBA and notify AHPRA if a student undertaking clinical training has an impairment that may place the public at substantial risk of harm
 - e. specific requirements for right of entry to health services for PEP
 - f. NMBA requirements for registration as an enrolled nurse.
- 6.2 Students are selected for the program based on clear, justifiable and published admission criteria.
- 6.3 Students are informed about, and have access to, appropriate support services, including counselling, health care and academic advisory services.
- 6.4 Processes to enable early identification of, and support for, students not achieving academic learning outcomes or with conduct issues.
- 6.5 All students have equal opportunity to meet the NMBA's Enrolled nurse standards for practice. The mode or location of program delivery should not influence this opportunity.
- 6.6 Processes for student representation and feedback in matters relating to governance and program management, content, delivery and evaluation.
- 6.7 Affirmative action strategies are adopted to support the enrolment of Aboriginal and Torres Strait Islander students and a range of supports are provided to students as needed.
- 6.8 Policies are adopted to support the enrolment of students from culturally, socially and linguistically diverse backgrounds, and a range of supports are offered to these students.
- 6.9 Affirmative action strategies are adopted to support people with diverse academic, work and life experiences to enrol in the program.

Standard 7: Resources

The program provider has adequate facilities, equipment and teaching resources, as well as a sufficient number of qualified and capable staff, to enable students to meet the NMBA's Enrolled nurse standards for practice.

The program provider must demonstrate:

- 7.1 Sufficient staff, facilities, online tools, equipment and other teaching resources—in quality and quantity—for the anticipated student population and any planned increase.
- 7.2 Students have sufficient, and timely, access to program and clinical teaching staff to support their learning.
- 7.3 A balance of teaching, clinical, technical and administrative staff appropriate to meeting research or scholarship, governance and teaching commitments.
- 7.4 Staff recruitment strategies that:
 - a. are culturally inclusive and reflect population diversity
 - b. take affirmative action to encourage participation from Aboriginal and Torres Strait Islander peoples.
- 7.5 Documented position descriptions for teaching staff, clearly articulating roles, reporting relationships, responsibilities and accountabilities.
- 7.6 The Head of Discipline is registered with the NMBA as a registered nurse with no conditions or undertakings relating to conduct or performance and holds a post graduate tertiary qualification relevant to their discipline.
- 7.7 Staff teaching enrolled nurse practice related units are registered with the NMBA as an enrolled nurse or registered nurse, with relevant clinical and academic preparation and experience.
- 7.8 Teaching staff are qualified in the relevant discipline for their level of teaching, to at least one qualification standard higher than the program of study being taught or with equivalent professional experience.
- 7.9 In cases where the tertiary qualifications of teaching staff do not include nursing, that staff qualifications and experience are relevant to the units they are teaching.
- 7.10 Processes to ensure teaching staff demonstrate a sound understanding of contemporary nursing research, scholarship and practice in the units they teach.
- 7.11 Learning and teaching are underpinned by research and staff are engaged in scholarship. Areas of interest, publications, grants and conference papers are documented.
- 7.12 Policies and processes in place to verify and monitor the academic and professional credentials, including evidence of annual registration with the NMBA, of current and incoming staff and ability to evaluate their performance and development needs.

Standard 8: Management of professional experience placement

The program provider ensures that every student is given supervised PEP conducted in environments providing suitable opportunities and conditions for students to attain the NMBA's Enrolled nurse standards for practice.

The program provider must demonstrate:

- 8.1 Constructive relationships and clear contractual arrangements with all health providers through which students gain their PEP, and processes to ensure these are regularly evaluated and updated.
- 8.2 Risk management strategies in all environments where students are placed to gain their PEP. Processes to ensure these are regularly reviewed and updated.
- 8.3 PEPs being in environments appropriate to enable students to meet the current NMBA's Enrolled nurse standards for practice in a timely manner.
- 8.4 Students provided with appropriate, quality PEPs reflecting the major health priorities and broad landscape of enrolled nurse practice. Opportunities provided for intraprofessional and interprofessional learning and the development of knowledge, skills and behaviours for collaborative practice.
- 8.5 Clearly articulated models of supervision, support, facilitation and assessment in place for all PEP settings, so students can achieve the required learning outcomes and meet the NMBA's Enrolled nurse standards for practice.
- 8.6 Academics, nurse clinicians and other health professionals engaged in supervising and supporting students during PEPs are adequately prepared for this role and seek to incorporate contemporary and evidence-based Australian and international perspectives on nursing practice.
- 8.7 Assessment of student practice against the NMBA's Enrolled nurse standards for practice, within the context of PEP, is undertaken by an appropriately qualified registered nurse.
- 8.8 Appropriate resources are provided, monitored and regularly evaluated to support students while on PEP.

Standard 9: Quality improvement and risk management

The program provider is able to assess and address risks to the program, its outcomes and students, and has a primary focus on continually improving the quality of the learning and teaching experience for students and the competence of graduates.

The program provider must demonstrate:

- 9.1 Ability to assess and address risks to the program, its outcomes and students, with a primary focus on continually improving the quality of the teaching and learning experience for students and the competence of graduates.
- 9.2 Regular evaluation of teaching staff and clinical supervisor effectiveness using feedback from students and other sources, as well as systems to monitor and, where necessary, improve staff performance.
- 9.3 Professional and academic development of staff to advance knowledge and competence in teaching effectiveness and assessment.
- 9.4 Feedback gained from the quality cycle incorporated into the program of study to improve the experience of theory and practice learning for students.
- 9.5 Regular evaluation and revision of program content to include contemporary and emerging issues surrounding enrolled nursing practice, health care research and health policy and reform.
- 9.6 Students and staff adequately indemnified for relevant activities undertaken as part of program requirements.

References

1. NMBA. Registration standard: Recency of practice. 2016.
2. NMBA. Enrolled nurse standards for practice. 2016.
3. *Health Practitioner Regulation National Law Act 2009*, 2019.
4. Ahpra. Procedures for the development of accreditation standards. 2014.
5. ANMAC. Protocol for the review and development of accreditation standards. 2017.
6. COAG. Best Practice Regulation: A guide for Ministerial Councils and National Standard Setting Bodies. 2007.
7. ANMAC. Enrolled Nurse Accreditation Standards. 2017.
8. ANMC. Standards and Criteria for the Accreditation of Nursing and Midwifery Courses: Re-entry to the register standards Enrolled Nurses. 2010.
9. ANMAC. Re-entry to the Register Midwife Accreditation Standards 2016.

