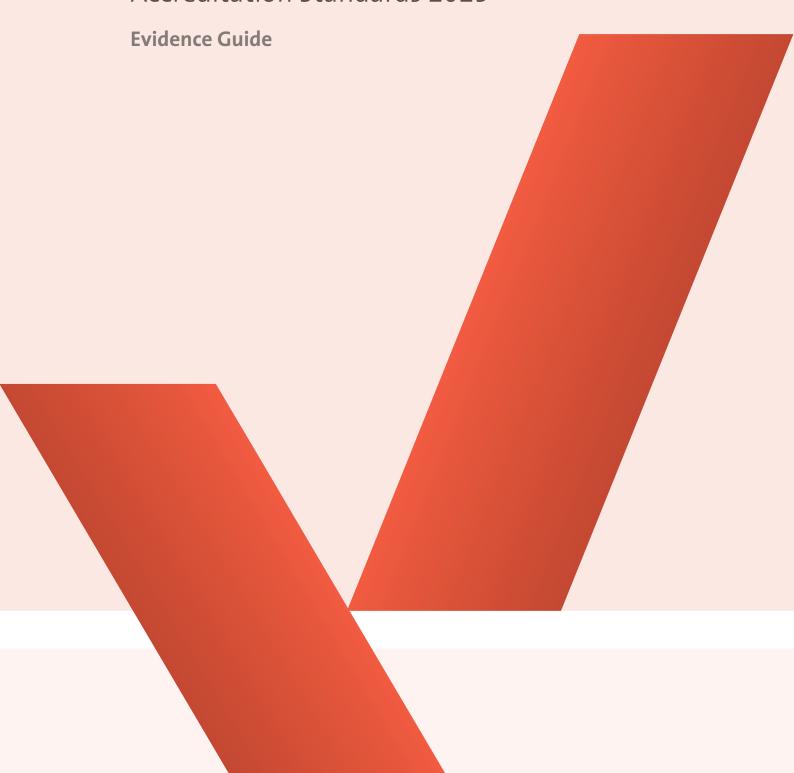


Registered Nurse PrescribingAccreditation Standards 2025



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1. Introduction

1.1 Evidence Guide

In collaboration with stakeholders, ANMAC developed the Registered Nurse Prescribing Accreditation Standards 2025 – Evidence Guide (the Evidence Guide). This is a companion guide to the Registered Nurse Prescribing Accreditation Standards 2025.

The Evidence Guide provides information to education providers on the minimum evidence for an education program to meet the Standards. It is separate to the Standards but integrally linked.

A submission for accreditation is not complete unless the essential evidence in the Evidence Guide is addressed.

Education providers must provide all evidence outlined in the Evidence Guide and in the Standards Application Pack.

All elements of the Evidence Guide must be submitted. The Assessment Team may ask for additional evidence.

1.2 Registered Nurse Prescribing Accreditation Standards

The Standards are principally for education providers who want to deliver education programs leading to the Endorsement for scheduled medicines – designated registered nurse prescriber (1) with the Nursing and Midwifery Board of Australia (NMBA).

ANMAC evaluates these education programs against the Standards before making recommendations to the NMBA in line with sections 48 and 49 of the schedule in the *Health Practitioner Regulation National Law Act* 2009 (the National Law) (2).

The Standards specify the minimum requirements education providers must meet for their education program to be accredited by ANMAC.

Registered nurses must complete a program of study accredited by ANMAC and approved by the NMBA to be eligible to apply for the Endorsement for scheduled medicines – designated registered nurse prescriber (1).

1.3 Glossary

Glossary terms in the Registered Nurse Prescribing Accreditation Standards 2025 and in the Evidence Guide are in ANMAC's online glossary on www.anmac. org.au/glossary

2. Evidence Guide

Standard 1: Safety of the public

STAN	DARD 1	EVIDENCE
1.1	The program of study's guiding principle is safety of the public.	 Curriculum document with a clear, detailed explanation of the principle of public safety in the program's conceptual framework.
		 Map of current National Safety and Quality Health Services Standards (3) within the program.
1.2	The program is delivered in Australia¹ to prepare graduates for safe and ethical practice.	 Evidence of where the NMBA professional standards include codes of conduct, standards for practice and codes of ethics (4) and introduce and scaffold them across the program.
		 Policies and procedures in place that guide student performance, conduct, and ethical and professional behaviour in all settings.
1.3		Admission policy.
	fair, equitable and transparent. Before making an offer for enrolment, education providers	Inherent requirements policy.
	must ensure applicants are: a. on the NMBA general register (5) as a	 Culturally safe affirmative action strategies to enrol, support and retain Aboriginal and Torres Strait Islander students.
	registered nurse	Application pack.
	b. informed of the NMBA requirements for Endorsement for scheduled medicines – designated registered nurse prescriber (1)	 Information provided to students before enrolment, including clearly stated entry requirements and information on NMBA requirements for endorsement.
	 informed of and meet the program's inherent requirements. 	 University website screenshot stating admission requirements.
1.4	The education provider has processes in place to manage students with identified	 Policies and processes for managing identified or reported student impairments.
	impairments that may place the public at risk. Processes include procedures for mandatory reporting (6) where required.	 Documented procedures for mandatory reporting to the NMBA under the National Law (2).

¹ Except as it relates to criteria 2.4 and 3.1

Standard 2: Governance

STANDARD 2

- 2.1 The academic governance arrangements for the program of study include:
 - a. current registration by the Tertiary
 Education Quality and Standards Agency
 (TEQSA) (7) as an Australian university or
 other higher education provider
 - b. current ANMAC accreditation and NMBA approval of an entry to practice registered nursing program by the Australian university or TEQSA (7) for non-self-accrediting higher education providers, detailing the expiry date, recommendations, conditions and progress reports related to the school
 - mechanisms to meet relevant national or state/territory regulatory requirements
 - d. listing on the Australian Qualifications
 Framework (8) National Registry for the award of a Graduate Certificate (Level 8) or credit towards such a program as a minimum.

EVIDENCE

- Details and diagram of the academic governance arrangements for the program of study.
- Screen shot of the education provider's registration on the TEQSA national register of higher education providers (7).
- Response report addressing conditions TEQSA (7) has applied.

- 2.2 The governance structure for the education provider and the school conducting the scheduled medicines designated registered nurse prescriber education program, ensures academic oversight of the program and promotes high-quality teaching and learning experiences for students to enable graduate competence.
- Organisational charts of the education provider conducting the program with reporting lines encompassing program governance and oversight.
- Details and diagrams of reporting relationships and committee structures demonstrating academic oversight of the program.
- Position descriptions demonstrating reporting relationships.
- Inclusion of the Head of Discipline on the ANMAC staff matrix template.
- Head of Discipline's curriculum vitae and evidence of:
 - » NMBA registration (5) (with no conditions or undertakings) screenshot
 - » relevant postgraduate qualifications.
- Staff performance and appraisal policy.
- Insurance policy and indemnification certificate covering activities undertaken as part of program requirements

STANDARD 2

- 2.3 Relevant input to the design and ongoing management of the program is provided by active leadership, consultation and collaboration with representatives from:
 - a. the nursing school, who are registered nurses with the NMBA, without conditions on their registration relating to conduct, and who hold relevant qualifications and experience.
 - b. the nursing profession, including nurse practitioners and registered nurse prescribers.
 - c. external community representatives including consumers, students, Aboriginal and/or Torres Strait Islander peoples and other relevant stakeholders.

EVIDENCE

- Committee structures with reporting lines relevant to the program of study.
- Terms of reference for advisory committees.
- Course Advisory Membership list that incorporates all stakeholders, notes position, organisations and contributions.
- Schedule for meetings and/or consultations relevant to the program.
- Agendas, meeting minutes and actions arising from the consultation process.
- 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 Prescribing Competencies Framework (9).
- Clear documentation of entry pathways included in the curriculum document.
- Credit Transfer Policy and Recognition of Prior Learning Policy and procedures that align with the Australian Qualifications Framework Qualifications Pathway Policy (10).
- Description of how the Credit Transfer Policy is applied in the program.
- Rationale for block credit and mapping to the Prescribing Competencies Framework (9).
- Rationale for block credit supported by learning outcomes mapping document.
- Copy of admission criteria for all entry pathways.
- 2.5 Program quality improvement mechanisms incorporate evaluation information from various sources and address:
 - a. risk assessment of student learning environments including cultural safety
 - 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 care.

- Program report (for example, an annual program dashboard).
- Quality improvement policy and process framework, including:
 - » risk assessment policy or processes for simulated learning and teaching environments
 - » schedules for surveys, outcomes and associated improvements
 - » terms of reference of any relevant school committee or group responsible for developing, monitoring, reviewing or quality improving the program.
- Strategies demonstrating staff access to research tools and other opportunities for program quality improvement activities.

Standard 3: Program of study

STAN	DARD 3	EVIDENCE
3.1	The curriculum document articulates the educational philosophy and its practical implementation into the program of study.	 Curriculum document including clearly explained and supported educational philosophy.
3.2	Teaching and learning reflect contemporary evidence-based prescribing practice.	 Strategies used to identify and incorporate contemporary evidence-based prescribing practice across program content and delivery.
3.3	Program content and subject alignment ensures:	 Curriculum document with all subject outlines inclusive of learning outcomes and assessments.
	 a. achievement of competencies described in the Prescribing Competencies Framework (9) b. preparation of students to prescribe 	 Documented map of subjects against the Prescribing Competencies Framework (9) which clearly identifies the links between learning outcomes, assessments and required graduate competencies.
	c. knowledge and understanding of legal and medicolegal principles and relevant legislative frameworks that enable designated registered nurses to prescribe in each state and territory	• Documented evidence of information related to the designated registered nurse prescribing model including but not limited to the Registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber (1) and associated guideline requirements.
	d. understanding of ethical and professional obligations of prescribing within the scope of designated registered nurse prescribing practice	 Mapping of program learning outcomes and content that addresses: » current National Safety and Quality Health Service Standards (3)
	e. an opportunity for students to demonstrate an integrated approach to prescribing	 regional, national and global health priorities person, family and consumer-centered
	f. an understanding of the designated registered nurse prescribing model	care » digital health.
	g. knowledge of relevant medicine funding models in Australia	
	h. prescribing practice learning plans.	
3.4	Principles of intra-professional learning and interprofessional practice are integrated in program content and subject learning outcomes.	 Examples of learning and reflective activities that prepare students for intra-professional and interprofessional learning and practice. Completed ANMAC content mapping template.
		23. Apreted A William to content mapping template.

STANDARD 3

3.5 Cultural diversity, safety and principles of inclusion are embedded in program content and subject learning outcomes.

EVIDENCE

- Curriculum document including:
 - » An explanation of how cultural diversity and the cultural safety of Aboriginal and Torres Strait Islander peoples – as defined by the Australian Health Practitioners Regulation Authority, and aligned with the Nursing and Midwifery Aboriginal and Torres Strait Islander Health Curriculum Framework (11) – translates into program learning outcomes and teaching and learning activities.
 - » Examples of learning and reflective activities that prepare students to practice cultural safety and work with people from diverse backgrounds.
 - Completed ANMAC content mapping template.
- 3.6 Research and evidence-based inquiry underpins all elements of the curriculum content and delivery.
- Curriculum document includes mapping of program learning outcomes, content and assessment that addresses research and evidence-based inquiry.
- Completed ANMAC content mapping template.
- 3.7 Program resources are sufficient to facilitate student achievement of the Prescribing Competencies Framework (9), with attention to human, physical and financial resources supporting all teaching and learning environments.
- Statement of proposed student population across the accreditation period.
- Academic timetable demonstrating sufficient access to resources and classes by students.
- Outline of available simulated learning environments and list of available simulation equipment.
- Process by which the supply of consumables supports the requirements of the student population.
- Library resources available to the student population.
- Recruitment policy including affirmative action strategies for employment, support and retention of Aboriginal and Torres Strait Islander staff that align with the Australian Government's National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan (12) and the Universities Australia Indigenous Strategy (13).
- Completed ANMAC staff matrix template.
- Description of the online learning environment and how it is used.

STAN	IDARD 3	EVIDENCE
3.8	Staff teaching into the program:	Completed ANMAC staff matrix template.
	 are qualified and experienced to deliver the subjects they teach 	 Professional and academic development policy and process.
	 b. hold one qualification higher than the program of study being taught. 	 Examples of how academic and professional credentials are verified and monitored.
	Free-man 2. 2.2.2.3 Journ Manager	 Position descriptions for staff teaching into the program.

Standard 4: Student experience

STANDARD 4	EVIDENCE
4.1 Program information provided to students is relevant, timely, transparent and accessible.	 Communication pathways and platforms which ensure dissemination of program information. For example, information provided to students online, through a website, in policies and through online support services.
	 Enrolment information.
	 Student handbook.
	 Subject outlines.
	 Policies and procedures relating to assessment, student progression and appeals information.
	 Examples of student journeys.
4.2 Education provider identifies and supports the academic learning needs of students.	 Mechanisms for monitoring triggers associated with students at risk.
	 Processes and flowchart for early detection of students at risk of poor academic performance and referral to appropriate support services.
	 Information provided to students regarding:
	» academic support services
	» access to academic staff for subject outlines, student handbook and learning management systems.
	 Samples of learning contracts and documents which identify and address learning needs.
4.3 Students are informed of, and have access to, grievance and appeals processes.	 Mechanism for informing students about the grievance and appeals policies and procedures.
	 Description of how students can access grievance and appeals policies and procedures.

STAN	DARD 4	EVIDENCE
4.4	Students are informed of, and have access to, pastoral and/or personal support services.	 Mechanism for informing students about pastoral and/or personal support services.
		 Description of support services and how these can be accessed by students.
4.5	Students are represented on program advisory and decision-making committees.	 Terms of reference for relevant committees and consultation schedules.
		 Examples of student consultation and collaboration, decisions made and implementation for the program.
		 Policy and processes for recruitment and preparation of students for a representative role.
4.6	Equity and diversity principles are observed and promoted in the student experience.	• Enrolment, assessment and progression policies.
		 Information provided to students – subject guide and/or outline, student handbook and learning management systems.
		 Policies and procedures on equity and diversity with examples of implementation and monitoring
4.7	Student experiences across all teaching and learning environments are monitored and evaluated regularly with outcomes informing program quality improvement.	Processes for:
		 circulating, gathering, collating and reporting on (including to academics) feedback from student evaluations.
		» closing evaluation loops.

Standard 5: Student assessment

STAN	DARD 5	EVIDENCE
5.1	The program's learning outcomes and assessment strategies are aligned.	Completed ANMAC assessment mapping template.
5.2	Subject learning outcomes, with associated subject assessments, are clearly mapped to the Prescribing Competencies Framework (9).	 Completed ANMAC assessment mapping template.
5-3	Contemporary, validated assessment tools, modes of assessment, sampling and moderation are used to ensure integrity of assessments.	 Curriculum document explaining the strategies in place to ensure assessment integrity.
		 Assessment, moderation and progression policy.
		 Completed ANMAC assessment mapping template.
		 Policy that embeds a documented process for moderation and sampling of assessments at subject or program level including across teaching sites where relevant.
		 Documented processes for validating assessment tools, moderation and sampling of assessments at subject/program level, including across teaching sites where relevant.
		• Examples of assessments and marking rubrics.
		 Measures, including security, in place to protect the integrity of all modes of assessment (for example, documented policy, processes, screen shots and software used).
5-4	Assessments include the prescribing process, underpinned by the quality use of medicines and the Prescribing Competencies Framework (9).	 Completed ANMAC assessment mapping template.
		 Examples of theoretical and practice assessments including marking rubrics.
		 Incorporation of the ASPRINH Project Prescribing Assessment Toolkit. (14)
5.5	Formative and summative assessments are used across the program to enhance learning and inform student progression.	 Completed ANMAC assessment mapping template.
		 Processes to ensure early detection and responsiveness to students facing difficulty.
		 Examples of formative and summative assessments including marking rubrics.
		 Process to inform students of formative and summative assessments and how they are used to support and evidence student learning.
5.6	The education provider is ultimately accountable for ensuring mechanisms are in place for assessing student's prescribing practice in theoretical and practice contexts.	 Clear articulation of roles and responsibilities of health service and education providers.
		 Communication processes are in place between the education provider, students, supervisors or mentors, and health service providers.

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