



Australian  
**Nursing & Midwifery**  
Accreditation Council

**Registered Nurse**  
Accreditation Standards 2012

registered nurse





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**Nursing & Midwifery**  
Accreditation Council

# Registered Nurse Accreditation Standards 2012

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The Council 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. Preamble

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## 1.1 Registered nurse education in Australia

To apply to become a registered nurse in Australia, individuals must first have completed a program of study accredited by the Australian Nursing and Midwifery Accreditation Council and approved by the NMBA. Programs of study eligible for accreditation (often referred to as entry to practice programs) are delivered by a government accredited university or higher education provider and lead to the award of a Bachelor or Masters degree in Nursing.

The Australian regulatory environment in which nurses are registered, and programs of study accredited and delivered, has undergone significant change in the past few years. Higher education regulation and quality assurance have also undergone major transformation. Further, national reforms in health policy, governance and funding are being implemented and may have further implications for nursing education. These changes form the basis for reviewing and updating the Registered Nurse Accreditation Standards contained in this document.

## 1.2 Changes in health practitioner regulation

On 14 July 2006, The Council of Australian Governments (COAG) agreed to establish a single national registration scheme for health professionals, beginning with the nine professional groups then registered by states and territories (the scheme has been extended to a number of other health professions). COAG further agreed to establish a single national accreditation scheme for health education and training, to simplify and improve the consistency of current arrangements.<sup>1</sup> At its 26 March 2008 meeting, COAG agreed to establish the scheme by 1 July 2010. Bills were put before state and territory parliaments, starting with Queensland, to enact the *Health Practitioner Regulation National Law Act 2009* (the National Law) to establish the scheme. The Act provides for a national law to be adopted to establish a national registration and accreditation scheme for health practitioners. The scheme has six objectives with the first of prime importance:

**... 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.<sup>2</sup>**

Under Section 49(1) of the National Law, graduates of entry to practice nursing programs of study are not eligible to register unless the program of study undertaken is accredited by an approved accreditation authority and that such accreditation is approved by the NMBA as meeting the educational requirements for registration as a registered nurse.

After the National Law was introduced, the Australian Nursing and Midwifery Council (ANMC) was appointed under the National Registration and Accreditation Scheme as the independent accreditation authority for all nursing and midwifery education providers and programs of study leading to registration and endorsement in Australia. ANMAC commenced operations on 1 July 2010.

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<sup>1</sup> COAG (2008), *Intergovernmental Agreement for a National Registration and Accreditation Scheme for the Health Professions*. Viewed at <http://www.ahpra.gov.au/Legislation-and-Publications/Ministerial-Directives-and-Communiques.aspx> on 12 September 2011.

<sup>2</sup> AHPR (2009), *Health Practitioner Regulation National Law Act 2009*, p.25. Viewed at <http://www.ahpra.gov.au/Legislation-and-Publications/Legislation.aspx> on 1 May 2012.

The ANMC changed its name to the Australian Nursing and Midwifery Accreditation Council (ANMAC) in November 2010 to reflect its principal role as an accrediting authority. ANMAC is also responsible for monitoring education providers and nursing and midwifery programs of study leading to registration or endorsement. In addition it regularly reviews and improves the Accreditation Standards underpinning accreditation for programs of study under its mandate.

Professional education accreditation is concerned with the quality of the profession and its work, from the perspective of the public interest and community safety. It is part of a broader process of assuring the community that, having completed an accredited program of study, beginning professional practitioners have achieved agreed professional outcomes and are able to practise in a safe and competent manner equipped with the necessary foundation knowledge, professional attitudes and essential skills. This process itself however, relies on two fundamental principles:

1. That the education providers themselves are authorised to issue the relevant qualification and are evaluated to assure continued quality learning outcomes for their graduates.
2. That there exists a set of agreed and contemporary competency standards for the profession, against which the capability of intending graduates of entry to practice programs can be assessed.

The first principle is discussed in Section 1.3. The second principle deals with the National Competency Standards for the Registered Nurse<sup>3</sup> developed in the early 1990s. These Standards articulate the core competencies used to assess the performance of those wanting to obtain and retain a licence to practise as a registered nurse in Australia. They are used by higher education providers when developing nursing curricula and assessing student performance, and by employers evaluating new graduate performance.

The National Competency Standards have been reviewed and revised regularly and were formally adopted by the NMBA in 2010. They will continue to be reviewed against nursing education and practice changes.

The accreditation process administered by ANMAC is an efficient and effective proxy for externally assessing each graduate against relevant competency standards. Professional course accreditation must ensure that professional standards are protected without inhibiting diversity and innovation or constraining continuous quality improvement. As with the National Competency Standards for the Registered Nurse, the National Accreditation Standards are regularly reviewed to ensure relevance in the light of pertinent changes in health and education legislation, policy, delivery and ethos.

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3 Nursing and Midwifery Board of Australia, National Competency Standards for the Registered Nurse, January 2006. Viewed at: <http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#competencystandards> on 21 May 2012.

### 1.3 Changes in higher education regulation

The policy direction and regulation of the higher education sector in Australia has changed dramatically, subsequent to the *Review of Australian Higher Education* (the Bradley Review).<sup>4</sup> The Review recommended structural reform, increased funding and improved quality, equity and access. The Australian Government's response, *Transforming Australia's Higher Education System* (December 2008),<sup>5</sup> heralded a period of transformation in post-secondary education in this country.

On 12 May 2011 the Government announced the establishment of an independent national body to regulate and assure the quality of all types of higher education. The Tertiary Education Quality and Standards Agency (TEQSA) started on 1 July 2011 to fulfil the Government's commitment to:

**... accredit providers, evaluate the performance of institutions and programs, encourage best practice, simplify current regulatory arrangements and provide greater national consistency.**<sup>6</sup>

The Government also committed to ensuring that growth in the higher education sector would be underpinned by a robust quality assurance and regulatory framework, which would renew emphasis on student outcomes and the quality of the student experience.<sup>7</sup>

TEQSA will evaluate the performance of universities and other higher education providers every five years, or when there is evidence standards are not being met. As a consequence, all higher education institutions offering degree programs in nursing and midwifery will be regulated and accredited by TEQSA.

One of TEQSA's first tasks was to review the National Protocols for Higher Education Approval Processes. After reviewing this assurance framework, TEQSA prepared the draft Higher Education Standards Framework and consulted widely on it in 2011. The resulting Threshold Standards (comprising the Provider and Qualification Standards), passed into legislation on 4 January 2012. They apply to all higher education providers offering Level 5 (diploma) to Level 10 (doctoral) qualifications as described in the Australian Qualifications Framework. The Teaching & Learning, Research and Information Standards are still to be developed and, when finalised, may have further implications for the Registered Nurse Accreditation Standards.

Another government initiative arising from the Bradley Review was the publication of the revised Australian Qualifications Framework (July 2011).<sup>8</sup> The framework (AQF) is the national policy for regulated qualifications in Australian education and training. It incorporates the qualifications from each education and training sector into one comprehensive framework comprising 10 levels of qualification (from certificates to doctoral degrees), with a bachelor degree sitting at Level 7.

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4 Australian Government (2008), *Review of Australian Higher Education—Final Report*. Viewed at: [http://www.deewr.gov.au/HigherEducation/Review/Documents/PDF/HigherEducationReview\\_onedocument\\_02.pdf](http://www.deewr.gov.au/HigherEducation/Review/Documents/PDF/HigherEducationReview_onedocument_02.pdf) on 15 September 2011.

5 Australian Government (2009), *Transforming Australia's Higher Education System*, Viewed at: <http://www.deewr.gov.au/HigherEducation/Documents/TransformingAusHigherED.pdf> on 15 September 2011.

6 Australian Government (2009), *Transforming Australia's Higher Education System*, p. 31. Viewed at: <http://www.deewr.gov.au/HigherEducation/Documents/TransformingAusHigherED.pdf> on 15 September 2011.

7 TEQSA, *About TEQSA*. Viewed at: <http://www.teqsa.gov.au/about-teqsa> on 17 May 2012.

8 AQF Council (2011), *Australian Qualifications Framework First edition 1 July 2011*. Viewed at: [http://www.aqf.edu.au/Portals/o/Documents/Handbook/AustQualsFrmwrkFirstEditionJuly2011\\_FINAL.pdf](http://www.aqf.edu.au/Portals/o/Documents/Handbook/AustQualsFrmwrkFirstEditionJuly2011_FINAL.pdf) on 12 September 2011.

The AQF stipulates the learning outcomes expected within each level of education in relation to knowledge, skills and the application of both. This is to ensure the integrity of qualifications and standardisation across education providers, settings and delivery modes. All institutions offering entry to practice nursing programs are required to comply with the new AQF criteria for learning outcomes. The Register of AQF Qualifications and Authorised Issuing Organisations,<sup>9</sup> lists all qualifications and the organisations authorised to issue them.

## 1.4 Reform in health policy and funding

Major reforms in the governance, funding and provision of health services are underway.<sup>10</sup> The objective is to build a nationally unified and locally controlled health system to improve patient access to health services, performance, transparency and accountability, while ensuring the sustainability of funding. In addition, new national agencies<sup>11</sup> have been announced over the past few years. One of the first is Health Workforce Australia, which is likely to have a developmental and ongoing influence on the role and number of registered nurses and their place in the system of professional health services delivery.

While the full impact of reforms is as yet unknown, the policy intent, at least at the Australian Government level, is clear. There is a mandate for health services and health professionals to be more involved in physical and mental health promotion and early intervention to prevent progression of illness. Greater emphasis on providing services in primary and sub-acute care settings will be required along with the need for stronger interprofessional awareness, collaboration and communication to better support people with complex illness and those who can self-care. Facilitating transition from one health care setting to another is critical to reform success. So too is familiarity with health informatics, including person-controlled electronic health care records. The Australian Government's role as funder and program provider of aged care services flags emphasis on accessible, seamless and comprehensive support for healthy ageing and care for older Australians.

Accountability for the quality and cost of health services delivered by health service providers and professionals is clearly articulated in the new National Health Reform Agreement<sup>12</sup> between the Australian and state and territory governments. Indeed, Australian Government growth funding is predicated on an efficient price for admitted and ambulant care for people and the requirement of providers to meet key performance indicators.

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9 AQF Council, *AQF Register of AQF Qualifications and Authorised Issuing Organisations*. Viewed at: <http://www.aqf.edu.au/RegisterAccreditation/AQFRegister/tabid/174/Default.aspx> on 17 May 2012.

10 Australian Government, Department of Health and Ageing, *A National Health and Hospitals Network for Australia's Future (2010)* and *A National Health and Hospitals Network: Further Investments in Australia's Health (2010)*. Viewed at: <http://www.health.gov.au/internet/main/publishing.nsf/Content/publications-N> on 17 May 2012.

11 Examples: Independent Hospital Pricing Authority; National Performance Authority; Australian Commission on Safety and Quality in Health Care; Australian National Preventive Health Agency; Health Workforce Australia.

12 COAG (2011), *National Health Reform Agreement*. Viewed at: [http://www.coag.gov.au/docs/national\\_health\\_reform\\_agreement.pdf](http://www.coag.gov.au/docs/national_health_reform_agreement.pdf) on 17 May 2012.

Consequently, it is likely that programs of study leading to registration as a registered nurse will require greater emphasis on understanding the cost drivers of health care as well as enhanced knowledge of quality improvement, performance measurement and care coordination. Broader experience and knowledge of complex care, community, primary and sub-acute health care settings are assumed under the National Health Reform Agreement. The education of nurses and other health professionals will require increased attention to developing the knowledge, skills and emphasis to care for the elderly across the spectrum of wellness to ill health, particularly for those with dementia and multiple disease aetiologies. Superior communication and teamwork, delegation and supervision capabilities will be essential pre-requisites in the emerging health care environment. Also important will be the capacity to innovatively use information technology and electronic resources to research the growing evidence base for improved care and treatment methods.

## 1.5 Background to the Registered Nurse Accreditation Standards

The original *Standards and Criteria for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia—with Evidence Guide* were developed by the ANMC with key industry stakeholders, including regulators, professional bodies and academics, in February 2009. The standards were approved by the newly established NMBA in 2010.<sup>13</sup>

As the external accreditation authority for nursing and midwifery programs of study (National Law, Section 44), ANMAC has been conducting accreditation assessments of programs of study leading to registration or endorsement as a nurse or midwife since 1 July 2010. During this time, education providers have provided valuable feedback on the Accreditation Standards, as have independent Assessment Team members and ANMAC Accreditation Managers. Following a request from the NMBA, the ANMAC Board, at its 30 to 31 August 2011 meeting, agreed to undertake a rolling review of all Accreditation Standards used by ANMAC, starting with the Registered Nurse Standards.

## 1.6 Review of the Registered Nurse Accreditation Standards

The ANMAC Board developed an action plan and convened a Working Party to oversee the review of the Registered Nurse (RN) Accreditation Standards. The Working Party developed a project timeline and identified a wide-ranging list of stakeholders to consult. A letter of invitation was sent to stakeholders outlining the process and options for providing comment and feedback throughout the review. A dedicated email address enabled stakeholders to contribute views at any time.

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<sup>13</sup> ANMC (2009), *Registered Nurses Standards and Criteria for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia—with Evidence Guide*, February 2009, Canberra, Australia.

The review comprised three key consultation stages:

### **Stage 1—First consultation paper**

The First Consultation Paper was prepared by the Working Party, approved by the ANMAC Board and sent to stakeholders to consider before the First Consultation Forum was held in Sydney (26 October 2011). A copy of the paper was placed on ANMAC's website with a public invitation to contribute. This paper covered the background, context, purpose and process of the review and addressed key areas of change in education and health policy pertinent to revising the nine Registered Nurse Accreditation Standards.

Stakeholders were asked to consider some general aspects of the Registered Nurse Accreditation Standards, including form, structure, logical flow and ease-of-understanding. The consultation paper asked for feedback on whether the standards were complete and sufficient to assure the NMBA, and de facto the Australian community, that a graduate of an accredited entry-to-practice program was fit to be registered and could practise in a safe and competent manner. It also sought advice on whether the Accreditation Standards and accompanying criteria were still valid given Australia's rapidly moving health and education environment. Finally, the paper asked for views on the rigour, or pitch, of each standard and its accompanying criteria to ensure education provider expectations were neither too high nor too low.

Stakeholders could provide feedback by attending the forum, sending a submission or email or by responding to an electronic survey.

The main thrust of the feedback received was that much of the content and intent of the original Registered Nurse Accreditation Standards should be retained although the format and manner of expression should be refined. Some new criteria were proposed to deal with identified omissions, narrowness of scope and lack of rigour. Some criteria required updating to reflect changes in policy or regulation. Some could be deleted, principally to reduce repetition. Many proposed revisions were self-evident, improved meaning or understanding, or were a consequence of changing technology, contemporary approaches to education, or developments in delivering health care.

Three issues were raised for which the Working Party or the ANMAC Board decided further consultation was required. The first issue centred on whether higher education providers of a degree in nursing must be a designated university and subject to the higher standards of performance, quality assurance and governance expected of universities by TEQSA. The second concerned the minimum hours of workplace experience and the place of simulation in acquiring clinical skills. The third involved the minimum level of English proficiency expected of students at entry or by graduation.

## **Stage 2—Second consultation paper**

After revising the Registered Nurse Accreditation Standards to incorporate the feedback received in Stage 1, ANMAC issued a Second Consultation Paper. It was placed on ANMAC's website and distributed to stakeholders on 13 December 2011. Again, an electronic survey was available.

The second paper raised the specific issues arising from the first stage of consultation where the Working Party or the ANMAC Board decided further consultation was required. Stakeholders were asked to provide feedback on these issues and respond to the broader amendments made to the Registered Nurse Accreditation Standards. They were asked to provide feedback by 30 January 2012 so the next draft of the Registered Nurse Accreditation Standards could be considered at the Second Consultation Forum.

## **Stage 3—Preparation of revised standards**

All submissions, emails and responses to the electronic survey were considered by the Working Party, the ANMAC Research, Innovation and Policy Sub-Committee and the Board. The Registered Nurse Accreditation Standards were revised and distributed to stakeholders for review before the Second Consultation Forum.

Three primary issues remained: category of higher education provider; English language proficiency of students; and qualifications of teaching staff. These were placed on the agenda for the Second Consultation Forum held in Melbourne on 11 April 2012. These, and other issues raised by participants on the day, were discussed in a facilitated session and, for the most part, resolved.

A penultimate version of the Registered Nurse Accreditation Standards was distributed to stakeholders on 3 May 2012 with a request to check for factual accuracy and errors of omission, with comments requested by 21 May 2012. The ANMAC Board considered and ratified the final version of the Registered Nurse Accreditation Standards at its meeting on 13 June 2012 and recommended submission for approval to the NMBA.

While ANMAC has the responsibility to develop the Accreditation Standards, the NMBA has the responsibility to approve them under the National Law. This is mirrored in ANMAC's role to accredit programs of study leading to registration or endorsement as a nurse or midwife and the NMBA's responsibility to subsequently approve accredited programs.

The NMBA has now considered and approved these revised Registered Nurse Accreditation Standards as required under Section 47 of the National Law.

## 2. Introduction

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### 2.1 Purpose of the ANMAC accreditation process

The purpose of the ANMAC accreditation process is to ensure the quality of the profession and its work on behalf of public interest and public safety. The public needs to know that higher education providers of Bachelor or Masters nursing and midwifery programs produce graduates who are competent to practise safely and effectively and eligible to be registered through the NMBA as a registered nurse in Australia.

The education provider is to ensure graduates have the required common and transferable skills, knowledge, behaviours and attitudes (articulated in the National Competency Standards for the Registered Nurse) upon which to build the competencies they need to practice. Accreditation evaluates whether the provider, on the basis of the evidence provided, is likely to meet this goal.

Professional course accreditation is concerned with the quality of the profession and its work, from the perspective of the public interest and public safety. This is contrasted with accreditation (or similar assessment) of a higher education provider (the provider of professional education) by TEQSA for purposes of quality assurance and risk management. However, under this framework, such accreditation or quality assurance of higher education providers is a pre-requisite for accrediting programs of nursing and midwifery study by ANMAC.

External professional (or occupational) accreditation helps assure the community that individual professionals, having completed an accredited program of study, are safe and competent beginning practitioners. It is an efficient and effective proxy for assessing every graduate against the National Competency Standards for the Registered Nurse. Accreditation therefore involves comprehensively examining the higher education provider's governance system and quality management framework; student enrolment processes, student support, assessment and workplace experience; curriculum philosophy, curriculum structure and content; and teaching and learning approaches.

Periodic accreditation of nursing and midwifery programs stimulates education providers to review and assess their own programs. It draws out weaknesses and gives providers the opportunity to validate the strengths of existing programs and introduce new teaching and learning initiatives.

The ANMAC RN accreditation process supports diversity, innovation and evolution in approaches to education. The standards therefore do not prescribe the content of curricula, the inclusion of core subjects or the educational approaches required to deliver the study program.

### 2.2 Registered Nurse Accreditation Standards

The Registered Nurse Accreditation Standards detail the minimum requirements to be met by higher education providers wanting accreditation of their program of study by ANMAC. TEQSA approved higher education providers must seek, and ultimately attain, accreditation for their nursing program of study. Under section 49(1) of the National Law, graduates of programs cannot register unless their program of study is accredited by ANMAC with accreditation approved by NMBA.

The nine Registered Nurse Accreditation Standards are listed in Figure 1 opposite:

**Figure 1—Registered Nurse Accreditation Standards**

<b>STANDARD 1: GOVERNANCE</b>
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 National Competency Standards for the Registered Nurse.
<b>STANDARD 2: CURRICULUM CONCEPTUAL FRAMEWORK</b>
The program provider makes explicit, and uses a contemporary conceptual framework for the nursing program of study that encompasses the educational philosophy underpinning design and delivery and the philosophical approach to professional nursing practice.
<b>STANDARD 3: PROGRAM DEVELOPMENT AND STRUCTURE</b>
The program of study is developed in collaboration with key stakeholders reflecting contemporary trends in nursing and education; complying in length and structure and complies with the Australian Qualifications Framework (AQF) for the qualification offered and enabling graduates to meet the National Competency Standards for the Registered Nurse. Workplace experience is sufficient to enable safe and competent nursing practice by program completion.
<b>STANDARD 4: PROGRAM CONTENT</b>
The program content delivered by the program provider comprehensively addresses the National Competency Standards for the Registered Nurse and incorporates Australian and international best practice perspectives on nursing as well as existing and emerging national and regional health priorities.
<b>STANDARD 5: STUDENT ASSESSMENT</b>
The curriculum 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 current National Competency Standards for the Registered Nurse.
<b>STANDARD 6: STUDENTS</b>
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.
<b>STANDARD 7: RESOURCES</b>
The program provider has adequate facilities, equipment and teaching resources, as well as staff who are qualified, capable and sufficient in number, to enable students to attain the current National Competency Standards for the Registered Nurse.
<b>STANDARD 8: MANAGEMENT OF WORKPLACE EXPERIENCE</b>
The program provider ensures that every student is given a variety of supervised workplace experiences conducted in environments providing suitable opportunities and conditions for students to attain the current National Competency Standards for the Registered Nurse.
<b>STANDARD 9: QUALITY IMPROVEMENT AND RISK MANAGEMENT</b>
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 teaching and learning experience for students and the competence of graduates.

## 2.3 Using the Registered Nurse Accreditation Standards

The Registered Nurse Accreditation Standards are designed principally for use by higher education providers seeking accreditation of an entry to practice program of nursing study. ANMAC Accreditation Managers, the Registered Nurse Accreditation Committee and members of ANMAC assessment teams evaluate programs in accordance with these standards and make recommendations to the ANMAC Board for decision.

While the standards are principally for use by higher education providers, they are also useful for anyone interested and involved in the education of nurses.

Higher education providers seeking accreditation have to complete an application pack (available at [www.anmac.org.au](http://www.anmac.org.au)). The pack includes the Registered Nurse Accreditation Standards and relevant guidance on addressing them. The guidance is regularly reviewed and updated to assist education providers prepare their submissions.

Other material of help to education providers (also available on the website) includes the National Guidelines for the Accreditation of Nursing and Midwifery Programs Leading to Registration and Endorsement in Australia<sup>14</sup> describing the structures, personnel and processes of accreditation of nursing and midwifery providers and programs of study. These guidelines should be read in conjunction with National Framework for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia 2007<sup>15</sup> (the National Accreditation Framework statement). Also of interest is ANMAC's Assessment Handbook.

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14 ANMAC (2011), *National Guidelines for Accreditation of Nursing and Midwifery Programs of Study Leading to Registration and Endorsement in Australia—July 2011*. Viewed at [http://www.anmac.org.au/userfiles/file/AccreditationDocumentsfortheWebsite/NationalAccreditationGuidelinesVersion12-07July2011\(2\).pdf](http://www.anmac.org.au/userfiles/file/AccreditationDocumentsfortheWebsite/NationalAccreditationGuidelinesVersion12-07July2011(2).pdf) on 19 May 2012.

15 ANMAC (2012), *National Framework for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia 2007*. Viewed at [http://www.anmc.org.au/userfiles/file/ANMC\\_Framework-Final.pdf](http://www.anmc.org.au/userfiles/file/ANMC_Framework-Final.pdf) on 21 May 2012.

### 3. The Registered Nurse Accreditation Standards

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#### 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 National Competency Standards for the Registered Nurse.

#### Criteria

The education provider must provide evidence of:

- 1.1 Current registration by the Tertiary Education Quality and Standards Agency (TEQSA) as an Australian university or other higher education provider.<sup>16</sup>
- 1.2 Current accreditation of the nursing program of study by the university (or TEQSA for non-self-accrediting higher education providers) detailing the expiry date and recommendations, conditions and progress reports related to the school.
- 1.3 Listing on the Australian Qualifications Framework (AQF) National Registry for the award of Bachelor degree as a minimum.
- 1.4 Current, documented academic governance structure for the university (or other higher education provider) and the school conducting the program (program provider) which ensures academic oversight of the program and promotes high-quality teaching and learning, scholarship, research and ongoing evaluation.
- 1.5 Terms of reference for relevant school committees and advisory and/or consultative groups, including partnerships with Aboriginal and Torres Strait Islander health professionals and communities.
- 1.6 Staff delegations, reporting relationships, and the role of persons or committees in decision making related to the program.
- 1.7 Governance arrangements between the university or higher education provider and the school that ensure responsiveness to accreditation requirements for ongoing compliance with accreditation standards.
- 1.8 Policies relating to credit transfer or the recognition of prior learning that are consistent with AQF national principles and the graduate's ability to meet the National Competency Standards for professional registration.

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<sup>16</sup> For explanation of provider categories see: Tertiary Education and Quality Standards Agency (2011), *Higher Education Standards (Threshold Standards) 2011 Legislative Instrument, Chapter 2*. Viewed at <http://www.teqsa.gov.au/higher-education-standards-framework> on 7 March 2012.

## Standard 2: Curriculum Conceptual Framework

The program provider makes explicit, and uses a contemporary conceptual framework for the nursing program of study that encompasses the educational philosophy underpinning design and delivery and the philosophical approach to professional nursing practice.

### Criteria

The program provider demonstrates:

- 2.1 A clearly documented and explained conceptual framework for the program, including the educational and professional nursing philosophies underpinning its curriculum.
- 2.2 The incorporation of contemporary Australian and international best practice teaching, learning and assessment methodologies and technologies to enhance the delivery of curriculum content, stimulate student engagement and promote understanding.
- 2.3 A program of study that is congruent with contemporary and evidence-based approaches to professional nursing practice and education.
- 2.4 Teaching and learning 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 application of critical thinking frameworks and problem-solving skills
  - 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 competence and life-long learning
  - h. instil students with the desire and capacity to continue to use, and learn from, emerging research throughout their careers
  - i. promote emotional intelligence, communication, collaboration, cultural safety, ethical practice and leadership skills expected of registered nurses
  - j. incorporate an understanding of, and engagement with, intraprofessional and interprofessional learning for collaborative practice.

## Standard 3: Program Development and Structure

The program of study is developed in collaboration with key stakeholders reflecting contemporary trends in nursing and education; complying in length and structure with the Australian Qualifications Framework (AQF) for the qualification offered and enabling graduates to meet the National Competency Standards for the Registered Nurse. Workplace experience is sufficient to enable safe and competent nursing practice by program completion.

### Criteria

The program provider demonstrates:

- 3.1 Consultative and collaborative approaches to curriculum design and program organisation between academic staff, those working in health disciplines, students, consumers and other key stakeholders including Aboriginal and Torres Strait Islander health professionals.
- 3.2 Contemporary nursing and education practice in the development and design of curriculum.
- 3.3 A map of subjects against the National Competency Standards for the Registered Nurse which clearly identifies the links between learning outcomes, assessments and required graduate competencies.
- 3.4 Descriptions of curriculum content and the rationale for its extent, depth and sequencing in relation to the knowledge, skills and behaviours expected of students at each stage of the program.
- 3.5 Opportunities for student interaction with other health professions to support understanding of the multi-professional health care environment and facilitate interprofessional learning for collaborative practice.
- 3.6 A minimum of 800 hours of workplace experience, not inclusive of simulation activities, incorporated into the program and providing exposure to a variety of health-care settings.
- 3.7 Content and sequencing of the program of study prepares students for workplace experience and, wherever possible, incorporates opportunities for simulated learning.
- 3.8 Workplace experience included as soon as is practically possible in the first year of study to facilitate early engagement with the professional context of nursing.
- 3.9 Extended workplace experience in Australia included towards the end of the program to consolidate the acquisition of competence and facilitate transition to practice. A summative assessment is made at this time against all National Competency Standards for the Registered Nurse in the clinical setting.
- 3.10 Equivalence of subject outcomes for programs taught in Australia in all delivery modes in which the program is offered (subjects delivered on-campus or in mixed-mode, by distance or by e-learning methods).
- 3.11 Where the structure of the program allows for multiple entry pathways for which students receive block credit or advanced standing (other than on an individual basis), evidence that each pathway meets the Registered Nurse Accreditation Standards.
- 3.12 Where the structure of the program allows for an exit qualification to be awarded, such as a diploma, these are explicitly stated and exit points meet National Accreditation Standards for the relevant exit qualification and are accredited separately.

## Standard 4: Program Content

The program content delivered by the program provider comprehensively addresses the National Competency Standards for the Registered Nurse and incorporates Australian and international best practice perspectives on nursing as well as existing and emerging national and regional health priorities.

### Criteria

The program provider demonstrates:

- 4.1 A comprehensive curriculum document structured around the conceptual framework that includes:
  - a. program structure and delivery modes
  - b. subject outlines
  - c. linkages between subject objectives, learning outcomes and their assessment, and national competencies
  - d. teaching and learning strategies
  - e. a workplace experience plan.
- 4.2 The central focus of the program is nursing practice, comprising core health professional knowledge and skills and specific nursing practice knowledge and skills that are evidence based, applied across the human lifespan and incorporate national and regional health priorities, health research, health policy and reform.
- 4.3 Nursing research and evidence-based inquiry underpins all elements of curriculum content and delivery.
- 4.4 Program content supports the development and application of knowledge and skills in:
  - a. critical thinking, analysis and problem solving
  - b. quality improvement methodologies
  - c. research appreciation and translation
  - d. legal and ethical issues in health care and research
  - e. health informatics and health technology.
- 4.5 Inclusion of subject matter that gives students an appreciation of the diversity of Australian culture, develops their knowledge of cultural respect and safety, and engenders the appropriate skills and attitudes.
- 4.6 Inclusion of a discrete subject specifically addressing Aboriginal and Torres Strait Islander peoples' history, health, wellness and culture. Health conditions prevalent among Aboriginal and Torres Strait Islander peoples are also appropriately embedded into other subjects within the curriculum.
- 4.7 Equivalence of theory or workplace experience gained outside Australia in terms of subject objectives, learning outcomes and assessment. Learning experiences undertaken outside Australia must not exceed one semester.

## Standard 5: Student Assessment

The curriculum incorporates a variety of 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 current National Competency Standards for the Registered Nurse.

### Criteria

The program provider demonstrates:

- 5.1 A consistent approach to student assessment across teaching sites and modalities that is periodically reviewed and updated.
- 5.2 Clear statements about assessment and progression rules and requirements provided to students at the start of each subject.
- 5.3 The level, number and context of assessments are consistent with determining the achievement of the stated learning outcomes.
- 5.4 Both formative and summative assessment types and tasks exist across the program to enhance individual and collective learning as well as inform student progression.
- 5.5 A variety of assessment approaches across a range of contexts to evaluate competence in the essential knowledge, skills and behaviours required for professional nursing practice.
- 5.6 Assessment of student communication competence and English language proficiency before undertaking workplace experience.
- 5.7 Validated instruments are used in workplace experience assessment to evaluate student knowledge, skills, behaviours and competence.
- 5.8 Ultimate accountability for assessing students in relation to their workplace experience.
- 5.9 Assessments include the appraisal of competence in pharmacokinetics, pharmacodynamics and the quality use of medicines.
- 5.10 Evidence of procedural controls, fairness, reliability, validity and transparency in assessing students.
- 5.11 Processes to ensure the integrity of online assessment.
- 5.12 Collaboration between students, health service providers (where relevant) and academics in selecting and implementing assessment methods.
- 5.13 A summative assessment of student achievement of competence against the current National Competency Standards for the Registered Nurse is conducted by a registered nurse (registered by the NMBA) in an Australian clinical context before 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.

### Criteria

The program provider demonstrates:

- 6.1 Applicants are informed of the following before accepting an offer of enrolment:
  - a. specific requirements for entry to the program of study including English language proficiency
  - b. education providers will, under the National Law, register students with the NMBA and notify the Australian Health Practitioner Regulation Agency if a student undertaking clinical training has an impairment that may place the public at risk of harm
  - c. specific requirements for right of entry to health services for workplace experience (including fitness for practice, immunisation and criminal history)
  - d. requirements for registration as required and approved by the NMBA including, but not limited to, the explicit registration standard on English language skills.
- 6.2 Students are selected for the program based on clear, justifiable and published admission criteria.
- 6.3 Students have sufficient English language proficiency and communication skills to be able to successfully undertake academic and workplace experience requirements throughout the program.
- 6.4 Students are informed about, and have access to, appropriate support services including counselling, health care and academic advisory services.
- 6.5 Processes to enable early identification and support for students who are not performing well academically or have professional conduct issues.
- 6.6 All students have equal opportunity to attain the current National Competency Standards for the Registered Nurse. The mode or location of program delivery should not influence this.
- 6.7 Processes for student representation and feedback in matters relating to governance and program management, content, delivery and evaluation.
- 6.8 Aboriginal and Torres Strait Islander peoples are encouraged to enrol and a range of support needs are provided to those students.
- 6.9 Other groups under-represented in the nursing profession, especially those from culturally, socially and linguistically diverse backgrounds, are encouraged to enrol and support needs are provided to those students.
- 6.10 People with diverse academic, work and life experiences are encouraged to enrol in the program.

## Standard 7: Resources

The program provider has adequate facilities, equipment and teaching resources, as well as staff who are qualified, capable and sufficient in number, to enable students to attain the current National Competency Standards for the Registered Nurse.

### Criteria

The program provider demonstrates:

- 7.1 Staff, facilities, equipment and other teaching resources are sufficient in quality and quantity for the anticipated student population and any planned increase.
- 7.2 Students have sufficient and timely access to academic and clinical teaching staff to support their learning.
- 7.3 A balance of academic, clinical, technical and administrative staff appropriate to meeting teaching, research and governance commitments.
- 7.4 Staff recruitment strategies:
  - 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 a registered nurse with no conditions on their registration relating to conduct, who holds a relevant post-graduate qualification.
- 7.7 Staff teaching and assessing nursing practice related subjects are Registered Nurses and have relevant clinical and academic experience.
- 7.8 Academic 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. For staff teaching in an entry to practice Masters program, this requires a relevant post-graduate qualification or equivalent professional experience.
- 7.9 In cases where an academic staff member's tertiary qualifications do not include nursing, their qualifications and experience are relevant to the subject(s) they are teaching.
- 7.10 Processes to ensure academic staff have a sound understanding of contemporary scholarship and professional practice in the subject(s) they teach.
- 7.11 Teaching and learning takes place in an active research environment where academic staff are engaged in research and/or scholarship and/or generating new knowledge. Areas of interest, publications, grants and conference papers are documented.
- 7.12 Policies and processes to verify and monitor the academic and professional credentials of current and incoming staff and to evaluate their performance and development needs.

## Standard 8: Management of Workplace Experience

The program provider ensures that every student is given a variety of supervised workplace experiences conducted in environments providing suitable opportunities and conditions for students to attain the current National Competency Standards for the Registered Nurse.

### Criteria

The program provider demonstrates:

- 8.1 Constructive relationships and clear contractual arrangements with all health providers where students gain their workplace experience 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 workplace experiences and processes to ensure these are regularly reviewed and updated.
- 8.3 Workplace experiences provide timely opportunities for experiential learning of curriculum content that is progressively linked to attaining the current National Competency Standards for the Registered Nurse.
- 8.4 Each student is provided with a variety of workplace experiences reflecting the major health priorities and broad landscape of nursing practice. Opportunities are 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 are in place so students can achieve required learning outcomes and current National Competency Standards for the Registered Nurse.
- 8.6 Academics, nurse clinicians and other health professionals engaged in supervising and supporting students during workplace experiences 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 nursing competence within the context of the workplace experience is undertaken by an appropriately qualified registered nurse.
- 8.8 Appropriate resources are provided, monitored and regularly evaluated to support students while on workplace experience.

## 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 teaching and learning experience for students and the competence of graduates.

### Criteria

The program provider demonstrates:

- 9.1 Responsibility and control of program development, monitoring, review, evaluation and quality improvement is delegated to the nursing school with oversight by the academic board or equivalent.
- 9.2 Regular evaluation of academic and clinical supervisor effectiveness using feedback from students and other sources; 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 nursing practice, health care research and health policy and reform.
- 9.6 Students and staff are adequately indemnified for relevant activities undertaken as part of program requirements.

## 4. Glossary and Abbreviations

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**Advanced standing**—recognition of prior learning in terms of experience and/or studies.

**Australian Health Practitioner Regulation Agency (AHPRA)**—the organisation responsible for the implementation of the National Registration and Accreditation Scheme across Australia. Supports the National Health Practitioner Boards (such as the Nursing and Midwifery Board Australia) in implementing the scheme.

**ANMAC**—the Australian Nursing and Midwifery Accreditation Council is the independent accrediting authority for nursing and midwifery under the National Registration and Accreditation Scheme. ANMAC sets standards for accreditation and accredits nursing and midwifery programs leading to registration and endorsement; and the providers of those programs.

**ANMC**—the Australian Nursing and Midwifery Council evolved into ANMAC following approval as the accrediting authority for nursing and midwifery. ANMC authored the original set of Accreditation Standards as well as the National Competency Standards for nursing and midwifery.

**AQF**—the Australian Qualifications Framework is the national policy for regulated qualifications in Australian education and training. It incorporates the qualifications from each education and training sector into a single comprehensive national qualifications framework.

**AQF qualification**—the result of an accredited complete program of learning leading to formal certification that a graduate has achieved learning outcomes as described in the AQF.

**AQF register**—a register of all AQF qualifications and the organisations authorised to issue them.

**Australian university**—a higher education provider registered with TEQSA in the ‘Australian University’ provider category.

**Block Credit**—the recognition of previously completed formal training/qualifications such that credit is given for whole stages or components of a program.

**COAG**—the Council of Australian Governments is the peak intergovernmental forum in Australia, comprising the Prime Minister, state premiers, territory chief ministers and the president of the Australian Local Government Association.

**Collaborative practice**—where health professionals work as an effective team, optimising individual skills and talents and sharing case management to reach the highest of patient care standards.

**Competence**—the combination of skills, knowledge, attitudes, values and abilities underpinning effective and/or superior performance in a profession or occupational area (from the National Competency Standards for the Registered Nurse).

**Competent**—when a person is competent across all the domains of competencies applicable to the nurse or midwife, at a standard judged to be appropriate for the level of nurse being assessed (from the National Competency Standards for the Registered Nurse).

**Criteria**—rules or tests on which a judgement or decision in relation to compliance with the Accreditation Standards can be based.

**Curriculum**—the full outline of a program of study, usually built around a conceptual framework with the educational and professional nursing or midwifery philosophies underpinning the curriculum and includes: the philosophy for the program; the program structure and delivery modes; subject outlines; linkages between subject objectives, learning outcomes and their assessment, and national competencies; teaching and learning strategies; and a workplace experience plan.

**Education provider**—university, or other higher education provider, responsible for a program of study, the graduates of which are eligible to apply to the NMBA for nursing or midwifery registration or endorsement.

**Equivalent professional experience**—successful completion of a qualification equivalent to that being taught and sufficient post-graduate professional experience<sup>17</sup> in the discipline being taught to demonstrate competence in applying the discipline's principles and theory.

**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.

**Graduate competency outcomes**—knowledge, skills, behaviours and attitudes possessed by graduating students in accordance with the National Competency Standards for the Registered Nurse.

**Head of school or discipline**—lead nursing academic responsible for the design and delivery of the program of study on behalf of the education provider.

**Health Practitioner Regulation National Law Act 2009 (National Law)**—contained in the Schedule to the Act. This second stage legislation provides for the full operation of the National Registration and Accreditation Scheme for health professions from 1 July 2010 and covers the more substantial elements of the national scheme, including registration arrangements, accreditation arrangements, complaints, conduct, health and 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. The National Law is legislated in each state and territory. The *Health Practitioner Regulation (Administrative Arrangements) National Law Act 2008* outlines the administrative arrangements established under the first stage of the National Registration and Accreditation Scheme for the Health Professions (Act A).

**Higher education provider**—tertiary education provider who meets the Higher Education Standards Framework (Threshold Standards) as prescribed by the *Tertiary Education Quality and Standards Agency Act 2011* and is currently registered with TEQSA.

**Health Workforce Australia (HWA)**—an initiative of the COAG and established to meet the challenges of providing a health workforce that responds to the needs of the Australian community.

**Interprofessional learning**—occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care.

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<sup>17</sup> To be read in the context of the *Recency of practice registration standard*, NMBA. Viewed at: <http://www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx> on 19 June 2012.

**National Competency Standards for the Registered Nurse**—core competency standards by which performance and professional conduct is assessed to obtain and retain registration as a Registered Nurse.<sup>18</sup>

**NMBA**—the Nursing and Midwifery Board of Australia works under the auspices of the Australian Health Practitioner Regulation Agency to protect the public and guide the professions of nursing and midwifery. Its functions include registering nursing and midwifery practitioners and students; developing standards, codes and guidelines for the nursing and midwifery professions; handling notifications, complaints, investigations and disciplinary hearings; assessing overseas trained practitioners who wish to practice in Australia; and approving accreditation standards and accredited programs of study.

**Pharmacokinetics**—the study of the bodily absorption, distribution, metabolism, and excretion of drugs.

**Pharmacodynamics**—the study of the biochemical and physiological effects of drugs and the mechanisms of their action in the body.

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

**Program provider**—school or faculty responsible for the design and delivery of a program of study in nursing leading to the award of a Bachelor Degree in nursing as a minimum.

**Recognition of prior learning**—an assessment process for the students formal and informal learning to determine the extent to which that they have achieved required learning outcomes, competency outcomes or standards for entry to and/or partial or total completion of a qualification.

**Registered nurse (RN)**—a person with appropriate educational preparation and competence for practice, who is registered by the NMBA to practise nursing in Australia.

**Research**—According to the Department of Innovation, Industry, Science and Research specifications for the Higher Education Research Data Collection, research comprises:

- Creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society, and the use of this stock of knowledge to devise new applications.
- Any activity classified as research which is characterised by originality; it should have investigation as a primary objective and should have the potential to produce results that are sufficiently general for humanity's stock of knowledge (theoretical and/or practical) to be recognisably increased. Most higher education research work would qualify as research.
- Pure basic research, strategic basic research, applied research and experimental development.

**Scholarship**—application of systematic approaches to acquiring knowledge through intellectual inquiry. Includes disseminating this knowledge through various means such as publications, presentations (verbal and audio-visual), professional practice and the application of this new knowledge to the enrichment of the life of society.

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<sup>18</sup> Nursing and Midwifery Board of Australia, *Registered Nurse Competency Standards 2006*.  
Viewed at : <http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx> on 27 April 2012.

**School**—organisational entity of an education provider responsible for the design and delivery of a program of study in nursing or midwifery. Where the school of nursing is part of a larger faculty, the school is regarded as the program provider for the purposes of these standards.

**Simulation**—any educational method or experience evoking or replicating aspects of the real world in an interactive manner.

**Standard**—level of quality or attainment.

**Subject**—unit of study taught within a program of study.

**Student assessment**—process to determine a student’s achievement of expected learning outcomes. May include written and oral methods and practice or demonstration.

**Tertiary Education Quality and Standards Agency (TEQSA)**—established in July 2011 to regulate and assure the quality of Australia’s large, diverse and complex higher education sector. From January 2012, the TEQSA will register and evaluate the performance of higher education providers against the new Higher Education Standards Framework. TEQSA will undertake compliance assessments and quality assessments.

**Workplace experience**—component of nursing education allowing students to use judgement when applying theoretical knowledge in an actual practice setting. Includes the concept of ‘clinical training’ as embodied in the National Law.

