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| Nurse/Midwife Prescribing Programmes Self- Assessment Audit Report |
| **Section 4 Standards for the Approval of the Educational Providers and Healthcare Providers for Education Programmes for Nurses and Midwives with Prescriptive Authority. (Major Award)** |
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| Revised: 15 January 2018 |

NMBI

**Use this form if you are submitting OR resubmitting application for:**

* Full Time/ Part Time Nurse/ Midwife Prescribing Programmes

**Note:** NMBI does not approve programmes that are NFQ level 7 and below.

# Name of Education Provider:

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QQI Named Award Types

1. Major Awards

This category includes a broad range of specialist or advanced programmes of study, of which some may lead to Registration with NMBI (e.g. Certificate in Nurse/Midwife Prescribing). Specialist or Advanced programmes are post registration education programmes designed, developed and conducted with reference to specific named award (e.g. Post Graduate Certificate, Higher Diploma, Post Graduate Diploma, Master of Science (MSc) Programmes) reflecting a defined body of knowledge , know how, competence in an area of nursing and midwifery. Such programmes must satisfy these and the NMBI (2010) Requirements and Standards for Post- Registration Nursing and Midwifery Education Programmes – Incorporating the National Framework of Qualifications.

CONTACT INFORMATION

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| EDUCATION PROVIDER |  |
| ADDRESS |  |
| HEAD OF DEPARTMENT |  |
| PHONE NUMBER |  |
| EMAIL |  |
| PROGRAMME CONTACT PERSON |  |
| PROGRAMME COORDINATOR/ LEADER |  |

PROGRAMME INFORMATION

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| PROGRAMME TITLE |  |
| Level as per NFQ |  |
| Award Type |  |
| ECTS and Effort Hours |  |
| New Course Submission (Yes/No) |  |
| Re – Approval Submission (Yes/No) |  |
| If re-submission please list changes |  |
| Course Approved by HEI Academic Council? |  |
| REGISTRATION needed (if applicable) for example: Active registration with NMBI, RANP/RAMP, RCN, RGN, RM, RNID, RNP, RNT, RPHN, RPN |  |
| Leads to Registration?  RANP/RAMP  RCN  RGN  RGN/RCN (integrated)  RM  RNID  RNP  RNT  RPHN  RPN  N/A |  |
| PROGRAMME LENGTH  Part Time, Full Time |  |
| MODES OF DELIVERY |  |
| MODULES  Number of Core Modules  Number of Optional Modules |  |
| HAS PROGRAMME A CLINICAL COMPONENT? YES/NO |  |
| FULL EDUCATION REVIEW DATE BY PROFESSIONAL OFFICER |  |
| NMBI CORRESPONDENCE with EDUCATION PROVIDER |  |
| FURTHER EVIDENCE RECEIVED |  |
| DATE FORWARDED TO THE NMBI COMMITTEE |  |
| OUTCOME FROM THE EDUCATION & TRAINING COMMITTEE |  |
| RESPONSE TO CONDITIONS |  |

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| **WEBSITE LINK TO COURSE IF APPLICABLE**  **(HEI LINK)** |  |
| **COURSE SUBJECT/S (FROM LIST OF 106 FOR WEBSITE)** |  |

In order to demonstrate that the programme is fit for purpose and meets the criteria for professional approval, the education provider is required to identify and describe the evidence required under each of the indicators as outlined in the table below. Each of the five headings reflects the standards and their relevant indicators outlined in NMBI (2010) *section 4 Standards for the Approval of the Educational Providers and Healthcare Providers* of the Requirements and Standards for Education Programmes for Nurses and Midwives with Prescriptive Authority.

Reference:

Nursing and Midwifery Board of Ireland (2007) *Requirements and Standards for Education Programmes for Nurses and Midwives with prescriptive Authority, 1st ed*. Nursing and Midwifery Board of Ireland, Dublin.

Requirements and Standards for Education Programmes for Nurses and Midwives with Prescriptive Authority

* 1. The Respective Educational Providers

Educational providers are committed to providing education (programmes) for prescriptive authority which demonstrates that the highest standards of professional education and training are in place.

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|  | **Indicators** | **Evidence** | **Reference page in the Curriculum Document** | **NMBI use only** |
| 1 | Educational providers respond to change affecting professional, educational, health, social and economic issues. |  |  |  |
| 2 | Educational providers keep appropriate records including records for the conferment of professional and academic awards. |  |  |  |
| 3 | The process for monitoring student attendance is declared. |  |  |  |
| 4 | Organisational structures supporting the management of the educational programme are explicit. |  |  |  |
| 5 | Educational providers have a Prescriptive Authority Education Committee with representatives of the key stakeholders. |  |  |  |
| 6 | The role of the external examiner in relation to the education for prescriptive authority is explicit. |  |  |  |
| 7 | The staff resource supports the delivery of the education programme for prescriptive authority at the stated professional, clinical and academic level. |  |  |  |
| 8 | Lecturers/tutors are involved in clinical practice and its development. |  |  |  |
| 9 | Nursing/midwifery subjects are developed and taught by registered nurses/midwives with appropriate professional, clinical and academic qualifications and teaching expertise in the subject matter. |  |  |  |
| 10 | Interprofessional subjects (e.g. physical assessment, pharmacology) are developed and taught with support from other health care disciplines (i.e. Medicine and Pharmacy) with appropriate professional, clinical and academic qualifications and teaching expertise in the subject matter. |  |  |  |
| 11 | A mechanism for staff development which prepares staff to deliver the education including the provision for maintaining nursing/midwifery expertise and credibility is identified. |  |  |  |
| 12 | Educational providers provide administrative and clerical support for all educational activity. |  |  |  |
| 13 | Educational providers provide educational resources/facilities (including library, computer, audio visual and accommodation) to meet the teaching and learning needs of the specific education for prescriptive authority. |  |  |  |
| 14 | Mechanisms for learner admission to the education programme for prescriptive authority ensure that the stated entry requirements are met. The mechanism and conditions for learners exiting the education programme before completion are explicit. |  |  |  |
| 15 | Following any interruption in the education the educational provider ensures that the learner meets the educational requirements. |  |  |  |
| 16 | The mechanism for learner support in relation to student services, facilities and academic and clinical guidance is explicit. |  |  |  |
| 17 | The educational provider provides an annual programme report on the education for prescriptive authority including the external examiner’s report to NMBI. |  |  |  |

4.2 P**rogramme Design and Development**

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|  | **Indicators** | **Evidence** | **Reference page in the Curriculum Document** | **NMBI use only** |
| 1 | Curriculum design and development reflect research and evidence based educational theory and health care practice. National and international benchmarks should inform curriculum development. |  |  |  |
| 2 | The curriculum model chosen should be dynamic and flexible to allow for changes in nursing/midwifery practice and health care delivery. |  |  |  |
| 3 | Theoretical and clinical learning experiences and the learning environment support the achievement of the aims and objectives/outcomes of the programme. |  |  |  |
| 4 | Programme design and development are led by registered nurse tutors or nurse/midwifery lecturers with a teaching qualification and supported by clinical experts in medicine and pharmacology and others as appropriate in collaboration with others and is guided by professional nursing/midwifery knowledge which is evidence/research based. |  |  |  |
| 5 | The programme education development team comprise representative members of key stakeholders in nursing/midwifery, medicine and pharmacology education and practice. |  |  |  |
| 6 | The programme is strategically planned to demonstrate balanced distribution and integration of theory and practice, logical sequencing and progressive development of subjects and clinical competence over the educational programme. |  |  |  |
| 7 | The programme is based on a range of teaching-learning strategies to assist the development of a knowledgeable and competent practitioner and to equip them with the life-long skills for problem solving, decision-making and self-directed learning. |  |  |  |
| 8 | The programme design reflects various methods of teaching/learning and provides a balance between lectures, tutorials, workshops, small group interactions, demonstrations, practical work/ clinical; and self-directed study. It also incorporates the required hours of clinical supervision by the designated medical practitioner. |  |  |  |
| 9 | The programme equips the students/participants with an appropriate level of knowledge, research awareness and critical analysis. |  |  |  |
| 10 | The awarding body accreditation of the programme is explicit. |  |  |  |
| 11 | Processes to facilitate access, transfer and progression are explicit. |  |  |  |
| 12 | The programme design includes the assessment strategy in relation to the assessment of clinical competence, theoretical learning outcomes in the attainment of the competencies for prescriptive authority. |  |  |  |
| 13 | Quality assurance criteria reflective of NMBI requirements and relevant awarding body are explicit. |  |  |  |
| 14 | Quality assurance mechanisms and indicators are identified and measured in relation to the internal and external governance requirements of the educational provider, the awarding body and the professional regulator. |  |  |  |
| 15 | **Programme** **learning outcomes** are Mapped to appropriate NFQ Level and standards for nursing/midwifery post registration education programmes. (See Appendix 5 & 6 of Requirements and Standards for Post-Registration Nursing and Midwifery Education Programmes – Incorporating the National Framework of Qualifications (NMBI 2010). |  |  |  |
| 16 | All **Module learning outcomes** are mapped to appropriate NFQ Level and standards for nursing/midwifery post registration education programmes. (See Appendix 5 & 6 of Requirements and Standards for Post-Registration Nursing and Midwifery Education Programmes – Incorporating the National Framework of Qualifications (NMBI 2010). |  |  |  |
| 17 | All **module assessments** are mapped to the module learning outcomes. |  |  |  |
| 18 | Clinical Competency Assessment Tool encompasses the **5 Domains** **of Competence** :   1. Professional/ Ethical Practice 2. Holistic Approaches to Care 3. Interpersonal Relationships 4. Organisation and Planning of Care 5. Personal and Professional Development. |  |  |  |

**4.3 Clinical Practice Experience**

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|  | **Indicators** | **Evidence** | **Reference page in the Curriculum Document** | **NMBI use only** |
| 1 | Clinical practice experience provides learning opportunities that enable the achievement of competency in prescribing, clinical nursing/midwifery practice and the stated learning outcomes. |  |  |  |
| 2 | Clinical placements are based in health care institutions, which are audited/ approved by the Programme team and satisfy NMBI Standards and Requirements. |  |  |  |
| 3 | The selection of areas for clinical practice experience reflects the scope of the health care settings and supports the achievement of the learning outcomes and competencies for the education for prescriptive authority. |  |  |  |
| 4 | Confirmation from the health service provider that the nurse/midwife is working in the area where the clinical practicum will occur and that there is an expressed service need for the nurse/midwife to prescribe as part of his/her individual role |  |  |  |
| 5 | Participant/student allocation to clinical placements is based on the need to integrate theory and practice and to facilitate the progressive development of clinical skills and competence and the establishment/presence of clinical supervision by a medical practitioner in the same speciality as the student. |  |  |  |
| 6 | Written confirmation from a medical practitioner for medical supervision of the nurse/midwife with the agreement to provide the required term of supervised practice. The particulars of the medical practitioners should be known to the educational institution. |  |  |  |
| 7 | Orientation material must be provided to medical practitioner serving as supervisor for clinical practicum or engaged in clinical instruction. This should include:  a. Copy of the programme overview, syllabus, course objectives and include learning outcomes and competencies of nurse/midwife.  b. Description of education faculty and medical practitioner clinical supervisory role in evaluation of clinical performance of nurse/midwife which should address the communication strategy for assessment/evaluation of the nurse/midwife from the medical practitioner to the higher education institute/programme instructor. This will require mutually agreed learning outcomes/objectives for the individual student to achieve in the clinical area.  c. Policies related to academic performance in clinical area.  d. Criteria for grading used by the educational institution for the clinical practicum.  e. Notification procedure for supervisors who believes a nurse/midwife is not able to meet clinical requirements or is having difficulty.  f. Explanation and frequency of clinical site visits, meetings between teachers and students about the clinical experience and expectations of medical practitioner supervisors regarding these areas. |  |  |  |
| 8 | Clearly written learning outcomes/objectives appropriate to the clinical area are developed and are available to ensure optimal use of valuable clinical experience. These learning outcomes/objectives are revised as necessary with consultation with the supervising medical practitioner. |  |  |  |
| 9 | Students/participants, supervising medical practitioner and all those involved in meeting the students learning needs are fully acquainted with the expected learning outcomes and competencies related to that clinical placement. |  |  |  |
| 10 | Lecturers and nurse/midwifery tutors, in liaison with supervising medical practitioner, clinical managers and practice development guide and support the participants/students in ensuring that the clinical placement provides an optimum-learning environment. |  |  |  |

4.4 Assessment Process

The assessment of learning is a continuous process and demonstrates a balanced and integrated distribution throughout the education programme for prescriptive authority.

Assessments are strategically planned and function to:

• Provide feedback on student/participant progress

• Ensure educational standards (theory and practice) are achieved before entry to the next part of the education, as appropriate.

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|  | **Indicators** | **Evidence** | **Reference page in the Curriculum Document** | **NMBI use only** |
| 1 | Assessments are based on a variety of strategies which are aligned with the subject area, practice setting and stage of the educational programme and expected learning outcomes and competencies. |  |  |  |
| 2 | Assessment measures where appropriate demonstrates the integration and application of theory to patient care learned throughout the programme and requires the student to demonstrate competence within practice through the achievement of learning outcomes and competencies in both theory and practice. |  |  |  |
| 3 | Assessment strategies are established as reliable and valid measures of learning outcomes and competencies. |  |  |  |
| 4 | Grading criteria indicating the standard for a pass award is required for theoretical and clinical practice competency assessments as awarding/grading mechanism, which acknowledges higher achievements by the student/participant, is recorded. |  |  |  |
| 5 | Assessment regulations relating to compensation, supplemental and appeal mechanisms and conditions for continuance of the educational programme are explicit. |  |  |  |

4.5 External Examiners

External examiners have an important role in maintaining the standard of education for prescriptive authority by providing an independent view about their content, structure, organisation and assessment. The third level institutions in collaboration with the relevant educational providers appoint external examiners in accordance with specified internal and external criteria (see below).

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|  | **Indicators** | **Evidence** | **Reference page in the Curriculum Document** | **NMBI use only** |
| 1 | The role of the external examiner is explicit and functions to:  • Maintain the quality and standards for education for prescriptive authority  • Ensure the assessment strategies for theory and practice are reliable and equitable.  • Ensure individual students are treated fairly. |  |  |  |
| 2 | External examiners for the education programme for prescriptive authority:  • Are Registered Nurses/Midwives with professional qualifications appropriate to the education programme being examined?  • Hold academic and teaching qualifications and have at least 3 years full-time teaching  experience in courses appropriate to the education being examined  • Have experience in examining and assessing post-registration students  • Have experience in the development, management, delivery and evaluation of education for prescriptive authority. |  |  |  |
| 3 | The mechanism whereby the external examiner is provided with relevant documentation participates in decision-making concerning the programme and has membership of the examination boards of the respective institutions, is explicit. |  |  |  |
| 4. | An abridged CV of the external examiner is explicit within the submission. |  |  |  |

SECTION 4: STANDARDS FOR APPROVAL OF EDUCATIONAL PROVIDERS AND HEALTH CARE PROVIDERS

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|  | Yes | No |
| The requirements of standard 4.1 The respective Educational Providers and its 17 indicators (41.1 to 4.1.17) have been met and are explicit in the curriculum document. |  |  |
| The requirements of standard 4.2 Programmes Design and Development and its 14 indicators (42.1 to 4.2.14) have been met and are explicit in the curriculum document. |  |  |
| The requirements of standard 4.3 Clinical Practice Experience and its 10 indicators (4.3.1 to 4.3.10) have been met and are explicit in the curriculum document. |  |  |
| The requirements of standard 4.4 Assessment Process and its 5 indicators (4.4.1 to 4.4.5) have been met and are explicit in the curriculum document. |  |  |
| The requirements of standard 4.5 External Examiner and its 3 indicators (4.5.1 to 4.5.3) have been met and are explicit in the curriculum document. |  |  |
| Submit an electronic copy of the curriculum document. |  |  |

We declare that the programme has met all the requirements of the NMBI (2007) *Requirements and Standards for Education Programmes for Nurses and Midwives with Prescriptive Authority* and NMBI (2010) *Requirements and Standards for Post – Registration Nursing and Midwifery Education Programmes – Incorporating the National Framework of Qualifications*. These standards and requirements are indicated and explicit in the submitted curriculum document.

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Head of School Programme Coordinator/ Leader

Note: Please sign over printed name

**Standards and Requirements**

The education provider must provide evidence that the programme demonstrates the highest standards of professional education & training to student, which enable them to meet the learning outcomes, with due regard to issues such as evolving public or service need, clinical audit, patient safety, educational and clinical quality and student access.

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| **Decision of the Professional Officer** |  |
| **Decision of the Education and Training Committee** |  |
| **Decision of the NMBI Board** |  |
| **Approval period start date:** |  |
| **Approval period expiry date:** |  |
| **Summary of course for website:** |  |

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