NURSING

NMBI Site Inspection Summary Report

for Nursing Education Programmes

Royal College of Surgeons Ireland and Practice Partners

Approved by Board: 29 May 2024

Bord Altranais agus Cnáimhseachais na hÉireann
Nursing and Midwifery Board of Ireland

Contents

Background

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 requirements as outlined in the tables below. Each of the headings reflects the requirements outlined by NMBI in the following documents:

- Nursing and Midwifery Board of Ireland (2015) Post registration nursing and midwifery programmes: standards and requirements. NMBI, Dublin.
- Nursing and Midwifery Board of Ireland (2007) Prescriptive Authority for Nurses and Midwives Standards and Requirements. NMBI, Dublin
- Nursing and Midwifery Board of Ireland (2017) Advanced Practice (Nursing) Standards and Requirements. NMBI, Dublin.

The regulatory mechanism/authority:

85. – (1) The Board shall–

(a) set and publish in the prescribed manner the standards of nursing and midwifery education and training for first-time registration and post-registration specialist nursing and midwifery
(b) qualifications, and
(c) monitor adherence to the standards referred to in paragraph (a).
(d) set and publish in the prescribed manner standards required for registration in any division, annotation and specialist nursing and midwifery qualifications pursuant to programmes approved under paragraph (a),
(e) monitor adherence to the criteria referred to in paragraph (a), the guidelines referred to in paragraph (b) and the standards referred to in paragraph (c),
(f) inspect bodies approved under paragraph (a) in order to ensure ongoing compliance with the
(g) criteria referred to in that paragraph, the guidelines referred to in paragraph (b) and the standards referred to in paragraph (c),
(h) inspect, at least every 5 years, places in the State where training is provided to persons undertaking training for a nursing or midwifery qualification, for the purposes of monitoring adherence to nursing and midwifery education and training standards.

The focus of the site inspection is:

Through a partnership approach to:

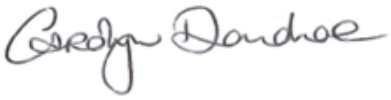
(a) Assess that all statutory and regulatory requirements of NMBI and the European Directives are met.
(b) Assess the effectiveness and efficiency of the curriculum structures, processes and outcomes.
(c) Assess the quality and appropriateness of educational experiences.

Approval

Site Inspection Dates	12-15 March 2024
Factual Accuracy – sent to Education Body	11 April 2024
Factual Accuracy Review and Finalisation	3 May 2024
Education, Training and Standards Committee	9 May 2024
Nursing and Midwifery Board of Ireland	29 May 2024

Signed:

Dr Louise Kavanagh McBride
President, NMBI



Carolyn Donohoe
Interim CEO, NMBI

Dr Karn Cliffe
NMBI Director of Professional Standards – Midwifery, Interim Head of Education, Policy and Standards

General Information

NAME OF EDUCATION BODY	Royal College of Surgeons, Ireland
HEAD OF SCHOOL	Professor Zena Moore
DATE OF EDUCATION BODY INSPECTION	12 and 13 March 2024

PROGRAMMES LEADING TO REGISTRATION AND SPECIALIST PRACTICE			
Title	**Level**	**Award(s)**	**Credits**
Nursing Management	8	Cert/BSc	30/60
Musculoskeletal Casting and Splinting	8	Prof Cert	30
Medicinal Product Prescribing (Nursing/Midwifery)	8	Prof Cert	30
Advanced Practice Nursing	9	PG Cert	50
Advanced Practice Nursing with Prescribing	9	PG Dip	70
Advanced Practice Nursing	9	MSc	100
Advanced Practice Nursing with prescribing	9	MSc	120
Advanced Leadership (Nursing)	9	PGCert/Dip/MSc	30/60/90
Primary Community and Continuing Care (Interprofessional)	9	MSc	90
Occupational Health (Interprofessional)	9	PGCert/Dip/MSc	30/60/90
Nursing (Specialisms listed below)	9	PGCert/Dip/MSc	30/60/90

- Wound Management and Tissue Viability
- Infection Prevention and Control
- Respiratory Care
- Gerontology
- Diagnosis Management and Care of the ENT patient
- Perioperative Children's Nursing
- Orthopaedic Nursing
- Ophthalmology
- Neonatology
- Critical Care
- Perioperative nursing
- Renal Nursing
- Neuroscience Nursing
- Care of the surgical patient
- Emergency Nursing
- Cancer Nursing
- Coronary Care
- Sexual Assault and Forensic Examination
- Medical Nursing

PRACTICE PARTNER SITES INSPECTED	**14 March 2024** • Beaumont Hospital • Royal Victoria Eye and Ear Hospital • St James' Hospital • The Coombe Hospital **15 March 2024** • Connolly Hospital, Blanchardstown • Hermitage Medical Clinic • Irish Prison Service • Cavan General Hospital
SITE INSPECTION TEAM	Dr Mary Ryder, RGN, RANP, RNP, Associate Professor in General Nursing, University College Dublin
	Dr John Larkin, RGN, RCN, RNT, Lecturer, Technological University of the Shannon, Athlone
	Niamh Cleary, RGN, RNT, Nurse Tutor, Mater Misericordiae University Hospital, Dublin
	Lorraine Clarke Bishop, RGN, Professional Officer, NMBI
	Mary Devane, RGN, RM, RPHN, Professional Officer, NMBI
	Claire Nolan, Staff Officer, NMBI
	Carolyn Donohoe, RGN, RNT, Director of Education Policy and Standards, NMBI

Post-graduate Programmes

Requirement Compliance

Key: C – Compliant, P – Partially Compliant, N – Non-compliant

Education Body Requirements

1. The Respective Educational Providers		Post-graduate
1.1	Educational providers respond to change and needs affecting professional, educational, health, policy, social and economic issues.	C
1.2	Educational providers keep appropriate records including records for the conferment of professional and academic awards.	C
1.3	Educational providers have a Post-registration Nursing and Midwifery Education Committee/local joint working group, with representatives of the key stakeholders including service users.	C
1.4	The role of the external examiner in relation to the post-registration nursing and midwifery education programmes/units of learning is explicit.	C
1.5	The staff resource supports the delivery of the education programmes/units of learning at the stated professional, clinical and academic level.	C
1.6	Lecturers/tutors are involved in clinical practice and its development.	C
1.7	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.	C
1.8	A mechanism for staff development which prepares staff to deliver the education programmes/units of learning including the provision for maintaining nursing/midwifery expertise and credibility is identified.	C
1.9	Educational providers provide educational resources/facilities (including library, computer, audio-visual and accommodation) to meet the teaching and learning needs of the specific post-registration programmes/units of learning.	C
1.10	Mechanisms for learner admission to the nursing and midwifery education programmes/units of learning ensure that the stated entry requirements are met. This should include specific mechanisms for the recognition of prior learning. The mechanism and conditions for learners exiting the education programmes/units of learning before completion are explicit.	C
1.11	Following any interruption in the education programmes/units of learning the educational provider ensures that the learner meets the education programmes/units of learning requirements.	C
1.12	The mechanism for learner support in relation to student services, facilities and academic and clinical guidance is explicit.	C

Programme Requirements

2. Programmes/Units of Learning Design and Development		Post-graduate
2.1	Curriculum design and development reflect research and evidence based educational theory and health care theory, policy and practice. National and International benchmarks should inform curriculum development.	P
2.2	Theoretical and clinical learning experiences and the learning environment must support the achievement of the aims and objectives/outcomes of the programmes/units of learning. (EB & PP).	N
2.3	Programmes/units of learning design and development are led by registered nurse tutors or nurse/midwifery lecturers with a teaching qualification and is supported by academic and clinical experts including inter-disciplinary professionals as appropriate in collaboration with others and is guided by professional nursing/midwifery knowledge which is evidence/research based.	C
2.4	The programmes/units of learning development team comprise representative members of key stakeholders in nursing/midwifery education and practice and service users.	C
2.5	The programmes/units of learning are strategically planned to demonstrate balanced distribution and integration of theory and practice, logical sequencing and progressive development of subjects and clinical competence over the education programme.	P
2.6	The programmes/units of learning are based on a range of teaching-learning strategies (including e-learning and blended learning) to assist the development of a knowledgeable, safe, and competent practitioner and to equip her/him with the life-long skills for problem-solving and self- directed learning.	C
2.7	The programmes/units of learning equip the students/participants with an appropriate level of knowledge, research awareness and critical analysis.	C
2.8	Processes to facilitate access, transfer and progression are explicit within the programme/unit of learning.	C
2.9	The programmes/units of learning design include the assessment strategy in relation to the assessment of clinical competence and theoretical learning outcomes.	P
2.10	Quality assurance criteria reflective of both NMBI Requirements and Standards and the relevant awarding body are explicit.	C
2.11	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.	C
2.12	Programme learning outcomes are mapped to appropriate NFQ Level and standards for nursing/midwifery post registration education programmes.	C
2.13	Module learning outcomes are mapped to appropriate NFQ Level and standards for nursing/midwifery post registration education programmes.	C

Practice Placement Requirements

3. Clinical Practice Experience		Post-graduate
3.1	Clinical practice experience provides learning opportunities that enable the achievement of competence in clinical nursing/midwifery practice and the stated learning outcomes (EB & PP).	C
3.2	Clinical placements are based in health care institutions, which are audited/approved by the Programmes/Units of Learning Team and satisfy NMBI Requirements and Standards. (EB & PP).	C
3.3	The selection of areas for clinical practice experience reflects the scope of the health care settings and supports the achievement of the learning outcomes of the post-registration education programmes/units of learning.	C
3.4	Post-registration learner allocation to clinical placements is based on the need to integrate theory and practice and to facilitate the progressive development of clinical skills, competence, quality patient care and patient safety.	C
3.5	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. (EB & PP)	N
3.6	Post-registration learners and all those involved in meeting their learning needs are fully acquainted with the expected learning outcomes related to that clinical placement.	P
3.7	Lecturers and nurse/midwifery tutors, in liaison with the appropriate clinical staff (clinical facilitators, preceptors, clinical managers, and practice development coordinators) guide and support the learners in ensuring that the clinical placement provides an optimum quality learning environment.	C

Assessments

4. Assessment Process		Post-graduate
4.1	Assessments are based on a variety of strategies that are aligned with the subject area, practice setting and stage of the education programmes/units of learning and expected learning outcomes.	P
4.2	Assessment measures where appropriate demonstrates the integration and application of theory to patient care learned throughout the programmes/units of learning and requires the student/ participant to demonstrate competence within practice through the achievement of learning outcomes in both theory and practice.	P
4.3	Grading criteria indicating the standard for a pass award is required for theoretical and clinical practice competency assessments as award/grading mechanism, which acknowledges higher achievements by the student/participant, is recorded.	C
4.4	Marks and standards and assessment regulations relating to compensation, supplemental and appeal mechanisms and conditions for continuance of the education programmes/units of learning are explicit.	C

External Examiners

5. External Examiner Process		Post-graduate
5.1	External Examiner is a Registered Nurse/Midwife with professional qualifications appropriate to the post- registration programmes/units of learning being examined. External Examiner holds academic and teaching qualifications and has at least 3 years full-time teaching experience in courses appropriate to the post-registration programmes/units of learning being examined. External Examiner has experience in examining and assessing post-registration students. External Examiner has experience in the development, management, delivery and evaluation of post-registration programmes/units of learning.	C
5.2	The mechanism whereby the external examiner is provided with relevant documentation, participates in decision-making concerning the programmes/ units of learning and has membership of the Examination Boards of the respective institutions, is explicit.	C

Education Body Organisational Commendations and Recommendations

Commendations

- The site inspection team would like to commend all academic staff, practice placement partners and support staff involved in the inspection for their openness and sincerity throughout the process. There is an impressive range of programmes provided and the responsiveness of programme development to societal needs is commendable.
- The inspection team would like to acknowledge the strong leadership that demonstrated an evident cohesive and collaborative atmosphere within the School of Nursing and Midwifery. There is extensive evidence of strong teamwork.
- The engagement of staff in peer-to-peer observation is impressive.
- The School of Nursing and Midwifery provided evidence of an excellent strategy.
- The level of professional doctorate outreach into clinical sites is commendable. The ladder model for students to start at a certificate level and progress their way to a master's level or further is particularly positive. The systematic review for dissertation and the follow through to publication is excellent.
- The emphasis placed on adult learning is impressive, particularly the flexibility allowed for students to source their own practice experiences.
- The student supports provided are excellent, especially the remote learning support, technology support, skills labs and library facilities.
- The team would like to commend the Sexual Assault and Forensic Examination programme, for meeting the need in society.

Practice Sites

Evidence of valuable learning experiences for RCSI students was available at Beamont Hospital, The Royal Victoria Eye and Ear Hospital, St James' Hospital, The Coombe Hospital, Connolly Hospital Blanchardstown, Hermitage Medical Clinic, The Irish Prison Service and Cavan General Hospital. There were many instances of innovative learning and a real enthusiasm for continuous professional development. All sites are to be commended for the significant support for learners and the provision of clinical exposure and expertise.

Conditions

Please be advised that there is a six-month timeline (unless otherwise stated) to meet these conditions and evidence of compliance must be provided in writing to the NMBI's Director of Education, Policy and Standards.

Requirement 2.2 – Theoretical and clinical learning experiences and the learning environment must support the achievement of the aims and objectives/outcomes of the programmes/units of learning. (EB & PP)

Evidence Provided: On discussion with students and staff, the minimum standard for learning outcomes was not defined.

Outcome: Non-compliant

Condition: Where there is a clinical component in a programme, the approach to competence achievement should be standardised across programmes so there is some objective achievement of a minimum standard.

Requirement 3.5 – 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. (EB & PP)

Requirement 3.6 – Post-registration learners and all those involved in meeting their learning needs are fully acquainted with the expected learning outcomes related to that clinical placement.

Evidence Provided: The minimum standards for the achievement of competence in the clinical practice environments are not explicit.

Outcome: 3.5 Non-compliant and 3.6 Partially compliant

Condition: Define minimum standards of competence in the clinical practice environments and ensure that they are made explicit.

Specific to ANP programme only

Requirement 2.9 – The programmes/units of learning design include the assessment strategy in relation to the assessment of clinical competence and theoretical learning outcomes.

Requirement 4.1 – Assessments are based on a variety of strategies that are aligned with the subject area, practice setting and stage of the education programmes/units of learning and expected learning outcomes.

Evidence Provided: No evidence of learning content relating to ionising radiation and capability framework as referenced in indicative content in the standards and requirements.

Outcome: Partially compliant

Condition: Include learning content for ionising radiation and capability framework as per indicative content in the standards and requirements.

Recommendations

- Ensure that curriculum design and development reflect current health and social policy (Linked to 2.1 – Partially Compliant).
- The programme documents need to accurately reflect what is happening in practice regarding the sequencing of modules and the timeline of the programme (Linked to 2.5 – Partially Compliant).
- Due to some modules being dependent on 100% written assessment, consider exploring alternative assessment strategies (Linked to 4.2 – Partially Compliant).
- The programme steering group must be reflective of all the participant sites with both clinical and academic representation. This will strengthen the existing relationship between the education body and practice sites (Linked to 2.4).
- Review the assessment criteria/model for clinical teaching competence assessment for a standard approach and include the consideration of skills/face to face learning (Linked to 2.6).
- Consider the creation of a student handbook for each programme to ensure that all relevant information is explicit for students (Linked to 2.8 and 4.3).
- Review the verb use in the module descriptor mapping (Linked to 2.13).
- Ensure that grading criteria/rubric is available for students prior to submission of assessment in theoretical modules (Linked to 4.3).