

PROFESSIONAL
STANDARDS
NURSING &
MIDWIFERY

Public Health Nursing Standards and Requirements for Education Programmes

Consultation Report



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

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Introduction

Public Health Nursing Standards and Requirements

The Nursing and Midwifery Board of Ireland (NMBI) is the independent statutory body which regulates the nursing and midwifery professions in Ireland. Our mission is to protect the public through the promotion of high standards of education and training and to protect the integrity of the professions of nursing and midwifery. We are mandated by the Nurses and Midwives Act 2011, as amended, to set standards and requirements for programmes leading to registration. The standards and requirements provide guidance for education bodies (EBs) and practice partners for the preparation of curricula and delivery of education programmes leading to registration.

Public Health Nursing is guided by government policy. Over the next decade, there will be many changes and challenges in healthcare, including an increase in the provision of integrated care (Government of Ireland 2021), an ageing population and a higher prevalence of people living with complex and long-term illnesses. In addition, further challenges will continue in the recruitment and retention of healthcare staff as the focus of Irish Healthcare moves from a hospital-centric model to a more community-focused one. These challenges will require new approaches to education to facilitate Public Health Nurses to continue to provide a high level of safe and effective care within the community and primary care setting (Department of Health, 2022).

NMBI commenced a scoping exercise in June 2022 with the purpose of revising the standards and requirements for the PHN education programme. The Standards and Requirements for Public Health Nursing (PHN) were developed in 2005 and re-issued in 2015.

This report sets out the consultation process undertaken by NMBI to revise the Standards and Requirements for the Public Health Nursing Education Programme.

The Consultation Process

Phase 1: Internal Consultation

The Education, Policy and Standards Department met in May 2022 to discuss the scope and criteria for this revision project. A scoping exercise was conducted and included a comprehensive review of the literature and a plan to meet with key stakeholders in Public Health Nursing. The purpose of these meetings was to investigate what was required to future-proof Public Health Nursing in the context of Sláintecare.

Phase 2: Targeted Stakeholder Meetings

A number of exploratory meetings were facilitated from the 29 June to the 13 July 2022 with representatives from the following departments:

- Chief Nurses Office, Department of Health
- Health Service Executive
- Office of Nursing and Midwifery Services Director
- Education Bodies
- Public Representative Bodies

These preliminary conversations yielded a number of themes to be considered for inclusion in the revision of the PHN standards and requirements. The themes identified included: digital health, caseload management, child health and wellbeing, and safeguarding.

Phase 3: Establishment of Working Group

A working group was established on 26 October 2022 with experts in the field of Public Health Nursing and healthcare to revise the standards and requirements. The working group comprised of the following members:

Table 1: Working Group membership

Representing	Name	Title
Department of Health	Georgina Bassett	Deputy Chief Nursing Officer
Directors of Public Health Nursing	Anne Lynott	Director of Public Health Nursing Dublin West
Office of the Nursing and Midwifery Services Director (ONMSD)	Virginia Pye	National Lead for Public Health Nursing
Office of the Nursing and Midwifery Services Director (ONMSD)	Carmel Buckley	Area Director NMPDU

Continued

Representing	Name	Title
Workforce Planning Lead ONMSD	Deirdre Mulligan	Area Director NMPDU Dublin NE
Public Health Nursing ONMSD	Sinead Lawlor	National Practice Development Coordinator
University of Galway	Nicola Gill Meeley	Programme Director (PHN)
University College Cork	Dr Lloyd Philpott	Programme Coordinator (PHN)
University College Dublin	Niamh Vickers	Head of Subject (PHN and Community Nursing)
University College Dublin	Catriona O'Daly	Programme Coordinator (PHN)
University College Dublin	Kate Frazer	Associate Professor, Director of Faculty Development
INMO	Steve Pitman	Head of Education and Professional Development
SIPTU	Sabrina Ryan	Health Division Representative
NMBI	Carolyn Donohoe	Director of Education, Policy and Standards
NMBI	Mary Devane	Professional Officer
NMBI	Claire Nolan	Staff Officer

In January 2023, Catriona O'Daly, Programme Director (PHN) UCD, joined the group and Carmel Buckley, Area Director ONMSD, replaced Virginia Pye.

List of working group meetings

- 26 October 2022
- 21 November 2022
- 15 December 2022
- 8 February 2023
- 19 April 2023
- 28 June 2023

The working group met at the NMBI offices on 21 November 2022 and 15 December 2022; significant progress was made with the revision of the standards and requirements document, which included changing the Domains of Competence to reflect the six domains of competence in the nursing practice standards (NMBI 2016). A mapping exercise was conducted by Education, Policy, and Standards Department in January 2023 to ensure that the indicative content aligned to the PHN standards and requirements (NMBI 2005,2015).

Phase 4: Public Health Nursing Recent Graduates Poll

In January 2023, a Qualtrics survey poll was conducted to capture the opinion of graduates from the PHN programme to ascertain if the programme had prepared them for their current role as PHNs.

Graduates from the years 2019 to 2022 (n=449) were invited to take part in an anonymous online survey poll, which consisted of 5 short questions. 106 graduates responded to the survey. Responding to the question: “What should be included or excluded from the PHN education programme?” Graduates responded by requesting more education and training on the following topics:

1. Maternal and Child Health
2. Practical Skills
3. Caseload Management
4. Wound Care
5. Care of the Older Person

While the evidentiary data had limitations, the results of the survey found that 40% of graduates would have liked more education and training on the maternal and child health component of the programme. As this is the first revision of the PHN standards and requirements since the legislative introduction of the maternal and child health module, this signalled the need for a review.

The maternal and child health module was introduced as regulated by the Nurses Rules Change in 2004, following the removal of the mandatory requirement of midwifery for entry to Public Health Nursing.

Section 6.4 of the Nurses Rules, 2004 stated:

Before admission to the programme of education and training leading to the registration in the Public Health Nurses Division of the Register, the name of the candidate for registration must already be entered in the Register of Nurses and the candidate must have two years clinical experience in nursing. Unless the candidate's name is registered in the Midwives Division of the Register the candidate must complete an An Bord Altranais approved module or unit of study on Maternal and Child Health as part of the programme.

On 19 April 2023, NMBI facilitated a hybrid meeting of the working group to discuss the maternal and child health component of the programme and invited midwifery representation. The following key stakeholders were invited to attend: the NMBI Director of Midwifery, Dawn Johnston, NMBI Board member Mary Leahy, and NMBI Board members Margaret Murphy, and Kate O'Halloran, who are also members of the Midwives Committee. K. O'Halloran was unable to attend the meeting. A robust discussion was held in relation to the role of the midwife, community midwifery and the role of the PHN.

The outcome of this meeting:

- The maternal and child health component of the programme is to be divided into two distinct modules, with 10 ECTS allocated to each module.
 - Maternal and Infant Health module
 - Child Health module
 - The distinct separation of the maternal and child health module will distinguish the two areas of learning for the student.

- Public Health Nurses are obligated to visit all mothers and infants post-discharge from the maternity service (DoH 2016). The focus of learning for the student PHN on maternity placement, therefore, shall focus on the care of the postnatal woman. This is to ensure that the PHN acquires the knowledge, skills, and competency to provide care to the woman on discharge from the maternity services/midwifery care.
- Draft 5 version of the Standards and Requirements approved for public consultation purposes, with theoretical and clinical Instruction details to be devised by the NMBI team and the academic programme leads.

Representatives from the education body programme providers met with the NMBI team on 8 May to discuss the theoretical and clinical instruction hours for the programme. Following this meeting, it was agreed that:

- The programme instruction would be reflected in hours similar to other nurse/midwife registration programmes.
- Student PHN to complete 50 examinations of the mother and infant during the PHN programme, exposure and competency achievement in postnatal care will extend across the maternity and community setting with final sign-off by the PHN preceptor. The number was selected to ensure all students received a minimum exposure to develop competency.

Phase 5: Public Consultation

On 17 May 2023, NMBI launched a public consultation seeking feedback on the Draft Public Health Nursing Education Programme Standards and Requirements.

The public consultation was open for five weeks and closed on 22 June 2023. The draft document was published on the NMBI website as part of the consultation, alongside an online questionnaire to gather feedback.

Key stakeholders were emailed directly, inviting them to participate in the consultation, including a link to the questionnaire.

Additional communication methods were used to promote the consultation. These included social media platforms, such as LinkedIn, Instagram and Twitter, and the NMBI eZine newsletter, which is emailed to all nursing and midwifery registrants as well as other subscribers.

The Working Group would like to acknowledge the work of Delaine Pillay, Consultation Research Officer, for the extensive role played in organising the Public Consultation and the subsequent review of data captured.

Overview of Responses to Public Consultation

Responses

Table 2: Methods of consultation

Method	Number of respondents
Online survey	112
Written responses	8
Incomplete online survey	28
Total Valid Responses	92

Only respondents that completed at least 80% of the questions in the survey were included in the data analysis.

As such, the number of responses considered for the analysis from the online survey was 84 (n=84).

The total number of responses from the online survey and written responses combined was 92(n =92).

The rationale for not including the incomplete online responses in the analysis is outlined here.

11 responses only completed demographic information but did not comment on the standards.

16 responses completed only between 10 and 15% of the questions; (up to and including Question 3) on the survey, 1 respondent answered all questions as 'I'm not sure' and included indecipherable information in one text box; therefore, these responses are not valid.

Findings

Eight written responses were received from the below organisations/individuals:

- Office of the Nursing and Midwifery Services Director
- Ireland East Hospital Group Senior Nursing Team
- Hospital Group Director of Midwifery
- DPHN, Community Health Organisation Area 2 (CHO2)
- University College Cork, School of Nursing and Midwifery (Public Health Nurse representative)
- University College Cork, School of Nursing and Midwifery (Midwives lecturers)
- Trinity College Dublin, School of Nursing and Midwifery (individual response – midwifery lecturer)
- Trinity College Dublin, School of Nursing and Midwifery (Midwifery Forum)

Online public consultation survey results

In **Question 1**, online survey respondents were asked to identify which option best represented them. Below is the breakdown of respondents.

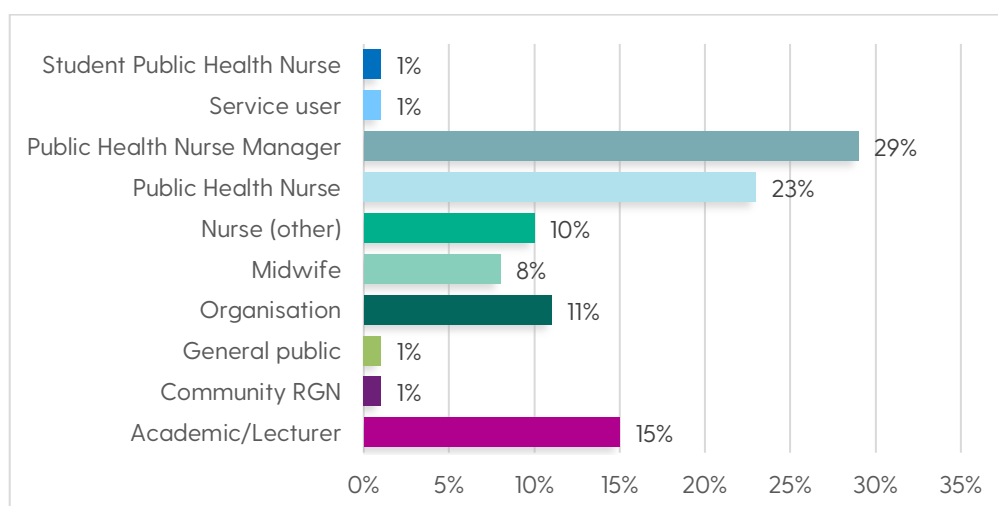


Figure 1: Classification of respondents from the online survey (n=84)

The majority of the respondents were Public Health Nurse Managers (DPHN/ADPHN) (29%), followed by Public Health Nurses (23%).

From the online survey, nine contributions were indicated as representing the following organisations and groups:

- Clinical Risk Unit, State Claims Agency
- DPHN Group CHO 8
- DPHN Group CHO 9
- Office of the Nursing and Midwifery Services Director
- Nursing and Midwifery Planning and Development Unit- with a PHN qualification
- Mental Health Nursing Discipline, Trinity College Dublin
- Midwives Section INMO
- UCD IEHG Midwifery Programme Strategic Group
- Midwifery Association of Ireland

The next section, **Questions 2-7** focused on Sections 1-3 of the draft standards and requirements document. Table 3 below represents the online survey results (n=84).

Section	Results of respondents		Indicated Not Sure
Governance and Legislation Is the information clear?	88% (n=74) Agreed	5% (n=4) Disagreed	7% (n=6)
Minimum entry requirements Do you agree with this section?	46% (n=39) Yes	38% (n=32) No	15% (n=13)
Programme learning outcomes Is the information clear?	73% (n=61) Yes	11% (n=9) No	17% (n=14)
Domains of competence and indicative content Is the information clear?	71% (n=60) Yes	14% (n=12) No	14% (n=12)
Theoretical and clinical practice instruction Do you agree with this section?	55% (n=46) Yes	24% (n=20) No	21% (n=18)
Requirements for Education Bodies (EBs), Practice Partners Is the information clear?	77% (n=65) Agreed	8% (n=7) Disagreed	14% (n=12)

Table 3 Results based on the 84 online valid survey results

The suggestions for improvement have been incorporated into themes, which are discussed later in the report.

The majority of respondents found that the information was clear for the needs of the programme.

Overall, the document was well received. Below are some of the comments provided by respondents.

.."very comprehensive and have included many components that are and will be required within newly qualified PHNs, including Sláintecare, chronic dx management, change management and quality improvement."

"Overall, very good document which articulates well the role and work of the PHN in terms of prevention, education and health promotion along with provision of a community based clinical nursing service".

“The new version of the standards is clear and explicit and make some components more clear such as the minimum hours (675) and the explicit outline of the acute maternity setting placement in postnatal care. The WHO (2022) recommendations on maternal newborn care for a positive postnatal experience state that 'home visits during the first week after birth by skilled health personnel or a trained community health worker are recommended for the postnatal care of healthy women and newborns'. This aligns with the current practice of Public Health Nurses providing care to women and their newborns in the postnatal period. While some areas have community midwifery which supports the 'midwife-led continuity-of-care models' (WHO, 2022), this is not a service which extends nationally.”

Key Themes

Thematic responses were derived from both the online survey and the written responses received (n=92).

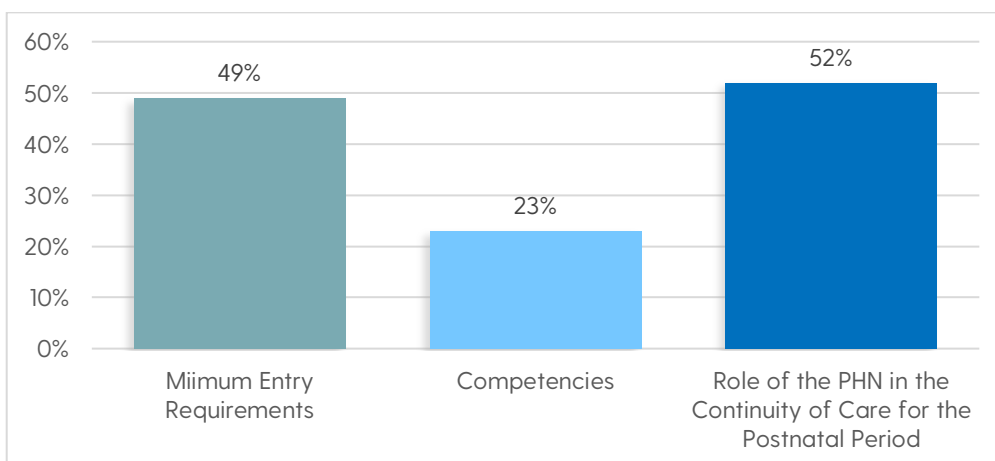


Figure 2 Key Themes Based on Total number of respondents (n=92)

Theme 1. Minimum Entry Requirements

What you said

49% (45 out of 92 respondents) commented on the Minimum Entry Requirements.

You wanted:

- Clarification regarding the type of experience required to apply for Public Health Nursing.
- More than two years clinical experience as a prerequisite to apply for Public Health Nursing.
- Other divisions of the register to be eligible to apply for Public Health Nursing.

“The entry requirements require clarification. What does 'a combination of two years of post-registration nursing and midwifery experience' mean? For example, if an applicant is a RGN and RM but has no adult nursing/ RGN experience (i.e. only 2 years or more RM experience), are they eligible to apply? All applicants should be required to have some RGN experience.”

“RCN/RGN qualified nurses should be able to apply for the course. Without requiring the two years general experience but have two years paediatric experience as the profile of patients in the community now has increased numbers of children with complex needs being cared for at home. Requiring input from the PHN.”

“It is such a diverse job; 2 years post-general registration is not enough to experience to be a PHN”

Our response

- We reworded the minimum entry requirements to provide more clarity. The wording now reflects two years general nursing experience as a requirement. For candidates who hold more than one registration, a combination of one-year general experience and one-year experience in another primary division of the register is acceptable as a prerequisite to apply for the programme (Children's, Intellectual Disability, Mental Health, or Midwifery).
- It has been made explicit that this is the minimum entry requirement for the programme and that additional entry requirements are at the discretion of the programme provider.

Theme 2. Competencies

What you said

71% (n=84) of the online survey respondents agreed with the updated competencies, domains and indicative content, 23% (21 of 92 respondents) provided comments and suggestions.

You wanted:

- A greater emphasis on leadership skills in the learning outcomes.
- Inclusion of digital professionalism.
- Clarity on language used.

“Many of the programme learning outcomes listed are aligned to the principles of Slaintecare ... which impact the environment in which PHN's work. Principles of digital health, informatics and data analysis are increasingly relevant and fundamental to care delivery, and their inclusion will be an important enabler of quality care delivery as we move forward.”

“Very important: Apply leadership skills to practise as an autonomous public health nurse- commend its inclusion.”

“The breastfeeding support policy, the current Indicative content page 9 is as follows...Principles of caring for the new-born include promotion of breastfeeding and other types of infant feeding. It should state “promotion, protection and support of breastfeeding”.... (National Maternity Strategy 2021-2026)”

“Domain 2 'Screening for and promoting healthy development and wellbeing of infants and children' is mentioned. However, the model in use since the best health for children and the current National Healthy Childhood Programme is developmental surveillance. Screening is related but a very specific component of the programme”.

“It is great to see the division of the maternal and infant health module and the child health module as separate entities.”

The Public Health Nursing Working group met on June 28 to review and update the wording in the standards and requirements to reflect the comments and suggestions received.

Our response

- Leadership skills have been given a greater emphasis in the programme learning outcomes.
- A principle on digital professionalism has been added to Domain 2.
- A definition of the phrase 'person' has been added to represent a wide range of stakeholders, including patients, service users, the woman, child and family.

Theme 3. The Role of the Public Health Nurse in the Continuity of Care for the Postnatal Period

What you said

52% (48 out of 92 respondents) commented on Postnatal Care and the role of the Public Health Nurse. The postnatal period begins after childbirth and is typically considered to end within six weeks.

You said:

- The separation of the Maternal and child module into two distinct modules was a welcomed development, particularly from respondents in the Public Health Nursing arena.
- The opportunity to focus on a distinct number of examinations of the postnatal woman and newborn was also a welcomed development, particularly from respondents working in the community.
- Concerns were raised regarding the challenges that may arise from student PHN trying to achieve 50 examinations of the mother and infant in the maternity setting, particularly as other students, such as student midwives, are required to assess a minimum of 100 postnatal women during their practice placement. There was also a concern regarding sign-off of the assessment of competency in postnatal assessment and who had the responsibility to do this Registered Midwife/Registered PHN.
- Concerns were raised by members of the midwifery profession regarding PHNs completing postnatal examinations as they felt that this “contravened legislation” with reference to midwifery being identified as a separate profession in the 2011 Nurses and Midwives Act.

“I'm glad to see that student PHN will have to carry out a certain amount of infant and maternal examinations while on their maternity placement... The maternal health part of the programme is to be welcomed, it's important that PHNs are competent and confident at examining mothers in the postnatal period”

“The quality of the experience gained on the maternal and infant practical is very important”

“It is great to see the division of the maternal and infant health module and the child health module as separate entities”

“The requirements for the student to spend 150 hrs in post-natal care in an acute maternity setting is appreciated, and in theory supported, however access to such placements may prove difficult in accordance with existing clinical placement capacity challenges.”

“The law is clear on the separation of midwifery from the nursing profession...the guidelines show a lack of respect for the role of the midwife and for the women who are being badly served by this type of service. PHNs cannot be expected to have the expertise of a midwife or be able to help mothers maintain breastfeeding etc. this is a retrograde step”

“midwife ‘signing off’ on the achievement of the 50 postnatal examinations, a midwife on a postnatal ward when community skills are required? It is outside the scope of practice for a midwife to declare competency for a PHN.”

The Public Health Nursing Working group met on June 28 to review and update the wording in the standards and requirements to reflect the comments and suggestions received.

Our response

- The Theoretical and Clinical instruction section was reviewed and the proposed requirement of 150 hours in postnatal care was removed (180 hours clinical practicum in acute maternity service remains to cater for individual experience and learning needs).
- The proposed 50 postnatal examinations of mothers and infants remains however, the exposure and competency achievement in postnatal care will extend across the maternity and community with final sign-off by the PHN preceptor.
- NMBI are in agreement with and support the National Maternity Strategy (Department of Health 2016) and Slaintecare Strategy (Department of Health 2017) and their recommendations. The ONMSD representing leads in nursing and midwifery has proposed that Domain 2 is reworded to reflect the principles of postnatal care within the context of continuity of care in a woman and family-centred approach, which is more appropriate to the remit of the PHN.

- To reflect the continuum of postnatal care provided by PHNs and midwives, a new indicator in Domain 4 was suggested by the ONMSD, which states, “Working in partnership with key healthcare professionals including midwives to provide the safe, effective care to women specially in relation to the postnatal care”.
- Public Health Nursing is a distinct register. PHNs are obligated to visit all mothers and infants post-discharge from the maternity service (Department of Health 2016). Provision of postnatal care in the community has been provided by Public Health Nurses since the 1960s. The legislative requirement to be a registered midwife to enter into Public Health Nursing was removed as regulated by the Nurses Rules Change in 2004 and replaced by the maternal and child module. PHN education programmes are compliant with EU and national legislation requirements.
- NMBI has made a commitment to evaluate the Maternal and Infant education programme component, including the 50 postnatal examinations, to determine its impact and to determine if this equates to the competency requirement of the PHN. This will take place after the completion of the first programme of the new standards and requirements.

Conclusion

An expert working group was established in October 2022 to revise the standards and requirements for the Public Health Nurse Education programme.

A draft of the standards was devised and prepared for public consultation. The public consultation was live from 17 May 2023 to 22 June 2023.

An invitation to consult and provide feedback was circulated to stakeholders, including the HSE, education bodies, practice partner sites, representative groups and other relevant Irish regulators. Additional communication methods were used to promote the consultation and encourage participation in the survey, including on social media, the NMBI eZine (online newsletter), and through a press release.

A total of 92 valid responses (84 from the online survey and eight written responses) were used for the analysis of the data and contribution to our overall findings and themes. Satisfaction rates were good, providing adequate information in the draft standards and requirement document, with between two-thirds to three-quarters of respondents indicating their agreement with this.

Three themes for improvement emerged:

- Minimum entry requirements
- Competencies
- The role of the PHN in the continuity of care for the postnatal period.

Revisions were made based on the feedback, and the expert working group drafted and revised a final version of the standards and requirements for the Public Health Nurse Education Programme to be reviewed by the NMBI Education, Training and Standards Committee for recommendation to the Board. An agreement was reached to submit the final draft to the Board, which was approved in July 2023.

Acknowledgements

We would like to thank all of those who gave their extensive time to the NMBI expert working group and to those who took part in our consultation process.

References

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Department of Health (2017) Slaintecare Implementation Strategy. Dublin: Department of Health

Department of Health (2021) Statement of Strategy 2021-2023. Dublin: Department of Health

Department of Health (2022) Review of the Expert Review Body on Nursing and Midwifery

Government of Ireland Nurses and Midwives Act 2011(No 41 of 2011)

Government of Ireland Nurses Rules (2004)

NMBI (2016) Nurse Registration Programmes Standards and Requirements, Nursing and Midwifery Board of Ireland, Dublin

NMBI (2015) Public Health Nursing Programmes Standards and Requirements, Nursing and Midwifery Board of Ireland, Dublin

World Health Organisation (2022) WHO recommendations on maternal and newborn care for a positive postnatal experience. Geneva: World Health Organisation 2022.



Appendix 1

Online Survey

Draft Public Health Nursing Education Programme Standards and Requirements

The Nursing and Midwifery Board of Ireland (NMBI) has launched a public consultation to gather your feedback on the Draft Public Health Nursing Education Programme Standards and Requirements.

The draft document aims to provide guidance to education bodies (EBs) and their practice partners on the delivery of the public health nursing education programmes to ensure that graduates of this programme continue to provide a high level of care within the community and primary care setting.

The standards and requirements have been revised in line with best practice and in consideration of the many changes and challenges facing healthcare and the role of the Public Health Nurse.

This survey is anonymous. Your responses will not be linked to your identity in any way and will be kept confidential. The information collected in this survey will be used solely for research purposes and your comments may be used in the consultation report. Information will not be shared with any third parties. Please view our [privacy notice](#) for more information.

Thank you for your time.

Please respond no later than 5pm on Thursday, 22 June 2023.

STEP 1: View the Draft Public Health Nursing Education Programme Standards and Requirements [here](#).

STEP 2: Take the survey. The survey should take you 15 minutes to complete.

Survey questions

Q1. Which of the below best represents you?

- ☐ Nurse
- ☐ Midwife
- ☐ Academic/lecturer
- ☐ Service user/patient
- ☐ Student nurse/midwife
- ☐ General public
- ☐ Organisation/other

If you are responding on behalf of an advocacy group, charity or other organisation, please state its name below.

Section 1: Governance and Legislation for Nursing and Midwifery Education Programmes Leading to Registration

Q2. Is the information in Section 1 clear?

- ☐ Strongly agree
- ☐ Agree
- ☐ Not sure
- ☐ Disagree
- ☐ Strongly disagree

Please provide any comments that you may have on this section.

Section 2: Public Health Nursing Education Programme Standards

Minimum entry requirements (Section 2.1)

Q3. Do you agree with the minimum entry requirements?

- ☐ Yes
- ☐ No
- ☐ I'm not sure

Please provide any comments that you may have on this section.

Programme learning outcomes (Section 2.3)

Q4. Do you agree that the programme learning outcomes are clear?

- ☐ Yes
- ☐ No
- ☐ I'm not sure

Please provide any comments that you may have on the programme learning outcomes. If your comment refers to a specific learning outcome, please indicate the number of the learning outcome your comment refers to.

Domains of competence and indicative content (Section 2.4)

Q5. Are the competencies and the indicative content outlined within the domains of competence clear?

- ☐ Yes
- ☐ No
- ☐ I'm not sure

Please provide any comments that you may have on the domains of competence; if your comment refers to a specific domain/s please indicate the domain number your comment refers to.

Theoretical and practice instruction for public health nursing education programme standards and requirements (Section 2.5)

Q6. Do you agree with the requirements for theoretical and practice instruction?

- ☐ Yes
- ☐ No
- ☐ I'm not sure

Please provide any comments that you may have on this section.

Section 3 Requirements for Education Bodies (EBs), Practice Partners and Education Programmes Leading to Registration as a Public Health Nurse

Q7. Is the information in this section clear?

- ☐ Strongly agree
- ☐ Agree
- ☐ Not sure
- ☐ Disagree
- ☐ Strongly disagree

Please provide any comments that you may have on this section.

Programme learning outcomes (Section 2.3)

Q8. NMBI welcomes any additional commentary that you may have on the draft Public Health Nursing Education Programme Standards and Requirements.

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