

# Undertaking an Adaptation and Assessment Programme

Guidance for Applicants and Health Service Providers



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Bord Altranais agus  
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### About this document

This document is a guide for Internationally Educated Nurses and health service providers.

Internationally educated midwives applying to the Midwifery division of the NMBI Register are advised to visit the [Competence Assessment](#) section for midwives on our website.

## Abbreviations

CAT	Competency Assessment Tool
CCPS	Certificate of Current Professional Practice
CGS	Certificate of Good Standing (alternative to CCPS)
DOH	Department of Health
EB	Education Body (alternative to HEI)
HSE	Health Service Executive
HEI	Higher Education Institution
HIQA	Health Information and Quality Authority
NMBI	Nursing and Midwifery Board of Ireland
PIP	Performance Improvement Plan (to replace 'Action Plan')
PPPG	Policies, Procedures, Protocols and Guidelines
PQE	Post Qualification Experience
SPP	Supervised Practice Placement
WHO	World Health Organisation

## Glossary

A full glossary of all terms used here and in other NMBI publications can be viewed at [www.nmbi.ie/Standards-Guidance/Glossary](http://www.nmbi.ie/Standards-Guidance/Glossary).

### Applicant

Applicant refers to a nurse or midwife who applies to NMBI to join the Register of Nurses and Midwives. All nurses and midwives must be on NMBI's Register to work in Ireland.

### Adaptation and assessment

A period of supervised practice placement which often includes further education and training. This period of supervised practice is assessed and is the responsibility of a registered nurse.

### Assessment

A process to check the level of skill, knowledge, understanding or attitudes a person has to complete a specified goal. Assessment measures how a candidate nurse demonstrates achievement of competence to care for patients.

### Candidate Nurse

An internationally educated nurse whose name is on NMBI's Candidate Register. Nurses are on this Register while they are completing their adaptation and assessment to have their qualification recognised by NMBI.

### Competence

A nurse's ability to understand and demonstrate knowledge, practice skills, and professional and ethical values. This is important for safe, accountable, compassionate and effective practice as a registered nurse or registered midwife.

### Critical Elements

A set of single, distinct and visible actions that show a nurse can perform to a required level of practice. They represent principles that are essential to show a nurse can practice competently. They allow a nurse to achieve the learning outcomes from a clinical perspective.

### Domains of Competence

A framework used to assess a candidate nurse's clinical practice. Competencies are used to show that a nurse has the knowledge, understanding, skills and abilities to work in contemporary practice. All competencies are assessed on an ongoing basis during the period of adaptation.

### Education Assessment

A review of an applicant's nursing credentials and qualifications such as transcripts, course content and other material that determines if their education programme is comparable to nursing education in Ireland. An education assessment includes nursing education, entry to practice and post qualification experience. As part of the assessment, NMBI ensures that unqualified people do not practice nursing.

### **Education Assessor**

A person who reviews and verifies if the nursing programmes of nurses who have qualified from outside of Ireland. They check that applicants meet NMBI's academic and clinical standards and requirements. They also check that an applicant meets the EU Directive 36/2005/36 for General Nursing.

### **Induction**

A formal introduction between a nurse and their employer. An employer will outline a nurse's role and responsibilities, and the mission and values of the wider organisation. An effective Induction process will ensure that the nurse is supported to achieve their expected performance levels.

### **Learning log**

The learning log is a diary or journal that shows what a candidate has learned. It outlines the specified domains of competence required by NMBI.

### **Learning Outcomes**

Learning outcomes set out the knowledge, understanding, ability and skills that a learner needs to achieve by the end of the programme.

### **Orientation (incorporating an Adaptation and Assessment Programme)**

A process used to provide initial training and information including assessment of competence relative to the responsibilities of their role, and the organisation's mission and goals.

### **Post Qualification Experience (PQE)**

A nurse's practice experience after they have completed their professional qualification and have been admitted onto a nursing Register.

### **Performance Improvement Plan (PIP)**

The goal of a PIP is to improve the competence level of the nurse to deliver quality care to the service user. The plan should cover specific areas of performance deficiencies, to identify skills or training gaps and sets clear expectations for improvement.

### **Qualification Recognition**

A formal acknowledgement by a competent authority of the validity of a foreign qualification with a view to access to educational and/or employment activities.

### **Registration**

This step follows qualification recognition and is the last process before the applicant's name is added to the relevant division of the NMBI Register (from NMBI Applicant's Guide).

### **Verifier**

An independent person who ensures that the assessment process is conducted fairly. If difficulties arise during the period of adaptation, the verifier is responsible for verifying the assessment process. The verifier attends the intermediate and final meeting if requested to do so by the candidate nurse/preceptor.

## Introduction

NMBI extends a warm welcome to all internationally educated nurses and we acknowledge their contribution to the Irish healthcare system.

Some applying to NMBI are required to undertake a compensation measure before they join a division of the Register. NMBI aims to regularly review processes so that opportunities can be identified to make meaningful improvements.

The Irish health service is evolving and expanding, and we need more nurses to meet the growing needs of service users. Since 2017, more internationally educated nurses have applied to join the NMBI Register than Irish educated nurses (DOH, 2022). This highlights the importance of internationally educated nurses who provide care within the Irish health service (DOH, 2022). As part of its main principles, the Sláintecare Action Plan is committed to having a workforce that 'is appropriate, accountable, flexible, well-resourced, supported, and valued' (DOH, 2019, p 9). NMBI must ensure that the nursing and midwifery workforce meets these goals by implementing clear standards and requirements for all nurses who apply to practise in Ireland.

In addition to a literature review, drawing on national and international research, a series of countrywide focus groups were conducted with former candidate nurses, preceptors, and clinical facilitators/clinical practice support nurses who completed or support the adaptation and assessment programmes. The feedback received facilitated the development of this guidance document which will be used by applicants and health service providers during the adaptation and assessment process.

The Irish healthcare system continues to benefit from the knowledge, experience and skills of internationally educated nurses. The preparation and support of adapting to working as members of a culturally diverse healthcare team is important to the success of international recruitment.

We will continue to support all registrants in their practise.

## Ethical Recruitment

There is a worldwide shortage of skilled nurses and a rise in people with healthcare needs. This is impacting some countries and as a result, Irish health service providers can only recruit in countries where the national government supports the process. This approach is consistent with the concept of ethical recruitment.

The WHO Expert Advisory Group on the Global Code of Practice on the International Recruitment of Health Personnel recommended that countries with the most pressing health workforce needs related to universal health coverage should be identified, and support and safeguards targeted at them. The Expert Advisory Group further called on leading destination countries and development partners, as well as others interested in providing health workforce related support and safeguards, to commit multi-year flexible funds towards implementation of the Code as a global public good (WHO, 2021).

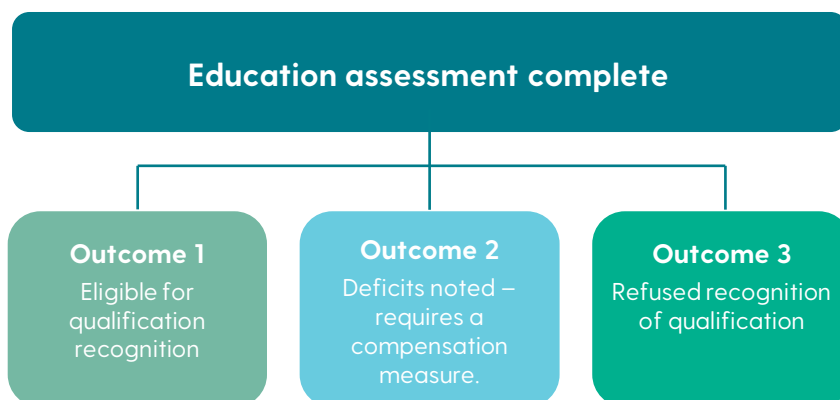


## Compensation Measures

Internationally educated nurses who have completed their education and training outside Ireland must undergo an education assessment for their qualifications to be recognised. An assessment is carried out to check if the applicant meets the European Union (EU) Directive 36/2005/36 requirements and the NMBI Nurse Registration Programmes Standards and Requirements to join a division of the NMBI Register. If an internationally educated nurse's professional education and training does not meet these standards and requirements, the applicant may be asked to complete a compensation measure. A compensation measure includes either a period of adaptation and assessment or an aptitude test.

The recognition of qualification process is carried out in line with the:

- I. EU Directive 36/2005/36 (applies to the General Nursing programme only)
- II. NMBI Nurse Registration Programmes Standards and Requirements



**Figure 1:** Outlines the possible outcomes of the regulatory education assessment

### Explanation

**Outcome 1:** Eligible for qualification recognition: the qualification meets the EU Directive 36/2005/36 – applies to General Nursing programmes) and NMBI Nurse Registration Programmes Standards and Requirements

**Outcome 2:** Deficits noted: the qualification falls short of the EU Directive/NMBI Nurse Registration Programmes Standards and Requirements – a compensation measure is required in order for the applicant to demonstrate their competency.

**Outcome 3:** Refused: Not eligible for qualification recognition: the qualification does not meet the EU Directive/NMBI Nurse Registration Programmes Standards and Requirements, and the deficits cannot be addressed by a compensation measure, on this basis an application for qualification recognition can be refused.

Following an Education assessment, NMBI will issue a 'Decision letter' if deficits were noted in the applicant's training programme and a compensation measure is required.

The Decision Letter is valid for 12 months from date of issue and is only valid for one attempt at a compensation measure. The applicant must have **commenced** the compensation measure on/before the expiration date of the Decision letter.

A Decision Letter is only valid for one compensation measure. If a candidate has not successfully completed their compensation measure, they must re-apply to NMBI for qualification recognition again in order to re-take a compensation measure.

**Please note:** Sometimes the applicant does not provide enough information or incorrect information about their education programmes which makes the application difficult to evaluate. It is the responsibility of the applicant, their Higher Education Institution (HEI)/Education Body (EB) and their employers to submit all the required documentation so that a full education assessment can be completed.

NMBI is responsible for developing a framework of compensation measures for nurses educated and trained outside of Ireland whose qualification does not meet the EU Directive 36/2005/36 standards for general nursing programmes) and the NMBI Nurse Registration Standards and Requirements.

For the General and Psychiatric Division of the Register, two compensation measure options are available:

1. a period of adaptation and assessment –facilitated by the Health Service Provider
2. an aptitude test – provided by a Higher Education Institution/education body.

If an applicant is applying to any division other than General or Psychiatric Nursing, they will need to complete a period of adaptation and assessment. An Aptitude test is currently not available for Midwives, Children's Nurses, Intellectual Disability Nurses, Public Health Nurses, Nurse Tutors, Midwife Tutors, Nurse Prescribers, Midwife Prescribers, Advanced Nurse Practitioners or Advanced Midwife Practitioners.

## The Aptitude Test

The aptitude test has two parts:

**Part 1:** Theory or knowledge test or multiple-choice questions, which must be successfully completed before Part 2 can be attempted.

**Part 2:** practical or objective structured clinical examination (OSCE).

For applicants who wish to complete an aptitude test, information is available on the [RCSI website](#).

This guidance document focuses mainly on the compensation measures of adaptation and assessment. It also provides guidance on the theoretical and competence assessment framework of an adaptation and assessment programme.

## English Language Competence

English language competence and effective communication is an important part of nursing and patient safety (Yahes and Dunn-Kitrick, 1996). Communication includes speaking, reading, listening, and writing. To register with NMBI, an applicant must provide evidence that they have the required level of competence in all four of these essential skills.

As well as the applicant's educational history, NMBI must review and approve the English language competence of candidate nurses seeking recognition of qualification. All applicants must show NMBI that they have the necessary knowledge of English to communicate effectively in their practice. This is a mandatory requirement of the registration process (for qualification recognition and registration).

To avoid unnecessary delay, applicants should ensure their English language test results are valid and in-date (within 2 years of the test date) when they apply for registration. Applicants will not be eligible for registration without a certificate to show they have passed the English language test.

For more information, please visit the [English Language Requirements](#) section of our website.

## Scope of Adaptation Programmes

For ease of reference, the guidance is divided into three sections:

1. Pre-Adaptation
2. The period of Adaptation and Assessment
3. Post-Adaptation



# Pre-Adaptation

### Employment Information

It is best practice to complete as much of the recruitment process as possible before the applicant arrives in Ireland. The applicant should be satisfied with the information provided on the recruitment process. If further information is needed, the applicant should contact the recruitment agency or healthcare provider.

The minimum information supplied to the applicant should include the following:

- Place of employment - organisation/hospital/health service provider.
- Job description for the post.
- The adaptation and assessment programme including orientation period, supervised practice placement and assessment process to recognise their qualification and eligibility to join the NMBI Register.
- Role of the recruitment agency and the health service provider in the recruitment process.
- Recruitment costs, the health service provider covers the cost of the recruitment process, and the applicant may have extra costs, for example, they may need to pay for notarisation, translation, or copies of required documentation.
- Salary scale during the adaptation and assessment programme and on registration.
- Continuing professional development (CPD) opportunities.
- Medical assessment process and occupational health requirements.
- Accommodation arrangements.
- Cost of living and working in Ireland.
- Social welfare, taxation, and pension systems.
- Equality and employment legislation for all employees.

### Further sources of information

Health service providers or agencies should develop their own information packs with relevant information. NMBI recommends the following sources:

- Department of Health: [www.gov.ie/en/category/health](http://www.gov.ie/en/category/health)
- Irish Government: [www.gov.ie](http://www.gov.ie)
- Citizen Information Centre: [www.citizensinformation.ie](http://www.citizensinformation.ie)
- Irish Tourist Board: [www.ireland.com](http://www.ireland.com)

For information about working visas, please visit: [Atypical Working Scheme](#).

### Joining the Candidate Register for the period of adaptation

Before the adaptation and assessment programme, an applicant will receive a letter from the health service provider confirming their place on the programme.

The letter must be on headed paper and include:

- The applicant's full name and date of birth.
- The start date (day 1 of orientation/theory/classroom-based activities)

This letter is required by the applicant to apply for their Candidate Certificate on the MyNMBI portal. It must be uploaded to the portal by the applicant only. This Candidate Certificate is a mandatory requirement and is valid for a total of 12 weeks or the duration of their adaptation and assessment programme, whichever is shorter.

The Candidate Certificate must be applied for at least one day **before** the start of their Adaptation and Assessment Programme (initial orientation week). Candidates will **not** be permitted to commence the programme without this certificate.

Applicants need to verify all their details on the MyNMBI portal before the first day of their orientation week. Changes cannot be made after this date. Once the application has been completed, NMBI will send the candidate nurse their Candidate Certificate. This will be sent by NMBI at midnight on the date they start their adaptation and assessment programme. It will not be available before this date.

All applicants must have an in-date Candidate Certificate and have their name on NMBI's Candidate Register from Day 1 and for the entire duration of their adaptation and assessment programme. This includes any time for orientation or classroom-based activities. The Candidate Register can be checked on the [MyNMBI](#) portal.

If an applicant does not have of a Candidate Certificate on Day 1 of their adaptation and assessment programme, they must email NMBI at: [G3req@nmbi.ie](mailto:G3req@nmbi.ie).

Once the adaptation and assessment period is complete and the Candidate Eligibility Report has been sent to NMBI, the applicant's candidate certificate expires, and the applicant is removed from the register regardless of the time remaining on the Certificate.

**Legislation does not provide for un-registered applicants to continue providing nursing duties. Therefore, applicants must cease nursing duties until they receive full registration with NMBI.**

### Human Resources/occupational health considerations

To ensure a nurse can practise safely, Human Resources or occupational health requirements must be completed before a nurse can start the supervised clinical placement practice. The health service provider should ensure that there is enough time to complete the occupational health appointments.

## Programme Design

Health care providers should develop a structured framework to support internationally educated nurses in the adaptation and assessment process. The health service provider should make available:

- Written guidelines to support the adaptation and assessment programme.
- An orientation week to introduce internationally educated nurses to the Irish healthcare system.
- Preceptorship training for staff supervising and assessing internationally educated nurses (a requirement).
- Planned peer support and reflection is an important part of the period of adaptation.
- A process for managing underperformance.

Adaptation and assessment programme must include clinical and theoretical knowledge, as well as cultural and social awareness training. This programme should ensure that internationally educated nurses can practice safely in the Irish healthcare setting and integrate into the Irish culture.

To achieve this, the programme should include the following elements:

### **Clinical competence:**

The programme must assess and validate the internationally educated nurse's clinical skills and knowledge to ensure that they meet the standards needed to practise. A number of assessment methods can be used, for example observations, practical assessments, simulations, and evaluation of their ability to provide safe and effective care.

### **Theoretical knowledge:**

Internationally educated nurses must have the opportunity to enhance their theoretical knowledge through targeted and self-directed educational modules or courses. This includes evidence-based clinical knowledge and skills for direct patient care, Irish healthcare policies, legislation and regulation that is specific to Ireland. Linking theory to practise is an important part of the assessment process.

### **Cultural and social awareness:**

Cultural competence is important, and the programme should include education and training on Irish culture, values and social norms. This will help internationally educated nurses to understand cultural differences and support them in effectively communicating and delivering patient-centred care.

### **Integration support:**

The programme should offer support services to help internationally educated nurses adjust to the Irish healthcare setting. This may include mentorship programmes, language support, and guidance on professional and social integration. Providing a supportive environment will help them to adapt and thrive in their new work environment.

## Components of an Adaptation and Assessment Programme



**Figure 2:** Principal components of an adaptation and assessment programme

### Content - Theoretical/Classroom Based Activities

The content is indicative and allows the candidate nurse to continue to learn and develop. Programme planners are expected to demonstrate that the programme is relevant and responsive to changes in policy and legislation and for providing care in line with evolving healthcare needs. Programmes may incorporate classroom-based simulated practices such as role play and workstations using a problem-based learning approach to improve learning and build confidence.



## Recommended content of an adaptation and assessment programme

### Clinical and theoretical knowledge

(including division specific indicative content)

Healthcare system in Ireland

Organisational structure of the health service provider

Ethical and legal issues (The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI)

Scope of Nursing and Midwifery Practice Framework (NMBI)

Role of the nurse within the Irish healthcare system

Role of the multidisciplinary team

The nursing process/local model of nursing

Discharge planning modalities -process and pathways

Health service provider's policies, procedures, protocols, guidelines and clinical guidelines.

Infection prevention and control practices

Medication management

Skills training to include:

- Manual handling
- Basic life support

Documentation: Recording Clinical Practice (NMBI)

Accountability and responsibility

Critical thinking and decision making

Communication and interpersonal skills

Approved abbreviations and terminology

Health and safety issues

Clinical skills such as Activities of Daily Living (ADLs) Irish National Early Warning System (INEWS), ISBAR, sepsis, deteriorating patient and escalation protocols

Malnutrition Universal Screening Tool (MUST)

Tissue viability, wound care management, diabetes, chronic disease management

Care of the older person (for example, dementia, falls, frailty)

Palliative care

End of life care

Reflective practice

Time management

Leadership

## Recommended content of an adaptation and assessment programme

### Cultural and social knowledge

(Recruitment/Health Service Provider)

Encourage self-directed research

Cultural and social norms

Irish climate and weather

Food and lifestyle

Public transport information

Accessing public services

Cost of living

Post Office and banking facilities

Salary arrangements

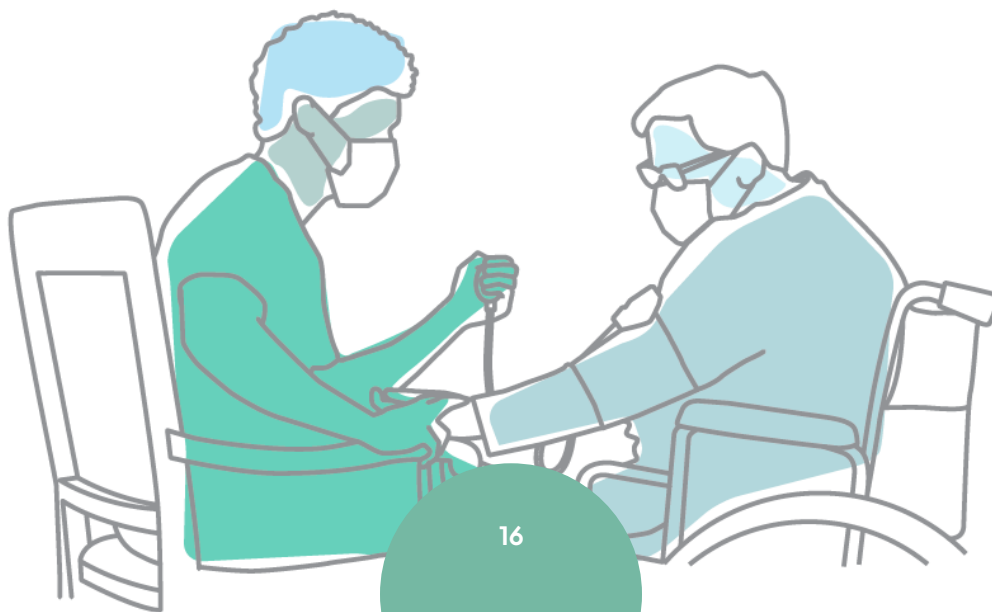
Healthcare entitlements and access

Personal safety

Employment and equality legislation

Social welfare entitlements

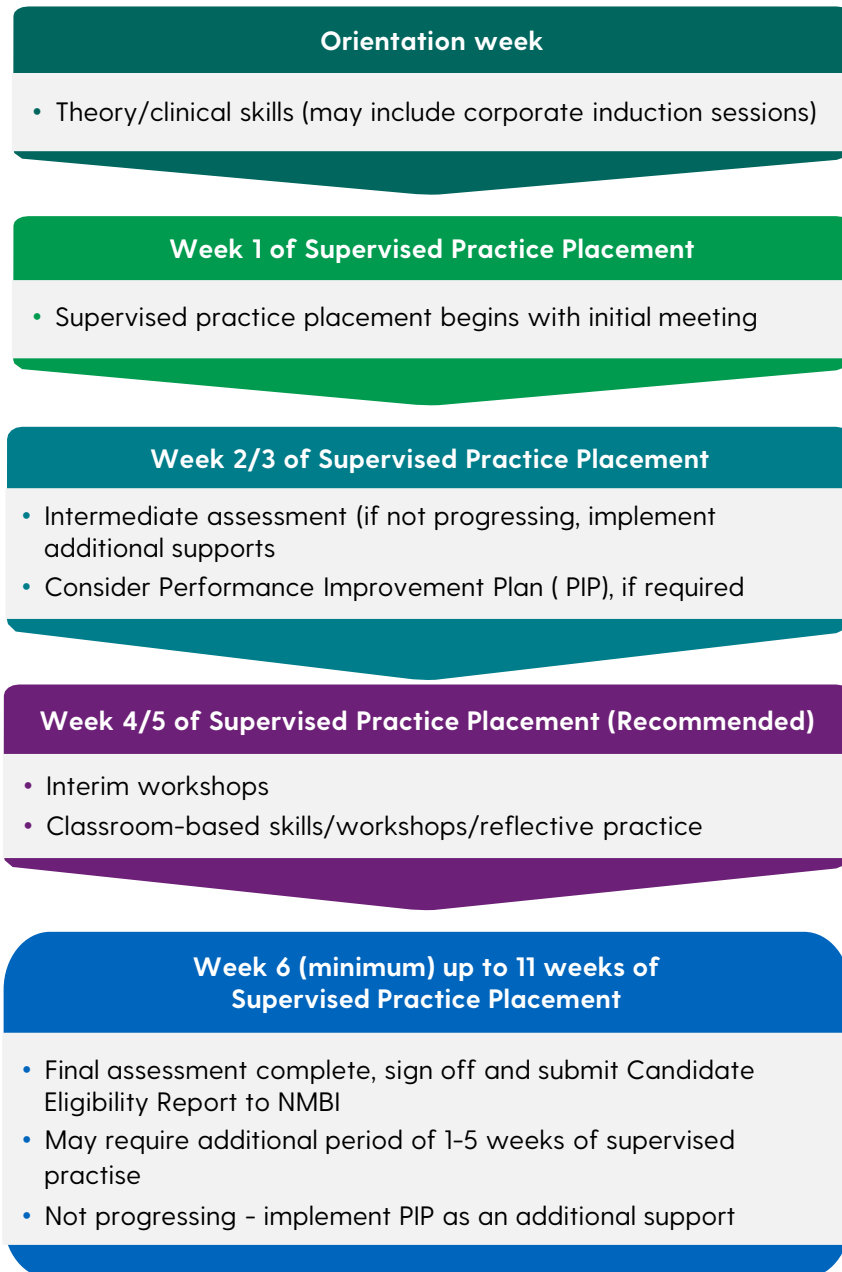
Accommodation information





# The Period of Adaptation and Assessment

**The duration of Adaptation is one week orientation and minimum of six weeks of supervised practice, (total of 7 weeks minimum for the programme).**



**Figure 3:** Indicative Timeline of Adaptation Assessments

## Attendance Management

Candidate nurses must complete a minimum of 1 week (37.5 hrs) of a classroom-based orientation programme and a minimum of 6 weeks (225 hrs) of a supervised practice placement (supernumerary). The total minimum programme is 7 weeks (262.5hours). Any time missed during the minimum 6 weeks of supervised practice placement must be made up. All candidates have the opportunity to achieve competence within an 11-week timeframe (see table below)

### Adaptation and assessment programme

The programme must consist of a minimum of one week of theory (37.5 hours) plus a minimum of six weeks of assessed practice. Hours/weeks can vary over a minimum of 6 calendar weeks).

Programme plan	Hours
Initial Orientation week (Theory/classroom activities)	37.5 hrs
Minimum of six weeks of assessed practice	(37.5 hrs per week x 6 weeks = 225 hrs).
<u>Total minimum hours</u> required to register with NMBI	262.5 hrs (37.5hrs +225hrs)
<b>The entire programme must not exceed 12 weeks.</b> (1 week of orientation and 11 weeks of supervised practice) (12 weeks x 37.5hrs)	450 hrs in total

**Table 1:** Adaptation and Assessment Programme hours

**Expiry Date:** Please note that NMBI must be notified if a candidate nurse, who is completing the full 12-week adaptation and assessment programme, has missed time and needs the expiry date of their temporary candidate certificate changed, **(only available in exceptional circumstances)**. The adaptation lead/clinical facilitator must apply to NMBI and explain why they need to change the expiry date.

### Long-term sick leave/absence

The adaptation lead/clinical facilitator must notify NMBI if a candidate nurse is on long-term sick leave. NMBI will temporarily remove them from the Candidate Register. NMBI must also be notified when the applicant is due to return to placement so that a new Candidate Certificate can be issued. NMBI will then reinstate the candidate to the Candidate Register.

**Please note:** NMBI do not need to be informed of sick leave once the minimum 225 hrs have been completed within the 11-week supervised practice placement timeframe. NMBI must be contacted if an extension to the Candidate Certificate is needed.

The health service provider must ensure that candidate nurses are on supervised clinical practice within the timeframe set out on the candidate certificate and do not exceed the expiry date.

### Supervised Practice Placement (SPP)

Recognition of qualification requirements is an important part of the registration process. Supervised clinical practice allows a candidate nurse to apply the knowledge and skills they need to meet the EU Directive 36/2005/36 (applies to General nursing programmes) and NMBI Nurse Registration Programmes Standards and Requirements. An adaptation and assessment programme allows candidates to complete a competency-based placement of supervised practice where they can demonstrate and develop their current nursing knowledge, clinical skills, clinical judgement (critical thinking, reasoning, and decision-making) leadership, management, scholarship and communication/interpersonal skills. A fundamental component of the adaptation period is the assessment of competence for recognition of qualification for entry onto the relevant division of the nursing register with NMBI. **The assessment process puts an emphasis on the achievement of core nursing competencies and provides the opportunity for eligible candidates to meet the requirement for qualification recognition and subsequent registration.**

**Please note:** Irrespective of the speciality, the candidate nurse should be assessed for entry onto the register at the level of a newly qualified nurse (graduate nurse).

The competencies required are outlined in the Competency Assessment Tool for Nurses which is available on our [website](#).

### Minimum Contact Time

The preceptor or associate preceptor must be available to supervise and assess the Candidate Nurse for at least two-thirds of their time on clinical placement. As the Candidate Nurse is supernumerary (an extra member of staff) while they are on their supervised practice placement, they should follow the shift pattern of their preceptor/associate preceptor. This may include working on weekends and on night duty. It is recommended that the candidate commence night duty after a period of day duty. This approach allows candidates to be assessed by a dedicated preceptor/associate preceptor on a continuous basis for the duration of their adaptation and assessment programme. Candidate nurses cannot be assigned shifts to meet operational demand.

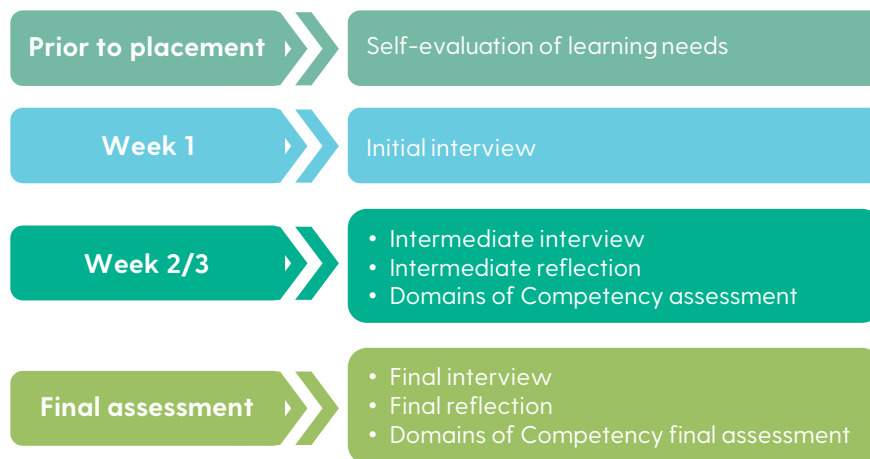
## Supervision

**The Scope of Practice of a candidate nurse should maintain the equivalence of the scope of an undergraduate internship student nurse.** Therefore, the candidate nurse must be supervised accordingly.

Distant Supervision requires that the candidate nurse carries out their duties and is expected to recognise if they need assistance or advice from the preceptor/registered nurse. If help or advice, they should be proactive and discuss their needs in a timely manner.

The candidate nurse is expected to apply a systematic approach to the provision of person-centered care to a designated caseload of service users under the distant supervision of a preceptor/registered nurse.

## The Competency Assessment process



**Figure 4:** Competency Assessment Process

Competence is defined as the attainment and application of knowledge, intellectual capacities, practice skills, integrity and professional and ethical values required for safe, accountable, compassionate and effective practice as a registered nurse.

The period of adaptation is used to assess if a candidate nurse has achieved competence. The candidate nurse must actively engage in the process of adaptation and assessment and has a responsibility to learn and achieve their competence.

The candidate nurse works under the supervision of a registered nurse (preceptor) to develop and demonstrate the expected competencies within their scope of practice for the duration of the practice placement.

## Domains of Competence

The Domains of Competence are outlined in the NMBI Nurse Registration Programmes Standards and Requirements. These standards and requirements also include core competencies and learning outcomes that a nurse must have achieved on completion of their final practice placement of a pre-registration undergraduate nursing degree programme, and prior to application for registration and entry onto the NMBI Register.

The Domains of Competence outlined in the [Competency Assessment Tool](#) for the candidate nurse are aligned to the [Nurse Registration Programmes Standards and Requirements](#) for undergraduate nursing programmes in Ireland.

## Best Practice During a Period of Supervised Practice Placement and Assessment

The candidate nurse is placed in a clinical learning environment that is already audited via a process approved by NMBI and has well established mechanisms for supporting learners.

- The learning environment must be suited to the specific division of the NMBI Register the candidate nurse is applying for.
- The candidate nurse works with a registered nurse (preceptor or associate preceptor) and/or other nursing staff daily for the duration of their adaptation. This will allow the candidate nurse to develop the knowledge, skills, attitudes and behaviours they need to gain competence.
- It is essential that each preceptor has completed the National Preceptorship Programme.
- The preceptor/associate preceptor must have at least 6 months post registration experience.
- Internationally educated nurses should ideally have one year's experience of working in the Irish health service before acting as a preceptor. They may assume the role of associate preceptor.
- Medication management must be assessed during the period of supervised clinical practice (to be determined locally).
- Ongoing reflective practice is important to achieve competence and should be encouraged.



## Learning Outcomes

Programme planners can develop learning outcomes that are specific to the supervised practice placement and assessment.

- Clearly written up-to-date learning outcomes that are suitable to the practice placement environment must be available for a candidate nurse to gain experience. These learning outcomes should be relevant to the practice setting and should act as a guide to the candidate nurses' practice-based learning. For more information, please read [A Guide to Writing Learning Outcomes for Practice Placements](#) (NMBI 2022). While this document outlines the learning outcomes for under-graduate nursing programmes, the principles can be applied to enhance the learning environment for the candidate nurse.
- The candidate nurse must negotiate every opportunity to demonstrate the achievement of learning outcomes (placement specific), performance indicators and critical elements across the 6 domains of competence identified during the initial meeting with the Preceptor.

## Learning Log

The use of a Learning log is recommended as it provides an opportunity to reflect upon and record personal encounters, and, in doing so, enhances the skill of reflective practice. This learning strategy will also help develop English language writing skills. To determine competence the preceptor/assessor satisfies him/herself that the candidate nurse has achieved the learning outcomes and the learning log may assist the Preceptor/Assessor in this endeavour. The log provides documented evidence of learning, and the reflective notes may provide evidence that competence has been achieved in the relevant domains.

## The Assessment Meetings

Formal meetings take place between the preceptor and the candidate nurse as part of their assessment process. Meetings are held in private and free from disturbance. There is a minimum of three formal meetings during the adaptation process: an initial, intermediate and a final meeting. The final meeting must be completed by the end of week 12 (i.e week 11 of supervised practice placement).

- The Competency Assessment Tool and any supporting documents required for the practice placement (for example, learning outcomes, learning logs etc) must be retained by the candidate and must be available to the preceptor, Registered Nurse, Clinical Nurse Manager and practice support personnel.
- Candidate must be present for all assessments and recording of their progress in the Competency Assessment Tool.
- All meetings must be documented in the Competency Assessment Tool and signed and dated by the relevant people in a timely manner.
- Protected time should be given to both the preceptor and candidate nurse to carry out practice placement assessments.

**Please note:** Medication management assessment should be part of the overall competence assessment.

### The Initial Meeting: (1st week of supervised practice placement)

- This meeting should take place within the first two days of the practice placement.
- Prior to the meeting, the candidate nurse should complete the 'Self Evaluation' form.
- The learning outcomes and the Domains of Competence are discussed in detail.
- This is an opportunity for the candidate nurse to talk about their own competency level and what they expect as well as what practice-based learning and resources are available.
- A learning plan should be agreed between the preceptor and the candidate nurse, and clearly written in the Competency Assessment Tool document.

### The Intermediate Meeting: (intermediate point between weeks 2-3)

The second meeting is the intermediate meeting where the preceptor talks with the candidate nurse about their strengths, areas for development and opportunities to learn. The preceptor will choose when the meeting takes place based on the. Of the candidate nurse in the achievement of competence in the 6 domains of competence outlined in the Competency Assessment Tool.

- This meeting is another opportunity to discuss the candidate nurse's progress and to give feedback on the competencies achieved to date.
- Immediately prior to the meeting, the candidate nurse should complete the 'Self-assessment' section of the Competency Assessment Tool.
- The learning plan outlined in the initial meeting should be reviewed.
- If the candidate nurse needs additional learning supports/Performance Improvement Plan (PIP) to develop their competencies, this should be discussed during this meeting.
- The preceptor and candidate nurse will review the 6 domains of competence, the associated performance indicators and learning outcomes and discuss the candidate's progression and areas for development.
- Constructive feedback should be given in a fair and balanced manner.
- The candidate should be given time to reflect on their experiences to date and discuss any concerns or questions they may have.
- The preceptor will initial each performance indicator under the relevant column.
- The Preceptor will ensure any relevant clinical skills documents are also signed off.
- Both the preceptor and the candidate nurse will discuss the learning plan for the remainder of the placement.
- A verifier may be requested by the candidate nurse/preceptor to attend this meeting if performance concerns have been identified.

### Candidates Requiring Additional Support

If a candidate nurse is not performing to the level of competence needed, a Performance Improvement Plan (PIP) should be used to support the candidate nurse to achieve competence. The PIP should be clear and focus on the domains of competence that need to be achieved.

**Please note:** If there is an immediate risk to the safety of service users/healthcare staff or the candidate nurse, the senior nurse manager must be informed immediately and the candidate nurse may be removed from the practice area while the situation is reviewed.

If the candidate nurse is not progressing, the preceptor will consider and review the candidate's learning needs, expected outcomes and resources.

With the support of a clinical facilitator or adaptation lead, the preceptor and the clinical nurse manager will start a PIP.

The PIP is an additional support and must be used in conjunction with the main competency assessment tool.

The PIP will highlight the specific competencies that need to be developed.

### Performance Improvement Plan (PIP)

A PIP is agreed between the candidate nurse, the preceptor and clinical nurse manager. A PIP includes specific guidance and support to help a candidate nurse to complete their placement. A locally approved performance improvement framework should be used.

The PIP must be recorded and should include:

- The specific competencies that the candidate nurse needs to develop.
- What steps the candidate nurses need to take to develop the competencies.
- To ensure a valid and reliable assessment process supported by consistent preceptorship, there should be an agreed minimum contact time per week when the preceptor and the candidate nurse will practice together (at least 2/3 of the working week).
- The candidate nurse should be given regular updates on their progress before their final assessment. Feedback must be delivered respectfully, be given in private, and with specific examples of competencies achieved and areas for development.
- All interactions should be documented in the candidate's competency assessment document.
- The PIP can be amended according to the achievement of competencies/further competencies requiring development.

### The Final Meeting: (between Weeks 6 – 11 of supervised practice)

- Weekly reviews should be held with the preceptor and the candidate nurse, utilising the support of Clinical Facilitators/Adaptation Leads.
- The decision as to when the final meeting should be held is determined locally by the preceptor and is dependent on the progress of the candidate nurse in the achievement of the 6 domains of competence outlined in the Competency Assessment Tool.  
**Please note that the final assessment should not take place until the last week of placement.**
- The Preceptor and the candidate nurse will review the six domains of competence and the performance indicators and discuss how they have been achieved. The preceptor will give feedback on the candidate's performance to date.
- The preceptor will add their initials to each competency indicator in the Competency Assessment Tool under the column 'Competent at final meeting, YES or NO'.
- The Preceptor will ensure that all the documents about the candidate's clinical skills are also signed off.
- A verifier will attend the meeting if:
  - the preceptor or candidate nurse asked them to attend the intermediate or any other meeting.
  - they were involved in the implementation of a PIP (the PIP should form part of the final assessment in collaboration with the Competency assessment tool)
  - The meeting must be documented, signed and dated by everyone who attends on the Meeting Record page.

## Adaptation Outcomes

**If competency has been achieved**, the Candidate Eligibility Report (CER) is completed by the preceptor and the candidate nurse and signed off by the Director of Nursing who will confirm that the applicant has successfully completed the period of adaptation and assessment.

The CER must then be forwarded within five days to NMBI for completion of the recognition of qualification and the applicant can subsequently apply for registration.

**If competency has not been achieved** within the maximum 11 weeks of supervised practice, the candidate nurse will not be recommended for recognition of qualification. The CER must be completed by the preceptor and the candidate nurse and signed by the Director of Nursing who will confirm that the applicant has not successfully completed the period of adaptation and assessment.

The CER and the candidate nurse's Competence Assessment Tool must be forwarded to NMBI for processing. NMBI will formally notify the applicant of non-recognition of qualification.

A copy of all documents relating to the Candidate must be provided to the Candidate

Once the adaptation and assessment period is complete and the Candidate Eligibility Report has been sent to NMBI, the applicant's candidate certificate expires, and the applicant is removed from the register regardless of the time remaining on the Certificate.

**Legislation does not provide for un-registered applicants to continue providing nursing duties. Therefore, applicants must cease nursing duties until they receive full registration with the NMBI.**

### Submitting the Candidate Eligibility Report (CER)

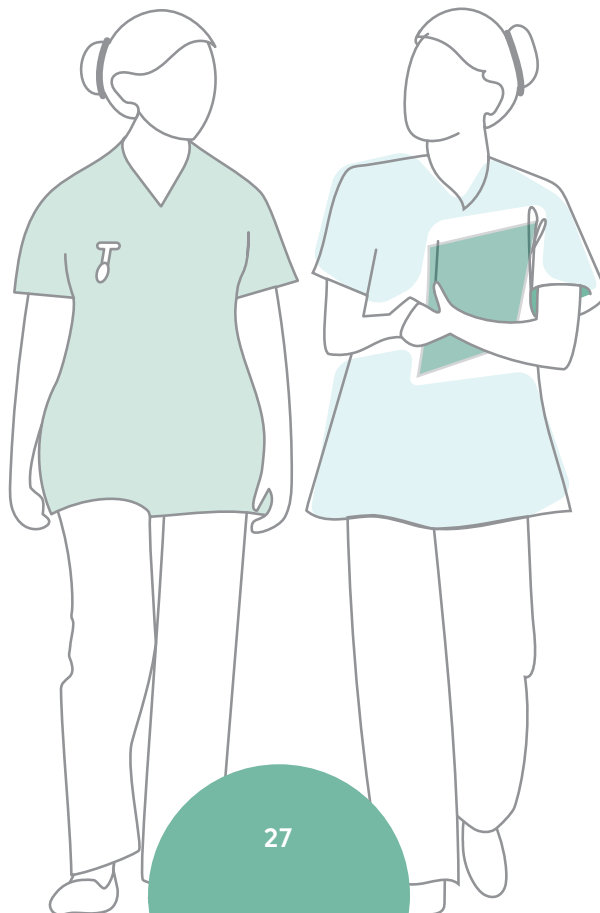
You can download the Candidate Eligibility report form (CER) from the NMBI [website](#).

## Appeals

When a candidate nurse starts their adaptation and assessment programme, the health service provider must inform the candidate about the appeals process. The candidate nurse can appeal if they feel that the process was not followed correctly or if there were other reasons that affected their performance. The applicant has 56 days to appeal the refusal decision.

If an unsuccessful candidate nurse chooses to appeal to NMBI, the health service provider is afforded the right to reply. NMBI will write to the Director of Nursing and ask for a full report and supporting documentation including their assessment tools, journals, logbooks or other information. All documents relating to the appeal process will be presented to the Registration Committee for consideration. The decision of the Registration Committee will be communicated to the applicant directly.

Further information about the appeals process is available on the [NMBI website](#).





# Post-Adaptation

Internationally educated nurses who have their full registration, for example applicants who have received their PIN after successfully completing an aptitude test, must also receive a full orientation and induction programme. This is in line with best practice for on-boarding employees (HSE 2023).

The Health Information and Quality Authority (HIQA) also requires a formal induction programme to take place that includes a focus on communication and safety of service users' (HIQA 2012, p 116).

## Registration Checklist for Candidate Nurses

NMBI requires a 'Certificate of Current Professional Practice' (CCPS), also known as a 'Certificate of Good Standing'(CGS) for all countries they have registered or practised in as a nurse.

NMBI will also ask for:

- proof of English language competency such as OET, IELTS or proof of nurse education in an approved English-speaking country (within 2 years of the test date).
- permission for NMBI to access their OET or IELTS results.
- a copy of their current certified passport.

NMBI will check that the candidate nurses name on their MyNMBI account matches their current passport.

To avoid delays in registration, the candidate nurse should have all their CCPS documents ready before they start their adaptation and assessment programme and also ensure the English language test results have not expired.

Ongoing support should be for personal and professional development perspective to enhance integration and promote job satisfaction. The provision of mentoring programmes offers peer support, while investment in education opportunities for CPD act as motivators for retention of staff as they feel valued and supported.

## Mentoring Programme

'Mentoring is a process where a more experienced person (a mentor) sets aside dedicated time to help the candidate nurse develop personally and professionally.

Mentoring programmes will help the candidate nurse to integrate and adapt to their role which leads to job satisfaction and retention. Cultural competence training helps the candidate nurse and their nursing colleagues to find neutral grounds of cultural values, beliefs and expectations, as well as cultural communication (Di Sabatina Smith, 2014).

## Buddy System

In the context of peer-to-peer support among nurses, the 'Buddy system' typically refers to a formal or informal programme where nurses are paired with a peer buddy for emotional support, guidance, and camaraderie. This system is designed to help nurses cope with the stresses and challenges of their profession, promote mental health and well-being, reduce burnout and foster a supportive work environment.

The Buddy system plays a crucial role in reducing burnout, and enhancing job satisfaction among nurses. It provides a valuable support network that enables nurses to thrive in their demanding and rewarding profession.

## Continuing Professional Development (CPD)

Examples of areas for continuing professional development
Accountability and responsibility
Autonomy
Assertiveness
Advocacy
Empowerment
Leadership
Negotiation skills
Conflict management
Continuing professional development and maintenance of professional competence
Professional organisations (for example, the Nursing and Midwifery Planning and Development Unit (NMPDU), the Centre for Nursing and Midwifery Education (CNME) and the Office of the Nursing and Midwifery Services Director (ONMSD))
Quality assurance (audits/metrics/key performance indicators)





# **Criteria for the Approval of the Adaptation and Assessment Programme**

Adaptation happens when a candidate nurse meets with an organisation to discuss its goals, culture and structure. It also includes learning roles, work expectations and meeting with colleagues (Gajda, 2019). The adaptation and assessment programme offered by the health service provider should be discipline-specific and be developed to assess the suitability of the candidate nurse prior to registration. The programme must be completed in a health service provider site that is approved by NMBI as an adaptation site for international educated nurses.

If a health service provider wishes to become an adaptation site, the application form can be downloaded on our [website](#) along with information on dates for submission to NMBI.

Completed forms should be emailed to: [educationandguidance@nmbi.ie](mailto:educationandguidance@nmbi.ie)

An applicant who needs to complete a compensation measure and is undertaking a period of adaptation and assessment is placed on NMBI's Candidate Register. They are a Candidate Nurse for the duration of their adaptation and assessment programme,

Internationally educated nurses who have their full registration, for example applicants who have received their PIN after successfully completing an aptitude test, must also receive a full orientation and induction programme. This is in line with best practice for on-boarding employees (HSE 2023).

## Criteria for Validation/Re-Validation of an Adaptation and Assessment Programme

To ensure Internationally Educated Nurses are appropriately supported during their adaption, and to standardise the assessment nationally; NMBI has set criteria for adaptation and assessment programmes which all sites must comply with.

Programmes must have a clear governance structure that demonstrates collaboration between the Director of Nursing and the programme provider. The structure of the adaptation and assessment programme. should reflect best practice.

The practice placement is approved as per NMBI's requirements:

- Nursing and Midwifery Board of Ireland (2023) Nurse Registration Programmes Standards and Requirements, Dublin (Section 3)
- Nursing and Midwifery Board of Ireland (2020) National Quality Clinical Learning Environment Professional Guidance Document, Dublin
- Nursing and Midwifery Board of Ireland (2020) National Quality Clinical Learning Environment Audit Tool, Dublin

Dedicated programme co-ordinators such as Adaptation and Assessment Lead, Clinical facilitators, clinical practice support nurses oversee and support candidates and preceptors.

A copy of the candidate handbook aligns with the NMBI *Internationally Educated Nurses Undertaking an Adaptation and Assessment Programme - Guidance for Applicants and Health Service Providers* (NMBI, 2024)  
Competence Assessment Tool for Nurses (2024)

Sufficient numbers of trained assessors who have completed the preceptorship training programme support candidates working in a supernumerary capacity (Database of number of staff trained in preceptorship).

Candidates, assessors, and all nursing personnel are provided with education and support to understand cultural differences in the Irish healthcare system.

Evidence of one week of theory and a contemporaneous timetable for the programme, incorporating the recommended content topics as per the NMBI *Internationally Educated Nurses Undertaking an Adaptation and Assessment Programme – Guidance for Applicants and Health Service Providers* (NMBI 2023).

The programme must consist of a minimum of one week of theory (37.5 hours plus six weeks of assessed practice (37.5 hrs per week x 6 = 225 hours).

**The entire programme must not exceed 12 weeks (450 hours).**

**(1 week of Orientation (37.5 hours) + 11 weeks of assessed practice x 37.5 hours per week.**

*Continued*

The Director of Nursing/Deputy will sign off on the Candidate Eligibility Form (CER) at the end of the period of adaptation and assessment. **The CER should be submitted to NMBI within five working days of completion of the adaptation and assessment programme.**

Quality assurance mechanisms are in place to include an ongoing written evaluation of the programme (theory and practice) by candidate nurses and programme providers. (A summary of evaluations will be required to be submitted to NMBI)

Database of candidate nurses (to include records of numbers who attended programme/number of weeks required/successful/unsuccessful in achieving competence/PIPs required/appeals)

Appeals: a copy of reports, actions taken and outcomes as a result of candidate appeal decisions upheld in the last two years (if applicable).



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## Resources

### E-Learning

[HSELand](#) - online learning portal with many different interactive eLearning programmes, resources and tools, (for example, clinical skills, medication management, sepsis, care of the older person, communication, management, leadership).

### Enhancing Communication Skills

Burdett Health Action Programme (HAT) is accredited by the NMBI Health Action Training provides a dynamic and cutting-edge approach to developing Advanced Communication skills, at a time when the healthcare system and people that work in it are under increasing pressure.

<https://www.nursingnow.org/hat/>

