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

Second Edition (2019)

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# Introduction

The new standards and requirements are developed in accordance with the provisions of the Nurses and Midwives (Education and Training) Rules, 2018, removal of the Collaborative Practice Agreement (CPA) as a requirement for nurses and midwives registration and authority to prescribe and the publication of the Six Domains of Competence for Nurses and Practice Standards for Midwives.

This document sets out the educational standards and requirements for nurse/midwife prescriptive authority. Its purpose is to provide guidance to all higher education institutions (HEIs) and their associated health care partners (AHCP) involved in the development, delivery and evaluation of education for nurse/midwife prescriptive authority. It is expected that all HEIs and AHCPs operate in a spirit of partnership in educational development. All those involved aims to educate nurse and midwife prescribers that are competent, confident and safe in their prescribing practice at the point of qualification. These nurse and midwife prescribers embrace a philosophy of lifelong learning so they can continue to deliver competent, responsive, flexible and safe care in a variety of clinical settings.

Part IV of the Nurses and Midwives Act, 2011 provides for the Board to make rules to enable all to develop their own curricula including examinations and assessment systems based on requirements. A committee appointed for that purpose must validate this curriculum.

All HEIs and AHCPs that participate in the education of nurses and midwives for prescriptive authority must submit a detailed curriculum document to the Nursing and Midwifery Board of Ireland (NMBI) for approval. This document assists the development of curricula and offers a framework to ensure that high standards are maintained.

This document details the programme standards and requirements leading to qualification as a registered nurse/midwife prescriber. It is divided into eight sections.

Section 1 provides extracts from the Nurses and Midwives Rules, 2018. Section 2 medicines legislations for nursing and midwifery prescribing. Section 3 sets out the standards and requirements for nurse and midwife education for prescriptive authority. Section 4 details the approval process for educational providers in prescriptive authority. Section 5 describes the standards for approval of educational and health care providers involved in such programmes. Section 6 Guide Template for the Submission of the Education Programmes for Prescriptive Authority Curriculum Document. Section 7 National Framework of Qualifications Learning Outcomes for Education Programmes for Nurse Prescriptive Authority. Section 8 National Framework of Qualifications Learning outcomes for Education Programmes for Midwife prescriptive authority

All registered nurse and midwife prescribers are required to prescribe within their scope of practice and must continue to maintain and demonstrate their competency in the role. The registered prescriber must also undertake an audit of their practices as determined by their local health service provider's audit process for prescribing and medicines management. The audit result must be documented and reported to the person with overall responsibility and authority for the governance of registered nurse or midwife prescribing in their health service provider.

The director of nursing/midwifery/public health nursing/services or their designated person has overall responsibility and authority for the governance of registered nurse and midwife prescribing to ensure due diligence in their health service provider (NMBI and ONMSD, HSE 2015).

# Section 1: Extracts from the Nurses and Midwives Rules, 2018

This section provides extracts from the relevant Rules of the Nurses and Midwives Rules, 2018 for the guidance of all higher education institutions and their associated health care partners involved in delivering registration and education programmes. The Nurses and Midwives Rules, 2018 guide and inform the development of this document.

#### Rule 2 – Commencement

These rules come on into operation on 25 June 2018.

#### Rule 3 – Definition

In these rules, "Act" means the Nurses and Midwives Act 2011 (No. 41 of 2011);

"Standards and requirements" means the standards and requirements set out in -

(a) the standards, set and published by the Board pursuant to section 85(1) of the Act, of nursing and midwifery education and training for first-time registration and post-registration specialist nursing and midwifery qualifications, and

(b) the guidelines, prepared by the Board pursuant to section 85(2)(b) of the Act, on curriculum issues and content to be included in education and training programmes approved by the Board;

#### Rule 9 – Applications for Approval of Programmes

9.1 An application by a body seeking approval from the Board under section 85(2)(a) of the Act to deliver education and training programme shall be in such form and manner as may be prescribed by the Board from time to time and shall –

- (a) satisfy the Board that the programme will comply with the relevant standards and requirements,
- (b) set out minimum governance requirements relating to the delivery of the programme, including long-term
- commitment, staffing, premises, facilities, funding, policies, procedures and organisational structures,
- (c) incorporate an indicative syllabus that is responsive to current health care needs, and

(d) have regard to the National Framework of Qualifications kept and maintained in accordance with section 43 of the Qualifications and Quality Assurance (Education and Training) Act, 2012 (No. 28 of 2012).

9.2 In considering an application under paragraph (1), the Board shall confirm the accuracy of the information provided and may give notice in writing to the body requesting it to provide further information in support of its application.

9.3 The Board may arrange a visit to a body which applies for approval under paragraph (1) and any associated health care provider for the purpose of ensuring compliance with the standards and requirements.

9.4 Having considered an application under paragraph (1), and consulted with the Minister for Education and Skills, the Board shall –

- (a) refuse approval,
- (b) grant approval, or
- (c) grant approval with such conditions as may be relevant and necessary.

9.5 On approval, including approval with conditions, of a programme under this rule, the Board shall publish a notice to that effect on its website.

#### Rule 10 – Annual Reports and Material Changes

10.1 A body granted approval under Rule 9 to deliver an education and training programme shall, on an annual basis, provide the Board with a report in such form and manner as may be prescribed by the Board, in relation to compliance of the programme with the standards and requirements, and any conditions that the Board may have imposed under Rule 9(4).

10.2 A body granted approval under Rule 9 to deliver education and training programme shall notify the Board of any proposed material change to the programme.

#### Rule 11 – Review and Monitoring of Programmes

11.1 Where the Board has granted approval for delivery of an education and training programme under Rule 9, it shall subsequently, and at intervals not exceeding five years, review whether the programme continues to conform with the standards and requirements, and any conditions that the Board may have imposed under Rule 9(4).

11.2 Notwithstanding paragraph (1), the Board shall monitor adherence to the standards and requirements by education and training programmes granted approval under Rule 9, and any conditions that the Board may have imposed under Rule 9(4).

11.3 Having carried out a review or monitoring of an education and training programme under this rule, the Board may-

- (a) continue to approve the programme,
- (b) continue to approve the programme subject to compliance with specified conditions,
- (c) defer its decision on continued approval of the programme pending the resolution, to the satisfaction of the Board, of specified issues of concern arising, or
- (d) withdraw approval of the programme

### Section 2: Medicines Legislation for Nurses and Midwife Prescribing

The primary legislation – the Irish Medicines (Miscellaneous Provisions) Act, 2006 – provides for amendments to medicines regulations by ministerial order for nurses and midwives to prescribe medications.

The Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations, 2007 (Statutory Instruments, (S.I.) No. 201 of 2007) and the Misuse of Drugs Regulations 2017 (S.I. No. 173 of 2017) (this revokes the 2007 Misuse of Drugs (Amendment) Regulations) specify the legislative requirements/conditions for prescribing of medicinal products by nurses and midwives.

In addition, the 2007 regulations allow a health service provider to determine further conditions for the prescriptive authority of the nurse or midwife. Prescribing MDA-controlled drugs is as detailed in the Misuse of Drugs Regulations, 2017 which stipulates conditions for Schedule 8 and restrictions for prescribing Schedule 4 and 5 MDAs.

They are summarised as follows:

1. The nurse/midwife must be employed by a health service provider in a hospital, nursing home, clinic or other health service setting (including any case where the health service is provided in a private home).

2. The medicinal product is one given in the usual course of service provided in the health service setting in which the nurse/midwife is employed.

3. The prescription is issued in the usual course of delivering that health service.

4. NMBI registration number (the personal identification number (PIN) must be stated on the prescription.

S.I. No. 529 of 2018 provides for the additional authority for the registered nurse or midwife prescriber to prescribe exempt medicinal products within their scope of practice. A number of conditions must be satisfied for this authority.

Reference must be made to the individual regulations for full details.

### Section 3: Standards and Requirements for Nurse/Midwife Education Programme for Prescriptive Authority

The education programme for nurse/midwife prescriptive authority may not be delivered without the Nursing and Midwifery Board of Ireland's (NMBI) prior approval.

#### Introduction

These standards and requirements are intended to facilitate programme writers in developing education for prescriptive authority leading to an academic named award at a minimum Level 8 on the National Framework of Qualifications. These requirements aim to guide the development of all post-registration education and training programmes leading to a qualification for the division of the Register for Nurse and Midwife Prescribers.

It is recognised that programme delivery requires interprofessional input, a concept that the NMBI supports. The interests of no single professional group should dominate interprofessional education initiatives which should be planned in a collaborative manner. Interprofessional education as part of the education for prescribing authority should support the professional identity and unique perspective of the nurse/midwife in their prescribing practice.

#### 3.1 Minimum Entry Requirements

Only registered nurses and midwives can be admitted to the programme for education and training in prescriptive authority. They must have at least one year of full-time or the equivalent post-registration clinical experience in their specific area of practice within the previous two years. They must have the competencies recognised at Level 8 of the National Framework of Qualifications. There should be demonstrable evidence of further education and the nurse/midwife should have a competent level of IT literacy. They must be employed by a health service provider in a hospital, nursing home, clinic or other health service setting (including any case where the health service is provided in a private home).

#### 3.2 Learning Outcomes

The purpose of the education programme for nurse/midwife prescriptive authority is to ensure that on successful completion the nurse/midwife prescriber has the knowledge, skills and competence to prescribe safely and effectively.

The education programme enables the nurse/midwife to:

- 1. Demonstrate a systematic understanding of the regulatory framework associated with prescribing, including the legislation and associated regulations and professional guidelines, supporting safe prescribing.
- 2. Critically utilise evidence-based knowledge and skill of person/service user assessment and consultation to achieve a holistic approach to a person's/service user's care in the prescribing of medicinal products.
- 3. Apply expert skills in clinical decision-making in prescribing medicinal products
- 4. Demonstrate a critical understanding of pharmacotherapeutics, pharmacodynamics and pharmacokinetics.
- 5. Demonstrate knowledge of the role of the multi-disciplinary team and effective communication processes involved in safe medication management.

#### **3.3 Competencies for Prescriptive Authority**

Competence, a complex multidimensional phenomenon, is defined as the ability of the Registered Nurse/Midwife prescriber to practise safely and effectively, fulfilling their professional responsibility within their scope of practice (NMBI 2014). It is also the attainment of knowledge, intellectual capacities, practice skills, integrity and professional and ethical values required for safe, accountable and effective practice as a registered nurse or registered midwife (NMBI 2016).

The Domains of Competence for Nurses and the Principles and Practice Standards for Midwives represent a broad enabling framework to facilitate the assessment of a nurse/midwife student's clinical practice. Each nurse prescribing domain consists of standard statements with relevant indicators while the midwife prescribing principles consist of practice standards and the required competencies and pertinent indicators.

All six domains of competence for nurse and the five principles for midwives represent the levels of competencies that must be reached at the completion of the programme for prescriptive authority. The competency framework aims to ensure that students acquire the skills of critical analysis, problem-solving, decision-making and reflective abilities essential to the art and science of nursing or midwifery in this expanded role. Safe and effective prescribing practice requires a sound theoretical underpinning that is, in turn, informed by that practice. Within complex and changing health care environments, it is essential that prescribing practice is based on the best available evidence. This is reflected in the competencies within the six domains:

- 1. Professional Values and Conduct of the Registered Nurse Prescribe Competences
- 2. Nursing Practice and Clinical Decision-making Competences
- 3. Knowledge and Cognitive Competences
- 4. Communication and Interpersonal Competences
- 5. Management and Team Competences
- 6. Leadership Potential and Professional Scholarship Competences

Together the six domains represent a broad enabling framework to facilitate the assessment of the nurse's prescribing practice. Each one consists of performance criteria and relevant indicators. For each indicator, critical elements should be developed at a local level by the partner institutions to reflect person/service user and service need.

The Principles of Midwifery Prescribing Practice:

- 1. Respect for the Dignity of the Person.
- 2. Professional Responsibility and Accountability.
- 3. Quality of Practice.
- 4. Trust and Confidentiality.
- 5. Collaboration with Others.

Competencies for midwifery prescribing practice are based on the principles of the Code of Professional Conduct for Registered Nurses and Registered Midwives (NMBI 2014) and Practice Standards for Midwives (NMBI 2015).

A team and partnership approach should be applied when assessing the participant. The assessor will consult professional colleagues in determining the participant's competence. The HEIs and ACHPs will agree with the assessment process. Participants are deemed either competent or not competent – there are no ratings in verification. Achievement of competence, as outlined in the programme for prescriptive authority, is required for registration as a nurse or midwife prescriber.

#### 3.3.1 Domains of Competences for a Nurse Prescriber

#### Domain 1. Professional Values and Conduct of the Nurse Prescriber Competencies

Performance Criteria:	Indicators:
1.1 Practices in accordance with legislation and associated regulation and professional guidance affecting	<ul> <li>Practices within the legislation, and associated regulation and professional regulation and guidelines relevant to their scope of practice and care setting</li> </ul>
nursing prescribing practice	<ul> <li>Integrates accurate and comprehensive knowledge of ethical principles and the Code of Professional Conduct within their scope of professional practice in the delivery of nursing care involving medicinal products and prescribing</li> </ul>
	<ul> <li>Accepts personal accountability for prescribing decisions and actions, understanding the legal implications of doing so</li> </ul>
1.2 Practices within the limits of own	<ul> <li>Recognises own abilities and level of professional competence</li> </ul>
competence and takes measures to develop and maintain own competence	<ul> <li>Conducts an audit of practice incorporating reflective practice/thinking to identify prescribing competence within the nurse prescriber's scope of practice</li> </ul>
	<ul> <li>Maintains current knowledge of advances in practice, pharmacotherapeutics and emerging safety concerns related to prescribing</li> </ul>
	<ul> <li>Consults appropriately with a medical practitioner and/or pharmacist for a person/service user when a registered nurse prescriber perceives limitations in their knowledge of prescribing</li> </ul>
1.3 Practices within a framework of professional accountability and responsibility in prescribing	<ul> <li>Identifies a mechanism to support continuing professional development needs</li> </ul>
	<ul> <li>Adheres to legislation, associated regulation, professional regulation and guidelines and health care provider medicinal product prescribing policy, procedures, protocols or guidelines (PPPGs) for prescriptive authority</li> </ul>
	<ul> <li>Complies with the requirements/PPPGs of the health care provider for:</li> </ul>
	<ul> <li>reporting medication errors/incidents and near misses</li> <li>audit of prescribing patterns/practices</li> <li>audit of prescribing patterns/practices must be conducted quarterly for the first year and bi-annually thereafter.</li> </ul>
	<ul> <li>Complies with the requirements of the health care provider and the Health Products Regulatory Authority for reporting adverse drug reactions</li> </ul>
	<ul> <li>Understands and applies the mechanisms of the HSE Primary Care Reimbursement Service for prescribing</li> </ul>

Performance Criteria:	Indicators:
2.1 Conducts a systematic holistic assessment of a person's/service user's needs	<ul> <li>Performs a comprehensive assessment of the person/service user encompassing history-taking, physical examination and identification of health risk factors.</li> </ul>
	<ul> <li>Comprehends the health conditions<sup>1</sup> being managed, their natural progress and how to assess the severity of the condition</li> </ul>
	<ul> <li>Assesses the relationship between the health condition and current medication plan</li> </ul>
	<ul> <li>Requests and interprets relevant diagnostic tests and procedures to inform appropriate and safe prescribing</li> </ul>
	<ul> <li>Evaluates the use of complementary therapies and over-the- counter medications by the person/service users for safety and potential interactions</li> </ul>
2.2 Plans care in consultation with the person/service user taking into consideration the therapeutic regimes of	<ul> <li>Critically utilises assessment data with expert clinical decision- making skills to formulate a diagnosis and care plan based on scientific rationale, evidence-based standards of care and practice guidelines supporting the maintenance and promotion of health</li> </ul>
all members of the interdisciplinary team	<ul> <li>Integrates appropriate non-pharmacological interventions into a care plan and advises the person/service user on the use of such interventions</li> </ul>
	<ul> <li>Involves person/service user or carer as active participants in the decision-making process and a mutually agreed care plan</li> </ul>
	<ul> <li>Initiates appropriate and timely consultation and/or referral when the</li> </ul>

problem exceeds the nurse's scope of practice and expertise

#### **Domain 2: Nursing Practice and Clinical Decision-Making Competencies**

'Also includes issues of health promotion and prevention

Performance Criteria:	Indicators:
2.3 Implements planned nursing care/interventions to achieve the identified outcomes of the care plan	<ul> <li>Implements care based on knowledge, skills and competence within their scope of practice</li> </ul>
	<ul> <li>Considers appropriate diagnostic and therapeutic interventions as part of the ongoing care plan</li> </ul>
	<ul> <li>Provides guidance and advice on the agreed care/interventions to the person/service user</li> </ul>
2.4 Evaluates person/service user progress toward expected outcomes and reviews plans in accordance with evaluation data and consultation with the person/service user	<ul> <li>Evaluates and provides an evidence-based rationale for clinical decision and nursing intervention for pharmacological/non-pharmacological treatment choice or referral to a medical practitioner if applicable</li> <li>Schedules appropriate follow-up care to monitor the person/service user and evaluate their response to treatment</li> </ul>
2.5 Demonstrates and integrates the knowledge of medicinal products for safe medication management and prescribing	<ul> <li>Integrates accurate and comprehensive knowledge of the Guidance to Nurses and Midwives on Medication Management within the scope of professional practice in delivering nursing/midwifery care involving medicinal products and prescribing</li> </ul>
practices	<ul> <li>Identifies and utilises current medicinal products information in the provision of individualised care</li> </ul>
	<ul> <li>Utilises expert knowledge of pharmacokinetics and pharmacodynamics to determine appropriate dosage, dosage form, route and frequency of administration of medications based on relevant person/service user characteristics (e.g. age, gender, co- morbidity, culture)</li> </ul>
	<ul> <li>Identifies and integrates appropriate monitoring systems for medication safety and efficacy in the care plan</li> </ul>
	<ul> <li>Demonstrates an understanding of the potential for unwanted effects, (e.g. adverse drug reactions [ADRs], drug interactions, special precautions and contraindications), and actions to avoid/minimise and manage them</li> </ul>
	<ul> <li>Understands the potential for misuse of drugs</li> </ul>
	<ul> <li>Applies the principles of evidence-based practice, and clinical and cost-effectiveness</li> </ul>
	Recognises the public health issues related to medicinal product use
	<ul> <li>Considers non-pharmacological approaches to modifying disease and promoting health where appropriate</li> </ul>

#### **Domain 3. Knowledge and Cognitive Competencies**

Performance Criteria:	Indicators:
3.1 Establishes and maintains caring therapeutic interpersonal relationships with persons/service users/groups/communities for safe and effective prescribing	• Discusses with person/service user assessment findings and treatment options recognising relevant person/service user characteristics (e.g. age, gender, co-morbidity, culture) and expectations
	<ul> <li>Assesses the person/service user understanding of and own responsibility in their care plan, involving carers where appropriate</li> </ul>
	<ul> <li>Facilitates the person/service user self-management of the condition and prescribed treatment</li> </ul>
	<ul> <li>Communicates sensitively, respecting person/service user emotions and concerns</li> </ul>

#### **Domain 4. Communication and Interpersonal Competencies**

Performance Criteria:	Indicators:
4.1 Collaborates with all members of the health care team and documents	<ul> <li>Identifies the roles and responsibilities of other health care professionals in the prescribing process</li> </ul>
relevant information	<ul> <li>Establishes relationships with other health care professionals based on understanding and mutual respect</li> </ul>
	<ul> <li>Maintains comprehensive documentation and person/service user records of a care plan within a legal and ethical framework</li> </ul>
	<ul> <li>Participates in interdisciplinary team collaboration on the person/service user's care plan</li> </ul>
	<ul> <li>Establishes mechanisms for consultation on practice decisions and referral pathways</li> </ul>

#### Domain 5. Management and Team Competencies

Performance Criteria:	Indicators:
5.1 Effectively manages the nursing care of persons/service users/groups/communities	<ul> <li>Demonstrates quality assurance and quality management in prescribing through a structure of audit and report</li> </ul>
	<ul> <li>Integrates the principles of clinical risk management and health and safety in prescribing practice</li> </ul>
	<ul> <li>Identifies health promotion priorities and implements health promotion strategies for service user groups in the area of clinical practice</li> </ul>
	<ul> <li>Maintains current knowledge of advances in practice associated with prescribing and medication management</li> </ul>
	<ul> <li>Develops professional links with others practising in the same area of practice</li> </ul>
	<ul> <li>Informs and empowers person/service user and communities to protect, maintain and promote health</li> </ul>
	<ul> <li>Contributes to the learning experience of colleagues through support, supervision and teaching in medication management</li> </ul>
	<ul> <li>Contributes to professional and health policy at local, regional and national levels in promoting safe and effective medication practices</li> </ul>
	<ul> <li>Uses the outcomes of an audit of prescribing practices to improve service provision</li> </ul>

#### Domain 6. Leadership Potential and Professional Scholarship Competencies

Performance Criteria:	Indicators:
6.1 Acts to enhance the personal and	<ul> <li>Demonstrates a commitment to lifelong learning</li> </ul>
professional development of self and others	<ul> <li>Accepts personal responsibility for professional development and the maintenance of professional competence</li> </ul>
	<ul> <li>Maintains current knowledge of advances in practice</li> </ul>
	associated with prescribing and medication management.

#### 3.3.2 Competencies for a Midwife Prescriber

#### Principle 1: Respect for the Dignity of the Person

#### **Practice Standard 1**

Midwifery practice is underpinned by a philosophy that protects and promotes the woman's safety and autonomy and respects her experiences, choices, priorities, beliefs and values.

#### **Competency 1**

The midwife prescriber applies ethically sound solutions to complex issues related to caring for women and their babies.

#### Indicators

1.1 Demonstrates leadership by protecting, promoting and supporting the human rights of women and babies, including advocating for each woman's right to choose how and where to give birth.

1.2 Demonstrates clinical leadership by practising empathetically and compassionately to facilitate and support the health and wellbeing of all women, babies and their families, respecting the diversity of beliefs, values, choices and priorities of each woman and her family.

1.3 Demonstrates leadership by advocating for women and their babies, including their emotional and psychological safety while at all times respecting each woman's right to choose whether or not to follow advice and recommendations about her care.

#### **Principle 2: Professional Responsibility and Accountability**

#### **Practice Standard 2**

Midwives practise in line with legislation and professional guidance and are responsible and accountable within their scope of midwifery practice. This encompasses the midwife's full range of activities as set out in EC Directive 2005/36/EC and the adapted Definition of the Midwife International Confederation of Midwives 2011 (ICM) as adopted by the NMBI.

#### **Competency 2**

The midwife prescriber uses evidence-based knowledge, skills and abilities to critically analyse, problem solve and engage in complex clinical decision-making as lead health care professionals.

#### Indicators

2.1 Is accountable and responsible for senior clinical decision- making, practising effectively as a lead health care professional in accordance with legal, professional and regulatory requirements.

2.2 Demonstrates professional boundaries by referring to and collaborating with other members of the multidisciplinary team for areas outside the midwife prescriber's scope of practice, experience or competence.

2.3 Promotes, protects and articulates the midwife prescriber role in clinical, professional and political contexts based on clinical expertise and supervision, reflection in and on practise and continuous professional development.

2.4 Demonstrates a vision for midwife prescriber based on a competent expert knowledge derived from research, critical thinking and experiential learning.

#### Principle 3: Quality of Practice

#### **Practice Standard 3**

Midwives use comprehensive professional knowledge and skills to provide safe, competent, kind, compassionate and respectful care. Midwives keep up to date with midwifery practice by undertaking relevant continuing professional development.

#### **Competency 3**

The midwife prescriber promotes and protects a culture of quality, compassionate and evidence-based safe maternity care and services.

#### Indicators

3.1 Demonstrates leadership in developing maternity services through initiatives, improvements and changes in the care provided to women, their babies and families.

3.2 Influences clinical practice through education (formal and informal), mentoring and coaching in the multidisciplinary team.

3.3 Uses expert knowledge and clinical competence when facilitating clinical supervision and mentorship of midwifery colleagues, postgraduate midwifery students and others.

3.4 Leads in the translation of new knowledge and facilitation of best available evidence in the clinical setting.

3.5 Demonstrates professional leadership by conducting audits and research and disseminating findings that shape and advance practice in midwifery, education, and policy at local, national, and international levels.

#### Principle 4: Trust and Confidentiality

#### **Practice Standard 4**

Midwives work in equal partnership with the woman and her family and establish a relationship of trust and confidentiality.

#### **Competency 4**

The midwife prescriber negotiates and advocates with other health professionals to ensure the beliefs, rights, and wishes of women, babies and their families are upheld in the design and evaluation of services.

#### Indicators

4.1 Demonstrates professional leadership in advocating choice for women when developing midwifery services.

4.2 Promotes, protects and develops a culture of openness, honesty, trust and confidentiality with women and their families.

4.3 Articulates and understands how, in exceptional circumstances, confidential information may need to be shared with others.

#### **Principle 5: Collaboration with Others**

#### **Practice Standard 5**

Midwives communicate and collaborate effectively with women, women's families and with the multidisciplinary health care team.

#### **Competency 5**

The midwife prescriber manages risk for those who access the service through collaborative risk assessments and promotion of a safe environment.

#### Indicators

5.1 Communicates effectively with other members of the multidisciplinary team sharing information according to legal, professional and regulatory requirements.

5.2 Uses expert professional judgment to make timely referrals to other appropriate health care professionals or members of the multidisciplinary team.

5.3 Demonstrates leadership in negotiation and consensus building to manage conflict in collaboration with women receiving care and other members of the multidisciplinary team.

#### 3.4 Syllabus/Indicative Content

#### Introduction

Nursing and midwifery are interpersonal caring processes that acknowledge the uniqueness of the individual. Students may enter this registration programme with a wide range of previous professional and educational experiences; these should be acknowledged and developed. The programme for prescriptive authority contains the essential elements that facilitate the development of professional knowledge, skills, attitudes and competencies necessary to meet the needs of persons/service users within this area of practice expansion. The list of topics included indicate the programme's content.

To meet the learning outcomes, education programme planning teams will be expected to include the following areas of study and develop these into a detailed curriculum that will enable nurses/midwives to develop knowledge and competence in prescribing.

The sections into which the indicative content is organised should not be viewed as distinct, neither is the list of topics included in the syllabus exhaustive. The manner in which the content is interwoven and interlinked is individual to each programme. Curriculum planners will have to demonstrate that the programme is relevant and responsive to the most recent policy and legislative changes. Students should have access to interprofessional learning and working.

#### **Professional Accountability and Responsibility**

- · Professional regulations and guidelines
- · Accountability and responsibility for prescribing practice
- · Critical review and self-audit
- Reflective practice
- · Risk management in medication management
- Public health issues for prescribing
- · Evidence-based practice and clinical governance in relation to prescribing

#### **Legal and Ethical Aspects**

- · Legislation for nursing/midwifery practice and medication management
- · Legal liability and clinical indemnity for prescribing and expansion of nursing/midwifery practice
- · Informed consent of person/service user for treatment
- · Awareness and reporting of fraud
- Substance abuse/dependence
- Budgetary considerations (e.g. HSE Primary Care Reimbursement Service/medical card)
- Licensing of medicinal products
- · Ethics and prescribing
- Documentation requirements of prescribing

#### **Pharmacology and Pharmacotherapeutics**

- · Pharmacotherapeutics, pharmacodynamics, pharmacokinetics
- Pharmacovigilance
- · Process for identification and treatment of adverse reactions and interactions

 Medication error/near miss reporting – health service provider's medicinal product prescribing policy, procedures, protocols or guidelines (PPPGs)

- Prescribing for special populations the elderly, the young, pregnant or breast-feeding women, the intellectually disabled and those with mental illness
- Pharmacoeconomics (cost versus benefit ratio)
- · Influences on and psychology of prescribing
- · Applied biosciences to prescribing practice

#### **Principles of the Prescribing Process**

- Steps of the prescribing process
- Assessment of person/service user history and physical examination
- · Requesting and interpretation of laboratory and diagnostic tests
- · Consultation skills
  - Awareness of cultural and ethnic diversity of person/service user/family
  - Awareness of the person/service user expectation for prescription medicinal products
  - Knowledge and skills for decision-making and treatment planning
  - Diagnostic reasoning data synthesis
  - Risk versus benefit ratio in treatment decisions
  - Use of non-pharmacological interventions in care plan

• Providing person/service user education and preventative health care advice regarding medicinal products and disease management issues

• Prescription writing and documentation of care plan including the person/service response

 National and local health service provider's medicinal product prescribing policy, procedures, protocols or guidelines (PPPGs)

#### **Collaboration/Referral with other Health Care Professionals**

- · Interpersonal and communication skills necessary to foster collaborative relationships with allied health professionals
- Role and functions of other health care professionals involved in medication management
- Interdisciplinary sharing of service user medical records documentation
- Management of conflict
- · Clinical audit and Key Performance Indicators as required by the health service provider

#### 3.5 Theoretical and Clinical Instruction for Nurse/Midwife Prescriptive Authority

This section presents the requirements for the education of nurses and midwives for prescriptive authority. The programme is developed on the assumption that participants are pursuing an expansion of practice beyond the point of initial registration.

The period of education for the achievement of prescriptive authority shall be attendance at an approved higher education institution.

ESSENTIAL REQUIREMENTS	MINIMUM NO. OF WEEKS
Theoretical instruction shall be: (to include self-directed study, exams)	no less than 28 days (168 hours)
Clinical instruction shall be:	no less than 12 days (96 hours)

The nurse/midwife must be working in an area where the clinical practicum will occur. The 12 days of clinical instruction must be delivered while undertaking the education programme. There must be confirmation from a medical practitioner for medical supervision of the nurse/midwife and agreement to provide the required term of supervised practice. The methodology of the HEI to support the nurse/midwife in the clinical practicum must be identified in the curriculum. Learning outcomes/objectives to be achieved by the nurse/midwife in the clinical area must also be made explicit.

The prescriptive authority programme should provide the opportunity to experience practice in a variety of settings to allow students to gain a broad understanding of prescribing as a practice and interdisciplinary/multidisciplinary team working. Practice placements should be of sufficient length to enable students to achieve the professional competence required.

Discretionary practice placement experiences may be selected based upon the identified needs of the students, the competencies to be achieved and current health care policy initiatives and developments.

The discretionary placements will be selected to enable the student to achieve the programme learning outcomes and develop the competencies essential for registration as a nurse or midwife prescriber.

Following any interruption<sup>2</sup> in the education programme, the higher education institution in partnership with the associated health care partners ensures that the participant meets both theoretical and practice requirements. No compensation between the theoretical and clinical practice assessments is permitted in meeting the education requirements.

<sup>2</sup>Interruption: Any leave (other than annual leave and bank holidays including sick leave, maternity leave, force majeure, paternity leave, parenting leave, compassionate leave and other special leave).

### Section 4: Approval Process for Providers in Education Programmes for Prescriptive Authority

The Nursing and Midwifery Board of Ireland has a statutory responsibility to approve educational providers of nursing and midwifery education

programmes leading to prescriptive authority.

#### 4.1 Approval Process

The approval process consists of two parts:

- 1. Approval of the educational provider utilising appropriate internal and external quality assurance criteria as determined by the relevant awarding bodies and the standards and requirements of the NMBI.
- 2. Approval of the education programme for prescriptive authority.

The respective educational providers must declare through a self-declaration audit of compliance that their programme complies with these standards for programmes in prescriptive authority.

Each provider must establish an education committee or equivalent representative of the educational and service stakeholders to oversee the nurse/midwife programme for prescriptive authority.

In respect to these programmes, the Board will satisfy itself as to the suitability of the educational provider's internal and external quality assurance mechanisms. Such mechanisms should reflect national and international best practice in terms of internal and external quality assurance structures and processes. The NMBI reserves the right to conduct an audit of programmes submitted to it for approval.

#### 4.2 Approval of Prescriptive Authority Education Programmes

The educational programme will be accredited by the relevant academic council and awarding bodies. Providers will make a written detailed submission to NMBI including evidence of its self-audit and compliance with the NMBI standards and requirements for education programmes for prescriptive authority. An educational institution proposing to provide a programme leading to registration in the nurse or midwife prescriber division of the register should demonstrate that the development and delivery of the programme have interprofessional input and support (e.g. medical and pharmacy).

The Education, Training and Standards Committee of the NMBI will approve the education programme for prescriptive authority. This committee includes representatives of the educational providers (elected and nominated to the Board). Once approval has been given it will be maintained through annual monitoring and review. An annual report is to be forwarded to the NMBI which will include statistics on attrition, success rate and evaluation data incorporating the views of stakeholders including students.

#### 4.3 General Provisions for Approval Process

#### **Approval process**

- 1. The education provider will submit the curriculum document, other relevant supporting documents and selfassessment audit for the programme.
- 2. Review by professional standards officer(s).
- 3. Review by the Education, Training and Standards Committee.
- 4. Any committee decision is validated by the Board.
- 5. The education provider is informed of the committee decision by the director of professional standards nursing, director of professional standards midwifery or a professional standards officer.
- 6. Approved education programmes are placed on the Nursing Careers Website www.nursingcareers.ie

The approval process will take place within a timescale prescribed by NMBI. The course submission timeframe is six weeks prior to the scheduled meeting of the NMBI Education, Training and Standards Committee. Dates for the scheduled committee meetings will be made available to all education providers.

After approval, any subsequent changes within the education provider or programme that affect any aspect of the programme must be notified to the NMBI. Notification of approval will be in writing from the NMBI. A letter of approval will be forwarded to the education provider within two weeks of approval.

Conditions and recommendations may be attached to the approval of any programme. These conditions and recommendations will include a six-month timeframe to address the conditions or as prescribed by the committee if a longer timeframe is required.

### Section 5: Standards for Approval of Educational and Associated Health Care Providers

#### **5.1 Educational Providers**

Educational providers are committed to providing programmes for prescriptive authority which demonstrate that the highest standards of professional education are in place.

- 5.1.1 Educational providers respond to change affecting professional, educational, health, social and economic issues.
- 5.1.2 Educational providers keep appropriate records including records for the conferment of professional and academic awards.
- 5.1.3 The process for monitoring student attendance is declared.
- 5.1.4 Organisational structures supporting the management of the programme are explicit.
- 5.1.5 Educational providers have a prescriptive authority education committee with representatives of the key stakeholders.
- 5.1.6 The external examiner's role in education for prescriptive authority is explicit.
- 5.1.7 The staff resource supports the delivery of the programme for prescriptive authority at the stated professional, clinical and academic level.
- 5.1.8 Lecturers/tutors are involved in clinical practice and its development.
- 5.1.9 Nursing/midwifery subjects are developed and taught by registered nurses/midwives with appropriate professional, clinical and academic qualifications and teaching expertise in the subject matter.
- 5.1.10 Interprofessional subjects (e.g. physical assessment, pharmacology) are developed and taught with support from other health care disciplines (e.g. medical and pharmacy) with appropriate professional, clinical and academic qualifications and teaching expertise in the subject matter.
- 5.1.11 A mechanism for staff development which prepares staff to deliver the education including the provision for maintaining nursing/midwifery expertise and credibility is identified.
- 5.1.12 Educational providers supply administrative and clerical support for all educational activity.
- 5.1.13 Educational providers deliver educational resources/facilities (including alibrary, computer, audio-visual and accommodation) to meet the teaching and learning needs of the specific education for prescriptive authority.
- 5.1.14 The programme's learner admission mechanisms ensure that the stated entry requirements are met. The mechanism and conditions for learners exiting the programme before completion are explicit.
- 5.1.15 Following any interruption in the programme the educational provider ensures that the learner meets the educational requirements.
- 5.1.16 The mechanism for learner support in student services, facilities and academic and clinical guidance is explicit.
- 5.1.17 The educational provider provides an annual programme report on the education for prescriptive authority including the external examiner's report to the NMBI.

#### 5.2 Programme Design and Development

- 5.2.1 Curriculum design and development reflect research and evidence-based educational theory and health care practice. National and international benchmarks should inform curriculum development.
- 5.2.2 The curriculum model chosen should be dynamic and flexible to allow for changes in nursing/midwifery practice and health care delivery.
- 5.2.3 Theoretical and clinical learning experiences and the learning environment support the achievement of the aims and objectives/outcomes of the education programme.
- 5.2.4 Programme design and development are led by registered nurse/midwife tutors or nurse/midwifery lecturers with a teaching qualification and supported by clinical experts in medicine and pharmacology and others as appropriate in collaboration with others and is guided by professional nursing/midwifery knowledge which is evidence/research-based.
- 5.2.5 The education programme development team comprises representative members of key stakeholders in nursing/midwifery, medical and pharmacology education and practice.
- 5.2.6 The education programme is strategically planned to demonstrate balanced distribution and integration of theory and practice, logical sequencing and progressive development of subjects and clinical competence over the education programme.
- 5.2.7 The education programme is based on a range of teaching-learning strategies to assist the development of a knowledgeable and competent practitioner and to equip them with the lifelong skills for problem-solving, decision-making and self-directed learning.
- 5.2.8 The education programme's design and delivery reflect various methods of teaching/learning and provide a balance between lectures, tutorials, workshops, small group interactions, demonstrations, practical work/clinical, and self-directed study. The programme incorporates the required hours of clinical supervision by the designated medical practitioner.
- 5.2.9 The programme is based on a range of teaching-learning strategies (including e-learning, blended learning and other new technologies that aid learning) to assist the development of knowledgeable, safe and competent practitioners and to equip them with the lifelong skills for problem-solving and self-directed learning.
- 5.2.10 The education programme equips the students with an appropriate level of knowledge, research awareness and critical analysis.
- 5.2.11 The awarding body accreditation of the education programme is explicit.
- 5.2.12 Processes to facilitate access, transfer and progression are explicit.
- 5.2.13 Programme design includes the strategy for assessment of clinical competence and theoretical learning outcomes in the attainment of the competencies for prescriptive authority.
- 5.2.14 Quality assurance criteria reflective of the NMBI requirements and relevant awarding body are explicit.
- 5.2.15 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.

#### 5.3 Clinical Practice Experience

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

#### **5.4 Assessment Process**

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

Assessments are strategically planned and function to:

- · Provide feedback on student progress
- Ensure education standards (theory and practice) are achieved before entry to the next part of the education, as appropriate.
- 5.4.1 Assessments are based on a variety of strategies that are aligned with the subject area, practice setting and stage of the education programme and the expected learning outcomes and competencies.
- 5.4.2 Assessment measures where appropriate demonstrate the integration and application of theory to person/service user care learned throughout the education programme and require the student to demonstrate competence within practice through the achievement of learning outcomes and competencies in both theory and practice.
- 5.4.3 Assessment strategies are established as reliable and valid measures of learning outcomes and competencies.
- 5.4.4 Grading criteria indicating the standard for a pass award are required for theoretical and clinical practice competency assessments as awarding/grading mechanism, which acknowledges higher achievements by the student, is recorded.
- 5.4.5 Assessment regulations relating to compensation, supplemental and appeal mechanisms and conditions for the continuance of the education programme must be explicit.

#### 5.5 External Examiners

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

- 5.5.1 The role of the external examiner is explicit and functions to:
  - · Maintain the quality and standards for education for prescriptive authority;
  - Ensure the assessment strategies for theory and practice are reliable and equitable;
  - · Ensure individual students are treated fairly.
- 5.5.2 External examiners for the education programme for prescriptive authority:
  - Are registered nurses/midwives with professional qualifications appropriate to the education programme being examined.
  - Hold academic and teaching qualifications and have at least three years of full-time teaching experience in courses appropriate to the education programme being examined;
  - Have experience in examining and assessing post-registration students.
  - Have experience in development, management, delivery and evaluation of education for prescriptive authority.
- 5.5.3 The mechanism whereby the external examiner is provided with relevant documentation participates in decision-making concerning the programme and has a membership of the examination Boards of the respective institutions, is explicit.

### Section 6: Guide Template for Submission of Education Programmes for Prescriptive Authority Curriculum Document

#### 6.1 Section 1 – Programme Summary

#### 1. Title

- 2. Location and Provider
- 3. Table of Contents

#### 4. Students

- I. Application Procedures
- II. Recognition of Prior Learning (RPL)
- III. Admission Criteria
- Entry requirements
- IV. Interruption in Programme Delivery

#### 5. Structure

#### 6. Attendance

I. Minimum Hours Declared

#### 7. Student Support

- I. Student Lecturers
- II. Student Unions
- III. Counselling
- IV. Disability/Access
- V. Other Supports Available to Student
- Admin Support

#### 8. Learning Resources

- I. Library Facilities
- II. Computer/IT Facilities
- III. Online/Virtual Learning Environments (eg Moodle/BlackBoard)
- **IV. Other Learning Resources**

#### 9. Administration

- I. Programme Management
- II. ECT Framework
- III. Awarding Body
- IV. Programme Evaluation, Oversight and Quality

#### 10. Programme review process

#### 6.2 Section 2 – Curriculum Design, Development, Content and Organisation

#### 1. Curriculum Design

- I. Background
- II. Rationale

#### 2. Curriculum Development

- Supported by current published evidence.

#### 3. Curriculum Philosophy

#### 4. Curriculum Content

- I. Aims and Learning Outcomes
  - a. Programme Learning Outcomes Mapped to Standards and Requirements at NFQ Level 9 (Section 7/8)
  - b. Module Learning Outcomes Mapped to Standards and Requirements at NFQ Level 9 (Section 7/8)
- II. Structure, Modes of Study and Duration

#### 5. Assignments and Assessments

- I. Module Assignments and Assessments Mapped to Module Learning Outcomes
- II. Submissions/Late Submissions
- III. Scope of Compensation Between Modules (compensation between a theoretical and clinical component of the assessment is prohibited).
- **IV. Examinations**
- V. Plagiarism
- **VI. Repeat Examinations**
- The number of repeats allowed for failed assessments.

#### 6. Module Descriptors in Table format

- Current references included

#### 6.3 Section 3 – Appendices

- 1. Letter of Accreditation from HEI's Academic Council
- 2. CVs of Academic Staff (Include NMBI PINs for nurses and midwives)
- 3. An abridged CV of External Examiner
- 4. Academic Regulations
- 5. Programme Evaluation Tools, eg Students Questionnaires, Impact on Service Assessment, Preceptor Evaluation
- 6. Clinical Competency Assessment Tool
- 7. Detailed Examination Grading Scale
- 8. Governance Structure in Diagrammatic Format
- 9. Oversight Committee Memberships
- 10. Policies on Marking/Plagiarism/Submission/Exams/Conduct/etc.
- 11. Recognition of Prior Learning Policies/Forms
- 12. Marking Criteria
- 13. Any Other Documents Deemed Relevant to the Programme

### Section 7: National Framework of Qualification Learning Outcomes for Education Programmes for Nurse Prescriptive Authority

Learning outcomes at this level relate to the demonstration of knowledge and understanding that is the forefront of a field of learning (Nurse Prescriptive Authority). Outcomes relate to the application of knowledge, understanding and problemsolving abilities in new or unfamiliar contexts related to a field of study (nurse prescriptive authority). The outcomes are associated with an ability to integrate knowledge, handle complexity and formulate judgments (National Qualifications Authority of Ireland 2003).

The higher education institution (HEI) must outline the programme and learning outcomes of the education for nursing prescriptive authority as indicated at a minimum by the NFQ Level 8 learning outcomes grid. The HEI must outline clearly the expected knowledge, competency and skills that the postgraduate student will have gained at the end of the programme.

### NFQ Level 8 and 9 Learning Outcomes Grid for Education Programmes for Nurse Prescriptive Authority

#### All cognate areas within the discipline of nursing must be at a minimum Level 8 Standard of the National Framework of Qualifications

<b>Knowledge -</b> Breadth	Understanding of the theory, concepts and methods pertaining to a field (or fields) of learning	A systematic understanding of knowledge at, or informed by, the forefront of a field of learning
	LEVEL 8	LEVEL 9
	The graduate should be able to: 1. Demonstrate an understanding of the theory, concepts and methods pertaining to relevant clinical practice skills essential for safe and effective nursing practice.	<ol> <li>The graduate should:</li> <li>Know how knowledge is created and changed within the profession.</li> <li>Be able to demonstrate a knowledge base that exercises higher levels of judgment, discretion and decision-making within nursing practice.</li> <li>Be able to demonstrate the value of nursing via the generation of nursing knowledge and innovative clinical practice, nursing education and management.</li> </ol>
<b>Knowledge -</b> Kind	Detailed knowledge and understanding in one or more specialised areas, some of it at the current boundaries of the field(s)	A critical awareness of current problems and/or new insights, generally informed by the forefront of a field of learning
	LEVEL 8	LEVEL 9
	<ol> <li>The graduate should:</li> <li>Know and demonstrate an understanding of relevant biological and related sciences as they apply to nursing practice.</li> <li>Know and demonstrate an understanding of the social sciences as they apply to nursing practice.</li> <li>Critically analyse and evaluate relevant knowledge in nursing science.</li> <li>Critically analyse and evaluate relevant knowledge in health promotion and health care policy.</li> <li>Demonstrate relevant knowledge to adopt systematic approaches to nursing practice based on the best available evidence.</li> </ol>	<ol> <li>The graduate should:</li> <li>Demonstrate the synthesis and integration of knowledge from various domains showing breadth and depth of knowledge of his/her discipline.</li> <li>Demonstrate the synthesis and integration of knowledge from a broad range of disciplines that inform and develop nursing practice.</li> <li>Demonstrate the synthesis and integration of the major research methodologies appropriate to his/her professional domain.</li> </ol>

<b>Know-How and Skill -</b> Range	Demonstrate mastery of a complex and specialised area of skills and tools; use and modify advanced skills and tools to conduct closely guided research, professional or advanced technical activity	Demonstrate a range of standard and specialised research or equivalent tools and techniques of enquiry
	LEVEL 8	LEVEL 9
	<ol> <li>The graduate should be able to:</li> <li>Assist individuals, families and groups achieve optimum health, independence, recovery or a peaceful death in a professional caring manner.</li> <li>Provide and manage direct practical nursing, whether health is promotional, preventative, curative, rehabilitative or supportive, to individuals, families or groups.</li> <li>Demonstrate evidence-based clinical practice skills essential for safe nursing practice.</li> <li>Identify and implement health promotion priorities in the relevant area of practice.</li> </ol>	<ul> <li>The graduate should be able to:</li> <li>1. Make critical choices in the selection of approaches to research problems.</li> <li>2. Synthesise different approaches To research and justify their use in practice.</li> <li>3. Systematically gather, interpret and evaluate evidence drawn from a diverse range of sources that are chosen independently.</li> <li>4. Conduct a comprehensive health needs assessment as the basis for independent nursing practice within a specified area.</li> <li>5. Demonstrate expert skill in providing care for individuals and</li> </ul>
	<ol> <li>Implement health promotion strategies for person/ service user groups in accordance with the public health agenda.</li> </ol>	<ul> <li>groups in communities, within The scope of practice framework and multidisciplinary team.</li> <li>6. Demonstrate advanced clinical decision-making skills to manage a service user caseload.</li> <li>7. Evaluate and critique current evidence base to set standards</li> </ul>

for best practice.

#### All cognate areas within the discipline of nursing must be at a minimum Level 8 Standard of the National

#### Framework of Qualifications

Know-How and Skill - Selectivity	Exercise appropriate judgment in a number of complex planning, design, technical and/or management functions related to products, services, operations or processes, including resourcing	Select from complex and advanced skills across a field of learning; develop new skills to a high level, including novel and emerging techniques
	LEVEL 8	LEVEL 9
	<ul> <li>The graduate should be able to:</li> <li>1. Identify and meet the nursing needs of the individual, family and community in all health care settings.</li> <li>2. Demonstrate the skills of <ul> <li>analysis</li> <li>critical thinking</li> <li>problem-solving, and</li> <li>reflection in nursing practice.</li> </ul> </li> <li>3. Act as an effective member of the health care team, in an appropriate nursing setting and participate in the multidisciplinary team approach to the care of person/service user.</li> <li>4. Evaluate practice and use current research findings to underpin clinical practice.</li> <li>5. Articulate and represent person/service user interests and enable person/service user and others to fully participate in decisions about his/her health needs.</li> <li>6. Implement changes in health care service in response to person/service user need and service demand.</li> </ul>	<ul> <li>The graduate should be able to: <ol> <li>Critically evaluate with discrimination the complex theories and concepts underpinning professional practice.</li> <li>Utilise advanced knowledge and critical thinking skills to, directly and indirectly, provide optimum nursing care.</li> <li>Develop and apply critical faculties to practice through reflection skills.</li> <li>Demonstrate the vision of a professional practice.</li> <li>Act proactively as an educational resource for health care professionals.</li> <li>Apply critical faculties to professional practice through analysis of the underlying epistemology of its knowledge base.</li> </ol></li></ul>

Competence -Context Use advanced skills to conduct research, or advanced technical or professional activity, accepting accountability for all related decision-making; transfer and apply diagnostic and creative skills in a range of contexts Act in a wide and often unpredictable variety of professional levels and illdefined contexts

#### LEVEL 8

#### LEVEL 9

The graduate should be able to:

- Adopt a holistic approach to care and the integration of knowledge. Conduct a systematic holistic assessment of person/service user needs to be based on nursing theory and evidence-based practice.
- Plan care in consultation with the person/service user taking into consideration the therapeutic regimes of all members of the health care team.
- 3. Implement planned nursing care/interventions to achieve the identified outcomes.
- Evaluate person/service user progress toward expected outcomes and review plans in accordance with evaluation data and consultation with the person/service user.
- 5. Establish and maintain caring therapeutic interpersonal relationships with person/service user/groups/communities.
- 6. Perform a nursing assessment; plan and initiate care and treatment modalities within agreed interdisciplinary protocols to achieve person centred outcomes and evaluate their effectiveness.
- Identify, critically analyse, disseminate and integrate nursing and other evidence into the relevant area of practice.
- 8. Initiate and/or participate in and evaluate audit and use the outcome of an audit to improve service provision.

9. Contribute to service planning And budgetary processes through the use of audit and prescribing knowledge. The graduate should be able to:

- Demonstrate autonomy, experience, competence, accountability, authority and responsibility in nursing practice.
- 2. Demonstrate leadership in nursing practice.
- Use knowledge to autonomously identify, resolve and evaluate intellectual issues and practical problems that appear in practice.
- Identify and integrate research into areas of health care that can incorporate best evidence-based practice.
- Use acquired skills to conduct an in-depth research study relevant to the field of professional Nursing.

#### All cognate areas within the discipline of nursing must be at a minimum Level 8 Standard of the National

#### Framework of Qualifications

Competence -Role Act effectively under guidance in a peer relationship with qualified practitioners; lead multiple, complex and heterogeneous groups Take significant responsibility for the work of individuals and groups; lead and initiate activity

#### Learn to self-evaluate and take Competence -Learn to act in variable and responsibility for continuing Learning to Learn unfamiliar contexts; learn to academic/professional development manage learning tasks independently, professionally and ethically LEVEL 8 LEVEL 9 The graduate should be able to: The graduate should be able to: 1. Take responsibility for 1. Identify personal learning needs personal and professional and the steps needed to meet development. them. 2. Reflect critically on practice in 2. Act to enhance the personal and professional development of self order to improve it in self and and others. others. 3. Demonstrate a commitment to 3. Undertake complex and sustained lifelong learning. analysis of subject matter and provide a balanced, logical and 4. Contribute to the learning coherent conclusion. experiences of colleagues through support, supervision and 4. Continually evaluate the teaching. personal contribution to the current body of knowledge in 5. Educate person/service user practice. /groups/communities to maintain and promote 5. Utilise lifelong learning skills to continue to develop knowledge health. applied to the nursing practice. 6. Provide mentorship, preceptorship, teaching, 6. Explore beyond scope of practice, facilitation and professional developing effective and supervisory skills for nurses, innovative nursing practice. midwives and other health care 7. Demonstrate a commitment to professionals. advancing the body of knowledge in nursing practice.

Competence -Insight

Express a comprehensive internalised, personal worldview manifesting solidarity with others Scrutinise and reflect on social norms and relationships and act to change them

#### LEVEL 8

The graduate should be able to:

- 1. Provide and articulate professional and ethical nursing practice. Safe and effective practice requires a sound underpinning of theoretical knowledge that informs practice and is in turn informed by that practice.
- 2. Practice in accordance with legislation affecting nursing practice.
- 3. Practice within the limits of own competence and takes measures to develop own competence.
- 4. Demonstrate an understanding and consciousness of professional nursing practice issues through the process of reflection on experience.
- 5. Generate and contribute to the development of clinical standards and guidelines.
- Use relevant knowledge to support and enhance generalist nursing knowledge and practice.

The graduate should be able to:

LEVEL 9

- 1. Identify and implement action to improve practice and initiate change.
- Identify and critically evaluate ethical issues and work with others towards their resolution.
- 3. Develop the ability to be political within and outside of his/her employing organisation.
- Challenge assumptions and question values, beliefs and policies underpinning care at the individual, team and organisational level.
- 5. Actively contribute to the quality of care through research that can advance nursing and health care knowledge.
- 6. Develop advanced communication skills in order to present balanced arguments.
  - present structured, rational and evidenced coherent arguments using appropriate strategies.
  - engage confidently in an academic and multi-professional debate.

### Section 8: NFQ Learning Outcomes for Education Programmes for Midwife Prescriptive Authority

The learning outcomes at this level relate to the demonstration of knowledge and understanding which is the forefront of a field of learning (midwife prescriptive authority). The outcomes relate to the application of knowledge, understanding and problem-solving abilities in new or unfamiliar contexts related to a field of study (midwife prescriptive authority). The outcomes are associated with an ability to integrate knowledge, handle complexity and formulate judgments (National Qualifications Authority of Ireland 2003).

The higher education institution (HEI) must outline the programme and learning outcomes of the education programme for midwifery prescriptive authority as indicated at a minimum by the NFQ Level 8 learning outcomes grid. The HEI must outline clearly the expected knowledge, competence and skills that the postgraduate student will have gained at the end of the programme.

### NFQ Level 8 and 9 Learning Outcomes Grid for Education Programmes for Midwife Prescriptive Authority

#### All cognate areas within the discipline of midwifery must be at a minimum Level 8 Standard of the National Framework of Qualifications

Knowledge -Breadth

Specialised knowledge across a variety of areas

Understanding of the theory, concepts and methods pertaining to a field (or fields) of learning A systematic understanding of knowledge, at, or informed by, the forefront of a field of learning

LEVEL 7	LEVEL 8	LEVEL 9
The graduate should be able to: 1. Demonstrate integration of knowledge and an understanding of a systematic approach to care and a specified range of midwifery interventions, and of health, ethics, interpersonal communication, management, information technology, numeracy and literacy as applied to maternity care within a maternity care team.	The graduate should be able to: Demonstrate an understanding of the theory, concepts and methods pertaining to relevant clinical practice skills, essential for safe and effective midwifery practice.	<ul> <li>The graduate should:</li> <li>1. Know how knowledge is created and changed within the midwifery profession.</li> <li>2. Be able to demonstrate a knowledge base that exercises higher levels of judgment, discretion and decision-making within midwifery practice.</li> <li>3. Be able to demonstrate the value of midwifery through the generation of midwifery knowledge and innovative clinical practice, midwifery education and management.</li> </ul>

<b>Knowledge -</b> Kind	Detailed knowledge and understanding in one or more specialised areas, some of it at the current boundaries of the field(s).	A critical awareness of current problems and/or new insights, generally informed by the forefront of a field of learning
	LEVEL 8	LEVEL 9
	<ol> <li>The graduate should:</li> <li>Know and demonstrate an understanding of relevant biological and related sciences as they apply to midwifery practice.</li> <li>Know and demonstrate an understanding of the social sciences as they apply to midwifery practice.</li> <li>Critically analyse and evaluate relevant knowledge in contemporary midwifery practice.</li> <li>Critically analyse and evaluate relevant knowledge in contemporary midwifery practice.</li> <li>Critically analyse and evaluate relevant knowledge in health promotion and health care policy.</li> <li>Demonstrate relevant knowledge to underpin evidence-based midwifery practice</li> </ol>	<ol> <li>The graduate should:</li> <li>Demonstrate the synthesis and integration of knowledge from various domains showing breadth and depth of knowledge of midwifery.</li> <li>Demonstrate the synthesis and integration of knowledge from a broad range of disciplines that inform and develop midwifery practice.</li> <li>Demonstrate the synthesis and integration of the major research methodologies appropriate to midwifery.</li> </ol>

<b>Know-How and Skill -</b> Range	Demonstrate mastery of a complex and specialised area of skills and tools; use and modify advanced skills and tools to conduct closely guided research, professional or advanced technical activity	Demonstrate a range of standard and specialised research or equivalent tools and techniques of enquiry
	LEVEL 8	LEVEL 9
	<ul> <li>The graduate should be able to:</li> <li>1. Conduct a comprehensive needs assessment as the basis for independent midwifery practice.</li> <li>2. Provide competent, safe midwifery care to women and, where possible, their wider family circle.</li> <li>3. Demonstrate evidence-based clinical practice skills essential for safe midwifery practice.</li> <li>4. Identify and implement health promotion priorities in midwifery practice.</li> <li>5. Implement health promotion strategies for women, their families and the wider community in accordance with the public health agenda.</li> </ul>	<ul> <li>The graduate should be able to:</li> <li>1. Make critical choices in the selection of approaches to research problems.</li> <li>2. Synthesise different approaches to research and justify their use in practice.</li> <li>3. Systematically gather, interpret and evaluate evidence drawn from a diverse range of independently chosen sources.</li> <li>4. Demonstrate expert skill in providing care for women and groups in communities, within the scope of practice framework and multidisciplinary team.</li> <li>5. Demonstrate advanced clinical decision-making skills to manage a midwifery caseload.</li> <li>6. Evaluate and critique the current evidence base to set standards for best practice.</li> </ul>

Exercise appropriate judgment in

a number of complex planning,

Selectivity design, technical and/or learning; develop new skills to a management functions related to high level, including novel and products, services, operations or emerging techniques processes, including resourcing LEVEL 8 LEVEL 9 The graduate should be able to: The graduate should be able to: 1. Identify and meet the midwifery 1. Critically evaluate with care needs of women, their discrimination the complex families and community in all theories and concepts underpinning professional health care settings. midwifery practice. 2. Demonstrate the skills of 2. Utilise advanced knowledge and - analysis critical thinking skills to, - critical thinking directly and indirectly, - problem-solving, and provide optimum midwifery care. - reflection in midwifery practice. 3. Develop and apply critical

- 3. Where appropriate, act as an effective member of the maternity care team and participate in the multidisciplinary team approach to the care of women.
- Evaluate practice and use current research findings to underpin clinical midwifery practice promoting the normality of pregnancy and birth.
- 5. Articulate and represent women's interests and enable women to fully participate as partners in decisions about their maternity care needs.
- Implement changes in maternity care service in response to women's needs and choices and service demand.

 Develop and apply critical faculties to practice through advanced reflection skills.

Select from complex and

advanced skills across a field of

- Demonstrate a vision of a professional practice that can be developed beyond the current scope of practice.
- 5. Act proactively as an educational resource for health care professionals.
- Apply critical faculties to professional midwifery practice through analysis of the underlying epistemology of its knowledge base.

Know-How

and Skill -

Competence -Context Use advanced skills to conduct research, or advanced technical or professional activity, accepting accountability for all related decision-making; transfer and apply diagnostic and creative skills in a range of contexts Act in a wide and often unpredictable variety of professional levels and ill-defined contexts

#### LEVEL 8

#### LEVEL 9

The graduate should be able to:

- Adopt a holistic approach to midwifery care and the integration of knowledge. Conduct a systematic holistic assessment of women's needs based on midwifery theory and evidence-based practice.
- 2. Plan care in partnership with the woman taking into consideration the role and potential input of all members of the maternity care team.
- 3. Implement planned midwifery care to achieve the identified outcomes.
- Evaluate a woman's progress toward expected outcomes and review plans in accordance with evaluation data and partnership with the woman.
- 5. Establish and maintain caring interpersonal relationships with women and their families.
- Assess and confirm the health of women during pregnancy, labour, birth and the puerperium and provide appropriate midwifery care.
- 7. Identify, critically analyse, disseminate and integrate midwifery and other evidence into midwifery practice.
- Initiate and/or participate in and evaluate audit and use the outcome of an audit to improve the provision of maternity care.
  - 9. Contribute to service planning And budgetary processes through the use of audit and midwifery knowledge.

The graduate should be able to:

- Demonstrate autonomy, experience, competence, accountability, authority and responsibility in midwifery practice.
- 2. Demonstrate leadership in midwifery practice.
- Use knowledge to autonomously identify, resolve and evaluate intellectual issues and practical problems that appear in midwifery practice.
- Identify and integrate research into areas of health care that can incorporate the best evidencebased practice.
- 5. Use acquired skills to conduct an in-depth research study relevant to professional midwifery practice.

npetence -	Act effectively under guidance in a peer relationship with qualified practitioners; lead multiple, complex and heterogeneous	Take significant responsibility for the work of individuals and groups; lead and initiate activity
	groups	
	LEVEL 8	LEVEL 9
	<ul> <li>The graduate should be able to:</li> <li>1. Effectively manage the midwifery care of women and their families.</li> <li>2. Contribute to the overall goal/mission of the health care institution.</li> <li>3. Demonstrate the ability to work as a team member.</li> <li>4. Determine priorities for midwifery care based on need, informed choice, acuity and optimal time for an intervention.</li> <li>5. Select and utilise resources effectively and efficiently.</li> <li>6. Utilise methods to demonstrate quality assurance and quality management.</li> <li>7. Delegate to other midwives activities commensurate with their competence and within their scope of professional practice, having due regard for the principles outlined in the</li> </ul>	<ul> <li>The graduate should be able to:</li> <li>1. Co-ordinate evidence-based practice audit and research to develop and evaluate midwifery practice.</li> <li>2. Actively contribute to the professional body of midwifery knowledge.</li> <li>3. Demonstrate the value of midwifery through the generation of midwifery knowledge and innovative midwifery education and practice.</li> <li>4. Teach others from a broad and in-depth knowledge base derived from reflection on midwifery practice and expertise.</li> <li>5. Critically review the working of teams and demonstrate skills in negotiation and the management of conflict.</li> </ul>

scope of nursing and midwifery practice framework when delegating a particular role or

 Facilitate the coordination of care. This is achieved through working, in partnership with a woman, with all team members to ensure that a woman's care is appropriate, effective and

9. Provide leadership in clinical practice and act as a resource and role model for midwifery

function.

consistent.

practice.

Com

Role

Competence - Insight	Express a comprehensive internalised, personal world view manifesting solidarity with others	Scrutinise and reflect on social norms and relationships and act to change them
	LEVEL 8	LEVEL 9
	<ul> <li>The graduate should be able to:</li> <li>Provide and articulate professional and ethical midwifery practice. Safe and effective practice requires a sound underpinning of theoretical knowledge that informs practice and is in turn informed by that practice.</li> <li>Practice in accordance with legislation affecting midwifery practice.</li> <li>Practice within the limits of own competence and take measures to develop own competence.</li> <li>Demonstrate an understanding and consciousness of professional midwifery practice issues through the process of reflection on experience.</li> <li>Generate and contribute to the development of clinical standards and guidelines.</li> <li>Use relevant knowledge to support and enhance midwifery knowledge and practice.</li> </ul>	<ul> <li>The graduate should be able to:</li> <li>1. Identify and implement action to improve midwifery practice and initiate change.</li> <li>2. Identify and critically evaluate ethical issues and work with others towards their resolution.</li> <li>3. Develop the ability to be political within and outside of his/her employing organisation.</li> <li>4. Challenge assumptions and question values, beliefs and policies underpinning maternity care at the individual, team and organisational level.</li> <li>5. Actively contribute to the quality of care through research that can advance midwifery and maternity care knowledge.</li> <li>6. Develop advanced communication skills in order to present balanced arguments. <ul> <li>present structured, rational and evidenced coherent arguments using appropriate strategies.</li> <li>engage confidently in an academic and multi-professional debate.</li> </ul> </li> </ul>

<b>Competence -</b> Learning to Learn	Learn to act in variable and unfamiliar contexts; learn to manage learning tasks independently, professionally and ethically	Learn to self-evaluate and take responsibility for continuing academic/professional development
	LEVEL 8	LEVEL 9
	<ol> <li>The graduate should be able to:</li> <li>Take responsibility for personal and professional development.</li> <li>Act to enhance the personal and professional development of self and others.</li> </ol>	<ul><li>The graduate should be able to:</li><li>1. Identify personal learning needs and the steps needed to meet them.</li><li>2. Reflect critically on midwifery practice in order to improve it in self and others.</li></ul>
	<ol> <li>Demonstrate a commitment to lifelong learning.</li> <li>Contribute to the learning experiences of colleagues through support, supervision and teaching.</li> <li>Educate and support women, their families and the wider community to maintain and promote health.</li> <li>Provide mentorship, preceptorship, teaching, facilitation and professional Supervisory skills for midwives and other health care professionals.</li> </ol>	<ol> <li>Undertake complex and sustained analysis of subject matter and provide a balanced, logical and coherent conclusion.</li> <li>Continually evaluate the personal contribution to the current body of midwifery knowledge in practice.</li> <li>Utilise lifelong learning skills to continue to develop knowledge applied to midwifery practice.</li> <li>Explore beyond scope of practice, developing effective and Innovative midwifery practice.</li> <li>Demonstrate a commitment to advancing the body of knowledge in midwifery practice.</li> </ol>
Competence - Insight	Express a comprehensive internalised, personal world view manifesting solidarity with others	Scrutinise and reflect on social norms and relationships and act to change them
	LEVEL 8	LEVEL 9
	<ol> <li>The graduate should be able to:</li> <li>Provide and articulate professional and ethical midwifery practice. Safe and effective practice requires a sound underpinning of theoretical knowledge that informs practice and is in turn informed by that practice.</li> <li>Practice in accordance with legislation affecting midwifery practice.</li> <li>Practice within the limits of own competence and take measures to develop own competence.</li> <li>Demonstrate an understanding and consciousness of professional midwifery practice issues by reflecting on experience.</li> <li>Generate and contribute to the development of clinical standards and guidelines.</li> <li>Use relevant knowledge to support and enhance midwifery knowledge and practice.</li> </ol>	<ol> <li>The graduate should be able to:</li> <li>Identify and implement action to improve midwifery practice and initiate change.</li> <li>Identify and critically evaluate ethical issues and work with others to resolve them.</li> <li>Develop the ability to be political within and outside of his/her employing organisation.</li> <li>Challenge assumptions and question values, beliefs and policies underpinning maternity care at the individual, team and organisational level.</li> <li>Actively contribute to the quality of care through research that can advance midwifery and maternity care knowledge.</li> <li>Develop advanced communication skills to present balanced arguments.</li> </ol>

 engage confidently in an academic and multi-professional debate.

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