

# CHILDREN'S NURSING POST REGISTRATION

Standards and requirements



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



These standards and requirements were originally published in April 2007 as part of *Requirements and Standards for Nurse Post Registration Education Programmes* (First Edition).

This document was re-issued in October 2015 for the relaunch of the NMBI website. This involved reviewing the content, updating dated references and redesigning the document. However, the standards and requirements themselves reflect what is in the 2007 edition.

## **About NMBI**

The Nursing and Midwifery Board of Ireland (NMBI) is the independent, statutory organisation which regulates the nursing and midwifery professions in Ireland. For more information about our role and functions, visit [www.NMBI.ie/What-We-Do](http://www.NMBI.ie/What-We-Do)

## **Nurses Rules 2010**

This programme is governed by the Nurses and Midwives Act 2011 and by the Nurses Rules, which provide titles of recognised qualifications under the Register of Nurses and Midwives. For more information on the Act, and on the Nurses Rules, visit the What we Do/Legislation section of NMBI's website, [www.NMBI.ie](http://www.NMBI.ie)

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## **Glossary**

A full glossary of all the terms used in this and other NMBI publications is published on our website on [www.NMBI.ie/Standards-Guidance/Glossary](http://www.NMBI.ie/Standards-Guidance/Glossary)

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# INTRODUCTION

Childhood forms a distinct phase of life and children are a social group that merit their own status within contemporary society. Children are not “miniature adults”. They are special, important and unique individuals with bio/psycho/social and spiritual needs relative to their level of maturity and dependence. It is also acknowledged that the child exists within the immediate context of his/her family system. Nursing the child with health care needs requires the adoption of a child and family-centred philosophy within which each child and his/her family are valued. The aim of children’s nursing is to facilitate child and family empowerment, and to enable maintenance/restoration of optimal well-being for the child in a needs-led culturally sensitive and high quality manner.

It is universally acknowledged that a child and his/her family deserve to be cared for by specially trained nurses in order to ensure the facilitation of delivery of holistic and appropriate care within a variety of health care settings. Within such a programme of nurse education the learner will gain insight into the complexity of caring for this client group, and will develop the relevant knowledge, attitudes and skills that are required for competent nursing practice and lifelong learning.

Children’s nursing is a professional, interpersonal caring process that encompasses autonomous and collaborative care of children and young people and their families through the use of a child and family centred philosophy, where negotiation of care and participation in care is central to a partnership approach to care with families. In delivering care the children’s nurse recognises and values the individual physiological, psychological, spiritual, cultural and emotional developmental needs of the child.

The term “children’s nurse” is used for consistency with the Registered Children’s Nurse Division of the Register of Nurses and Midwives maintained by Nursing & Midwifery Board of Ireland (NMBI). The term “child” refers to the infant, child and adolescent.

# LEARNING OUTCOMES

The purpose of the registration education programme is to ensure that on successful completion of the programme the student is equipped with the knowledge and skills necessary to practice as a competent and professional nurse.

The registration education programme enables the student to:

1. Assist individuals, families and groups achieve optimum health, independence, recovery or a peaceful death in a professional caring manner
2. Provide and manage direct practical nursing whether health promotion, preventive, curative, rehabilitative or supportive, to individuals, families or groups
3. Demonstrate a knowledge base and a level of competence in clinical practice skills essential for safe practice, which are grounded in recent evidence based nursing research where available
4. Identify and meet the nursing care needs of the individual, family, community in all health care settings
5. Demonstrate development of skills of analysis, critical thinking, problem-solving and reflective practice
6. Act as an effective member of a health care team and participate in the multidisciplinary team approach to the care of patients/clients

# COMPETENCIES FOR ENTRY TO THE REGISTER

Competence is a complex and multidimensional phenomenon and is defined as the ability of the registered nurse to practice safely and effectively, fulfilling his/her professional responsibility within his/her scope of practice.

The aim is to ensure that students acquire the skills of critical analysis, problem-solving, decision-making, reflective skills and abilities essential to the art and science of nursing. Safe and effective practice requires a sound underpinning of theoretical knowledge that informs practice and is in turn informed by that practice. Within complex and changing healthcare environments it is essential that practice is informed by the best available evidence. This is reflected by competencies.

All five Domains of Competence represent the level the student must reach on completion of the education programme for entry to the Register held by the Nursing & Midwifery Board of Ireland (NMBI). The Domains of Competence represent a broad enabling framework to facilitate the assessment of student nurses' clinical practice. Each domain consists of performance criteria and their relevant indicators. These indicators will be developed at local level appropriate to the division of the Register and the specialty.

A team and partnership approach will be applied when assessing the student nurses as the assessor will consult with colleagues in determining the student nurses' competence. Clinical Nurse Managers, nurse lecturers and HEIs will agree on the assessment process.

Student nurses are deemed to be either competent or not and where competence has not been achieved the student nurse will be given opportunities to develop competence.

The competencies encompass five domains:

1. Professional/ethical practice.
2. Holistic approaches to care and the integration of knowledge.
3. Interpersonal relationships.
4. Organisational and management of care.
5. Personal and professional development.

## Domain 1- Professional/Ethical Practice

|     |   | Indicators  |
|-----|---|---|
| 1.1 | Practices in accordance with legislation affecting nursing practice.                        | <ul style="list-style-type: none"> <li>• Integrates accurate and comprehensive knowledge of ethical principles, the Code of Professional Conduct and Ethics for Nurses and Midwives and within the scope of professional nursing practice in the delivery of nursing practice.</li> <li>• Fulfils the duty of care in the course of nursing practice.</li> <li>• Implements the philosophies, policies, protocols, and clinical guidelines of the healthcare institution.</li> <li>• Responds appropriately to instances of unsafe or unprofessional practice.</li> <li>• Integrates knowledge of the rights of clients and groups in the health care setting.</li> <li>• Serves as an advocate for the rights of clients or groups.</li> <li>• Ensures confidentiality in respect to records and interactions.</li> <li>• Practices in a way that acknowledges the differences in beliefs and cultural practices of individuals/groups/communities.</li> </ul> |
| 1.2 | Practices within the limits of own competence and takes measures to develop own competence. | <ul style="list-style-type: none"> <li>• Determines own scope of practice utilizing the principles for determining scope of practice in the Scope of Nursing and Midwifery Practice Framework document.</li> <li>• Recognises own abilities and level of professional competence.</li> <li>• Accepts responsibility and accountability for consequences of own actions and omissions.</li> <li>• Consults with supervisors if allocated nursing assignments are beyond competence.</li> <li>• Clarifies unclear or inappropriate instruction.</li> <li>• Formulates decisions about care within the scope of professional nursing practice utilising the Decision-Making Framework in the Scope of Nursing and Midwifery Practice Framework document.</li> </ul>  |

## Domain 2 - Holistic Approaches to Care and the Integration of Knowledge

|     |  | Indicators   |
|-----|--|--|
| 2.1 | Conducts a systematic holistic assessment of clients' needs based on nursing theory and evidence-based practice.                             | <ul style="list-style-type: none"> <li>• Uses an appropriate assessment framework safely and accurately.</li> <li>• Analyses data accurately and comprehensively leading to appropriate identification of findings.</li> <li>• Incorporates relevant research findings into nursing practice.</li> <li>• Promotes research designed to improve nursing practice.</li> </ul>  |
| 2.2 | Plans care in consultation with the client taking into consideration the therapeutic regimes of all members of the health care team.         | <ul style="list-style-type: none"> <li>• Establishes priorities for resolution of identified health needs.</li> <li>• Identifies expected outcomes including a time frame for achievement.</li> <li>• Identifies criteria for the evaluation of the expected outcomes.</li> <li>• Plans for discharge and follow up care.</li> </ul>   |
| 2.3 | Implements planned nursing care/interventions to achieve the identified outcomes.  | <ul style="list-style-type: none"> <li>• Delivers nursing care in accordance with the plan that is accurate, safe, comprehensive and effective.</li> <li>• Creates and maintains a physical, psychosocial, and spiritual environment that promotes safety, security and optimal health.</li> <li>• Provides for the comfort needs of individuals.</li> <li>• Acts to enhance the dignity and integrity of individuals/clients/groups/communities.</li> </ul> |
| 2.4 | Evaluates client progress toward expected outcomes and reviews plans in accordance with evaluation data and in consultation with the client. | <ul style="list-style-type: none"> <li>• Assesses the effectiveness of nursing care in achieving the planned outcomes.</li> <li>• Determines further outcomes and nursing interventions in accordance with evaluation data and consultation with the client.</li> </ul>  |

## Domain 3 - Interpersonal Relationships

|     |   | Indicators  |
|-----|---|---|
| 3.1 | Establishes and maintains caring therapeutic interpersonal relationships with individuals/clients/groups/communities. | <ul style="list-style-type: none"> <li>• Reflects on the usefulness of personal communication techniques.</li> <li>• Conducts nursing care ensuring clients receive and understand relevant and current information concerning health care.</li> <li>• Assists clients/groups/communities to communicate needs and to make informed decisions.</li> </ul> |
| 3.2 | Collaborates with all members of the health care team and documents relevant information.                             | <ul style="list-style-type: none"> <li>• Participates with all health care personnel in a collaborative effort directed toward decision making concerning clients.</li> <li>• Establishes and maintains accurate, clear and current client records within a legal and ethical framework.</li> </ul>   |

## Domain 4 - Organisation and Management of Care

|     |  | Indicators   |
|-----|--|--|
| 4.1 | Effectively manages the nursing care of clients/groups/communities.  | <ul style="list-style-type: none"> <li>• Contributes to the overall goal/mission of the health care institution.</li> <li>• Demonstrates the ability to work as a team member.</li> <li>• Determines priorities for care based on need, acuity and optimal time for intervention.</li> <li>• Selects and utilises resources effectively and efficiently.</li> <li>• Utilises methods to demonstrate quality assurance and quality management.</li> </ul> |
| 4.2 | Delegates to other nurses activities commensurate with their competence and within their scope of professional practice. | <ul style="list-style-type: none"> <li>• When delegating a particular role/function account is taken of the principles outlined in the Scope of Nursing and Midwifery Practice Framework.</li> </ul>   |
| 4.3 | Facilitates the co-ordination of care.   | <ul style="list-style-type: none"> <li>• Works with all team members to ensure that client care is appropriate, effective, and consistent.</li> </ul>  |

## Domain 5 - Personal and Professional Development

|     |   | Indicators   |
|-----|---|--|
| 5.1 | Acts to enhance the personal and professional development of self and others. | <ul style="list-style-type: none"><li>• Demonstrates a commitment to life long learning.</li><li>• Contributes to the learning experiences of colleagues through support, supervision and teaching.</li><li>• Educates clients/groups/ communities to maintain and promote health.</li></ul> |

# SYLLABUS/ INDICATIVE CONTENT

The list of topics included in the syllabus is not exhaustive. It provides an indication of the content of the Registered Children's Nurse Education programme in terms of topics and gives no indication of the weighting of each topic in the curriculum. The indicative content listing consists of the following topic areas:

1. Foundations of contemporary children's nursing
2. The art and science of children's nursing
3. Children's nursing practice
4. Psychology as applied to children's nursing practice
5. The child in health and illness
6. Child and family health promotion
7. Communication and interpersonal skills for children's nursing
8. Professional and personal development of the children's nurse

## Foundations of Contemporary Children's Nursing

- The development of children's nursing including the historical, contemporary, political, social, economic, legal, professional, educational, cultural and international factors influencing its development.
- Evolution and development of the role of the children's nurse.
- Demographic profile and changing trends in child health care.
- The health and social services available to the child and family in relation to access, entitlements and provisions.
- Current national and international child and family health issues, policies and initiatives.

## The Art and Science of Children's Nursing

- Definitions and conceptualisations of children's nursing practices including child and family centred care.
- Philosophical and theoretical foundations of key concepts underpinning children's nursing practice including children's nursing models.
- Sources of knowledge underpinning children's nursing practice.
- Process of developing children's nursing knowledge and practice through review, reflection and research.
- The application and utilisation of a systematic approach to nursing care including assessment/ identification of needs, planning, prioritising, facilitating, delivering and negotiating the delivery of care and evaluating nursing care for all children.

## Children's Nursing Practice

- Informed evidence-based, safe, and holistic nursing practice in a primary, emergency and acute care, life-threatening illness, chronic illness, palliative and terminal care settings.
- The nurse's role, responsibility and practice related to diagnostic investigations, methods of treatment including drug therapy, curative, palliative and terminal aspects of care.
- The ability to be responsible and flexible in meeting the identified needs of the child and family and to integrate these needs into care, discharge planning and support in dying and death.
- Process of developing nursing practice in partnership with children and families in relation to performing, assisting, supporting, educating and rehabilitating the individual at all ages in hospital, community and home care settings.
- Awareness of complementary and alternative therapies for the child in hospital and other appropriate care settings.

## Psychology as Applied to Children's Nursing Practice

- Developmental psychology.
- Behavioural psychology.
- Social psychology.
- Health and illness psychology relating to children.
- Play and education as a developmental and therapeutic activity.
- Impact of illness, disability, and hospitalisation for children and families.

## The Child in Health and Illness

- The process of development from conception to childhood and the genetic and environmental factors influencing each developmental phase.
- The bio/psycho/socio/economic/cultural/spiritual and political factors influencing the development of the child and his/her experience of health and illness.
- The nature of disease and pathological processes and how they alter normal function and activities of living of the child.
- The unique world of the child and family and the nursing responsibility and practice in relation to children with chronic and life limiting illness, learning/physical/intellectual disability and mental health problems and vulnerable children including disadvantaged and ethnic/cultural minorities.

- Caring for children and their families in a multicultural society.
- The importance of play/therapeutic play and education in childhood.
- The affects of illness and hospitalisation on the child and family.

## Child and Family Health Promotion

- Concepts of child and family health and well being, illness, disease and disability.
- Models and approaches to health promotion and public health.
- Demographic and epidemiological trends in child health and illness.
- Local, national and international strategies and policies influencing child health.
- Contemporary issues in protection and welfare of children.
- Factors affecting child and family health including social, cultural, gender, environment, political and economic factors.
- Factors affecting fetal and maternal health and wellbeing.
- The unique role and skills of the children's nurse in assessing planning, facilitating and evaluating healthy life targets in partnership with the child and family.
- The role of the children's nurse in health promotion and health education, and the application of the principles of health promotion and health education for children and their families.
- The education and empowerment of children and families in achieving optimum health status.

## Communication and Interpersonal Skills for Children's Nursing

- Self-awareness, exploration of the impact of personal beliefs, values, attitudes and feelings and their impact on interactions.
- Development of age appropriate interpersonal, cross cultural and communication techniques and skills essential for therapeutic relationships with children and families according to age, ethnicity, disability and impairment.
- The establishment of effective professional relationships by communicating, collaborating and liaising with child, family and person(s) significant in the child's life, nursing colleagues and members of the multidisciplinary healthcare team.
- Development of verbal and written skills in relation to information giving, teaching and presentation of health information and maintaining clinical nursing records.

- Creating and contributing to a work environment supportive of teaching and learning, through preceptorship, clinical supervision and mentorship.
- The role of counselling skills and their application to the child.
- Pastoral care and philosophical foundations of spiritual well being, loss and grief, bereavement, dying and death.

## Professional and Personal Development of the Children's Nurse

- Self-directed learning skills, critical thinking/reasoning skills and decision-making skills in nursing as the foundation for life-long professional education, maintaining competency and career development.
- The scope of children's nursing practice as defined by the profession, legislation and ethical codes and values.
- Legal and ethical issues relevant to the health care of children.
- The professional behaviour and conduct of the children's nurse in relation to accountability, confidentiality and advocacy.
- Delivery of a nursing care service that is family-centred in all health care settings, which is responsive and flexible to changing needs of the child, families, the community and society.
- Process of developing nursing practice and ensuring quality care including audit/quality improvement mechanisms.
- Multi-disciplinary team functioning and differing role boundaries including the role of formal and informal carers.
- The promotion and protection of children's rights and their incorporation into national and international health care policies.
- The fostering of a supportive clinical work environment that facilitates self-determination, teaching and assessing, effective coping skills, professional and safe standards of care.
- Current issues in personal and professional development.

# THEORETICAL AND CLINICAL INSTRUCTION

## Children's Nursing Post-registration Programme: Standards and Requirements

### Theoretical Instruction

In the case of the post-registration programme there must be 12 weeks of theoretical instruction given.

### Clinical Instruction

The following is the number of weeks to be spent in the different aspects of clinical instruction over the fifty-two weeks of the post-registration programme:

| Clinical Instruction  | Number of weeks |
|---|-----------------|
| Nursing children with medical/surgical disorders (including nursing infants under 1 year)             | 22              |
| Nursing children in Accident and Emergency (including outpatient department)                          | 4               |
| Nursing children requiring high-dependency care   | 2               |
| Specialist placements*<br>Operating theatre<br>Maternity care<br>Intellectual disability<br>Community | 8               |
| <b>Total</b>  | <b>36</b>       |

Clinical = 36 weeks  
Theory = 12 weeks  
Holidays = 4 weeks

\*Should a student have obtained the clinical experience in a previous training course registered by the NMBI for the candidate it is not necessary to repeat such experience. These weeks must be incorporated into the clinical instruction weeks.

Following any interruption in the educational programme the third level institution in partnership with health care institutions ensures that the student meets the programme requirements. Interruption means any leave (other than annual leave and bank holidays) including sick leave, maternity leave, paternity leave, parenting leave, compassionate leave and special leave.