



Accreditation Project Consultation Questionnaire

July 2008

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Organisation Represented Australian Nursing Federation, Federal Office

Date Sent to ANMC: 9 September 2008

[Date Received ANMC]:

Please indicate which profession-specific document you are providing feedback on (please complete a **separate questionnaire** for each document **if you are responding to more than one**):

Registered Nurses

Nurse Practitioners

Midwives

Enrolled Nurses

Questionnaire

1. Is the overall format of the Standards and Criteria clear and easy to understand? Please comment

Yes.

2. Are the Standard statements clear and easy to understand? Please comment.

Yes

3. Are the Statements of Intent clear and easy to understand? Please comment.

Yes

4. Are the Criteria clear and easy to understand? Please comment.

Yes, although there is overlap/duplication in one criteria in Standard One and Standard Eight.

5. Are the criteria congruent with the standard statements and the statements of intent? Please comment?

Yes

6. Is the Explanation of Terms clear and easy to understand? Please comment.

Yes, in the most part.

As this section is at the end of the document, it would be helpful for terms to be referenced to the explanation of terms when they first arise in the document so that it can be used as a progressive reference.

The term professional experience placement is confusing given most people would use the terminology "clinical placement". See question 8 for further discussion.

Competence – the term decision making framework should be used before using the DMF acronym.

Consumer – the last word of the final sentence should be changed from ‘personnel’ to ‘professionals’.

Cultural security – the last sentence of the first paragraph should read ‘...that no one person is afforded a less favourable outcome because of the cultural outlook they hold.’ This change is suggested to avoid locating one cultural outlook as ‘different’ or ‘the other’.

Education provider – should remove reference to ‘a recognised training organisation (RTO)’ for these Standards as RTO’s do not prepare nurse practitioners.

Procedural fairness – dot point 2 – should be amended to ‘...a fair opportunity to prepare for, and answer ...’

Supervision/support – delete ‘for instance’.

7. Are there any terms missing from the Explanation of Terms?

No

8. Other general comments, if any:

The Draft National Accreditation Standards and Criteria for Nurse Practitioners are well presented and organised.

The ANF does have concerns regarding the use of the term “professional experience” in Standards Four, Six and Eight. Whilst it is appreciated that this term may be intended to include the breadth of professional domains of nursing and therefore the professional experiences that students may have in the course of their studies, use of this term and the related standards are not sufficiently clear in articulating the requirements for **actual clinical experience**.

The discussion relating to Standard One states that “*professional experience can be gained in a variety of different environments. These may include areas that are under-supplied by health professionals such as general practice, rural and remote health clinics, and community health settings*” (p.23)

While we acknowledge that these nurses already practice at an advanced level, they should not be placed in settings where they do not have the clinical supervision and support.

Professional experience must not replace or be offered in lieu of any clinical learning which is required for students to achieve the graduate competency outcomes. The Standards should clearly articulate the need for course providers to demonstrate how students will be provided with sufficient and appropriate clinical experience opportunities to achieve the graduate competency outcomes required for effective and safe practice as a nurse practitioner.

Feedback Template

Please use this table to provide any comments on specific aspects of the document to which you are responding.

	Suggested Changes to Standard Statement	Suggested Changes to Statement of Intent	Suggested Changes to Criteria (please indicate by number)	General Comments
Standard 1			<p>3. This point should require education providers to demonstrate <i>their processes for</i> course development, monitoring, review, evaluation, and quality improvement.</p> <p>6. Should detail that the students have these facilities and resources ‘provided’ and that they would not be expected to fund or subsidise the opportunity to participate in clinical placements.</p> <p>7. It is unclear what is meant by ‘requirements’ in this point, or whether the ‘requirements’ are related to the ‘formal agreements’ – the intention here needs to be articulated more clearly.</p> <p>9. The requirements of regulatory authorities for approval of credit transfer and RPL should be more explicit, including the requirement for course providers to provide evidence of their policies regarding RPL.</p>	<p>Some health services are charging providers for clinical placement. These costs should not be passed on to the student by the providers as additional fees or charges.</p>

			<p>12. As above, course providers need to demonstrate <i>their processes for</i> monitoring of staff performance and ongoing staff development etc</p> <p>There should also be an additional requirement for course providers to demonstrate that their staff are, as well as how they are, provided with sufficient and appropriate supports and resources to deliver the course fully, i.e. to enable students to meet graduate outcomes.</p>	
Standard 2		Should read 'That staff are appropriately qualified ...'	Staff also need to be able to demonstrate recency and currency of theoretical and clinical knowledge and practice. This needs to be required explicitly in the criteria.	
Standard 3			Admission criteria point b) – 'requisite education and/or extensive experience in a specialty field' is more appropriate as there are fields that do not have education programs that are deemed equivalent.	Point a)- The use of a minimum of 3 years full time employment (FTE) can discriminate against those with parental/family obligations, study needs or those

				that cannot access full time work (+/- rural/remote areas). Should consider use of definition of FTE – working a minimum number of hours (ie 24 per week) or replace reference to FTE with a minimum of 24 hours per week.
Standard 4			1. Minimum qualification must be a Master of nurse practitioner practice or equivalent 3. Clinical placements <i>should not just complement</i> the academic content of the course, but should be overtly correlated to theoretical studies and should incrementally prepare student to meet approved competencies and graduate outcomes.	
Standard 5				
Standard 6				

Standard 7			5. It is not sufficient to state only 'quality' of assessors etc. Course providers must demonstrate that assessors are both appropriately qualified and experienced so that they may be able to undertake quality assessments.	This section could include some reference to the use of student feedback regarding the curriculum and assessment by the course provider to review course content.
Standard 8	Professional experience – see general comments.		1. Clinical placements <i>should not just complement</i> the learning activities, but should be overtly correlated to theoretical studies and should incrementally prepare student to meet approved competencies and graduate outcomes. 4. This criteria is duplicated in Standard 1 criteria 7.	
Standard 9	The role in research of nurse practitioners should be strengthened as these nurses are clinical leaders.		Criteria should be added to indicate that nurse practitioners are clinical leaders and mentors.	

Thank you for your valuable feedback.