

ANMF Submission to ANMAC consultation

# REVIEW OF REGISTERED NURSE ACCREDITATION STANDARDS CONSULTATION PAPER 3

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Nursing &  
Midwifery  
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## INTRODUCTION

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The ANMF is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of 275,000 nurses, midwives and carers across the country.

Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.

Our strong and growing membership and integrated role as both a professional and industrial organisation provide us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.

Through our work with members we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.

As the largest professional organisation for nurses and midwives in Australia, the ANMF has, on behalf of our members, a genuine interest in, and concern for, matters relating to the education of our professions. We therefore have contributed significantly, and continue to do so, to a range of committees and working groups at national and jurisdictional levels, which relate to the design, accreditation and evaluation of education programs for nurses, midwives and assistants in nursing.



## General Comments

Nursing is a complex and demanding profession. The educational preparation for such a profession must therefore be rigorous, with a skilful mix of theory and clinical practice experience. The standards for accrediting education programs leading to registration of nurses likewise must be designed to ensure a beginning practitioner who is safe and capable for practice, in whatever setting health and aged care are delivered.

## Background

The ANMF has made submissions to the two previous consultations on the Review of the Registered Nurse Accreditation Standards and note there are a number of matters recommended to ANMAC in those previous submissions that have not been included in the updated version of the standards. One of significant concern is that of quality professional experience placement.

### Professional experience placement hours

The ANMF re-states the following from our submission to the Review of Registered Nurse Accreditation Standards, Consultation Paper 2<sup>i</sup> specifically pertaining to professional experience placements:

*The professional experience placement is an area about which our members express concern. The provision of high quality professional experience placements throughout the undergraduate program is essential in preparing students to transition into employment. There are two parts to ensuring quality professional experience placements: firstly, that the accreditation standards ensure the curriculum shows quality policies and processes are in place, and secondly, evidence that these are being appropriately implemented. The latter also needs to be addressed through monitoring processes by ANMAC.*

*The ANMF is aware of situations where undergraduate nursing students have been required to attend clinical placements that offer the student little or no professional experience placement. Specifically, some placement localities are not appropriate to meet any part of the undergraduate curricula. For example, a number of nursing students in Adelaide spent valuable clinical placement hours in a Salvation Army opportunity shop with no clinical objectives for this placement.*

*Other members have experienced situations where although students have not met the learning outcomes for the placement, the clinical placement assessor is strongly advised by the education provider not to fail the student. Some recently graduated ANMF members have indicated that there was not enough clinical placement hours or that the undergraduate program did not enable them to enter the workforce 'work ready'.*



*Achieving quality professional experience placements is difficult. The ANMF acknowledges that the space education providers have to compete in to negotiate quality clinical placements is both onerous and complex, and is driven by a number of factors<sup>ii</sup>. This complex situation has been further compounded by the recent changes to university places, resulting in significant increases in student numbers, and therefore the number of student clinical placements required. Nonetheless, every undergraduate nursing student must achieve his or her learning objectives that align to the course content.*

## **Theory to practice**

*A recent study completed in Australia recommended that appropriate sequencing of clinical experience in relation to theory, consistency of venue, and preparation for the health setting, were important in providing quality placements for students<sup>iii</sup>. The ANMF supports these findings. Students must be able to link the theory they are learning with the practical setting as well as feel a part of the context within which they are working. The communication interface between the health setting and the education provider, prior, during, and after student clinical placement, also has to be clear and comprehensive to enable links to be identified between theory and practice. This should include providing the health setting with the necessary information about the students attending clinical placement, their objectives for the placement, and all relevant paperwork.*

## **Service agreement**

*There is an increasing trend for health services to provide the clinical education support for students within their clinical settings at a charge to the education provider. Our members have expressed concern that at times this agreement has not necessarily been in the best interest of students. The ANMF contends the accreditation standards should require education providers and health services using this model to establish a contract that clearly states, inter alia, the model of clinical support being provided, the ratio of students to clinical educator, the minimum qualifications of the educator, and a clear process for conflict resolution and/or escalating concerns.*

*The service agreements between education providers and clinical placement providers must articulate that students will be mentored and guided in their experience by a supervisory role undertaken by a registered nurse, including delegation and evaluation of care. The agreement also requires collaborative communication between the education providers and placement providers to promote continuity of the learning experience for the student.*



## Clinical support

*Effective clinical support is an essential element to a quality-learning environment. Undergraduate nursing students require timely clinical support from registered nurses who are equipped to support their learning and who are familiar with educational principles. Undergraduate students must therefore have access to preceptors, clinical support nurses and nurse educators. The accreditation standards must provide a framework for the education providers to ensure such clinical support is provided. Additionally, the accreditation standards must include measures for ensuring the clinical placement environment fosters a safe and positive learning culture, which is led by strong clinical leadership. A quality learning culture is demonstrated by ensuring learning is prioritised, and as part of that, undergraduate students are provided appropriate workloads and access to timely clinical support. Our members have expressed concern that at times there is no facilitator available to students.*

*It is essential that clinical facilitators/preceptors or buddies are experienced registered nurses who understand the importance of reflective practice and are able to provide appropriate feedback. Some student members have expressed that they do not receive feedback in a timely and effective manner.*

*Many of our members also report that when their facility receives students for clinical placement, the facilitation of that placement impacts upon the quality of care. Clinical nurses providing support are often not provided with the necessary provisions by the education provider, including the supernumerary staff required, to enable a positive learning experience for the students. The provision of clinical education support to students and nursing staff who are the 'buddy' or preceptor is a key requirement for an educationally meaningful placement.*

## Staffing and skills mix

*Another feature of a quality clinical learning environment, often overlooked, is the staffing and skills mix in the area where the student is completing their placement. There can often be haphazard provision of facilitators to support the students on placement.*

ANMF members have provided examples where the registered nurse (clinical support staff or facilitator) who is responsible for supervision of student's on placement in a health service, is unable to provide quality support due to insufficient staff numbers in the clinical areas, or, to oversight students over a number of campuses. The number and timing of student placement may also present difficulties, especially if coinciding with commencement of new graduates or students from other professional disciplines. The best outcomes will be achieved when student and staff support is appropriately resourced.



The accreditation standards must address the requirements for quality professional experience placements. As identified in our submission to the first and second ANMAC consultation papers, the ANMF supports the Best Practice Clinical Learning Environment Framework (BPCLEF) as a comprehensive, evidence-based framework. This framework could be effectively used as an established outcome based best practice principles document for professional experience placements.

Considering these concerns outlined above, the ANMF is disappointed that ANMAC has chosen not to test a solution with the profession in providing quality professional experience placement in this third consultation paper. Instead, ANMAC has chosen to wait for the outcomes of the *Review of Nursing Education 2019*. As the contracted regulator for nursing and midwifery education leading to registration, the ANMF strongly encourages ANMAC to be the leader in this area of expertise and provide an innovative solution for the complex issues facing the profession regarding quality professional experience placement.

The ANMF suggests that the solution to improving professional experience placement is twofold: to increase the minimum required hours and improve the quality of the placement. The following changes are essential in improving the student's experience of professional experience placements:

- The professional experience placement minimum hours is increased from 800 to at least 900 hours.
- Increased regulation is applied to all areas of professional experience placement including:
  - the use of the Best Practice Clinical Learning Environment Framework (BPCLEF)<sup>iv</sup>. This framework could be effectively used as an established outcome based best practice principles document for professional experience placements;
  - the accreditation standards needing to state clear expected minimum requirements for providing quality professional experience placement (as outlined in the submission below);
  - consideration of accreditation of health service providers to conduct professional experience placement;
  - conducting extensive monitoring on approved programs to ensure the professional experience placements are being conducted as per the approved curriculum.
- Conducting independent research to explore the issues of professional experience placement and provide future solutions.



## Proposed Registered Nurse Accreditation Standards

### Standard 1: Safety of the public

- The words 'before course commencement' should be added to 1.6 under point (b) to provide further clarity regarding the entry requirements for English language skills. Item 1.6 should state the following:  
*1.6 Program admission requirements are fair, equitable and transparent. Before accepting an offer of enrolment applicants must:*
  - a) meet the program's inherent requirements*
  - b) provide evidence of meeting the NMBA's English language skills registration standard **before course commencement**.*
  - c) be informed of NMBA registration requirements.*
- The order of standard 1 needs to be changed. 1.6 should swap with item 1.3 to provide a more logical order within the standard.

### Standard 2: Governance

- In point 2.4, 'approved by ANMAC' should be added. The new 2.4 should state the following:  
*2.4 All entry pathways for which students receive block credit or advanced standing (other than on an individual basis) are identified, **approved by ANMAC** and allow graduates to meet the Registered Nurse standards for practice.*
- In 2.5 the terms 'and aged' need to be added to item (e):  
e) evidence-based developments in health **and aged care**.
- The ANMF also suggests the inclusion of standard 1.9 from the *2017 ANMAC Enrolled Nurse Accreditation Standards* be included in this section. This standard states the following:

**The education provider must provide evidence of governance arrangements between the education provider and health service providers to monitor students' learning and teaching when undertaking professional experience placement including, but not limited to, clinical teaching, supervision and assessment.**



### Standard 3: Program of study

- In point 3.7 'medicines' needs to be added:  
*3.7 Program content and subject learning outcomes prepares students to supply medicines under a structured prescribing arrangement.*
- As outlined previously in this submission, the ANMF suggests that the minimum professional experience placement hours should be increased to 900 hours. Further, considering the current concerns with professional experience placement, the ANMF recommend that these 900 hours are only completed within the Australian context. The new 3.10 (a) should state the following:
- *3.10 The program includes:*
  - a) a minimum of ~~800~~ 900 hours of professional experience placement, exclusive of simulation, and within the Australian context. and not exceeding 130 hours (one sixth) undertaken outside Australia*
  - In regard to 3.10 item (b), the ANMF suggests that it is not enough to only state contractual arrangements, further detail needs to be included in this item to provide clearer expectations of the arrangement for both the education provider and the health service. Item 3.10 (b) should state the following:*
    - b) professional experience placements **that are** underpinned by contractual arrangements between education providers and placement providers. **The contract outlines the model of support used, such as the Best Practice Clinical Learning Environment Framework that will be used to facilitate student learning and provide clear expectations for both the education provider and health service.***
- Support needs to be deleted from point 3.11.  
3.11 Program resources are sufficient to facilitate ~~support~~ student achievement of the Registered Nurse Standards for Practice, with attention to human, physical and financial resources supporting all teaching and learning environments, including simulated practice and professional experience placements.
- The ANMF suggests the following additional item is added as item 3.12:  
**Theory taught outside of the Australian context cannot exceed the equivalent of a total of three months of the total program and must be equivalent in terms of subject and objectives, learning outcomes and assessment.**



## Standard 4: Student experience

- Criteria 3.9 is an essential criterion in the current Registered Nurse Accreditation Standards and it needs to be included in the next version of the standards. It states the following: ***The program provider demonstrates extended professional practice experience towards the end of the program to consolidate the acquisition of competence and facilitate transition to practice. A summative assessment is made at this time against the Registered nurse standards for practice in the clinical setting.***

This criterion must be retained and added as point 4.8.

## Glossary

The following changes need to be made to the definition of simulated learning:

*Simulated learning – refers to a variety of activities using patient simulators, including devices, trained persons, lifelike virtual environments, and role-playing. **Simulated learning** SBE experiences strengthen or mimic ~~or replace~~ real-life clinical situations. **Simulated learning** SBE aims to enable students to reason through a clinical problem and make decisions, without compromising patient wellbeing.*



## CONCLUSION

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Thank you for the opportunity to provide a submission to the discussion paper- Review of the *Registered Nurse Accreditation Standards, Consultation paper 3*. The ANMF looks forward to being able to contribute further in the next stage of the registered nurse accreditation standards review, including the development of the evidence guide that will be the accompanying document to these standards.

### References

- i. Australian Nursing and Midwifery Federation (2018) Submission: Review of the Registered Nurse Accreditation standards consultation paper 2. [http://anmf.org.au/documents/submissions/ANMF\\_Submission\\_ANMAC\\_RN\\_AccreditationStandards\\_ConsultationPaper2\\_July2018.pdf](http://anmf.org.au/documents/submissions/ANMF_Submission_ANMAC_RN_AccreditationStandards_ConsultationPaper2_July2018.pdf)
- ii. Birks, M., Bagley, T., Park, T., Burkot, C. and Mills, J. (2017) The impact of clinical placement model on learning in nursing: A descriptive exploratory study. *Australian Journal of Advanced Nursing*. Vol 34, Issue 3.
- iii. Birks, M., Bagley, T., Park, T., Burkot, C. and Mills, J. (2017) The impact of clinical placement model on learning in nursing: A descriptive exploratory study. *Australian Journal of Advanced Nursing*. Vol 34, Issue 3.
- iv. Best Practice Clinical Learning Environment Framework [https://bpacletool.net.au/media/medialibrary/2016/09/BPCLE\\_Framework\\_Aug\\_2016.pdf](https://bpacletool.net.au/media/medialibrary/2016/09/BPCLE_Framework_Aug_2016.pdf)