



Australian  
**Nursing & Midwifery**  
Accreditation Council

# Registered Nurse Accreditation Standards 2019

Essential Evidence

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Published by the Australian Nursing and Midwifery Accreditation Council (ANMAC), Canberra, 2019.

This document is online at

<https://www.anmac.org.au/search/publication>

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## Acknowledgements

The Board of the Australian Nursing and Midwifery Accreditation Council (ANMAC) gratefully acknowledges the expertise, time and commitment contributed by each member of the Professional Reference Group (PRG), ANMAC staff and stakeholders who contributed to the development of the Essential Evidence companion document for the Registered Nurse Accreditation Standards 2019.

# 1. Introduction

## 1.1 Essential evidence

This is a companion document to the standards themselves—Registered Nurse Accreditation Standards 2019. This companion document provides information to education providers about evidence they need to submit to demonstrate their program of study meets the standards. Education providers applying for program accreditation are required to provide all stated essential evidence in conjunction with their Registered Nurse Accreditation Standards 2019 Application Pack.

*All elements of the Essential Evidence must be submitted – additional evidence may be requested by the Assessment Team.*

## 1.2 Registered Nurse Accreditation Standards

The Registered Nurse Accreditation Standards are principally designed for use by education providers seeking accreditation for an entry to practice Registered Nurse program (Bachelor or Masters degree).

ANMAC evaluates these programs against the Standards before making recommendations to the Nursing and Midwifery Board of Australia (NMBA) in line with sections 48 and 49 of the schedule in the *Health Practitioner Regulation National Law Act 2009* (the National Law).

The Standards specify the minimum requirements that education providers must meet for ANMAC to accredit their program of study. Graduates of Australian programs must complete a program of study that is accredited by ANMAC and approved by the NMBA to be eligible to apply for registration with the NMBA.

## 1.3 Glossary

Glossary terms in the Registered Nurse Accreditation Standards 2019 and in the Essential Evidence companion document appear in ANMAC's online glossary. It is available on ANMAC's website (<https://www.anmac.org.au/glossary>).

## 2. Essential evidence

### Standard 1: Safety of the public

STANDARD 1	ESSENTIAL EVIDENCE
<p><b>1.1 The program’s guiding principle is safety of the public.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document with a clear and detailed explanation of the principle of public safety in the program’s conceptual framework.</li> <li>• Mapping of current National Safety and Quality Health Services Standards (1) and current Aged Care Quality Standards (2) within the program.</li> </ul>
<p><b>1.2 The program is delivered in Australia<sup>1</sup> to prepare graduates for safe and ethical practice.</b></p>	<ul style="list-style-type: none"> <li>• Evidence of where the Nursing and Midwifery Board of Australia’s (NMBA) professional standards are introduced, included and scaffolded across the program, including codes of conduct, standards for practice and codes of ethics.</li> <li>• Policies and procedures guiding student performance, conduct, ethical and professional behaviour in all settings.</li> </ul>
<p><b>1.3 The program’s admission requirements are fair, equitable and transparent. Before making an offer for enrolment, education providers inform applicants of the requirements to:</b></p> <p><b>a. meet the program’s inherent requirements</b></p>	<ul style="list-style-type: none"> <li>• Admission policy.</li> <li>• Inherent requirements policy.</li> <li>• Affirmative action strategies in place to enrol, support and retain Aboriginal and Torres Strait Islander students.</li> <li>• Program application information.</li> <li>• Screen shot of the education provider’s website showing program admission requirements.</li> </ul>
<p><b>b. demonstrate English language proficiency either by providing a written declaration that English is their primary language or evidence that they have achieved the minimum English language test results as specified in the Nursing and Midwifery Board of Australia’s (NMBA) English language skills registration standard (3)</b></p>	<ul style="list-style-type: none"> <li>• Information provided to students before enrolment, that:               <ul style="list-style-type: none"> <li>» clearly states English language entry requirements</li> </ul> </li> <li>• Policies and procedures for recording students’ English language assessment test results.</li> <li>• Template for student declaration where English is the primary language.</li> </ul>

<sup>1</sup> Except as it relates to criteria 2.4 and 3.1.

STANDARD 1	ESSENTIAL EVIDENCE
<p>c. meet the requirements of health services where professional experience placements (PEP) occur</p>	<ul style="list-style-type: none"> <li>• Information provided to students before enrolment, that lists health service provider requirements for undertaking PEP (for example, immunisation, criminal history checking).</li> </ul>
<p>d. register with the NMBA on program completion.</p>	<ul style="list-style-type: none"> <li>• Information provided to students before enrolment, that includes NMBA registration standards.</li> </ul>
<p>1.4 The education provider ensures that organisations in which students undertake PEP have:</p> <p>a. evidence-based quality and safety policies and processes that meet relevant jurisdictional requirements and standards</p>	<ul style="list-style-type: none"> <li>• Policies and procedures relating to risk management and safety in PEP, addressing: <ul style="list-style-type: none"> <li>» risk assessing clinical learning environments before student PEP</li> <li>» reporting when a clinical learning environment or student practice is considered inappropriate or unsafe</li> <li>» ensuring the minimum qualifications required of clinical staff supervising students</li> <li>» ensuring the ratio of nursing students to supervising registered nurses.</li> </ul> </li> </ul> <p><i>NB: Criterion 1.4—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for ‘quality PEP’ assessment.</i></p>
<p>b. registered nurses who are prepared for the supervisory role and able to supervise and assess students during all PEP</p>	<ul style="list-style-type: none"> <li>• Documented processes and examples for: <ul style="list-style-type: none"> <li>» preparing students to use and appraise organisational policies and procedures during PEP</li> <li>» preparing and supporting preceptors (registered nurses supervising students) to engage students in organisational policies and evidence-based practice</li> <li>» providing students and clinical supervisors with relevant risk management and safety information and details of PEP supervision models (for example, PEP handbook, log and/or portfolio, PEP Guide for Clinical Agencies and/or Clinical Facilitators)</li> <li>» informing clinical facilitators about their roles and responsibilities on PEP, if employed by the education provider (for example, position description).</li> </ul> </li> </ul>

STANDARD 1	ESSENTIAL EVIDENCE
<p>c. relevant registered health practitioners available to support collaborative teaching and learning opportunities in interprofessional settings.</p>	<ul style="list-style-type: none"> <li>• Policies and procedures relating to risk management and safety in PEP, addressing:               <ul style="list-style-type: none"> <li>» supporting interprofessional teaching and learning by relevant registered health professionals during PEP.</li> </ul> </li> </ul>
<p>1.5 Students are registered with the NMBA before starting their first PEP (4).</p>	<ul style="list-style-type: none"> <li>• Details of internal (school/department) processes for ensuring students are registered with the NMBA before PEP.</li> <li>• Documented information provided to students about NMBA student registration (for example, student handbook, program materials and program website).</li> </ul>
<p>1.6 The education provider has processes in place to manage students with identified impairments that, in the course of PEP, may place the public at risk. These processes include procedures for mandatory reporting (5) where required.</p>	<ul style="list-style-type: none"> <li>• Policies and processes for managing identified or reported student impairments</li> <li>• Documented procedures for mandatory reporting to the NMBA under the National Law.</li> </ul>
<p>1.7 The program’s progression policies and rules ensure that only students who have demonstrated the requisite knowledge and skills required for safe practice are eligible for PEP.</p>	<ul style="list-style-type: none"> <li>• Policies, procedures and guidelines to assess student competence to attend PEP.</li> <li>• Course progression rules specific to the program of study, readily available and accessible to students.</li> <li>• Pre-placement checklist verifying students’ right of entry to PEP.</li> <li>• Examples of assessments undertaken by students before each scheduled PEP.</li> <li>• Complaint and appeal policy and procedure.</li> </ul> <p><b>NB:</b> Criterion 1.7—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for ‘quality PEP’ assessment.</p>



## Standard 2: Governance

STANDARD 2	ESSENTIAL EVIDENCE
<p><b>2.1 The academic governance arrangements for the program of study include current registration by the Tertiary Education Quality and Standards Agency as an Australian university or other higher education provider.</b></p>	<ul style="list-style-type: none"> <li>• Details/diagram of the academic governance arrangements for the program of study.</li> <li>• Screen shot of the education provider's registration on the Tertiary Education Quality and Standards Agency (TEQSA) national register of higher education providers.</li> <li>• A response report addressing any conditions that TEQSA has applied.</li> </ul>
<p><b>2.2 The education provider conducting the program has a governance structure that ensures the head of discipline is a registered nurse with the NMBA, with no conditions or undertakings on their registration relating to performance or conduct and holds a relevant post-graduate qualification. The head of discipline is responsible for:</b></p> <p><b>a. academic oversight of the program</b></p>	<ul style="list-style-type: none"> <li>• Organisational charts of the education provider conducting the program with reporting lines encompassing program governance and oversight.</li> <li>• Details/diagrams of reporting relationships and committee structures demonstrating academic oversight of the nursing program</li> <li>• Governance arrangement between the university or higher education provider and the school that ensure responsiveness to accreditation requirements for ongoing compliance with accreditation standards.</li> <li>• Head of discipline's position descriptions demonstrating:               <ul style="list-style-type: none"> <li>» reporting relationships</li> <li>» roles and responsibilities.</li> </ul> </li> <li>• Head of discipline's curriculum vitae with evidence of:               <ul style="list-style-type: none"> <li>» NMBA registration (with no conditions or undertakings)—screenshot</li> <li>» relevant post graduate qualifications.</li> </ul> </li> <li>• Head of discipline's details included in the ANMAC Staff Matrix Template.</li> </ul>
<p><b>b. promoting high-quality teaching and learning experiences for students to enable graduate competence</b></p>	<ul style="list-style-type: none"> <li>• Details of reporting relationships promoting high quality teaching and learning experiences for students</li> <li>• Staff performance and appraisal policy.</li> </ul>
<p><b>c. ensuring staff and students are adequately indemnified for relevant activities undertaken as part of program requirements.</b></p>	<ul style="list-style-type: none"> <li>• Insurance policy and indemnification certificate covering activities undertaken as part of program requirements.</li> </ul>

## STANDARD 2

## ESSENTIAL EVIDENCE

**2.3 The education provider undertakes consultation into the design and ongoing management of the program from external representatives of the nursing profession, including Aboriginal and/or Torres Strait Islander peoples, consumers, students, carers and other relevant stakeholders.**

- Committee structures with reporting lines, relevant to the program of study.
- Terms of reference for advisory committees listing stakeholder membership, inclusive of industry partners where students undertake PEP and notes on each member's position and represented organisation.
- Schedule for meetings and/or consultations relevant to the program.
- Agendas, meeting minutes, list of attendees, their contributions and actions arising from consultation relevant to program design and management.

***NB:** Criterion 2.3—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for 'quality PEP' assessment.*

**2.4 All program 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 NMBA Registered nurse standards for practice (6).**

- Documented processes verifying all students entering the program through an enrolled nurse pathway hold NMBA registration as an enrolled nurse.
- Curriculum document and program information identifying all program entry pathways and associated admission criteria.
- Credit transfer and Recognition of Prior Learning policy and procedure aligning with the Australian Qualifications Framework's Qualifications Pathway Policy.
- Description of how staff will apply the credit policy to the registered nurse program.
- Rationale for block credit.
- Mapping that demonstrates how graduates from each pathway will meet the Registered nurse standards for practice.

STANDARD 2	ESSENTIAL EVIDENCE
<p><b>2.5 The program’s quality improvement mechanisms incorporate evaluation information from a variety of sources and address:</b></p> <p><b>a. risk assessment of student learning environments</b></p>	<ul style="list-style-type: none"> <li>• Program report (for example, an annual program dashboard).</li> <li>• Quality improvement framework, including risk assessment policy or processes for academic, simulated and clinical (PEP) learning and teaching environments</li> </ul> <p><i><b>NB:</b> Criterion 2.5—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for ‘quality PEP’ assessment.</i></p>
<p><b>b. student evaluations</b></p>	<ul style="list-style-type: none"> <li>• Quality improvement framework, including analysis reports arising from surveys identifying outcomes and program quality improvements</li> </ul>
<p><b>c. internal and external, academic and health professional evaluations</b></p>	<ul style="list-style-type: none"> <li>• Quality improvement framework, including: <ul style="list-style-type: none"> <li>» schedules for subject and PEP surveys and/or evaluations (staff, students and industry partners) that may include, or be in addition to, TEQSA student evaluation requirements</li> <li>» terms of reference of any relevant school committee or group that is responsible for developing, monitoring, reviewing or quality improving the program</li> </ul> </li> </ul>
<p><b>d. evidence-based developments in health professional education</b></p>	<ul style="list-style-type: none"> <li>• Demonstrated staff access to research databases and/or journals to inform understanding of developments in: <ul style="list-style-type: none"> <li>» health professional education</li> <li>» health and health care.</li> </ul> </li> </ul>
<p><b>e. evidence-based developments in health and health care.</b></p>	<ul style="list-style-type: none"> <li>• Demonstrated staff opportunities for program quality improvement activities, including staff professional development plan and conferences.</li> </ul>

## Standard 3: Program of study

STANDARD 3	ESSENTIAL EVIDENCE
<p><b>3.1 The program of study is undertaken in Australia. Where there is an offshore component, it is required to:</b></p> <p><b>a. be no more than one-sixth of the full program completed offshore</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document including mapping of the program's structure across three years and:               <ul style="list-style-type: none"> <li>» details of any offshore study component, including:                   <ul style="list-style-type: none"> <li>- when and where offshore study is planned</li> <li>- duration of offshore study</li> <li>- types of offshore learning environments</li> </ul> </li> <li>» details of how the offshore study component meets the requirements in ANMAC's Explanatory Note: Offshore Components in Accredited Australian Programs of Study for Registered Nurses and Midwives (7).</li> </ul> </li> </ul> <p>See also Criterion 3.12.</p>
<p><b>b. demonstrate equivalence of learning outcomes.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document including mapping of the program's structure across three years and:               <ul style="list-style-type: none"> <li>» details of any offshore study component, including:                   <ul style="list-style-type: none"> <li>- map of equivalent subject learning outcomes students must demonstrate if undertaking onshore or offshore study</li> </ul> </li> </ul> </li> </ul> <p>See also Criterion 3.12.</p>
<p><b>3.2 The program of study is delivered at an Australian Qualifications Framework Level 7 or above for the award of a Bachelor Degree, as a minimum.</b></p>	<ul style="list-style-type: none"> <li>• Evidence of university accreditation of the program as an award of a Bachelor Degree or TEQSA approval for a non-self-accrediting higher education provider.</li> <li>• Curriculum document detailing how subject learning outcomes reflect Australian Qualifications Framework Level 7 or above, as applicable.</li> </ul>
<p><b>3.3 The curriculum document articulates the nursing and educational philosophies and their practical implementation into the program of study.</b></p>	<p>Curriculum document including:</p> <ul style="list-style-type: none"> <li>• clearly identified and referenced nursing and education philosophies</li> <li>• explanation on how these will be practically implemented within the program e.g. subjects, content, learning outcomes, assessments.</li> </ul>

STANDARD 3	ESSENTIAL EVIDENCE
<p><b>3.4 Teaching and learning reflects contemporary practices in nursing, health and education, and responds to emerging trends based on research, technology and other forms of evidence.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document detailing and providing examples of how teaching and learning incorporates contemporary best practice and emerging trends in:               <ul style="list-style-type: none"> <li>» nursing</li> <li>» health</li> <li>» education</li> <li>» digital health, informed by the domains of the National Nursing and Midwifery Digital Health Capability Framework (8)</li> <li>» leadership.</li> </ul> </li> <li>• Documented process for ensuring teaching staff are informed about, and are responsive to, contemporary practices and emerging trends in:               <ul style="list-style-type: none"> <li>» nursing</li> <li>» health</li> <li>» education</li> <li>» digital health, informed by the domains of the National Nursing and Midwifery Digital Health Capability Framework (8)</li> <li>» leadership.</li> </ul> </li> </ul>
<p><b>3.5 The program's content and subject learning outcomes ensure:</b></p> <p><b>a. achievement of the NMBA Registered nurse standards for practice</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document that:               <ul style="list-style-type: none"> <li>» includes as an appendix all subject outlines detailing learning outcomes and assessments</li> <li>» demonstrates equivalency in subject learning outcomes in all program delivery modes.</li> </ul> </li> <li>• Completed ANMAC Assessment Mapping Template mapping links among subject learning outcomes, subject assessments and the NMBA Registered nurse standards for practice.</li> </ul>
<p><b>b. integrated knowledge of regional, national and global health priorities, including mental health and care of the older person</b></p>	<ul style="list-style-type: none"> <li>• Completed ANMAC Content Mapping Template including subject learning outcomes and program content (with examples) to support integrated knowledge of:               <ul style="list-style-type: none"> <li>» regional, national and global health priorities, including mental health</li> </ul> </li> </ul>

STANDARD 3	ESSENTIAL EVIDENCE
<p><b>c. integrated knowledge of safety and quality standards as they relate to health care</b></p>	<ul style="list-style-type: none"> <li>• Completed ANMAC Content Mapping Template including subject learning outcomes and program content (with examples) to support integrated knowledge of current:               <ul style="list-style-type: none"> <li>» National Safety and Quality Health Service Standards (1)</li> <li>» National Safety and Quality Primary and Community Healthcare Standards (9)</li> </ul> </li> </ul>
<p><b>d. integrated knowledge of care across the lifespan and across contexts of nursing practice</b></p>	<ul style="list-style-type: none"> <li>• Completed ANMAC Content Mapping Template including subject learning outcomes and program content (with examples) to support integrated knowledge of:               <ul style="list-style-type: none"> <li>» care across the lifespan (including care of the older person (2))</li> <li>» nursing practice contexts (including primary, secondary and tertiary health care nurse practice contexts).</li> </ul> </li> </ul>
<p><b>e. equivalence in all delivery modes in which the program is offered.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document that:               <ul style="list-style-type: none"> <li>» includes as an appendix all subject outlines detailing learning outcomes and assessments</li> <li>» demonstrates equivalency in subject learning outcomes in all program delivery modes.</li> </ul> </li> </ul>
<p><b>3.6 The program's content and subject learning outcomes integrate principles of intraprofessional and interprofessional learning and practice.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document including:               <ul style="list-style-type: none"> <li>» a definition and explanation of intraprofessional and interprofessional learning and practice how this understanding is integrated vertically and horizontally into relevant subject learning outcomes and program content</li> <li>» explanation of teaching strategies that develop knowledge, skills and attitudes that result in interprofessional team behaviours and competence</li> </ul> </li> <li>• Completed ANMAC Content Mapping Template including subject learning outcomes and program content (with examples from across the program) that prepares students for intraprofessional and interprofessional learning and practice.</li> </ul>

STANDARD 3	ESSENTIAL EVIDENCE
<p><b>3.7 The program’s content and subject learning outcomes embed principles of diversity, culture, inclusion and cultural safety for all people.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document including a definition and explanation of cultural diversity and cultural safety principles and how this understanding translates into relevant subject learning outcomes and program content.</li> <li>• Completed ANMAC Content Mapping Template including subject learning outcomes and program content (with examples) that prepares students to practice cultural safety and work with people from diverse backgrounds (for example, ethnicity, sexual identity and religion).</li> </ul>
<p><b>3.8 The program’s content and subject learning outcomes support the development of research skills that include searching and reviewing research and other evidence for translation into practice.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document explaining how students will develop research skills and be prepared to translate research into practice.</li> <li>• Completed ANMAC Content Mapping Template including subject learning outcomes and program content (with examples) supporting students’ development of research skills in: <ul style="list-style-type: none"> <li>» conducting literature searches</li> <li>» reviewing research and other evidence</li> <li>» translating research and other evidence into practice</li> <li>» using research in practice.</li> </ul> </li> </ul>
<p><b>3.9 The program’s content and subject learning outcomes support the development of student knowledge and skills in pharmacotherapeutics and quality use of medicines. This includes the supply and administration of medicines.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document explaining how students will develop knowledge and skills in pharmacotherapeutics and quality use of medicines.</li> <li>• Completed ANMAC Content Mapping Template including subject outcomes and program content (with examples) supporting students’ development of knowledge and skills in: <ul style="list-style-type: none"> <li>» Pharmacotherapeutics</li> <li>» quality use of medicines.</li> </ul> </li> </ul>

STANDARD 3	ESSENTIAL EVIDENCE
<p><b>3.10 The program includes:</b></p> <p><b>a. Aboriginal and Torres Strait Islander peoples' history, culture and health taught as a discrete subject and based on the Nursing and Midwifery Aboriginal and Torres Strait Islander Health Curriculum Framework (10)</b></p>	<ul style="list-style-type: none"> <li>• Subject outline of this discrete subject including learning outcomes, subject content and assessment addressing Aboriginal and Torres Strait Islander peoples' history, culture and health and referencing the Nursing and Midwifery Aboriginal and Torres Strait Islander Health Curriculum Framework (10)</li> <li>• Completed Staff Matrix Template identifying staff teaching into this subject and their qualifications and experience.</li> </ul>
<p><b>b. content relevant to health outcomes of Aboriginal and Torres Strait Islander peoples is embedded throughout the program.</b></p>	<ul style="list-style-type: none"> <li>• Mapping across the program of content relevant to health outcomes of Aboriginal and Torres Strait Islander peoples based on national health priorities—as an example, see the National Aboriginal and Torres Strait Islander Health Plan 2013–2023 (11).</li> </ul>
<p><b>3.11 The program includes content and sequencing that incorporates simulated learning experience to prepare students for PEP.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document describing how simulation is used across the program to support student learning outcomes.</li> <li>• Program structure demonstrating sequencing of subjects and scheduled PEP.</li> <li>• PEP plan.</li> <li>• Program timetable demonstrating how theory and simulated practice is scheduled across the program to prepare students for each scheduled PEP.</li> </ul> <p><b>NB:</b> Criterion 3.11—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for 'quality PEP' assessment.</p>



STANDARD 3	ESSENTIAL EVIDENCE
<p><b>3.12 The program includes:</b></p> <p><b>a. a minimum of 800 hours of quality PEP completed by all students in a variety of settings, relevant to the curriculum, exclusive of simulation and not exceeding one-sixth of the PEP hours undertaken outside Australia</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document that:               <ul style="list-style-type: none"> <li>» includes a detailed PEP plan showing that PEP:                   <ul style="list-style-type: none"> <li>- is a minimum of 800 hours</li> <li>- is completed across a variety of settings</li> <li>- is conducted in Australia</li> <li>- excludes simulation</li> </ul> </li> <li>» explains how scheduled PEP facilitates students' transition to practice as a registered nurse</li> <li>» demonstrates PEP undertaken outside Australia meets requirements in ANMAC's Explanatory Note: Offshore Components in Accredited Australian Programs of Study for Registered Nurses and Midwives (7)                   <ul style="list-style-type: none"> <li>- see also Criterion 3.1.</li> </ul> </li> </ul> </li> <li>• PEP policy and procedure.</li> <li>• Documented processes for managing PEP and ensuring all students obtain the required 800 hours, including allocation, make-up and verification of PEP hours.</li> <li>• Documented processes for establishing and maintaining communication between education provider and health services where students undertake PEP.</li> <li>• PEP record demonstrating that each student has relevant PEP allocations that provides opportunities for achievement of NMBA Registered nurse standards for practice and subject learning outcomes.</li> </ul> <p><i><b>NB:</b> Criterion 3.12—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for 'quality PEP' assessment.</i></p>
<p><b>b. PEP as soon as practically possible in the first year of study to facilitate early engagement with the professional context of nursing</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document that:               <ul style="list-style-type: none"> <li>» includes a detailed PEP plan showing that PEP:                   <ul style="list-style-type: none"> <li>- starts early in the program</li> </ul> </li> </ul> </li> </ul>

STANDARD 3	ESSENTIAL EVIDENCE
<p><b>c. PEP included towards the end of the program, conducted in Australia, to demonstrate achievement of the NMBA Registered nurse standards for practice (6)</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document that:               <ul style="list-style-type: none"> <li>» includes a detailed PEP plan showing that PEP:                   <ul style="list-style-type: none"> <li>- is included towards the end of the program</li> </ul> </li> </ul> </li> </ul>
<p><b>d. PEP is underpinned by contractual arrangements between education providers and PEP providers.</b></p>	<ul style="list-style-type: none"> <li>• Contractual arrangements for PEP, including signed agreements stipulating obligations of each party.</li> <li>• Documented processes for:               <ul style="list-style-type: none"> <li>» establishing and maintaining communication between education provider and health services where students undertake PEP.</li> <li>» managing PEP and ensuring all students obtain the required PEP hours, including allocation, make-up and verification of PEP hours.</li> </ul> </li> </ul>

## STANDARD 3

## ESSENTIAL EVIDENCE

**3.13** The program's resources are sufficient to facilitate student achievement of the NMBA Registered nurse standards for practice, with attention to human and physical resources supporting all teaching and learning environments, including simulated practice and PEP.

- Statement about the proposed annual student population across the five years of accreditation.
- Program timetable demonstrating sufficient physical resources and classes for the proposed student population across the five years of accreditation.
- Description of the online learning environment and how it will be used by students and staff.
- List of health facilities and associated services where students will be placed for each scheduled clinical placement.
- Staffing models for academic and clinical learning environments, including simulation and PEP.
- Outline of available simulated learning environments and list of available simulation equipment.
- Process by which the supply of consumables will support requirements of the proposed student population.
- Library resources available to the registered nurse student population and how the library is managed.
- Affirmative action strategies for recruiting, employing, supporting and retaining Aboriginal and Torres Strait Islander staff engaged with program delivery.
- Completed ANMAC Staff Matrix Template supporting assessment of the quality and quantity of human resources allocated to program delivery.

**NB:** Criterion 3.13—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for 'quality PEP' assessment.

STANDARD 3	ESSENTIAL EVIDENCE
<p><b>3.14 Staff teaching into the program:</b></p> <p><b>a. are qualified and experienced to deliver the subjects they teach</b></p>	<ul style="list-style-type: none"> <li>• Policy and/or process to support and monitor professional and academic development for staff teaching into the program and evidence of implementation.</li> <li>• Documented process for verifying and monitoring academic and professional credentials and NMBA registration, including ongoing currency.</li> <li>• Position descriptions for staff teaching into the program.</li> </ul>
<p><b>b. are registered nurses where the subject relates to nursing practice</b></p>	<ul style="list-style-type: none"> <li>• Completed ANMAC Staff Matrix Template supporting assessment of teaching staff's registration, credentials and ongoing professional development.</li> </ul>
<p><b>c. hold one qualification higher than the program of study being taught.</b></p>	<ul style="list-style-type: none"> <li>• Completed ANMAC Staff Matrix Template supporting assessment of teaching staff's registration, credentials and ongoing professional development.</li> <li>• For staff teaching in an entry to practice Masters program, this requires a relevant post-graduate qualification or equivalent professional experience.</li> </ul>

## Standard 4: Student experience

STANDARD 4	ESSENTIAL EVIDENCE
<p><b>4.1 Program information provided to students is relevant, timely, transparent and accessible.</b></p>	<ul style="list-style-type: none"> <li>• Information provided to students and how it can be accessed, including:               <ul style="list-style-type: none"> <li>» admission and enrolment information</li> <li>» student or program handbook</li> <li>» subject outlines</li> <li>» PEP information, including immunisation, police checks, inherent requirements, fitness to practice</li> <li>» policies and procedure relating to assessment, PEP, student progression and appeals information.</li> </ul> </li> <li>• Examples of student journeys.</li> </ul> <p><i><b>NB:</b> Criterion 4.1—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for ‘quality PEP’ assessment</i></p>
<p><b>4.2 Student academic learning needs are identified and supported by the education provider.</b></p>	<ul style="list-style-type: none"> <li>• Mechanisms for early identification and monitoring of students at academic risk.</li> <li>• Documented process and/or flowchart offering guidance to staff on:               <ul style="list-style-type: none"> <li>» early detection of students at risk of poor academic performance</li> <li>» referral of students to appropriate support services.</li> </ul> </li> <li>• Samples of learning contracts used to identify and support student learning needs.</li> <li>• Information provided to students about:               <ul style="list-style-type: none"> <li>» the types of academic support services and how these can be accessed</li> <li>» how to access academic staff support (for example, in subject outlines, student handbook, Learning Management System).</li> </ul> </li> </ul>
<p><b>4.3 Students are informed of, and have access to, grievance and appeals processes.</b></p>	<ul style="list-style-type: none"> <li>• Mechanism for informing students about the grievance and appeals policies and procedures.</li> <li>• Description of how students can access the grievance and appeals policies and procedures.</li> </ul>

STANDARD 4	ESSENTIAL EVIDENCE
<p><b>4.4 Students are informed of, and have access to, pastoral and/or personal support services.</b></p>	<ul style="list-style-type: none"> <li>• Mechanism for informing students about pastoral and/or personal support services.</li> <li>• Description of support services and how these can be accessed by students.</li> </ul>
<p><b>4.5 Students are represented on program advisory and decision-making committees.</b></p>	<ul style="list-style-type: none"> <li>• Terms of reference for relevant committees including student membership and meeting schedules.</li> <li>• Examples of student consultation and collaboration, decisions made and implementation into the program.</li> <li>• Policy and process for recruiting and preparing students for a representative role.</li> </ul>
<p><b>4.6 Student experiences have equity and diversity principles observed and promoted.</b></p>	<ul style="list-style-type: none"> <li>• Demonstration of how enrolment, assessment and progression policies promote equity and diversity principles.</li> <li>• Information promoting equity and diversity principles provided to students (for example, in a subject guide or outline, student handbook, Learning Management System, PEP handbook or log).</li> <li>• Policies and procedures addressing equity and diversity principles and examples of implementation and monitoring by staff.</li> </ul>
<p><b>4.7 Student experiences across all teaching and learning environments are monitored and evaluated regularly with outcomes informing program quality improvement.</b></p>	<ul style="list-style-type: none"> <li>• Processes for providing PEP venues with outcomes of feedback obtained from student and clinical facilitator evaluations.</li> <li>• Process for circulating, gathering, collating and reporting on (including to academics) feedback from student evaluations</li> <li>• Processes for closing all evaluation loops.</li> </ul> <p><b>NB:</b> Criterion 4.7—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for ‘quality PEP’ assessment.</p>

## Standard 5: Student assessment

STANDARD 5	ESSENTIAL EVIDENCE
<p><b>5.1 The program’s learning outcomes and assessment strategies are aligned.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document explaining the alignment between program learning outcomes and assessment strategies</li> <li>• Completed ANMAC Assessment Mapping Template demonstrating the links among NMBA Registered nurse standards for practice, subject learning outcomes and subject assessments.</li> </ul>
<p><b>5.2 The program’s subject learning outcomes, with associated subject assessments, are clearly mapped to the NMBA Registered nurse standards for practice.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document explaining how learning outcomes and assessments will prepare students for practice as a registered nurse.</li> <li>• Completed ANMAC Assessment Mapping Template demonstrating the links among NMBA Registered nurse standards for practice, subject learning outcomes and subject assessments</li> </ul>
<p><b>5.3 The integrity of the program’s theoretical and clinical assessments is ensured through the use of contemporary, validated assessment tools, modes of assessment, sampling and moderation processes.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document explaining the strategies in place to ensure assessment integrity.</li> <li>• Assessment policy addressing assessment moderation and progression rules.</li> <li>• Completed ANMAC Assessment Mapping Template showing all modes and contexts of assessments.</li> <li>• Documented processes for:               <ul style="list-style-type: none"> <li>» moderating and sampling assessments at subject and/or program level, including across teaching sites where relevant</li> <li>» validating assessment tools.</li> </ul> </li> <li>• Examples of theoretical assessments and marking rubrics.</li> <li>• Examples of simulated assessments and marking rubrics (for example, for Objective Structured Clinical Examinations).</li> <li>• PEP assessment tools and the means by which these have been validated.</li> <li>• Evidence of security measures (including information technology security) used to protect the integrity of all modes of assessment (for example, documented policy, processes, screen shots and software used).</li> </ul> <p><i><b>NB:</b> Criterion 5.3—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for ‘quality PEP’ assessment.</i></p>

STANDARD 5	ESSENTIAL EVIDENCE
<p><b>5.4 The program’s assessments include the appraisal of competence in pharmacotherapeutics and the quality use of medicines.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document explaining how students will develop knowledge and skills in pharmacotherapeutics and the quality use of medicines.</li> <li>• Completed ANMAC Assessment Mapping Template showing links among assessments that appraise competence in pharmacotherapeutics and quality use of medicines, subject learning outcomes and the NMBA Registered nurse standards for practice.</li> <li>• Examples of clinical and theoretical assessments and marking rubrics used to appraise competence in pharmacotherapeutics and the quality use of medicines.</li> <li>• Evidence of security measures (including information technology security) used to ensure:               <ul style="list-style-type: none"> <li>» integrity of these assessments</li> <li>» reliable assessment of student competency.</li> </ul> </li> </ul>
<p><b>5.5 The program has formative and summative assessments that enhance learning and inform student progression. The summative assessment appraises competence against the NMBA Registered nurse standards for practice before successful completion of the program.</b></p>	<ul style="list-style-type: none"> <li>• Curriculum document explaining how formative and summative assessment will be used to enhance learning and informs student progression.</li> <li>• Completed ANMAC Assessment Mapping Template showing formative and summative assessments used across the program.</li> <li>• Documented processes ensuring early detection and responsiveness to students experiencing difficulties.</li> <li>• Examples of formative and summative assessments and associated marking rubrics.</li> <li>• Process to inform students about formative and summative assessments and how they will be used to support and evidence student learning.</li> </ul>



## STANDARD 5

## ESSENTIAL EVIDENCE

**5.6 The education provider is ultimately accountable for the assessment of students in relation to their PEP.**

- Curriculum document explaining how the education provider ensures ultimate accountability for student assessment in relation to PEP.
- Student placement agreements detailing roles and responsibilities of health service and education providers.
- Documented clinical supervision models.
- Clinical facilitator guide with information about the roles of the education provider and supervising registered nurses in relation to student assessment during PEP.
- PEP record for PEP assessment clarifying the role of the education provider and supervising registered nurses in student assessment and indicating assessment sign off is to be by a registered nurse.
- Documented communication processes between the education provider and students, clinical facilitators and health service education managers enabling oversight of student assessment and supervision during PEP.

**NB:** Criterion 5.6—Essential Evidence assesses key features of quality PEP. Criteria 1.4, 1.7, 2.3, 2.5, 3.11, 3.12, 3.13, 4.1, 4.7, 5.3 and 5.6 form a framework for 'quality PEP' assessment.

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