National Accreditation Guidelines:

Nursing and Midwifery Education Programs

February 2017
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Version Control

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<th>Version</th>
<th>Date</th>
<th>Amendments</th>
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<td>1.0</td>
<td>February 2017</td>
<td>First Version</td>
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**Responsible Officer:** Director Accreditation Services  
**Review Date:** December 2017

February 2017
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Purpose of the National Accreditation Guidelines

The purpose of the National Accreditation Guidelines (the Guidelines) is to articulate the principles and processes associated with the accreditation of nursing and midwifery education programs.

The principles and processes outlined in the Guidelines are drawn from national and international best practice models for accreditation used by health professions and industry and former nursing and midwifery regulatory authorities in each Australian state and territory.

The Guidelines are designed for anyone interested and/or involved in the accreditation of nursing and midwifery education. This includes the Australian Nursing and Midwifery Accreditation Council (ANMAC) staff, education providers, members of assessment teams, students and the public. The National Accreditation Guidelines describe the personnel involved in, and the structures and processes relating to the accreditation and monitoring of nursing and midwifery education providers and their education programs.
1 Background

1.1 Australian Nursing and Midwifery Accreditation Council

The Australian Nursing and Midwifery Accreditation Council (ANMAC) is the independent accreditating authority for nursing and midwifery education under Australia’s National Registration and Accreditation Scheme.

ANMAC helps to protect the health and safety of the Australian community by establishing high-quality standards of nursing and midwifery education, training and assessment.

ANMAC facilitates the development of accreditation standards in consultation with our stakeholders and representatives from the professions. ANMAC is also responsible for determining whether programs of study for nurses and midwives seeking to practice in Australia meet required accreditation standards.

1.2 Accreditation Framework overview

The Guidelines are part of a broader accreditation policy framework that comprises the:

- *Health Practitioners Regulation National Law Act 2009 (Qld)* (National Law)
- approved standards for the accreditation of nursing and midwifery education programs.

The accreditation standards and other documents supporting ANMAC’s accreditation process were developed in consultation with key stakeholders. They incorporate national and international best practice models for accreditation in health and education.

All education providers of nursing and midwifery programs are subject to the national accreditation process.

The accreditation process is designed to be timely, transparent, accountable, efficient, effective and responsive for education providers and ANMAC. The process is robust, standards focused and risk based. A risk assessment is conducted by an Associate Director on every nursing and midwifery education program to assign a risk rating of low, medium or high. The risk rating is endorsed by the Director Accreditation Services. The risk assessment and risk rating influences three key areas of the Accreditation Framework:

1. program accreditation
2. program changes
3. monitoring.

A program’s risk rating determines how an education provider completes the application pack required for accreditation assessment. Low-risk programs do not have to provide evidence against all standards criterion. Medium-risk and high-risk programs, new programs and new nursing and midwifery education providers must provide evidence against all standards criterion.

The risk rating also determines how an education provider reports program changes to approved programs to ANMAC. Program changes for low-risk programs are reported retrospectively. Program changes for medium and high-risk programs are reported prospectively. All education providers must prospectively report changes associated with the
number and/or location of campuses, program delivery mode and number of students enrolled.

The risk rating is reviewed annually as part of ANMAC’s monitoring requirements for each program. How risk is assessed at the time of accreditation and reviewed annually is detailed in ANMAC’s Accreditation Services Risk Framework.

Section 50 of the National Law requires ANMAC to monitor accredited programs. To meet these requirements, ANMAC has developed routine, targeted or random monitoring methods. This enables ANMAC to tailor monitoring activities to each program.

1.3 Relevant documents

The following policies and documents should be read in conjunction with the Guidelines:

- *Health Practitioners Regulation National Law Act 2009 (Qld)*
- ANMAC Accreditation Services Risk Framework
- ANMAC Protocol for the Review of Nursing and Midwifery Accreditation Standards
- ANMAC Transition and Teach-out Arrangements on Expiry of Accreditation Period
- ANMAC accreditation standards
  - Enrolled Nurse Accreditation Standards 2009
  - Re-entry to the Register Enrolled Nurse Accreditation Standards
  - Midwife Accreditation Standards 2014
  - Programs Leading to Endorsement for Scheduled Medicines for Midwives Accreditation Standards 2015
  - Nurse Practitioner Accreditation Standards 2015
  - Registered Nurse Accreditation Standards 2012
  - Re-entry to the Register Registered Nurse Accreditation Standards 2014
  - Entry Programs for Internationally Qualified (EPIQ) Registered Nurse Accreditation Standards 2014
- ANMAC Assessor Handbook
- ANMAC Explanatory Notes
  - Offshore components in accredited Australian programs of study for nurses and midwives 2015
  - Qualifications of academic staff teaching into nursing and midwifery programs of study 2015
  - Health informatics and health technology 2014
  - Credit transfer and recognition of prior learning 2015
  - Integrating new NMBA Standards for practice 2016
1.4 Accreditation function

ANMAC has entered into an agreement with Australian Health Practitioner Regulation Agency (AHPRA) to undertake the accreditation functions as defined in Section 42 of the National Law. ANMAC’s accreditation functions under the National Law are:

1. development of accreditation standards
2. accreditation of programs of study
3. monitor approved programs of study.

ANMAC conducts its accreditation functions in a transparent, accountable, efficient, effective and fair way. In performing the accreditation functions, ANMAC supports the objectives of the National Registration and Accreditation Scheme. These are to:

a. provide for the protection for the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered
b. facilitate workforce mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction
c. facilitate the provision of high quality education and training of health practitioners
d. facilitate the rigorous and responsive assessment of overseas-trained health practitioners
e. facilitate access to services provided by health practitioners in accordance with the public interest
f. enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.
2 Governance

This section outlines the governance structures and personnel involved in ANMAC meeting requirements as the independent accrediting authority for nursing and midwifery in applying the National Registration and Accreditation Scheme.

In addition to the ANMAC Board, several ANMAC committees play a key role in ANMAC’s accreditation process. These include the:

- Strategic Accreditation Advisory Committee
- Registered Nurse Accreditation Committee
- Enrolled Nurse Accreditation Committee
- Nurse Practitioner Accreditation Committee
- Midwife Accreditation Committee.

The Professional Reference Group for Standards Development and Review also plays a key role in ANMAC’s development of accreditation standards process. All of these entities contribute to world-class education accreditation and assessment services. These foster better nursing and midwifery performance and high quality and safe health care for the Australian community. ANMAC’s Strategic Accreditation Advisory Committee and four accreditation committees report to the Chief Executive Officer (CEO). All committee members are bound by ANMAC’s Committees Policy and Terms of Reference.

The assessment of education programs for accreditation is supported by the Director Accreditation Services. ANMAC’s accreditation services team manages the assessment. The assessment process is led by an Associate Director Accreditation Services and assessment team members.

2.1 ANMAC’s Strategic Accreditation Advisory Committee

Purpose
The Strategic Accreditation Advisory Committee provides high-level strategic advice to the CEO in all areas of ANMAC’s accreditation function.

The terms of reference and membership for the Strategic Accreditation Advisory Committee are in the ANMAC Committees Policy and Terms of Reference.

2.2 Accreditation committees

Purpose
To promote and protect the health of the Australian community by:

- reviewing the assessment outcomes of nursing and midwifery programs of study leading to registration undertaken by appointed ANMAC assessment teams
- making recommendations on accreditation of programs of study to the ANMAC CEO.
Each Accreditation Committee is made up of a panel of academics and clinicians with experience in accreditation.

The terms of reference and membership for each Accreditation Committee is in the ANMAC Committees Policy and Terms of Reference.

2.3 ANMAC assessment teams

An ANMAC assessment team is formed for:

- the accreditation of all programs
- some assessments of program changes, determined by the complexity and type of assessment required (in some cases, the assessment team has two Associate Directors Accreditation Services)
- some monitoring functions.

Individuals are appointed for their relevant knowledge, skills, expertise and experience, and the standing they have within the nursing and midwifery professions. Assessors are drawn from ANMAC’s Register of Assessors.

The Associate Director Accreditation Services leads the assessment team. The number of members on the team is determined by the Director Accreditation Services in conjunction with the allocated Associate Director Accreditation Services. The complexity of the work required and the program’s risk rating is taken into consideration when appointing the assessment team.

The assessment team can comprise:

- a nurse or midwife with relevant academic and educational expertise who chairs the team
- a nurse or midwife with relevant clinical expertise or clinical management expertise
- others as determined by program requirements.

Education providers are given the names and employment details of assessment team members. An education provider can preclude an assessment team member if there is a real or perceived conflict of interest.

Associate Director Accreditation Services

The Associate Director Accreditation Services (Associate Director) is a member of the assessment team and is responsible for:

- leading the assessment team throughout the assessment process
- reviewing accreditation assessments as part of the assessment team
- coordinating and conducting the accreditation process for assessments
- monitoring education providers and nursing and midwifery programs leading to registration and endorsement in Australia
- engaging with education providers, regulatory authorities, professional associations and other key stakeholders, including the public.
Assessment team Chair

The assessment team Chair is responsible for:

- in collaboration with the Associate Director, leading the team during the assessment process
- supporting the Associate Director in the accreditation process
- Chairing the site visit meeting
- attending (by teleconference) the relevant Accreditation Committee meeting to present the application.

Assessment team members

Assessment team members are responsible for:

- reviewing accreditation application documents to verify they meet relevant accreditation standards
- providing comment to the Associate Director on the application
- providing feedback on and correspondence relating to the assessment within the timeframes agreed by the assessment team
- attending assessment team meetings (face-to-face, teleconference or video conference)
- attending site visits to meet key personnel, clarify the submission and view education provider’s resources and facilities
- contributing to the preparation of a site visit report by the Associate Director
- contributing to the Outcome of Accreditation Assessment Report
- reviewing and verifying the final report before it is given to the relevant Accreditation Committee.

2.4 Director Accreditation Services

The Director Accreditation Services oversees all functions of ANMAC’s Accreditation Services and delegates the following functions where appropriate to other Accreditation Services staff:

- identifying the Associate Director in collaboration with the Manager of Accreditation Services, to coordinate the accreditation assessment
- reviewing and maintaining procedures and processes for monitoring the accreditation of education providers and programs of study to ensure fair and consistent outcomes
- supporting the assessment team on site visits.
3 Accreditation Framework

This section outlines the Accreditation Framework, including risk assessment, timeframes, accreditation assessment processes and responsibilities.

Under the National Law, graduates of nursing and midwifery programs cannot be registered or endorsed unless the program undertaken is accredited by ANMAC and approved by the Nursing and Midwifery Board of Australia (NMBA).

ANMAC conducts a risk-based assessment of nursing and midwifery education programs as part of the assessment process for accreditation.

3.1 Risk assessment

ANMAC’s risk assessment process applies a set of risk determinants and measured indicators to all programs offered by education providers. This is described in the Accreditation Services Risk Framework. Each program is given a risk rating. An education provider offering multiple programs may have different risk ratings applied to different programs.

The risk assessment process is based on measurable indicators, including:

- previous experience in delivering a nursing or midwifery accredited program
- history of compliance with accreditation standards
- current conditions on a program imposed by ANMAC or another regulatory body
- substantiated complaints against a program
- number of campuses at which a program is delivered.

ANMAC understands some risk is inevitable for professional programs to maintain a contemporary approach and to continuously improve. Low levels of risk can be managed with appropriate controls.

ANMAC conducts annual risk assessments to keep all risk profiles up-to-date. The risk rating is subject to change, either up or down, depending on factors such as monitoring, significant changes in program delivery or substantiated complaints.

The risk assessment and risk rating of high, medium or low assigned to all nursing and midwifery education programs influences three key areas of the Accreditation Framework:

1. program accreditation
2. program changes
3. monitoring.

These three standard components are consistently applied to all education programs and all education providers.

3.2 Accreditation assessment timeframe

It takes approximately six months for ANMAC to complete the accreditation assessment, from the time the completed application pack is received. Education providers are given timeframe
details well in advance; these are clearly outlined in the Accreditation Schedule. There is no fast tracking of accreditation applications and education providers are informed of this.

The Accreditation Schedule includes dates for:

- the submission of the application pack and associated documentation
- site visits
- the Accreditation Committee meeting at which the accreditation recommendation is made.

The Accreditation Schedule is agreed to by ANMAC and the education provider approximately 18 months before the approved program is due to expire.

ANMAC may need more than six months depending on the complexity and extent of the accreditation assessment required. This could be:

- for programs involving dual and combined degrees
- for programs involving a number of sites or campuses
- when multiple programs are being assessed at the same time.

In these cases, ANMAC discusses the timeframes with the education provider and agrees to them in the Accreditation Schedule.

ANMAC treats each accreditation as a discrete process. Education providers should therefore regard every application as a new one, even if it draws on past curricula, evaluations and previously submitted information.

The NMBA’s approval process and timeframes is separate to, and in addition to, ANMAC’s accreditation work. NMBA approval is essential. A new education program or changes to accredited programs must not start until the program or change is on the NMBA Approved Programs of Study list. For example, teaching from a new campus must not commence until the campus is listed on the NMBA Approved Program of Study list.

3.3 Registration and accreditation by Tertiary Education Quality and Standards Agency and Australian Skills Quality Authority

Through the accreditation process an education provider must demonstrate their current education provider accreditation status with their relevant accrediting body. For the higher education sector, this is with the Tertiary Education Quality and Standards Agency (TEQSA) and for the Vocational Education and Training (VET) sector this is with the Australian Skills Quality Authority (ASQA) or relevant state VET sector regulatory authority. If the education provider is acquiring accreditation but has not yet received final certification, they can still apply for program accreditation with ANMAC. This is at the education provider’s own risk.

3.4 Accreditation assessment

A program’s risk rating determines how an education provider completes the accreditation application. Low-risk programs are not required to provide evidence against all standards criterion. Medium-risk and high-risk programs, new programs and new nursing and midwifery education providers must provide evidence against all standards criterion.

The accreditation assessment process, including ANMAC and education provider responsibilities are detailed in Table 1.
Table 1: Accreditation assessment process

<table>
<thead>
<tr>
<th>Assessment timeframe (from date program is due to expire)</th>
<th>Responsibilities</th>
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<tbody>
<tr>
<td>12 to 18 months</td>
<td>ANMAC</td>
</tr>
<tr>
<td></td>
<td>• sends Accreditation Schedule to education provider to sign</td>
</tr>
<tr>
<td></td>
<td>• sends application pack to education provider with Accreditation Schedule</td>
</tr>
<tr>
<td></td>
<td>Education provider</td>
</tr>
<tr>
<td></td>
<td>• returns signed Accreditation Schedule to ANMAC</td>
</tr>
<tr>
<td>9 to 12 months</td>
<td>ANMAC</td>
</tr>
<tr>
<td></td>
<td>• assigns Associate Director to education program and starts preparing for assessment of application pack</td>
</tr>
<tr>
<td></td>
<td>• allocates assessment team and advises education provider</td>
</tr>
<tr>
<td></td>
<td>• negotiates date(s) for the site visit(s) to education provider</td>
</tr>
<tr>
<td></td>
<td>Education provider</td>
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<tr>
<td></td>
<td>• confirms the assessment team has no perceived conflict of interest</td>
</tr>
<tr>
<td></td>
<td>• confirms site visit date is suitable</td>
</tr>
<tr>
<td>6 to 9 months</td>
<td>Education provider</td>
</tr>
<tr>
<td></td>
<td>• sends application to ANMAC</td>
</tr>
<tr>
<td></td>
<td>ANMAC</td>
</tr>
<tr>
<td></td>
<td>• conducts preliminary review (by Associate Director)</td>
</tr>
<tr>
<td></td>
<td>• sends invoice to education provider for accreditation assessment</td>
</tr>
<tr>
<td>24 to 26 weeks</td>
<td>Assessment team</td>
</tr>
<tr>
<td></td>
<td>• receives application</td>
</tr>
<tr>
<td></td>
<td>• reviews application (by individual assessment team members)</td>
</tr>
<tr>
<td></td>
<td>• prepares for individual assessment team members to attend team teleconference</td>
</tr>
<tr>
<td>18 to 24 weeks</td>
<td>Assessment team</td>
</tr>
<tr>
<td></td>
<td>• holds teleconference</td>
</tr>
<tr>
<td></td>
<td>• prepares for site visit to education provider</td>
</tr>
<tr>
<td></td>
<td>• agrees on the content of the collated review and issues to be raised at site visit during teleconference discussion.</td>
</tr>
<tr>
<td>16 to 18 weeks</td>
<td>Assessment team</td>
</tr>
<tr>
<td></td>
<td>• attends site visit</td>
</tr>
<tr>
<td></td>
<td>• prepares site visit report</td>
</tr>
<tr>
<td></td>
<td>• completes the Outcome of Accreditation Assessment Report</td>
</tr>
<tr>
<td></td>
<td>Associate Director</td>
</tr>
<tr>
<td></td>
<td>• collects additional information requested at site visit</td>
</tr>
<tr>
<td></td>
<td>• updates collated review and site visit report</td>
</tr>
<tr>
<td></td>
<td>• completes the Outcome of Accreditation Assessment Report</td>
</tr>
<tr>
<td>15 to 16 weeks</td>
<td>Associate Director</td>
</tr>
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</table>
3.5 ANMAC accreditation decision

The ANMAC Board (the Board) delegates the accreditation decision to ANMAC’s CEO. The CEO makes the accreditation decision based on the recommendations of the relevant Accreditation Committee where the assessment process has been straightforward and without controversy. The CEO refers to the Board to make the accreditation decision where the assessment process raises questions that require application of material conditions, significant reporting requirements or refusal of accreditation.

The Board generally meets to consider matters every two months. The reports and recommendations from ANMAC’s Accreditation Committees are provided in a timely manner before a Board meeting so recommendations can be carefully considered. The Board can also consider reports from ANMAC Accreditation Committees out-of-session.

The outcomes of the accreditation process are based on meeting the accreditation standards. Three decisions are possible:

- accreditation is granted
- accreditation is granted with conditions
- accreditation is refused.

Accreditation is granted

Accreditation is granted when ANMAC is satisfied the program to be conducted by the Education Provider meets the approved standards. Accreditation is usually granted for five years.

Accreditation is granted with conditions

Accreditation is granted with conditions and the details and timeframes (if relevant) for meeting these conditions are explicit. The education provider is responsible for adequately addressing the conditions and supplying ANMAC with a comprehensive report on how they have been addressed. The report must provide evidence the education provider has met the conditions, including compliance with timeframes.
If the conditions are not met within the timeframes, ANMAC reviews the education provider’s accreditation status to determine if it should be revoked.

Accreditation is refused
If ANMAC refuses to accredit a program of study, it must—under Section 48 of the National Law—provide written notice of its decision to the education provider. The written notice must state:

• the reason for the decision
• within 30 days after receiving the notice, the education provider can apply to the accreditation authority for an internal review of the decision
• how the education provider can apply for a review.

3.6 Appeal of accreditation decision
Under Section 48 of the National Law, an education provider can appeal an accreditation decision. The provider must submit the requests within 30 days of notification of the decision. Appeal requests must be in writing and addressed to the Director Accreditation Services. The education provider must include details of why ANMAC should reconsider its decision.

In accordance with Section 48, the appeal is dealt with as an internal review and not be carried out by anyone who assessed the program of study for ANMAC.

ANMAC selects an appropriate person to conduct the review. The reviewer may require other members to assist, in which case the lead reviewer becomes the Chair of the panel. The review panel consults with ANMAC’s Director Accreditation Services in relation to procedural issues that may arise.

The reviewer:

• reviews the original report and recommendations
• discusses issues with the education provider
• seeks more information from the original Accreditation Committee if necessary
• takes other reasonable steps that are required.

Once the review is completed the reviewer finalises the report and provides it to the education provider, NMBA and ANMAC’s Director Accreditation Services, relevant Accreditation Committee, CEO and the Board.

Education providers have the opportunity to respond to the report and submit further evidence in support of their application through ANMAC’s accreditation process.

3.7 Nursing and Midwifery Board of Australia accreditation decision
ANMAC’s role is to accredit an education program or program change. The NMBA’s role is to approve the accredited program of study as providing a qualification for the purposes of registration in the professions of nursing and midwifery.

The NMBA makes accreditation decisions at scheduled monthly meetings.

If the NMBA approves the program:

• program details are noted on the NMBA’s Approved Programs of Study list
• ANMAC notifies the education provider detailing the outcome and accreditation monitoring requirements.

If the NMBA does not approve the program:
• the NMBA gives ANMAC written notice outlining its reasons for refusal (in accordance with Section 49 of the National Law)
• ANMAC informs the education provider of the outcome
• the education provider decides whether to appeal the NMBA decision within 30 days.

3.8 Continuity of accreditation
While an education provider has students enrolled in a program leading to registration or endorsement as a nurse or midwife, the provider must ensure the program remains accredited. Sometimes this requires transitioning students from a program with expired accreditation to a newly accredited program to ensure their qualification leads to registration or endorsement.

ANMAC sees each accreditation as a discrete process. Education providers should therefore regard every application as a new one, even if it draws on past curricula, evaluations and previously submitted information.

Education providers are also informed there is no fast tracking of accreditation applications.

3.9 Program changes
ANMAC works with education providers to ensure continued compliance with accreditation standards does not stifle innovation or continuous quality improvement. While program changes are supported and encouraged it is important that an education provider reports program changes to ANMAC. The reporting requirements are determined by the risk rating of the program (Table 2).

ANMAC considers the following program changes to be significant risks:
• number and/or location of campuses
• program delivery mode
• number of students enrolled into the program.

Because these changes are significant risks, education providers must prospectively report them to ANMAC, before change takes place. The education provider may have to cover additional costs incurred by ANMAC in assessing these program changes.

The assessment team can determine the maximum student capacity for a program during the accreditation assessment period. The capacity is detailed in the Outcome of Accreditation Assessment Report.

If the education provider increases student numbers to the capacity provided in the Outcome of Accreditation Assessment Report and no other program changes have occurred, the program change can be reported retrospectively. If the change is greater than the student capacity described in the Outcome of Accreditation Assessment Report, the education provider must report this prospectively.
Table 2: Program change reporting requirements related to program risk rating

<table>
<thead>
<tr>
<th>Low-risk rating</th>
<th>Medium-risk rating</th>
<th>High-risk rating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Retrospective</strong> reporting on all changes except a change in:</td>
<td><strong>Retrospective</strong> reporting on all changes except:</td>
<td><strong>Prospective</strong> reporting on all changes.</td>
</tr>
<tr>
<td>• the number and/or location of campuses</td>
<td>• where specified as part of the Outcome of Accreditation Assessment Report</td>
<td></td>
</tr>
<tr>
<td>• program delivery mode</td>
<td>• a change in the number and/or location of campuses</td>
<td></td>
</tr>
<tr>
<td>• the number of students enrolled into the program.</td>
<td>• a change to program delivery mode</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• a change in the number of students enrolled.</td>
<td></td>
</tr>
</tbody>
</table>

3.10 Monitoring

Section 50 of the National Law requires ANMAC to monitor programs of study approved by the NMBA to ensure the program and education provider continue to meet the approved accreditation standards. To meet these requirements, ANMAC has developed monitoring methods—routine, targeted or random. This enables ANMAC to tailor monitoring activities to each program.

Monitoring of an accredited program can include:

- reviewing the Program Monitoring Report provided by the education provider
- reviewing reporting requirements
- conducting site visits
- complaints management.

Methods of monitoring depends on the program’s risk rating. Low-risk programs have lower monitoring requirements. High-risk programs have higher requirements.

Program Monitoring Report

The Program Monitoring Report, completed by the education provider, is designed to confirm a program continues to be delivered as accredited, against the relevant accreditation standards. ANMAC uses the information provided in the report to conduct a risk assessment of the education program.

As a general condition of accreditation, ANMAC requires education providers to routinely submit a Program Monitoring Report on the anniversary of the program’s accreditation. ANMAC sends the report template to the education provider one month before the anniversary. Submitting the completed report by the due date is a condition of accreditation. If an education provider fails to submit it on time, ANMAC takes all reasonable steps to determine if the approved accreditation standards are being met. The outcome might place the ongoing accreditation of the program in jeopardy.
When an education provider does not submit its Program Monitoring Report on time, they must cover all costs incurred by ANMAC in ensuring the program continues to be delivered as accredited. ANMAC issue an invoice to the education provider to recover the costs.

The Program Monitoring Report is:

- sent to education providers as a random or targeted form of monitoring for the accredited program
- used by education providers with low and medium-risk programs to report retrospective program changes.

More information about making program changes is in Section 3.6.

Reporting requirements
ANMAC can place additional reporting requirements on an accredited program if:

- the Accreditation Committee requests more information
- accreditation has been granted with conditions
- complaints have been made against the education provider and/or program
- program monitoring reports have not been adequately completed
- program monitoring reports have not been submitted on time
- site visit monitoring indicates the program is not being delivered as accredited.

Additional reporting requirements are an essential part of ANMAC’s ongoing monitoring since they ensure accreditation standards are being met. The reporting requirements required at the time of the accreditation decision are outlined in the final Outcome of Accreditation Assessment Report sent to the education provider after the accreditation decision has been made. ANMAC reviews the reporting requirements when provided by the education provider. If reporting requirements change during a program’s accreditation cycle, the education provider will be formally notified (in writing) by the Director of Accreditation Services.

Site visits
A site visit to the education provider’s campuses is usually made during an accreditation assessment. Site visits can also take place during ANMAC’s targeted or random monitoring requirements or when ANMAC is investigating a complaint or concern that the program is not being conducted in accordance with its accreditation.

ANMAC site visits usually involve a face-to-face meeting. Activities involved and topics discussed can include:

- an overview of the education provider’s vision and strategic plan
- relevant accreditation standards
- a tour of the relevant areas of the facility
- demonstration of the online learning platform
- interviews with:
  - industry and other stakeholders
  - student support staff
- teaching staff
- current students
- graduates.

Complaints management
ANMAC values complaints, recognising effective complaints management fosters an environment of safety, continuous quality improvement and promotes accountability and transparency. ANMAC works cooperatively with all stakeholders to manage and resolve complaints in an impartial and confidential way. ANMAC recognises those administering a program are often best placed to decide how to resolve a grievance. However, compliance with accreditation standards remains a key focus of ANMAC’s strategy for managing complaints. Please refer to Accreditation Services Complaints Handling Policy for more information on our complaints management processes.
4 Explanatory Notes and related information

This section outlines the Explanatory Notes for education providers that clarify and/or provide additional information about statements made within the accreditation standards. ANMAC’s Explanatory Notes should therefore be read in conjunction with the accreditation standards.

4.1 ANMAC Explanatory Notes

The Explanatory Notes include:

- **Offshore components in accredited Australian programs of study for nurses and midwives 2015**
  - This explanatory note assists education providers within Australia seeking to conduct a subject or a component of a subject in an accredited program of study offshore. This explanatory note does not apply to education providers submitting a program leading to endorsement as a Nurse Practitioner. Education providers must also comply with all relevant accreditation standards.

- **Qualifications of academic staff teaching into nursing and midwifery programs of study 2015**
  - This explanatory note assists education providers seeking accreditation by ANMAC for an entry to practice nursing or midwifery program of study. It clarifies qualifications of academic staff teaching into nursing and midwifery programs of study.

- **Health informatics and health technology 2014**
  - This explanatory note assists education providers in preparing and providing applicable evidence to address the full scope of this criterion in nursing and midwifery education programs leading to registration or endorsement.

- **Credit transfer and recognition of prior learning in Bachelor of Nursing and Bachelor of Midwifery Programs 2015**
  - This explanatory note assists education providers in Australia on assessment and recognition of prior learning and the award of credit transfer for students in an entry to practice program of nursing or midwifery study. Education providers must also comply with all relevant accreditation standards.

- **Integrating new NMBA standards for practice 2016**
  - This explanatory note assists education providers to align their accredited programs with the NMBA standards for practice—formerly referred to as competency standards. The competency standards reflect contemporary nursing and midwifery practice to ensure the Australian public is protected. Once the new standards for practice come into effect, ANMAC is responsible for aligning accreditation standards with the competency standards.
4.2 Non-standard entry to practice

‘Non-standard’ refers to programs exceeding the program minimum qualification as stated in relevant ANMAC standards. ANMAC expects non-standard program submissions for accreditation to contain:

Evidence demonstrating how students will achieve program and AQF requirements.
The underpinning principle (consistent with TEQSA guidelines) is that all students should start a program with a basis of knowledge and skills enabling them to achieve, within a prescribed timeframe, the learning outcomes commensurate with the presumed AQF level of the program.

Clarification of research content to meet AQF requirements.
This is relevant to graduate entry programs at AQF Level 9 that require the application of knowledge skills in planning and executing a substantial research project, capstone experience and/or piece of scholarship. This contrasts with the requirement of a ‘typical’ program leading to registration as a nurse or midwife at AQF Level 7.

Evidence demonstrating how industry partners will manage varied AQF-level student participation and entry to practice skills requirements.
The clear expectation and knowledge of industry partners on variations in curriculum content and cohort distinctions need to be reflected in the corresponding provision of Professional Experience Placements. This includes learning opportunities and models of supervision for students enrolled in non-standard programs leading to initial registration.

Evidence demonstrating specific preparation of Professional Experience Placement supervisors.
Supervisors of Professional Experience Placements should be prepared to flexibly accommodate students enrolled in non-standard programs who may demonstrate assumed advanced cognitive and problem solving skills in addition to novice technical skills.

Evidence of curriculum design and student support to meet the required volume of learning plus entry to practice requirements.
Curriculum design, learning and teaching strategies, provision of Professional Experience Placements and provision of student support should be developed so students enrolled in non-standard programs can demonstrate within a truncated timeframe all requirements for application for registration.

4.3 Enrolment of students

Students who are applying to undertake a program of study leading to a qualification that enables graduates to register or be endorsed as nurses or midwives must be advised of the accreditation status of the program prior to enrolling. The students must be assured they will be able to complete an approved course of study leading to registration or endorsement.

Education providers must ensure advertising material used to inform potential students contains accurate information on the accreditation status of both the education provider and
the program being advertised. Advertising a program before the accreditation process is complete must include a notation that the program of study is ‘subject to accreditation by ANMAC and approval by the NMBA’.

Education providers can choose to plan, develop and acquire the necessary resources to offer a program of study before receiving accreditation from ANMAC. This is at their own risk.

Teach-out and transition arrangements on expiry of accreditation period
The most appropriate option for students in an expired program is to enable them to transition into the equivalent point in a new program. ANMAC acknowledges it is not always possible to transition students because of major changes to a new program or for other reasons. In this instance, a ‘teach-out’ arrangement is required. This is where the student can complete the program they entered, even though its accreditation has expired. The length of the ‘teach-out’ is time limited but is a reasonable period that enables a student to complete or transition at a later date without losing their opportunity to register with the NMBA.

The length of the teach-out for each program relates to the length of the program based on a student being enrolled full time. For example, programs of:

- 12 months or less—length of the program after expiry + ½ the length of the program
- 18 months—length of the program + ½ the length of the program from the beginning of the fifth year of accreditation
- 2 years—length of the program + ½ the length of the program from the beginning of the fifth year of accreditation
- 3 years—length of the program + ½ the length of the program from the beginning of the fifth year of accreditation
- 4 years (dual degrees)—length of the program + ¼ the length of the program from beginning of the fifth year of accreditation.

NMBA Approved Programs of Study list
An education provider should only enrol students into a program once it appears on the NMBA Approved Programs of Study list. Accredited programs no longer being delivered by the education provider or no longer approved for new enrolments are on the NMBA Inactive Programs of Study list. A student who holds a qualification listed as inactive still qualifies for registration, endorsement or notation depending on the qualification type. This is provided they enrolled when the program was approved or before it became inactive.
5 Quality cycle for accreditation guidelines and standards

This section outlines ANMAC’s quality cycle which includes the regular review of all aspects of its standards, policies and procedures relating to accreditation. This includes the review of the:

- *National Accreditation Guidelines*
- policies, processes and procedures that relate to ANMAC’s responsibilities under the *National Law*
- ANMAC’s accreditation standards.

**ANMAC review of policies and processes**

A formal review of ANMAC’s policies and processes—including those relating to accreditation—takes place every three to five years. This review is undertaken through formal planning and with relevant accreditation staff. Information is gathered through research and wide-ranging stakeholder consultation. Collated information is provided to ANMAC for discussion and action.

**ANMAC review of accreditation standards**

A formal review of ANMAC’s approved accreditation standards for nursing and midwifery education programs in Australia takes place generally every five years.

This requires considering the purpose of professional education accreditation. The review is concerned with the quality of the profession and its work, from a public interest and community safety perspective. It is part of a broader process of assuring the community that, having completed an accredited program of study, beginning professional practitioners have achieved agreed professional outcomes and can practise in a safe and competent manner because they are equipped with the necessary foundation knowledge, professional attitudes and essential skills.

ANMAC’s review of the accreditation standards, relies on these two fundamental principles:

1. education providers are authorised to issue the relevant qualification and are evaluated to assure continued quality learning outcomes for their graduates (TEQSA, ASQA and AQF).
2. a set of agreed and contemporary competency standards exist for the profession, against which the capability of intending graduates of entry to practice programs can be assessed (against Standards for Practice).

For more information on the review of nursing and midwifery standards please refer to ANMAC’s *Protocol for the Review of Nursing and Midwifery Accreditation Standards*. 
6 Accreditation fees

ANMAC charges education providers to accredit programs of study. The cost is determined by factors including:

- length of program—over 12 months, between 6 and 12 months or under 6 months
- type of accreditation—full submission or changes to an existing program
- complexity of accreditation—examples: if a program is offered from more than two sites; if dual degrees are involved; if a joint site visit is required
- program changes—determined by the complexity of change and level of assessment required.

The fee schedule is available on the ANMAC website.

Monitoring
If ANMAC receives a concern or complaint relating to an education provider or approved program and needs to undertake a site visit as part of the monitoring process, ANMAC will invoice the Education Provider to recover costs.

Refunds
An education provider may be eligible for a refund if they withdraw a program after the assessment process has started. Any refund is determined by how much work ANMAC has already completed. This is at the CEO’s discretion. Generally, an education provider is not eligible for a refund after ANMAC has conducted a site visit.

Invoice
Education providers are invoiced when ANMAC conducts the preliminary review of their submission.
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td>Approved Program</td>
<td>A program of study that has been accredited by ANMAC and approved by the NMBA. Approved programs will appear on the AHPRA Approved Programs of Study (APoS) list, once on the APoS list, students may be enrolled into the program.</td>
</tr>
<tr>
<td>Australian Health Practitioner Regulation Agency (AHPRA)</td>
<td>The organisation responsible for the implementation of the National Registration and Accreditation Scheme across Australia. AHPRA supports the National Health Practitioner Boards in implementing the National Registration and Accreditation Scheme. AHPRA manages the registration and renewal processes for health practitioners and students around Australia.</td>
</tr>
<tr>
<td>Australian Nursing and Midwifery Accreditation Council (ANMAC)</td>
<td>The independent accrediting authority for nursing and midwifery under the National Registration and Accreditation Scheme. In this role ANMAC is responsible for developing the content of accreditation standards and determining whether programs of study for nurses and midwives seeking to practice in Australia meet the required education standards. This contributes to protecting the health and safety of the community.</td>
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<tr>
<td>Australian Qualifications Framework (AQF)</td>
<td>The national policy for regulated qualifications in Australian education and training. It incorporates the qualifications from each education and training sector into a single comprehensive national qualifications framework.</td>
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<tr>
<td>Australian Qualifications Framework (AQF) qualification</td>
<td>This qualification is the result of an accredited complete program of learning leading to formal certification that a graduate has achieved learning outcomes as described in the AQF.</td>
</tr>
<tr>
<td>Australian Qualifications Framework (AQF) register</td>
<td>A register of all AQF qualifications and the organisations authorised to issue them.</td>
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<tr>
<td>Australian Skills Quality Authority (ASQA)</td>
<td>The national regulator for Australia’s vocational education and training sector that regulates courses and training providers to ensure nationally approved quality standards are met.</td>
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<tr>
<td>Curriculum</td>
<td>Incorporates the nursing or midwifery program’s total planned learning experience including: educational and professional philosophies subject outlines</td>
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<td>links between subject learning outcomes, their assessment and the national competencies or standards for practice teaching and learning strategies practice placement plan.</td>
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<tr>
<td>Delivery mode</td>
<td>The means by which programs are made available to students: on-campus or in mixed-mode, by distance or by e-learning methods.</td>
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<tr>
<td>Education provider</td>
<td>An organisational entity responsible for the design and delivery of a program of study from which graduates are eligible to apply for nursing or midwifery registration or endorsement.</td>
</tr>
<tr>
<td>Entry to practice program</td>
<td>The NMBA approved, three-year program of education for entry to register as a Registered Nurse. The minimum qualification must be a Bachelor Degree (or where relevant, a postgraduate qualification) offered by a university or higher education provider and the minimum length of the course is equivalent to six semesters of full-time study</td>
</tr>
<tr>
<td>Governance</td>
<td>The framework, systems and processes supporting and guiding an organisation towards achieving its goals and the mechanisms by which it, and its people, are held to account. Ethics, risk management, compliance and administration are all elements.</td>
</tr>
<tr>
<td>Graduates</td>
<td>Those who, having successfully undertaken a program of study that enables them to apply for registration or endorsement with the NMBA.</td>
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<tr>
<td>Health informatics</td>
<td>The appropriate and innovative application of the concepts and technologies of the information age to improve health care and health.</td>
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<tr>
<td>Health Practitioner Regulation National Law Act 2009 (the National Law)</td>
<td>This legislation contained in the schedule to the Act, provides for the full operation of the National Registration and Accreditation Scheme for health professions from 1 July 2010 and covers the more substantial elements of the national scheme, including registration arrangements, accreditation arrangements, complaints, conduct, health and performance arrangements, and privacy and information-sharing arrangements. The purpose is to protect the public by establishing a national scheme for regulating health practitioners and students undertaking programs of study leading to registration as a health practitioner.</td>
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<td>High Risk Program</td>
<td>High-risk ratings may result when the majority of the measured risk factors indicate that there is increased likelihood of the program not being delivered as accredited. For example, programs with: conditions imposed by ANMAC or other regulatory body • multiple campuses • substantiated complaints • unapproved changes</td>
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<tr>
<td>Higher education provider</td>
<td>Tertiary education provider who meets the Higher Education Standards Framework (Threshold Standards) as prescribed by the Tertiary Education Quality and Standards Agency Act 2011 and is registered with TEQSA.</td>
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<tr>
<td>Learning outcomes</td>
<td>The skills, knowledge and attitudes identified as the requirements for satisfactory program completion including, but not limited to, the relevant NMBA standards for practice.</td>
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<tr>
<td>Low Risk Program</td>
<td>Low-risk ratings may result when few or none of the measured risk factors are present and therefore it is likely that the program will be delivered as accredited</td>
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<tr>
<td>Measurable indicators</td>
<td>Used in the risk assessment, they are: Previous experience in delivering a nursing or midwifery accredited program History of compliance with accreditation standards Current conditions on a program imposed by ANMAC or another regulation body Substantiated complaints against a program Number of campuses at which a program is delivered</td>
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<tr>
<td>Medium Risk Program</td>
<td>Medium-risk ratings may result when some of the measured risk factors indicate that there is increased likelihood of the program not being delivered as accredited.</td>
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<tr>
<td>Monitoring</td>
<td>As described in Section 50 of the National Law, ANMAC monitors programs of study approved by the NMBA to ensure the program and education provider continue to meet the approved accreditation standards. This consists of routine, targeted or random monitoring methods. Monitoring of a program can include: Reviewing the Program Monitoring Report provided by the education provider Reviewing reporting requirements</td>
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<td>Conducting site visits</td>
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<td>Reviewing complaints</td>
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<tr>
<td>Nursing and Midwifery Board of Australia (NMBA)</td>
<td>The national regulator for the nursing and midwifery professions in Australia. It is established under the Health Practitioner Regulation National Law, as enacted in each state and territory. Its primary role is to protect the public and set standards and policies that all nurses and midwives registered within Australia must meet.</td>
</tr>
<tr>
<td>Professional experience placement</td>
<td>The component of nursing education that allows students to put theoretical knowledge into practice within the consumer care environment. It includes, but is not limited to, the hospital setting, and may include general practice, remote and rural health clinics, and community care environments. It excludes simulation.</td>
</tr>
<tr>
<td>Program Changes</td>
<td>A change to an approved program of study against the relevant standard the program is accredited against. Program changes are notifiable to ANMAC based on the risk rating of the program. Program changes are notifiable prospectively or retrospectively.</td>
</tr>
<tr>
<td>Program Monitoring Report</td>
<td>A report (completed by the education provider) designed to confirm that a program continues to be delivered as accredited, against the relevant accreditation standards. This report is required to be submitted to ANMAC routinely on the anniversary of the program’s accreditation. If the document is not submitted, it may place the ongoing accreditation of the program in jeopardy.</td>
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<tr>
<td>Program or program of study</td>
<td>The full program of study and experiences that are required to be undertaken before a qualification, such as a statement of completion or attainment, can be awarded.</td>
</tr>
<tr>
<td>Prospective Program Change</td>
<td>A change that must be notified to ANMAC BEFORE it is implemented. This will change depending on the risk rating of the program, but always includes: New sites Increases in student numbers over the maximum number of students/cohorts allowed for the accredited program Change to delivery mode for a program</td>
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<tr>
<td>Random Monitoring</td>
<td>A random monitoring activity may be a request for information relating to a specific standard or criteria, an additional program monitoring report</td>
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<td>Random monitoring activities</td>
<td>Random monitoring activities can occur regardless of the risk rating of a program.</td>
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<tr>
<td>Retrospective Program Change</td>
<td>A change that may be notified to ANMAC after it occurs. This only applies to Low and Medium risk programs and is any change (other than what must be notified prospectively) to the approved program against the relevant standard the program is accredited against. These changes are notified to ANMAC via the Program Monitoring Report.</td>
</tr>
<tr>
<td>Risk assessment</td>
<td>Risk assessment applies a set of risk determinants and measurable indicators to all nursing and midwifery education programs. It is based on the principles of ISO 31000:2009 Risk Management Standard.</td>
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</tbody>
</table>
| Risk management                         | ANMAC’s risk assessment for Nursing and Midwifery programs incorporates:   
  • Identify risks/hazards   
  • Assess the likelihood of the risks occurring and the severity of the consequences if the risks do occur and   
  • Prevent the occurrence of the risks, or minimise their impact. |
| Risk Rating                             | Completion of a risk assessment using measurable indicators results in a risk rating of high, medium or low. The risk rating determines how a program will be monitored. |
| Routine Monitoring                      | Routine monitoring occurs annually. ANMAC will send a link for the Program Monitoring report to the education providers 30 days before the due date (the anniversary of approval of the program). A reminder will be sent 14 days before the program is due. Routine monitoring activities will occur regardless of the risk rating of the program. |
| Standard                                | A level of quality or attainment.                                                                                                         |
| Targeted Monitoring                     | Targeted monitoring will occur based on the measured indicators that show increased risk. Targeted monitoring may include requests for information relating to a specific standard or criteria, an additional program monitoring report or a site visit. Targeted monitoring will occur for medium and high risk programs. |