

**STANDARDS FOR THE  
ACCREDITATION  
OF  
DEGREE NURSING PROGRAMMES  
  
IN THE  
CARIBBEAN COMMUNITY  
(CARICOM)**

**Caribbean Accreditation Authority  
for Education in Medicine  
and other Health Professions**

**CAAM-HP- 2010**

**For further information, contact:  
The CAAM-HP Secretariat  
P.O. Box 5167, Kingston 6, Jamaica  
Tel: (876) 927-4765  
Fax: (876) 927-6781**

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# **STANDARDS FOR THE ACCREDITATION OF UNIVERSITY SCHOOLS OF DEGREE NURSING PROGRAMMES**

## **INTRODUCTION**

### **A. Accreditation**

Accreditation is a peer review process designed to attest to the educational quality of new and established educational programmes.

The Caribbean Accreditation Authority for Education in Medicine and other Health Professions (CAAM-HP) is established to accredit dental, medical, veterinary and other health professions education programmes leading to professional degrees required for practice in CARICOM member states. By assessing and judging the compliance of professional education programmes with nationally and internationally accepted standards of educational quality, this accreditation agency serves the interests of the general public in the CARICOM member states and the interest of the students enrolled in the programmes of the schools. The Accreditation reports are intended to confirm to member governments, registration bodies (local, regional and international), as well as education institutions, the quality of the programmes offered by the participating institutions.

### **B. Goals**

The goals of the accreditation process are to:

1. Develop quality nursing education programmes, consistent with the ideals of the profession, the society and the parent institution and which meet the requirements of the profession's regulatory bodies.
2. Produce nurses for the region who are educated to function responsibly in diverse health care environments, contributing to health promotion and maintenance services; nurses who provide care to individuals across their lifespan, to families, groups and communities with a variety of health problems.
3. Develop within nursing graduates a keen awareness of the values of the profession of nursing.
4. Foster systematic enquiry into the nursing and health care system.
5. Evaluate programme outcomes relative to the institution's mission, vision and programme objectives.
6. Create awareness of the value of continuing quality improvement of the education programmes and their impact on the development of the profession and its contribution to positive health outcomes.

7. Assure the public of the competence of the graduates of these programmes and their ability to practice ethically and safely.

Emphasis is to be placed on professional nursing competence on graduation, valuing and observing self-directedness for life-long learning in maintaining personal and professional development.

Evidence of education in ethical standards, evidenced-based decision-making and clinical competence, is a primary focus in establishing these standards for professional nursing education.

### **C. Criteria for Evaluation**

The following three values or qualities are essential to the development of an educational programme, and are the criteria against which all aspects of the programme are judged.

**Relevance:** The extent to which the goals, activities and outcomes of the nursing educational programme(s) are a response to the health needs of a society.

**Relatedness:** The inter-relatedness of the parts of a nursing education programme, i.e., curriculum, teaching of nursing, practice of nursing and research, and administration, and their influence in developing and achieving programme goals.

**Accountability:** The extent to which the nursing school values its primary responsibility of teaching the student, its relationships with stakeholders, and developing within the students the obligation to embrace the responsibility for safe and ethical patient care.

### **D. Areas**

CAAM-HP has identified the following six areas as essential to quality education in nursing and has formulated its accreditation standards accordingly.

- I. Institutional Setting
- II. Students
- III. Education Programmes
- IV. Faculty and Staff
- V. Educational Resources
- VI. Continuing Professional Education

These standards identify basic elements that are required of all accredited nursing education programmes, while allowing for creativity in the pursuit of excellence in programme development and execution.

Each standard, written to provide an inter-related and holistic view of the programme, is supported by criteria and annotations, which elaborate the respective standards and guide and enhance the accreditation evaluation process.

To achieve and maintain accreditation, degree nursing programmes must meet the standards portrayed in this document.

The standards have been compiled consistent with global nursing accreditation authorities including WHO, Australia, Canada, Europe, and the USA.

### **E. Use of the standards**

This document presents the CAAM-HP accreditation standards for degree nursing programmes in the Caribbean Community (CARICOM).

The standards are intended to guide the university schools of nursing in the development, implementation and evaluation of their nursing education programmes.

It is the responsibility of the university nursing school to seek accreditation of its programme(s) by CAAM-HP.

## ACCREDITATION STANDARDS

### I. INSTITUTIONAL SETTING

#### A. Governance and Administration

IS.1 The nursing school's defined governance structures and functions, including the responsibilities and privileges of administrative officers, faculty, students and committees, are promulgated in the university by-laws and in the nursing school's handbooks.

IS.2 The defined administrative structure and functions, including committees of the nursing school must show their relationships within the university, and indicate the autonomy of the school's faculty as a body responsible for decision-making affecting all aspects of the professional education programme.

A description / flow chart of the governance and administrative structure should be available.

IS.3 The governance and administrative committees of the school should have representation from academic staff, students and other stakeholders.

The roles of the faculty and students and other stakeholders in the governance of the programme should be clearly defined and known to all.

Important areas where there must be direct faculty involvement include admissions, curriculum development, implementation and evaluation, student promotions and policy formulation.

There should be evidence produced of regular meetings of stakeholders for members to discuss the school's policies and practices.

IS.4 The nursing school should have a link with the Ministry of Health and institutions providing different levels of care, to serve as a conduit for pertinent information related to the needs of the health sector.

IS.5 The governing body responsible for oversight of the nursing school is composed of persons who have the educational needs of the institution as a primary interest and have no conflict of interest in the operation of the school, its clinical facilities, and/or other related teaching or service facilities.

IS.6 The terms of office of governing body members should be of sufficient duration to permit an understanding of the programmes of the nursing school and their operation.

- IS.7 Administrative officers and members of the faculty must be appointed by, or on the authority of the governing body of the school or its parent institution.

Written policies on appointments of officers and faculty should be presented.

- IS.8 The director or chief official of the nursing school must have access to the administrative head of the university or other university official charged with final responsibility for the school, and to other university officials as are necessary to fulfill the responsibilities of the office.

- IS.9 There should be a clear understanding of the authority and responsibility for nursing school matters among the administrative officials of the university, the director of the school, the faculty, and the administrative officials of other components of the teaching complex and of the university.

- IS.10 The nursing school administration should include such associate or assistant directors, programme coordinators or other such staff as are necessary to accomplish the mission and strategies of the school.

Areas that require administrative support include admissions, student affairs, academic affairs, faculty affairs, postgraduate education, continuing education, clinical sites relationships, research, and business, planning, and fund raising.

An organizational structure of the administration of the school should be presented.

- IS.11 There should be evidence of active attempts to address excessive turnover or long-standing vacancies in school leadership, where a vacancy could negatively impact institutional stability, especially planning for or implementing the educational programme.

- IS.12 The nursing school should interface constructively with other disciplines in the parent institution, clinical practice sites, professional organizations, government and non-governmental organizations (NGOs) and with regional and international partners.

- IS.13 Regular evaluation of the nursing school director's effectiveness in advancing the vision, mission and strategies of the school and in leadership and administration of the programme is done.

- IS.14 A system of record keeping of matters pertinent to the school's administration, educational programmes and student's affairs must be kept.

- IS.15 Students and other records are kept confidential, according to the school's written policy on such matters.



## **B. Vision, Mission, Values and Strategies**

- IS.16 The university nursing school must have defined statements of its vision, mission, values and strategies, which are congruent with those of the parent institution, and the guidelines for the preparation of the professional nurse.

The educational programmes of the nursing school must be designed to provide their graduates with general professional competencies that are appropriate for entry to nursing practice, ethical and safe patient care, life-long learning, and serve as the foundation for advanced nursing education.

- IS.17 The vision, mission, values and strategies of the nursing school are defined by its principal stakeholders, which include the director, faculty, the profession, university, health authorities and wider society.

Documentation of the school's vision and mission statement should be presented.

- IS.18 The strategies should portray the educational process that would result in a professional nurse competent to practice in CARICOM countries, in keeping with the roles of professional nurses in the health care system, and with an appropriate foundation for pursuing advanced education in nursing.

The strategies should support research and evidence-informed practice and be up to date within the context of the parent university mandates, health system strategic goals, and expectations for professional practice.

- IS.19 The governance and administration of the nursing school should promote its vision, mission and values and facilitate the achievement of its strategic objectives.

The vision, mission, values and strategic objectives are accessible to current and prospective faculty and students.

Evidence should be available to show that the faculty regularly evaluates the adherence of these statements with programme preparation, delivery and evaluation.

## **C. Academic Environment**

- IS.20 The nursing school is a component of a university which should be registered in the country where it is based. The University should offer other graduate, research and professional degree programmes that contribute to the academic environment of the nursing school.

Documentation of the legal status of the nursing school or Parent University must be presented.

- IS.21 Faculty and students must have the opportunity to participate in research and other scholarly activities of the school and university.

Evidence of research work undertaken by the faculty/students in the school should be presented.

- IS.22 Faculty members should work mutually in teaching, research, and appropriate health care delivery programmes.

There is evidence of close interaction among faculty members in the various disciplines and an understanding of the relevance and integration of the various disciplines to nursing practice and nursing education.

- IS.23 The nursing school must meet the accreditation / registration requirements as outlined by the recognized accreditation authority in the country where it is based.

Documentation of any national accreditation status is presented.

#### **D. Safe and Positive Practice Environments**

- IS.24 The nursing school must create and maintain a safe and positive work environment for faculty, staff and students.

The nursing school director ensures that appropriate systems and protocols for safe practice environments, risk management and safety are employed within the workplace by all faculty, staff and students.

There must be written policies and strategies which are congruent with the parent university's established policies and procedures, for developing and maintaining a positive work environment, including strategies for dealing with grievances, workplace stress, discrimination and violence.

## **II. STUDENTS**

### **A. Admissions**

- NS.1 Students must meet the minimum admission criteria defined by the university for its degree programmes and as deemed essential preparation for completing the nursing school curriculum.

- NS.2 The nursing school must develop and publish policies, criteria and procedures for the selection and admission of students that are made readily available to potential applicants and their academic advisors.

The nursing school's publications, advertising, and student recruitment present a comprehensive and accurate representation of the vision, mission, values and objectives of the programme, and the school's criteria for selection and the admissions process.

- NS.3 The nursing school and parent university informational materials must describe the requirements for admission, and the qualifying degree as offered on-site, off-site or through distance education such as on-line programmes.
- NS.4 The nursing school should develop and publish technical standards for the admission of persons with disabilities in consonance with any legal requirements in the jurisdiction where the school is established.
- NS.5 The final responsibility for selecting students for admission to the nursing school should reside with a duly constituted faculty committee.
- NS.6 The nursing school should have a pool of applicants sufficiently large and possessing the published qualifications to fill its entering class.
- NS.7 The size and characteristics of the student intake must be related to the capacity of the nursing school at all stages of the education process.

The size of the entering class and of the student body as a whole is determined not only by the number of qualified applicants, but also the adequacy of critical resources:

- Finances
- Size of the faculty and the variety of specialties they represent
- Library and information systems resources
- Number and size of classrooms, student laboratories, and clinical experience sites and facilities
- Student services
- Instructional equipment
- Space for the faculty

- NS.8 The nursing school should select from among its qualified applicants students who possess the intelligence, integrity, personal and emotional characteristics necessary for them to become effective professional nurses.
- NS.9 The nursing school should have policies and practices ensuring the gender, racial, cultural, and economic diversity of its students.

The extent of diversity needed depends on the school's vision, mission, goals, the expectations of the community in which it operates, and its implied or explicit social contract at the national and/or regional level.

## **B. Visiting and Transfer Students**

- NS.10 Institutional resources to accommodate the requirements of any visiting or transfer students must not significantly diminish the resources available to existing enrolled students.
- NS.11 Transfer students from other schools for selected courses and clinical experiences should possess qualifications equivalent to the students they will join in these experiences.
- NS.12 Transfer students should not be accepted into the final year of the programme except under exceptional circumstances.
- NS.13 The accepting school must verify the credentials of visiting students, formally register and maintain a complete roster of such students, approve their assignments, and provide evaluations to their parent schools.

Registration of visiting students allows the school accepting them to establish protocols or requirements for health records, immunization, exposure to infectious agents or environmental hazards, insurance, and liability protection comparable to those of their own enrolled students.

## **C. Student Services**

### **1. *Academic and Career Counselling***

- NS.14 The system of academic advisory services for students should integrate the efforts of faculty members, course directors, and student affairs' officers with the school's counselling and tutorial services.
- NS.15 There should be a system to assist students in career choice and application to any extra-mural or postgraduate programmes, and to guide students in choosing elective courses.
- NS.16 The process of applying for extra-mural and postgraduate programmes must not disrupt the education of the students.
- NS.17 There must be a system in place to review and approve students' proposed extra-mural programmes and to ensure the return of performance appraisal by the host programme.
- NS.18 The school should develop financial aid resources that minimize any student indebtedness, and provides students with essential financial aid and management counselling.
- NS.19 The school must have a system of confidential counselling and health services for its students that includes programmes to promote their well-being and facilitate their adjustment to the physical and emotional demands of nursing school.

NS.20 Confidential counselling or health reports should **not** normally be used in academic evaluations or the promotion of students.

NS.21 Health and disability insurances should be available to all students.

NS.22 The nursing school must have policies addressing students' exposure to infectious and environmental hazards and should follow the guidelines in the jurisdiction in which they study in determining appropriate management, including immunization.

The nursing school institutes these policies by:

- Education of students about methods of prevention and control of cross-infection;
- Procedures for care and treatment after exposure, including definition of financial responsibility; and
- All registered students (including visiting students) are informed of these policies before undertaking any educational activities that would place them or patients at risk.

#### **D. The Learning Environment**

NS.23 The nursing school must define and publish the standards of conduct for the teacher-student relationship, and have written policies for addressing violations of these standards.

Mechanisms for reporting violations of these standards, such as incidents of harassment or abuse, assure that they can be registered by the student and investigated without prejudice to the student or faculty.

The policies specify mechanisms for the prompt handling of such complaints and promote educational activities aimed at preventing inappropriate behaviour.

NS.24 There should be no discrimination on the basis of gender, sexual orientation, age, race, religion, or creed in the admissions process and throughout the nursing school.

NS.25 The nursing school must publish for all faculty and students its standards and procedures for the evaluation, advancement, and graduation of its students and for disciplinary action.

NS.26 Students records should be confidential and available only to members of the faculty and administration with a need to know, unless released by the student or as otherwise governed by laws concerning confidentiality.

NS.27 Students must be allowed to review and challenge their records.

NS.28 The school should ensure that students have adequate study space, lounge areas, and personal lockers or other secure storage facilities.

## **E. Student Assessment**

NS.29 The nursing school's written policy must ensure ongoing assessment of students' performance in the cognitive, affective and psychomotor domains at all levels of the educational programme.

NS.30 The nursing school must define and document the methods of assessment, including the criteria for progression in the programme.

Assessments include both summative assessment, which results guide student progression, and formative assessment; its results guide students in the learning process.

Assessment methods should be clear, concise and known to students.

NS.31 The nursing school should ensure consistency in the application of the assessment methods throughout the programme.

NS.32 The reliability and validity of assessment methods should be evaluated and updated as required.

NS.33 There must be written policies for student transfer, withdrawal, and termination.

NS.34 There must be a formal and transparent process for taking any action that adversely affects the status of the student.

The process includes timely notice of the impending action, disclosure of the evidence on which the action would be based, an opportunity for the student to respond, and an opportunity to appeal any adverse decision related to promotion, graduation, or dismissal.

## **F. Student Representation**

NS.35 The nursing school should have student representation on appropriate committees, policy development activities and other matters relevant to the students.

Students' participate in the early detection and correction of problems and deficiencies associated with inter alia, course delivery including clinical experiences.

There is evidence to show that students actively participate on select committees, and other appropriate activities in the governance of the programme and in the ongoing efforts to improve programme quality.

NS.36 Students should actively participate on select committees, and other appropriate activities in the governance of the school, programme implementation and in the ongoing efforts to improve programme quality.

Minutes of appropriate committees showing the membership and participation of students should be available.

### **III. EDUCATION PROGRAMMES**

#### **A. Curriculum Development and Management**

ED.1 The nursing degree programme must prepare graduates to function ethically and safely as a practitioner in all health care settings, contributing to health promotion, restoration and maintenance health services and the care of individuals across their lifespan, their families, and in community groups.

ED.2 The nursing school faculty should have the responsibility and authority for the design, implementation and evaluation of a coherent and coordinated curriculum; are accountable for the programme outcomes and have sufficient resources to fulfill this mandate.

An institutional body (commonly a curriculum committee) oversees the educational programme as a whole. An effective central curriculum authority exhibits:

- Faculty, student, and administrative participation
- Expertise in curricular design, pedagogy, and evaluation methods
- Empowerment to work in the best interests of the institution's programmes without regard for parochial or departmental pressures.

The phrase "coherent and coordinated curriculum" implies that the programme as a whole is designed to achieve the school's overall educational objectives. Evidence of coherence and coordination includes:

- Logical sequencing of the various segments of the curriculum
- Content that is coordinated and integrated within and across the academic periods of study (horizontal and vertical integration)
- Methods of pedagogy and student evaluation that is appropriate for the achievement of the school's educational objectives.

Evidence of effective curriculum management includes:

- Evaluation of programme effectiveness by outcome analysis
- Monitoring of content and workload in each discipline, including the identification of omissions and redundancies
- Reviewing the stated objectives of individual courses and clinical experiences, as well as methods of pedagogy and student evaluation, to assure congruence with institutional educational objectives.

Minutes of the curriculum committee meetings and reports to the faculty governance and director document that such activities take place and show the committee's findings and recommendations.

- ED.3 The primary health care-focused curriculum is congruent with and responsive to the health system strategic orientation, standards and any national or regional guidelines.

There is evidence of the use of national or regional nursing regulations and other related documents, such as internationally defined competencies for the professional nurse and the nursing code of ethics.

- ED.4 The curriculum must be designed, developed, implemented and evaluated to reflect clear statements of expected student learning outcomes that are consistent with the overall programme expectations.

- ED.5 The curriculum scope, objectives, course descriptions, sequencing and methods of integration should guide faculty and students progression at each level of implementation.

The educational objectives represent the cognitive, affective and psychomotor domains consistent with the level of behaviour the student is expected to exhibit at that particular stage of the curriculum.

Student achievement of these objectives is shown by specific and measurable outcomes as documented in the courses and clinical practice.

- ED.6 Sequence, relevance, relatedness, integration, and internal consistency should be observed in defining curriculum statements, course objectives, and content, learning objectives, teaching/learning methods, learning experiences, student evaluation methods and enable students to develop life-long self-directed study skills.

- ED.7 The curriculum should prepare nursing students to recognize and appropriately address gender, cultural and religious biases in themselves and others, and in the process of providing patient care.

- ED.8 The curriculum content must cover cultural diversity and belief systems with respect to health and illness and the manner in which people of diverse cultures and belief systems perceive and respond to health, illness, various symptoms, and treatments.

Faculty and students should demonstrate an understanding of the manner in which people of diverse cultures and belief systems perceive health and illness and respond to various symptoms, diseases, and treatments.

To demonstrate compliance with this standard, the nursing school must document objectives relating to the development of skills in cultural matters, knowledge of international codes of professional conduct, and demonstrate the extent to which the objectives are being achieved.



ED.9 The nursing school must observe the following minimum standards, applicable for programmes of fulltime study depending on the objective of the degree programme:

- a. Bachelor of Science Degree in Nursing leading to registration with a national or regional regulatory body: At least -
  - 140 weeks of instruction delivered over at least 3 calendar years of 9 semesters or 4 academic years of 10 semesters
  - 2,000 hours of clinical practicum
  - 135 credits, at least 60% of these credits are dedicated to professional course work.
- b. Bachelor of Science Degree in Nursing for nurses registered with a national or regional regulatory body when admitted to the degree programme: At least -
  - 60 weeks of instruction delivered over at least 2 academic years
  - 400 hours of clinical practicum
  - 60 credits, 70% of these credits are dedicated to professional course work.

ED.10 Mandatory courses for the nursing undergraduate degree programme must include subjects from biological, e.g. anatomy, physiology, pharmacology; physical; behavioural and social sciences; the humanities and clinical professional nursing.

ED.11 Instruction within the basic sciences should include laboratory or other practical exercises that entail accurate observations of biomedical phenomena.

ED.12 The curriculum should include elective courses to supplement required courses.

Electives should permit students to gain exposure to and deepen their understanding of disciplines and provide opportunities for students to pursue individual academic interests.

ED.13 There must be comparable educational experiences and equivalent methods of evaluation across all alternative instructional sites of the nursing school.

Courses and clinical experiences duration should be similar. The instruments and criteria used for student evaluation, as well as policies for the determination of grades, should be the same at all alternative sites.

The faculty who teach at various sites must be sufficiently knowledgeable in the subject matter to provide effective instruction, with a clear understanding of the objectives of the educational experience and the evaluation methods used to determine achievement of those objectives.

Opportunities to enhance teaching and evaluation skills should be available for faculty at all instructional sites.

While the types and frequency of problems or clinical conditions seen at alternate sites may vary, each course or clinical experience must identify the core experiences needed to achieve its objectives, and ensure that students receive sufficient exposure to such experiences.

To facilitate comparability of educational experiences and equivalency of evaluation methods, the course coordinator must orient all participants, teachers and students, about the educational objectives and grading system used. This can be accomplished through regularly scheduled meetings between the coordinator of the course or clinical experiences and the directors of the various sites that are used.

The course/clinical experiences leadership should review student evaluations of their experiences at alternative sites to identify any persistent variations in educational experiences or evaluation methods.

## **B. Clinical Teaching Programme**

ED.14 The clinical teaching programme must be consistent with the curriculum statements, courses, and objectives and define the clinical objectives, related student placements, teaching, supervision and evaluation.

ED.15 The curriculum must prepare students for their role in addressing the realities of demographic, epidemiological and socio-economic influences on health and health care quality.

ED.16 Clinical experiences must cover the continuum of wellness to ill-health and include health promotion, restoration of well-being and rehabilitation.

ED.17 Clinical experiences must include practical experiences working as a member of a multi-disciplinary team.

The objectives for clinical education should include quantified criteria for the types of patients, the level of student responsibility, duration of the experiences, and the appropriate clinical settings needed for the objectives to be met; they should also specify the extent of student interaction with patients.

ED.18 The nursing school's Clinical Skills Laboratory (CSL) should have adequate space, equipment, supplies and multi-media technology for the students to learn and practice basic nursing skills in preparation for the administration of safe and ethical patient care at the clinical sites.

The Laboratory contains updated learning resources such as audiovisual equipment, scientific charts and models, and disposable and non-disposable supplies utilized in patient care. It provides as much as possible, a simulated

clinical environment with various equipment and life size manikins to simulate patient care situations.

ED.19 Nursing students must achieve mastery of selected clinical procedures through return demonstrations in the Clinical Skills Laboratory prior to engaging in actual patient care.

The faculty should employ various methods of assessing students' mastery. The results must be documented and made known to students and preceptors. Students should not provide unsupervised patient care without evidence of mastery in the applicable clinical procedures.

Students must be required to exhibit scrupulous ethical principles in caring for patients, families, and communities and in relating to others involved in care.

The nursing school must ensure that students receive instruction in appropriate professional ethics, human values, communication skills, and patient and staff safety, before engaging in patient care activities.

Adherence to ethical and safety principles must be observed, evaluated, and reinforced throughout all formal instructional efforts.

ED.20 Clinical teaching activities should be pursued in diverse environments that best serve the educational programme interests, such as the range and level of service and care provided, and include health and related health sectors, regional, international organizations/agencies, and NGOs.

ED.21 Clinical or other facilities that serve as major sites for nursing student clinical experiences must be approved for health care delivery by the regulatory bodies in the jurisdiction.

Students' clinical experience sites should include primary, secondary and tertiary level health care facilities for all ages.

Documentation of the assessment of the clinical sites by the jurisdiction regulatory body should be available.

ED.22 The criteria used for the selection of patients, clinical settings, levels of student participation, supervision and evaluation should be based on written programme objectives which are made known to all students, faculty and others with responsibilities in the education programme.

ED.23 Clinical Instructors/Preceptors, who teach, supervise and evaluate nursing students, must be familiar with the educational objectives of the course, be competent in their assigned specialty, and are prepared for their roles in teaching, supervision and evaluation.

- ED.24 Supervision of student learning experiences must be provided throughout required clinical practice and practicum by members of the school's faculty and approved staff from the affiliated institutions/agencies.
- ED.25 Written contractual agreements, which state the responsibility of the nursing school and the agencies for placement of students for their required learning experiences, should exist between the school and affiliated teaching sites.
- ED.26 The nursing school must retain the control of the education programme for students in the partnership between the school and the affiliated clinical sites.

### **C. Teaching and Evaluation**

- ED.27 The nursing school must demonstrate the use of recognized approaches to teaching and learning in their programmes; approaches that reflect current and emerging trends in education technology, adult education, self-directed learning, e-learning, clinical simulation, and are aimed at eliciting active student participation and achieving programme objectives.
- ED.28 The faculty should employ a variety of instructional methods that satisfy the requirements of the course objectives, content, learning experiences and student characteristics.

There should be evidence of a variety of instructional technologies, which are current and relevant.

- ED.29 The faculty of each course should collaboratively set the standards of achievement in that course, including knowledge, attitudes and practice in the course.
- ED.30 The coordinators of all courses and clinical experiences must design and implement a system of formative and summative evaluation of student achievement in each course and clinical experience.
- ED.31 Regular feedback on students' progress in achieving the expected programme outcomes must be documented and made available to students and faculty and a system of remediation implemented.

Evaluation of student performance must measure not only the retention of factual knowledge, but the development of the skills, behaviours, and attitudes needed in professional practice, as well as the ability to use data appropriately for solving problems commonly encountered in practice.

Those directly responsible for the evaluation of student performance should understand the uses and limitations of various test formats, reliability and validity issues, and objective vs. subjective formats.

Courses or clinical experiences that are short in duration may not have sufficient time to provide structured evaluation activities but should provide some alternate means (such as self-testing or teacher consultation) that allow students to measure their progress in learning.

ED.32 Where teacher-student interaction permits these forms of assessment, narrative descriptions of student performance including personal qualities and interactions should be included as part of the evaluation in all required courses and practicum.

#### **D. Geographically Separated, On-line and Franchise Programmes**

ED.33 The nursing school's administration is responsible for the quality and conduct of the educational programmes and for assuring the adequacy of faculty and other resources at all educational sites.

The nursing school must demonstrate the means by which faculty at dispersed sites participate in and are held accountable for student education that is consistent with the objectives and performance expectations established by the course or clinical experience leadership.

ED.34 The principal academic officer of each geographical site should be administratively responsible to the director of the parent nursing school conducting the educational programme.

ED.35 The faculty at all sites should be functionally integrated by appropriate administrative mechanisms.

Mechanisms to achieve functional integration can include regular meetings; electronic communication; periodic visits to all sites by course leadership; sharing of course or clinical experiences evaluation data and other types of feedback regarding faculty performance of their educational responsibilities.

ED.36 The parent nursing school must assume ultimate responsibility for the selection and assignment of all nursing students when geographically separated campuses are operated.

ED.37 There must be a single standard for promotion and graduation of students across geographically separate sites.

ED.38 Students assigned to all sites should have the same rights, receive the same support services and have the opportunity to move among the component programmes of the nursing school.

#### **E. Programme Assessment and Renewal**

ED.39 The nursing school must conduct ongoing and systematic formative and summative assessments of the performance of its current students.

The appropriate committee should give attention to the impact on students of the amount of work required, including the frequency of examinations and their scheduling.

ED.40 The nursing degree programme administration must document student progress toward completion of the degree requirements.

ED.41 There should be a dynamic process in place for regular review and renewal of the nursing school mission, values, strategies, structures and functions, and the educational programme(s).

The nursing school should engage in a process of total quality improvement to facilitate curriculum renewal and update in response to changing health and social issues / problems and national, regional or international priorities.

ED.42 The nursing school programmes and resources should be kept current in accordance with any change in institutional mission, strategies and policies, current trends in nursing, epidemiology, demography, health and social conditions, health care delivery, and nursing regulatory requirements.

The faculty committee responsible for the curriculum must monitor the content provided in each course so that the school's educational objectives are achieved.

The committee, working in conjunction with the director/administrative head of the school, should assure that each academic period of the curriculum maintains common standards for content and its delivery. Such standards should address the depth and breadth of knowledge required for a general professional education, currency and relevance of content, and the extent of redundancy needed to reinforce learning of complex topics. The final year should complement and supplement the curriculum so that each student will acquire appropriate competence in professional nursing practice.

ED.43 Accredited programmes must notify CAAM-HP of plans for any major modification of the curriculum.

Notification should include the explicitly defined goals of the change, the plans for implementation, and the methods to be used to evaluate the results.

The plan for change should include the incremental resources that will be required, including the physical facilities; faculty; student facilities; demands on library and computer facilities and operations; and equipment needs.

In view of the increasing pace of discovery of new knowledge and technology, experimentation that aims at increasing the efficiency and effectiveness of nursing education should be encouraged.

## **F. Programme Effectiveness**

### **1. Outcomes**

ED.44 Graduates of the nursing school should have achieved established curriculum competencies and are prepared to practice nursing ethically and safely.

ED.45 The nursing school should evaluate the effectiveness of the educational programme, documenting the extent to which its objectives have or have not been achieved, using the results to guide programme improvement.

Relevant outcome measures include data on student performance, academic progress and programme completion rates, acceptance into postgraduate programmes, and practice characteristics of graduates.

ED.46 Students evaluation of their courses, clinical sites and teachers indicate the quality of the programme's performance.

ED.47 Graduates of the nursing programme meet the standards necessary for professional registration as a nurse at a national and regional level.

ED.48 Graduates are capable of successfully undertaking advanced education programmes.

ED.49 Programme effectiveness is evidenced by:

- Success rate for programme completion in the stipulated period of study
- Performance in National / Regional Examinations for Nurse Registration
- Job placement
- Employers' performance rating at least 12 months after graduation
- Job satisfaction as evidenced by self-assessment at least 12 months after graduation.

## **IV. FACULTY AND STAFF**

### **A. Number, Qualifications and Functions**

FA.1 The recruitment and development of the nursing school's faculty and staff should take into account its mission and the diversity of its student body.

FA.2 The director/dean of the nursing school should have a graduate nursing degree and be educationally and experientially qualified to provide effective leadership and administration in professional nursing education, scholarly and other activities of the school.

The director/dean of the nursing school has the authority to administer the business of the school including its educational programmes. Such authority

extends to overall responsibility for the delivery of the nursing programmes at geographically separate sites.

- FA.3 The nursing school should have a staffing plan that delineates the quantity, quality and functions of the faculty and staff.

The profile of both faculty and administrative staff should be suitable for the implementation of the nursing school's vision, mission, strategic goals and educational programme.

- FA.4 The core academic faculty should be registered nurses and midwives who demonstrate knowledge as educators and have a minimum of a bachelor's degree – preferably a postgraduate degree, with advanced preparation and clinical competence in their specialty area.

- FA.5 There must be a sufficient number and mix of faculty members in the subjects essential to nursing to meet the needs of the educational programme.

- FA.6 The faculty to student ratio in the clinical areas should be sufficient to ensure optimum student learning and safe patient care.

The number and type of faculty appointed in the clinical areas, should relate to the level of the students, diversity of patient care, and the health promotion and maintenance activities required.

- FA.7 There must be a sufficient number and mix of administrative staff for the nursing school to meet its academic and administrative mandates.

- FA.8 Faculty members should have the capability and continued commitment to be effective teachers.

Faculty members involved in teaching, course planning and curricular evaluation should possess or have ready access to expertise in teaching methods, curriculum development, programme evaluation, and student evaluation. Such expertise may be supplied by an office of professional education or by faculty/staff members with backgrounds in educational science.

Faculty involved in the development and implementation of a course, clinical teaching, or larger curricular unit should be able to design the learning activities and corresponding evaluation methods (student and programme) in a manner consistent with the school's stated educational objectives.

Registered Nurses/Midwives appointed to the faculty, on a part-time basis or as volunteers, should be able to serve as role models for students, and provide insight into health promotion and safe and ethical patient care.



Among the lines of evidence indicating compliance with this standard are the following:

- Documented participation of the faculty in professional development activities related specifically to teaching and evaluation
- Attendance at international regional or national meetings on educational affairs
- Evidence that faculty members' knowledge of their specialty is current.

## **B. Personnel Policies**

FA.9 There must be written policies for faculty appointment, renewal of appointment, promotion, granting of tenure, and dismissal that involve the faculty, the appropriate department heads, and the director.

FA.10 Faculty members must receive written information about their terms of appointment, responsibilities, and lines of communication, privileges and benefits.

FA.11 There should be a programme of on-going performance appraisal and feedback for faculty on their academic performance and their progress toward promotion.

FA.12 The school should have policies that deal with circumstances in which the private interests of faculty members or staff may be in conflict with their official responsibilities.

## **C. Professional Development of Faculty and Staff**

FA.13 The nursing school should have a policy and system, which provides education opportunities for the continuing professional education of its faculty and staff.

FA.14 Opportunities for professional development must be provided to enhance faculty members' skills and leadership abilities in education programme management and research.

FA.15 Research and scholarly activities that contribute to the advancement of nursing knowledge and education programme enhancement should be conducted by nursing faculty.

## **V. EDUCATIONAL RESOURCES**

### **A. General Facilities**

ER.1 The nursing school must have sufficient resources to fulfill its responsibility for the management and evaluation of the curriculum.

The kinds of resources needed to assure effective delivery of the educational programme include:

- Adequate numbers of teachers who have the time and education necessary to achieve the programme's objectives
- Appropriate teaching space for the methods of pedagogy employed in the educational programme
- Appropriate educational infrastructure (computers, audiovisual aids, equipment, laboratories, etc.)
- Educational support services, such as examination grading, classroom scheduling, and faculty training in methods of teaching and evaluation
- Support and services for the efforts of the curriculum management body and for any interdisciplinary teaching efforts that are not supported at a departmental level.

The school's facilities include offices for faculty, administrators, and support staff; -

- clinical skills and other laboratories;
- classrooms and lecture hall (s) sufficiently large to accommodate a full year's class and any other students taking the same courses;
- space for student use, including study space;
- space for library and information access.

Appropriate security systems should be in place at all educational sites.

- ER.2 The university should demonstrate an ongoing commitment and support for the nursing programme by making available resources to enable the nursing school to achieve its mission, strategies, and expected programme outcomes.
- ER.3 The nursing school must have easily accessible current and relevant information materials, communication technology, and physical facilities including but not limited to, offices, classrooms, clinical practice sites, and clinical simulation laboratories.

## **B. Finances**

- ER.4 The current and anticipated financial resources of the school should be adequate to maintain a sound programme of nursing education and to attain other institutional goals.
- ER.5 The nursing school should be responsible and accountable for preparing and managing a dedicated budget that meets the requirements of the programme, faculty and students.
- ER.6 Pressure for institutional self-financing must not compromise the vision, mission and educational programme of the school, nor cause it to enroll more students than its total resources can accommodate.

The costs of conducting the degree in nursing programme should be supported from diverse sources, such as tuition, endowments, the parent university, covenants, grants from organizations and individuals, and appropriations by government.

Evidence for compliance with this standard includes documentation of adequate financial reserves to maintain the educational programme in the event of unexpected revenue losses, and demonstration of effective fiscal management of the school's budget.

Reliance on student tuition should not be so great that the quality of the programme is compromised by the need to enroll or retain inappropriate numbers of students or students whose qualifications are substandard.

### **C. Information Resources and Library Services**

- ER.7 The nursing school must have ready access to a well-maintained library and information facilities, sufficient in size, breadth of holdings, and information technology to support its educational programme needs.

There is physical or electronic access to leading science and professional journals, periodicals, etc., the current numbers are available to faculty and students. The library and other learning resource centres are equipped to allow faculty and students to access information electronically, as well as to use self-instructional materials.

- ER.8 The library and information services staff are responsive to the needs of the faculty and students.

- ER.9 Educational resources including information technology and clinical facilities technologies should be selected by faculty and are relevant, comprehensive, current, and must be accessible to faculty and students.

Professional staff supervise the library and information services, and provides instruction in their use. The library and information services staff are familiar with current international, regional and national information resources and data systems, and with contemporary information technology.

Both school officials and library/information services facilitate faculty and students access to information resources, addressing their needs for information during extended hours and at dispersed sites.

## **VI. CONTINUING PROFESSIONAL EDUCATION**

- CE.1 A nursing school should provide education programmes for the continuing professional education (CPE) of its graduates, faculty and staff. Where appropriate such programmes should be done in consultation and cooperation with national and regional authorities to satisfy professional practice requirements.

- CE.2 Continuing professional education programmes should have the organisational structure and resources necessary to provide programmes of acceptable educational quality and promote quality of care through self-evaluation.
- CE.3 Programmes should be conducted according to standards and criteria developed by the school in keeping with any national, regional and international standards.
- CE.4 A nursing school should be prepared to cooperate with national and regional authorities in setting and the administration of professional examinations that authorities may deem necessary to determine the competence of nurses to enter or continue in professional practice.
- CE.5 A nursing school should provide opportunities for research and scholarly activity and the promulgation of the results of such work to the faculty, staff, students and the nursing profession.