

Guidelines on the Development of Courses Preparing Nurses & Midwives as Clinical Nurse/Midwife Specialists and Advanced Nurse/Midwife Practitioners



*National Council for the
Professional Development
of Nursing and Midwifery*

*An Chomhairle Náisiúnta d'Fhorbairt
Ghairmiúil an Altranais agus
an Chnáimhseachais*

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Introduction

Nursing and midwifery practice continues to evolve both nationally and internationally and the potential of nurses and midwives to contribute significantly to healthcare, in a wide variety of areas, remains. The mission of the National Council is to promote and develop the professional role of nurses and midwives in order to ensure the delivery of quality nursing and midwifery care to patients/clients in a changing healthcare environment. The development of specialist and advanced practice roles for nurses and midwives is central to this process. It also establishes a clinical career pathway for nurses and midwives, a function vested in the National Council by the Commission on Nursing. The National Council has defined the roles and core concepts for Clinical Nurse/Midwife Specialist (CNS/CMS) and Advanced Nurse/Midwife Practitioner (ANP/AMP) posts (Appendices 1 and 2).

Healthcare provision is complex and multi-faceted and the response of specialist and advanced practice is at an early stage in Ireland. The National Council recognises that the educational preparation for specialist and advanced nursing and midwifery practice is a process that involves a partnership between all stakeholders. As such, there is great scope for innovation in both the development of roles in line with service need and of educational courses to prepare nurses and midwives to meet those needs. Collaboration and partnership between service providers and educational institutions will enhance the relevancy of educational programmes and take cognisance of emerging trends in healthcare needs and provision. Appropriate educational preparation is vital in ensuring the safety and quality of the specialist and advanced practice contribution to healthcare. This document provides guidance to organisations engaged in the development of educational courses for CNSs/CMSs and ANPs/AMPs.

Guidelines are provided in relation to:

- Programme development, design and evaluation
- The curriculum
- Programme resources.

Guidelines specific to CNS/CMS courses and ANP/AMP courses are outlined on page 6.

Programme Development, Design and Evaluation

Educational programmes preparing nurses and midwives as CNSs/CMSs and ANPs/AMPs, should be developed in relation to service needs. Key stakeholders should be engaged in programme development and design and further development should be based on the findings of programme evaluation and quality improvement procedures.

Programme Development

- Programmes should evolve in response to an identified health service need as identified by health service policy, identified workforce needs, service plans, demographic trends and epidemiological profiles.
- In the spirit of partnership, all key stakeholders should be engaged in programme development and design. Development of programmes should be based on the findings of programme evaluation and quality improvement procedures.

Programme Design

- Programmes should be definable entities with a primary focus on the clinical role. The programme should contain core modules that may be shared with other programmes (or other disciplines if appropriate).
- The design of programmes should allow for them to be accessible to as wide a variety of nurses/midwives as possible taking cognisance of geographical distribution of services and the particular needs of the target group of students. This includes opportunities for distance learning, modularisation and part-/full-time participation where appropriate.
- Programmes should be designed so that prior learning and experience at an appropriate level can be accredited.
- The design of programmes should allow for students to access modules externally (i.e. in other educational facilities, countries, etc) where appropriate.

Programme Evaluation

- Evaluation and audit procedures from the full range of stakeholder perspectives should be developed and include annual external examiner reports, policies and procedures for student selection, post-programme tracking of graduates, service provider and service user satisfaction with graduate practice, response to health care developments and, CNS/CMS, ANP/AMP standards.

The Curriculum

Programme curricula should demonstrate best educational practice.

They should incorporate an integrated approach to theory and practice with recognition of their mutual significance to specialist and advanced professional practice.

Theoretical Content

- Curricula should be explicitly underpinned by the core concepts of the CNS/CMS (clinical focus, patient advocate, education and training, audit and research, consultant) or ANP/AMP (autonomy in clinical practice, pioneering professional and clinical leadership, expert practitioner, researcher) as outlined by the National Council for the Professional Development of Nursing and Midwifery.
- Curricula should contain the knowledge required to support the specific competencies of the area of practice.
- Curricula should state the research content and training in the programme and this should be commensurate with the programme award.
- Curricula should incorporate a variety of teaching and learning strategies suitable to the programme content and learning outcomes and which reflect the principles of adult learning and current healthcare provision.

Clinical Placements

- Clinical placements should offer a planned learning experience that allows students to develop the identified specialist or advanced practice competencies. The clinical facilities available for student placement should provide opportunities for a variety of clinical experiences of sufficient quantity and quality to prepare the student to fulfil the role of CNS/CMS or ANP/AMP. Clinical placements should be appropriate to the specialist or advanced practice area and support the achievement of learning outcomes including the identified competencies of the programme.
- The number of hours allocated to clinical practice should support the achievement of the programme learning outcomes. Supervision of practice may take various forms depending on the level of competence of the student, the type of clinical practice and the context of care. Detail of supervision provided should be explicit and justified in the programme. See page (6) for specific information regarding clinical placement hours for CNS/CMS and ANP/AMP.
- Appropriate specific learning outcomes including competencies for each clinical placement should be stated in the curriculum.
- Clinical placements should be located in areas in which the care is based on research and/or evidence and where audit of practice occurs.
- Students should be supervised in their practice by nurses/midwives and/or appropriate healthcare professionals¹ who are competent practitioners and have preparation and/or experience in the supervision of clinical practice; the teaching and assessment of clinical skills; and knowledge of the programme.
- The ratio of students to supervisors should be specified in the curriculum and justified taking cognisance of the type of clinical practice, the existing service and other commitments of the supervisor.
- Structured feedback for students undergoing supervision of clinical practice should be available and the mechanism for this information to be available to the programme leader should be demonstrated.

Student Assessment

- Student assessment should be a continuous process that is integrated throughout the curriculum.
- A range of assessment methods should be utilised that is consistent with programme content and learning outcomes and that meets educational quality indicators.
- An equal assessment weighting should be given to theoretical knowledge and clinical practice with no compensation between the two.

¹Appropriate health care professionals are deemed suitable to undertake a clinical supervisory role in the absence of a suitably qualified and experienced nurse or midwife. They include any member of the multidisciplinary health service provision team.

Programme Resources

The programme should be resourced in such a manner as to support its delivery and further development and to ensure quality programme provision.

Human Resources

- The programme should be led, in the spirit of partnership, by a registered nurse or midwife, with professional, academic and teaching qualifications or experience commensurate with the role of programme leader, and, where available a CNS/CMS or an ANP/AMP (or an expert nurse or midwife) as appropriate from the relevant area of practice.
- The number and qualifications of teaching staff and support staff should be sufficient to achieve the programme learning outcomes as outlined in the curriculum; reflect the area of speciality of the programme; and are sufficient for the numbers of students admitted to the programme.
- Lecturers should hold professional registration and academic qualifications commensurate with those aspects of the programme that they teach. A teaching qualification is desirable.
- Lecturers involved in teaching clinical elements of the programme should be competent in the area of practice that they teach and mechanisms for maintenance of competence should be in place.
- Formal structures such as joint appointments, teaching agreements or memoranda of understanding should exist between the third level institution and healthcare organisations to facilitate appropriate clinical staff in teaching clinical aspects of the programme and to facilitate appropriate academic staff in undertaking clinical practice, teaching and assessment in clinical areas.
- The department structures should facilitate protected time for teaching staff to undertake research.
- The department structures should facilitate protected time for teaching staff to be involved in clinical practice and clinical practice development.
- Provision should be made to support the professional development of the teaching staff.

Infrastructure

- Library access, with sufficient and appropriate literature for specialist/advanced practice, should be available for students and those delivering the programme.
- Students and those delivering the programme should have access to the necessary information technology required to support the programme.

Programme Participants

- The recruitment policy and criteria for the selection of students should be explicit.
- Student support within the programme should be demonstrated in the curriculum and should include equity of access to the full range of services provided by the institution(s).
- Standards for success and failure should be explicit and the mechanism by which students are provided with feedback on their progress throughout the programme should be available.

Guidelines Specific to CNS/CMS Courses

- The educational award should be a postgraduate diploma, higher diploma, graduate diploma or equivalent.
- The programme should contain a minimum requirement of 500 clinical hours² in the area of specialist practice, 250 of which must be in supervised clinical practice with explicit justification for the amount and level of supervision.

Guidelines Specific to ANP/AMP Courses

- The educational award should be a Master's degree.
- The programme should contain a minimum requirement of 1000 clinical hours², in the area of advanced practice, 500 of which must be in supervised clinical practice with explicit justification for the amount and level of supervision.
- The recruitment policy and criteria for the selection of students should be consistent with the National Council criteria for ANP/AMP.

²Clinical hours are defined as working in direct clinical practice associated with the achievement of the clinical learning outcomes of the programme and includes observation of clinical practice, supervised clinical practice and consolidation of clinical practice.

Appendix 1

Definition and Core Concepts of Clinical Nurse/Midwife Specialist

Definition

A nurse or midwife specialist in clinical practice has undertaken formal recognised post-registration education relevant to his/her area of specialist practice at higher diploma level. Such formal education is underpinned by extensive experience and clinical expertise in the relevant specialist area. The area of specialty is a defined area of nursing or midwifery practice that requires application of specially focused knowledge and skills, which are both in demand and required to improve the quality of client/patient care. This specialist practice will encompass a major clinical focus, which comprises assessment, planning, delivery and evaluation of care given to patients/clients and their families in hospital, community and outpatient settings. The specialist nurse or midwife will work closely with medical and para-medical colleagues and may make alterations in prescribed clinical options along agreed protocol driven guidelines. The specialist nurse or midwife will participate in nursing research and audit and act as a consultant in education and clinical practice to nursing/midwifery colleagues and the wider multidisciplinary team.

Core Concepts

- **Clinical Focus:** The role of CNS/CMS must have a strong patient focus whereby the specialty defines itself as nursing³ and subscribes to the overall purpose, functions and ethical standards of nursing (ICN 1992). The clinical practice role may be divided into two categories, direct and indirect care (Markham 1988, Kersley 1992). Direct care comprises the assessment, planning, delivery and evaluation of care to patients and their families, indirect care relates to activities that influence others in their provision of direct care.
- **Patient Advocate:** The CNS/CMS role involves communication, negotiation and representation of the client/patient values and decisions in collaboration with other professionals and community resource providers.
- **Education and Training:** The CNS/CMS remit for education and training consists of structured and impromptu educational opportunities to facilitate staff development and patient education (McCaffrey Boyle 1996). Each CNS is responsible for his/her continuing education through formal and informal educational opportunities thus ensuring continued clinical credibility amongst nursing, medical and paramedical colleagues.
- **Audit & Research:** Audit of current nursing practice and evaluation of improvements in the quality of patient care are essential. The CNS/CMS must keep up date with current relevant research to ensure evidence-based practice and research utilisation. The CNS/CMS must contribute to nursing research, which is relevant to his/her particular area of practice.
- **Consultant:** Inter and intra-disciplinary consultations both internal and external are recognised as part of the contribution of the clinical nurse specialist to the promotion of improved patient management.

³Core concepts of CNS/CMS 'nursing' should be read as nursing or midwifery specialist practice.

Appendix 2

Definition and Core Concepts of Advanced Nurse/Midwife Practitioner

Definition

Advanced nursing and midwifery practice is carried out by autonomous, experienced practitioners who are competent, accountable and responsible for their own practice.

They are highly experienced in clinical practice and are educated to masters degree level (or higher). The post-graduate programme must be in nursing/midwifery or an area which is highly relevant to the specialist field of practice (educational preparation must include substantial, clinical, modular component(s) pertaining to the relevant area of specialist practice).

ANPs/AMPs promote wellness, offer health care interventions and advocate healthy lifestyle choices for patients/clients, their families and carers in a wide variety of settings in collaboration with other healthcare professionals, according to agreed scope of practice guidelines. They utilise sophisticated clinical nursing/midwifery knowledge and critical thinking skills to independently provide optimum patient/client care through caseload management of acute and/or chronic illness. Advanced nursing/midwifery practice is grounded in the theory and practice of nursing/midwifery and incorporates nursing/midwifery and other related research, management and leadership theories and skills in order to encourage a collegiate, multidisciplinary approach to quality patient/client care. ANP/AMP roles are developed in response to patient/client need and healthcare service requirements at local national and international level.

ANPs/AMPs must have a vision of areas of nursing/midwifery practice that can be developed beyond the current scope of nursing/midwifery practice and a commitment to the development of these areas.

Core Concepts

- **Autonomy in Clinical Practice:** An autonomous ANP/AMP is accountable and responsible for advanced levels of decision making which occur through management of specific patient/client caseload. ANPs/AMPs may conduct comprehensive health assessment and demonstrate expert skill in the diagnosis and treatment of acute and/or chronic illness from within a collaboratively agreed scope of practice framework alongside other healthcare professionals. The crucial factor in determining advanced nursing/midwifery practice however is the level of decision making and responsibility rather than the nature or difficulty of the task undertaken by the practitioner. Read and Graves state (1994 p57): "When nursing [or midwifery] knowledge and experience continuously inform a practitioner's decision making, even though some parts of the role may overlap the medical [or other healthcare professional] role, then that may be said to be advanced nursing [or midwifery] practice⁴."
- **Pioneering Professional and Clinical Leadership:** ANPs/AMPs are pioneers and clinical leaders in that they may initiate and implement changes in healthcare service in response to patient/client need and service demand. They must have a vision of areas of nursing/midwifery practice that can be developed beyond the current scope of nursing/midwifery practice boundaries and a commitment to the development of these areas. They provide new and additional health services to many communities in

⁴Furthermore, the authors state that "conversely, when a nurse is expected to perform routine technical tasks with no opportunity to exercise nursing knowledge or take autonomous decisions, then that is when a nurse becomes a doctor's assistant."

collaboration with other healthcare professionals to meet a growing need that is identified both locally and nationally by healthcare management and governmental organisations. ANPs/AMPs participate in educating nursing/midwifery staff, and healthcare professionals through role modelling, mentoring, sharing and facilitating the exchange of knowledge both in the classroom, the clinical area and the wider community.

- **Expert Practitioners:** Expert practitioners demonstrate practical and theoretical knowledge and critical thinking skills that are acknowledged by their peers as exemplary. They also demonstrate the ability to articulate and rationalise the concept of advanced practice. Education must be at master's degree level (or higher) in a programme relevant to the area of specialist practice which encompasses a major clinical component. This post-graduate education will maximise pre- and post-registration nursing/midwifery curricula to enable the ANP/AMP to assimilate a wide range of knowledge and understanding which is applied to clinical practice.
- **Researcher:** ANPs/AMPs are required to initiate and co-ordinate nursing/midwifery audit and research. They identify and integrate nursing/midwifery research in areas of the healthcare environment that can incorporate best evidence based practice to meet patient/client and service need. They are required to carry out nursing/midwifery research which contributes to quality patient/client care and which advances nursing/midwifery and health policy development, implementation and evaluation. They demonstrate accountability by initiating and participating in audit of their practice. The application of evidence based practice, audit and research will inform and evaluate practice and thus contribute to the professional body of nursing/midwifery knowledge both nationally and internationally.

References

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The Council exists to promote and develop the professional role of nurses and midwives in order to ensure the delivery of quality Nursing and Midwifery care to patients/clients in a changing healthcare environment.

National Council Publications

Criteria and Processes for the Allocation of Additional Funding for Continuing Education by the National Council (February 2001)

Clinical Nurse/Midwife Specialists Intermediate Pathway (April 2001)

Framework for the Establishment of Advanced Nurse Practitioner and Advanced Midwife Practitioner Posts (May 2001)

Aid to Developing Job Descriptions/Profiles for Clinical Nurse/Midwife Specialist Posts.

Quarterly Newsletter

All National Council publications are available from the National Council or can be downloaded from our website.

Our Newsletter is circulated quarterly to every nurse and midwife on the live register.



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