



CAYMAN ISLANDS NURSING AND MIDWIFERY COUNCIL

**GUIDELINES FOR THE APPROVAL OF NURSING EDUCATION
INSTITUTIONS AND PROGRAMMES
PROVISIONAL REGISTRATION OF STUDENT NURSES
AND INITIAL REGISTRATION OF REGISTERED NURSES**

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Foreword

This manual provides the Cayman Islands Nursing and Midwifery Council (the Council), Schools of Nursing and Nursing Educators with the guidance regarding the approval process for nursing education programmes and facilities in the Cayman Islands. It also details the procedures for provisional registration of student nurses, as well as the initial registration of nurses who have completed a Bachelor's degree programme in nursing, and the necessary qualifying examination.

The manual must be used in conjunction with the Health Practice Law (2017 Revision), Health Practice Regulations (2017 Revision) and the Nursing Regulations, 2016. Together, these documents give the Council the authority to regulate all aspects of the nursing profession, including education.

Using this approval manual, nursing educational institutions and nursing programmes in the Cayman Islands will have the information necessary to fulfil the requirements and expectations of the Council. The manual is comprehensive with chapters that are easy to follow, user friendly matrices and appendices that contain essential check lists.

This document will also be available to the public for their information on the Department of Health Regulatory Services website, and will be updated frequently to ensure that it remains current as the educational needs evolve.

Andria Dilbert RN, MA
Chairperson
Cayman Islands Nursing and Midwifery Council

Table of Contents

Foreword	i
Background and Context.....	1
Introduction.....	2
1. Regulation, Evaluation, Approval and Accreditation Processes	3
1.1 Regulation	3
1.2 Evaluation	3
1.3 Approval.....	4
1.4 Accreditation	4
2. General Principles of the Approval/Accreditation Process	4
2.1 Accountability	4
2.2 Relatedness.....	5
2.3 Relevance	5
2.4 Responsiveness	5
2.5 Quality.....	5
2.6 Confidentiality	5
3. Scope and Authority for the Approval, Evaluation and Accreditation Processes	5
4. Objectives of Evaluation, Approval and Accreditation	6
5. Standards for Evaluation, Approval and Accreditation	7
6. Areas to be Evaluated, Approved and Accredited	7
6.1 Institutional Setting/Environment/Physical Facilities/School/Department	7
6.2 Students.....	7
6.3 Curriculum and Teaching-Learning Practices	8
6.4 Nursing Faculty/Teaching Staff	8
6.5 Clinical Teaching-Learning Programmes	8
6.6 Graduates.....	9
6.7 Programme Effectiveness/Evaluation/Student and Faculty Outcomes.....	9
7. Standards and Criteria of Nursing Education	10
7.1 Standard 1: Nursing Education Institution/Programme Setting	10
7.2 Standard 2: Students.....	14
7.3 Standard 3: Curriculum and Teaching-Learning Practices	19
7.4: Standard 4: Nursing Faculty/Teaching Staff.....	22
7.5 Standard 5: Clinical Teaching-Learning Programmes.....	25
7.6 Standard 6: Graduates	28
7.7 Standard 7: Programme Effectiveness/Evaluation.....	29
8. Guidelines and Procedures for the Evaluation and Approval Process.....	30
8.1 Development of Standards of Education.....	30
8.2 Approval Committee.....	31
8.3 Nursing Institution /Programme Self Evaluation.....	31
8.4 Site Visit.....	32
8.5 Written Report of the Visiting Team	32
8.6 Recommendations of the Approval Committee.....	32
8.7 Notification of Nursing Education Institution/Programme of Approval Rating.....	33
9. Process of Approval by the Nursing and Midwifery Council of the Cayman Islands.....	33
9.1 Approval of Nursing Education Institutions/Programmes.....	33
9.2 Initial Approval	34

9.3 Full Approval	34
9.4 Conditional Approval.....	35
9.5 Approval Denied	35
9.6 Approval of Major Curriculum Changes	35
9.7 Withdrawal of Full Approval	36
9.8 Restoring Full Approval to a Nursing Education Institution Programme	36
9.9 Programme Closure.....	36
10. Annual Nursing Education Institution/Programme Updates	37
11. The Appeal Process.....	37
11.1 Composition of the Appeals Tribunal	38
11.2 Procedures of the Appeals Tribunal.....	38
11.3 Notes on the Appeal Process.....	38
12. Evaluation of the Approval Process	38
13. Provisional and Initial Registration of Student Nurses, Licensure and Re-licensure	39
13.1 Provisional Registration of Student Nurses	39
13.2 Initial Full Registration	40
13.3 Licensure	41
13.4 Re-licensure.....	42
Glossary of Terms/Abbreviations/Acronyms	43
References	46
Appendices.....	48
A - Graduate Profile	49
B - Registered Nurse Scope of Practice	50
C - Registered Nurse Core Competencies.....	51
D - Nursing Institution/Programme Self-Evaluation Report	53
E - Standards of Nursing Education – Scoring Guidelines	61
F - Guidelines for Evaluation of Health Care Facility	85
G - Procedures for Approval of Nursing Education Institutions/Programmes	94
H - Approval of Programme Changes.....	97
I - Provisional Registration	99
J - Requirements for Provisional Registration for Student Nurses	100
K - BScN Programme Entry Requirements	102

Background and Context

The Cayman Islands Nursing and Midwifery Council (the Council) is responsible to the public of the Cayman Islands for the registration, licensing, regulation and disciplining of all categories of nurses including registered general nurse (RGN), advanced practice nurse (APN), registered nursing assistant (RNA), registered midwife (RM), public health nurse (PHN), and student nurse (StdN). Therefore, the primary role of the Council is to protect the public.

In carrying out its function the Council works with the schools of nursing in educational institutions, as well as with individual candidates who apply for registration as nurses and/or midwives. The Council prescribes the qualifications required for the scopes of practice, and for that purpose approves/accredits and monitors educational institutions and degrees, courses of studies, and programmes. The Council sets and monitors standards for registration, provides guidelines for nursing education, determines the licensing examination, and receives applications for registration.

Prior to the establishment of the four Health Practice Professional Councils, there was a Health Practitioners Board, which operated on the powers conferred by the Health Practice Law of 1974 and later the revised 1993 Health Practice Law Regulations, to regulate the practice of all health professionals within the Cayman Islands.

In 2005, the Health Practice Commission was established in Law to provide oversight of the Medical and Dental Council (MDC), the Nursing and Midwifery Council (NMC) the Pharmacy Council (PC) and the Council for Professions Allied with Medicine (CPAM). On the 1st July, 2008 there was a merger of the Health Insurance Commission with the Health Practice Commission to form the Department of Health Regulatory Services.

The Health Practice Law and Regulations were revised in 2013 to address professional regulation and elaborate upon specific elements contained in the principal law (Benton, 2013). Introduction of institutional registration, biennial licensure and composition of the Health Practice Commission are among the matters addressed by the 2013 revision of the Health Practice Law and Regulations. The Health Practice (Amendment of Schedule 5) Order of 2016 further elaborated the letters that may be used by each nursing and midwifery professional.

The Health Practice Law (2017 revision) together with the Nursing Regulations, 2016, allow the Council to approve and regulate nursing programmes, initially register students who have completed an approved programme and have passed a qualifying examination, approved by the Council.

Traditionally, the Cayman Islands have relied on other countries to either train their citizens by sending them overseas to established programmes or to recruit already trained nurses from a range of countries. This meant that existing legislation was limited in its scope to deal with endorsement of nurses who had received their nurse education elsewhere and clauses designed to deal with potential poor practice or misconduct. (Benton, 2013)

A Cayman Islands based baccalaureate nursing education programme was initiated and implemented at the University College of the Cayman Islands (UCCI) in 2013, necessitating the development of a mechanism for programme approval and initial registration of graduates who meet the requirements and standards set by the Council. This manual, which is developed based on the powers conferred by sections 21, 25, 28, 33 and 42 of the Health Practice Law (2017 Revision), and the Nursing Regulations, 2016 and in response to the need for evaluation, approval and later, accreditation of the newly (2013) implemented nursing education programme at the UCCI, is expected to meet this need. It is designed to provide a reference for determining the relevance and relatedness of the initial education programme for the Registered General Nurse to the needs of the society.

These guidelines utilize the framework of the Caribbean Standards of Nursing and Midwifery Practice: Accountability (2013) and the Caribbean Accreditation Authority for Education in Medicine and other Health Professions (CAAM-HP)- (2010) Standards for the accreditation of degree nursing programmes in the Caribbean Community (CARICOM) to describe the criteria, standards and key indicators to be used by the Council in the evaluation, regulation, approval and the accreditation of nursing education institutions, programmes and professionals. The criteria, standards and key indicators, along with the evaluation, approval and accreditation procedures, serve as the basis to evaluate the quality of the educational programme offered and to hold the nursing education institution/programme and professionals accountable to the educational community, the nursing profession, and the public.

All nursing education institutions/programmes and professionals seeking approval and/or accreditation are expected to meet the standards presented in this document. The standards are written as broad statements that embrace several areas of expected institutional performance. Related to each standard is a series of key indicators. Viewed together, the key indicators provide evidence of whether the broader standard has been met. The key indicators are considered by the evaluation team and the Council in determining whether the institution or programme meets each standard.

The key indicators are designed to enable a broad interpretation of each standard in order to support institutional autonomy and encourage innovation, while maintaining the quality of nursing programmes and the integrity of the accreditation process. Accompanying each key indicator is an elaboration, which is provided to assist programme representatives in addressing the key indicator and to enhance understanding of the Council's expectations. Supporting documentations are required as verification that standards are met (Commission of Collegiate Nursing Education, 2013).

The Council has the additional responsibility of evaluating and approving the health care facilities where students gain clinical experience during their practicum. The focus of the evaluation is on whether or not the facility is able to provide students with the requirements as identified in the standards set by the Council. Throughout this manual, the need for institutions and programmes to demonstrate the incorporation of professional nursing standards and guidelines is emphasized.

Marjorie E. Parks Ed. D., R.N., R.M.,
Parks Consultancy Services, BELIZE

Introduction

1. Regulation, Evaluation, Approval and Accreditation Processes

1.1 Regulation

Protection of the public is the legal purpose for defining the scope of nursing practice, licensing requirements, and standards of care. Nurses who know and follow their respective nurse practice laws, regulations and standards of care provide safe, competent nursing care. The respective practice laws and regulations protect the public by legally defining and describing the scope of nursing practice. Nurse practice laws and regulations also legally control nursing practice through licensing requirements.

A practicing license is a legal permit that a government agency grants to individuals to engage in the practice of a profession and to use a particular title. Nursing licensure is mandatory in the Cayman Islands. For a profession or occupation to obtain the right to license its members, it generally must meet three criteria:

1. There is a need to protect the public's safety or welfare.
2. The occupation is clearly delineated as a separate, distinct area of work.
3. A proper authority has been established to assume the obligations of the licensing process (Burkhardt & Nathaniel, 2013).

The Cayman Islands Nursing and Midwifery Council (the Council) is the competent authority that regulates the practice of nursing in the Cayman Islands. One of the functions of the Council is to ensure that schools preparing nurses maintain minimum standards of education.

The Council must **approve** a nursing education institution/ programme in order for it to legally operate.

1.2 Evaluation

Evaluation is a continuous exercise to assess and maintain high standards in nursing education institutions/programmes. It is a means by which the Council determines whether or not the nursing education institution/programme meets the standards for approval or accreditation.

Evaluation, in these standards, may be internal or external. Internal evaluation or institutional self-study is done on a varied basis by the institution/programme and/or the General Nursing Council with the aim of securing initial institutional or programme approval.

External evaluation is usually conducted three to five years after the nursing education institution/programme has achieved full approval from the Council. This evaluation is generally conducted by an external agency, such as the Regional Nursing Body, the Caribbean Accrediting Agency for Medicine and Other Health Professions (CAAM-HP) or other competent authority.

1.3 Approval

In order for a nursing education programme/institution to operate legally in the Cayman Islands it must meet the minimum standards set by the Council and receive formal approval to do so, according to Nursing Regulations, 2016 Section 3(3). Approval is **mandatory**. Facilities where nursing students gain clinical experience also have to be approved by the Council. Graduates of approved nursing education institutions/programmes may be registered and licensed by the Council. Standards and the approval process are discussed later in this document.

1.4 Accreditation

Accreditation is a process that focuses on the quality of institutions of higher and professional education and on the quality of educational programmes within institutions. Accreditation is a **voluntary** evaluation process that institutions of higher education undergo in order to maintain standards of educational quality agreed upon by members of an accrediting body. Accreditation assessments may include self-study on the part of the institution as well as evaluations by representatives of peer institutions who belong to the same accrediting agency (Understanding Accreditation, 2016).

According to the Saskatchewan Registered Nurses' Association (2015)

Accreditation promotes excellence and is recognized worldwide as an important, objective method to assess professional education programmes. Accreditation identifies strengths and opportunities for improvement that can aid decision making. The process provides administrators and faculty with information regarding areas that require development, modification and/or resources. (p. 1)

There are two recognized forms of accreditation: institutional accreditation and professional or specialized accreditation. Institutional accreditation is concerned with the quality and integrity of the total institution, assessing the achievement of the institution in meeting its own stated mission, goals, and expected outcomes. In professional or specialized accreditation, professional accrediting agencies assess the programme of study to determine the quality of the programme and the educational preparation of members of the profession or occupation (Commission on Collegiate Nursing Education, 2013).

2. General Principles of the Approval/Accreditation Process

The following general principles are essential to the development of a nursing education programme. These core values are used as guidelines for the evaluation of standards and criteria against which all aspects of the programme are assessed.

2.1 Accountability

Accountability refers to the extent to which the nursing education institution/programme accepts its primary responsibility of the education of students, its relationships with stakeholders, and developing within the students the obligation to embrace the responsibility for the provision of safe and ethical patient care (Lindeman, 2000).

2.2 Relatedness

Relatedness refers to the inter-connectedness of the various aspects of the nursing education programme. That is, the administration, the curriculum, method of delivery of the programme and the practice and research. Relatedness also deals with the development and achievement of the programme goals.

2.3 Relevance

Relevance, in the context of the evaluation and approval process, refers to the extent to which the goals, activities and outcomes of the nursing education programmes are developed and implemented in response to the health needs of a society.

2.4 Responsiveness

Responsiveness is the adaptability of the nursing education programmes to meet continuously and rapidly changing priority health needs of society, the health care delivery system, and diverse student and patient populations.

2.5 Quality

Quality in the approval and accreditation processes refers to the provision of effective and efficient services that are geared towards the enhancement of nursing education and training, which is fit for the purpose, add value and exceed stakeholders' expectations and, benchmarked against national, regional and international standards (Barbados Accreditation Council, 2010).

2.6 Confidentiality

Although the approval status of a nursing education institution/programme is a matter of public record, all information, documents and communication between the nursing education institution/programme and the Council related to the evaluation and approval process are considered confidential.

3. Scope and Authority for the Approval, Evaluation and Accreditation Processes

These rules and regulations are made by the Council pursuant to the following sections of the Health Practice Law and Nursing Regulations:

- Section 21(1) (iii), and 33(b), which provides the Council with the framework for regulating the education and training requirements for the Registered Nurse.
- The Nursing Regulations at section 3(3) empowers the Council to designate and approve all educational programmes offered in the Cayman Islands that leads to a degree in nursing.

The nursing education institution/programme shall apply the Council's Standards of Nursing Education and comply with the Health Practice Law, the Health Practice Regulations and the Nursing Regulations, in the form and manner set out in these guidelines.

The Council shall periodically review the nursing education institution/programme and shall conduct onsite visits to an institution/programme when it deems necessary.

4. Objectives of Evaluation, Approval and Accreditation

The purpose of evaluation, approval and accreditation are to:

1. Promote and regulate educational processes that prepare graduates for safe and effective nursing practice.
2. Ensure the adherence to and maintenance of standards and criteria for nursing education as developed for nursing education institutions/programmes in the Cayman Islands.
3. Provide a system of voluntary evaluation and approval for nursing education institutions and programmes in the Cayman Islands.
4. Advise on and assist in the improvements of standards of nursing education.
5. Encourage continuing improvement of nursing education programmes in the Cayman Islands thereby improving nursing services and patient care.
6. Involve educators/administrators and students of nursing education programmes in the process of continuing self-evaluation of nursing education institutions/programmes.
7. Assess eligibility for admission to the licensing examination for nurses.
8. Facilitate regional endorsement of graduates of Council-approved programmes through the Regional Examination for Nurse Registration (RENK).
9. Provide criteria for the development and approval of new and established nursing education programmes.
10. Provide procedures for the withdrawal of nursing education programme approval (PAHO/WHO, 2013).

5. Standards for Evaluation, Approval and Accreditation

The Council identifies the essential components of nursing education. That is, the minimum standards required for the provision of quality education in nursing.

To achieve and maintain approval, nursing education institutions/programmes must meet the standards set forth in this manual. Each standard, written to provide an inter-related and holistic view of the programme, is supported by criteria and necessary conditions, which elaborate the respective standards and guide and enhance the evaluation and approval processes.

The standards have been compiled in accordance with those of national, regional and global nursing accreditation authorities, including the World Health Organization, the International Council of Nurses, the American Association of Colleges of Nursing, through the Commission on Collegiate Nursing Education (CCNE), the Regional Nursing Body (RNB), and the Nursing and Midwifery Councils of Belize, Barbados, the Cayman Islands, and Jamaica.

6. Areas to be Evaluated, Approved and Accredited

The seven programme areas are assessed against the standards set forth in this manual. Standards may be deemed fully met, partially met or not met (details of the evaluation are elaborated in the approval process section of the manual).

6.1 Institutional Setting/Environment/Physical Facilities/School/Department

There is an established need for the nursing education institution/programme.

The, organization and administration of the nursing education institution/programme, vision, mission, philosophy, purpose, goals and educational outcomes are evaluated under this section to determine if approval and accreditation standards are met. Financial support, resources, facilities and safety are also addressed in this area.

6.2 Students

The nursing education programme is responsible for verifying the satisfactory completion of a high school educational programme, or its equivalent for each applicant before admission.

There are written policies for admission, promotion, and graduation of students, which are in compliance with the laws and regulations of the Cayman Islands.

There are written policies that are implemented for safeguarding the health and well-being of the students

The overall standards to be achieved by the institution/programme in the area of students include policies and processes related to recruitment, selection and admission, student services including student advisement and counselling, as well as student assessment and representation on relevant committees of the educational institution or programme. Policies related to recognition of previous learning, mature entry clause, grandfathering, student transfer, withdrawal from the

nursing education institution/programme and graduations are also evaluated to determine if they exist and meet approval and accreditation standards.

6.3 Curriculum and Teaching-Learning Practices

The curriculum meets the requirements of the parent institution and the requirements for the graduand to sit the RENR.

Evaluation is done to ensure that the institution/programme has a structured curriculum that is organized and sequenced logically to facilitate learning, thereby enabling students to achieve the programme outcomes and the Council's *Competencies for the Registered Nurse Scope of Practice* (Appendices A, B & C).

The curriculum has to meet the requirements of the parent institution in which the nursing education programme is housed and the requirement for eligibility of the graduate to sit the RENR, the licensing examination. The development, implementation, revision, and evaluation of the curriculum are evaluated to determine whether they meet the educational outcomes of registered nurses.

6.4 Nursing Faculty/Teaching Staff

The school of nursing presents evidence of a fully qualified director and faculty, which information is made available upon request by the Council.

The faculty of the nursing education institution/programme is assessed for number, composition, qualifications, job functions, and student: faculty ratio. Personnel policies, staff orientation, community involvement, communication and research are also a part of the evaluation, approval and accreditation processes.

6.5 Clinical Teaching-Learning Programmes

Patient experiences occur in a variety of clinical or simulated settings; all sites selected for clinical experiences shall have standards which demonstrate concern for the patient and evidence of skilful and safe nursing practice.

All faculty teaching clinical or practicum courses are experienced in the clinical area of the course and maintain clinical expertise.

There are signed contracts between the nursing education programme and cooperating health care entities that are reviewed annually.

The clinical teaching learning programmes are assessed for consistency with the curriculum statements, courses, and objectives and define the clinical objectives, related student placements, teaching, supervision and evaluation. Clinical skills laboratory, simulation materials and other laboratory resources are evaluated. Contractual agreement with clinical facilities and agencies where students receive practical clinical experience are evaluated for currency, relevance and approval by the Council.

6.6 Graduates

Graduates or alumni, through their practice, are able to perform the duties and responsibilities of the registered nurse, providing evidence regarding the outcomes of the nursing education programme.

Graduates of the nursing education institution/ programme are evaluated to determine whether or not they meet the standards necessary for professional registration as a nurse at a national and regional level and are capable of successfully undertaking advanced education programmes. Graduates may also be evaluated by employers' performance rating at least 12 months after graduation and their job satisfaction as evidenced by self-assessment at least 12 months after graduation. See Appendices A and C for graduate profile and RN Competencies respectively.

6.7 Programme Effectiveness/Evaluation/Student and Faculty Outcomes

The school of nursing implements a comprehensive, systematic plan for ongoing evaluation.

The school of nursing shall maintain a system of record keeping that shall include course outlines, evaluation instruments, school, faculty and student records and official publications of the nursing education programme

The institution or programme should be effective in fulfilling its mission, goals, and expected student and faculty outcomes. Actual student outcomes are consistent with the mission, goals, and expected student outcomes. Actual alumni satisfaction data and the accomplishments of graduates of the programme attest to the effectiveness of the programme. Actual aggregate faculty outcomes are consistent with the mission, goals, and expected faculty outcomes. Data on programme effectiveness are used to foster ongoing programme improvement.

Details, which include *standards, criteria, indicators and means of verification/supporting documentation* of the seven standards are displayed in the table in Section 7.

7. Standards and Criteria of Nursing Education

7.1 Standard 1: Nursing Education Institution/Programme Setting

Standards	Criteria	Indicators	Means of Verification Supporting Documentation
1. Need, Location, Physical Facilities	1.1. The nursing programmes emanate from a demonstrated need of the society	1.1.1 Nursing and health care human resources studies	1.1.1.1 Report of HR study
		1.1.2 Request for approval from the Council	1.1.1.2 Letter of intent and request to the Nursing Council
	1.2 The environment is conducive and accessible to community services and affiliating agencies	1.2.1 Suitable geographic location	
	1.3 The design of the physical facility is according to national standards for safety and spacing in tertiary education institutions	1.3.1 Knowledge of the building standards	1.3.1.1 Planning permits are available
		1.3.2 Nurse Educator's involvement in architectural design of new buildings	
	1.4 There is adequate space and amenities to accommodate students, staff and institution/programme activities	1.4.1 Identifiable space and provision of amenities	
		1.4.2 Learning laboratories, including simulation lab	
	1.5 The institution/programme has suitable lighting, ventilation, temperature regulation (natural/artificial), which makes it conducive to teaching/ learning.	1.5.1 Planning and budgetary allocation	
		1.5.2 Seating accommodation in relation to the standards of the nursing education institution/programme.	
		1.5.3 Adjustable and moveable facilities	
2. Academic Environment	2.1 The nursing education programme is a part (faculty, department) of an accredited tertiary	2.1.1 The nursing education programme is a part (faculty, department) of an	2.1.1.1 Accreditation documents of parent institution

	educational institution	accredited tertiary educational institution.	
	2.2 Faculty and students participate in research and other scholarly activities of the nursing education institution/programme and the parent institution (university)	2.2.1 Research work undertaken by the faculty/students is presented	2.2.1.1 Journal of the University College of the Cayman Islands 2.2.1.2 Documentation of approval, accreditation, registration
	2.3 Faculty members work mutually in teaching, research, and appropriate health care delivery programmes	2.3.1 There is evidence of close interaction among faculty members in the various disciplines	2.3.1.1 Minutes of meetings , memoranda and other correspondences between faculty and other disciplines in the education institution
	2.4 The nursing education institution/programme meets approval and/or accreditation registration requirements as outlined by the Council	2.4.1 Evaluation of nursing education institution /programme conducted by the Council initially and thereafter every three years	2.4.1.1 Approval and/or accreditation reports available
3. Safe and Positive Practice Environments	3.1 The nursing education institution/programme creates and maintains a safe and positive work environment for faculty, staff and students	3.1.1 The nursing education institution/programme 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	3.1.1.1 Policy manuals (Occupational Health and Safety)
		3.1.2 There are written policies and strategies, which are congruent with the parent university's established policies and procedures, for developing and maintaining a positive work environment,	3.1.2.1 Documented policies and procedures

		including strategies for dealing with grievances, workplace stress, discrimination and violence	
4. Vision, Mission, Goals and expected programme outcomes	4.1 The nursing education institution/programme' has defined statements of its vision, mission, values; goals expected programme outcomes, which are congruent with those of the parent institution, and the guidelines for the preparation of the professional nurse	4.1.1. The programme's mission statement, goals, and expected programme outcomes are written and accessible to current and prospective students, faculty, and other constituents	4.1.1.1 Vision, mission goals and expected programme outcomes are stated, circulated and prominently displayed
5. Governance and Administration	5.1 The parent institution assumes legal responsibility for overall conduct of the nursing education institution/programme	5.1.1 Nursing education institution/programme is included in the legal charter, vision, mission and other administrative structure of the parent institution	5.1.1.1 Documentation of the legal status of the nursing education institution/programme or parent university.
	5.2 The organizational structure includes a nursing director who has the authority and responsibility for decisions related to the nursing education programme and its resources	5.2.1 The nursing director is a registered nurse (RN) who holds a graduate degree in nursing	5.2.1.1 Organizational chart. Documentary evidence –diploma qualifications of nursing administrator
	5.3 The governance and administrative committees of the school has representation from academic staff, students and other stakeholders.	5.3.1 Faculty and students' role in the governance of the programme are clearly defined and promote participation	5.3.1.1 Minutes of committee meetings showing members in attendance

		5.3.2 Nursing faculty is involved in the development, review, and revision of academic programme policies	5.3.2.1 Documents that reflect decision-making (e.g., minutes, memoranda, reports) related to programme mission and governance.
	5.4 The nursing education institution/programme has 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	5.4.1 Joint meetings, circulars, telephone and electronic communication	5.4.1.1 Minutes of meetings; copies of circulars and memoranda.
	5.5 The nursing education institution/programme has signed contractual agreements with cooperating health care entities	5.5.1 Contracts reviewed annually by the cooperating health care entity. Contracts renewed at least every third year	5.5.1.1 Copies of contract on file
6. Resources	6.1 Fiscal and physical resources are sufficient to enable the nursing institution/programme to fulfil its mission, goals, and expected outcomes.	6.1.1 Review of fiscal and physical resources occurs and improvements are made as appropriate	6.1.1.1 Nursing education institution/programme budget for the current and previous two fiscal years.
	6.2 Information resources and library facilities and services support the nursing education institution/programme needs of students and faculty	6.2.1 There is physical or electronic access to scientific and professional journals, periodicals, available to faculty and students 6.2.2 The library and other learning resource centres are equipped to allow faculty and students to access information electronically and for self-instructional materials	6.2.1.1 Check library holding for electronic and physical journals and nursing websites access

7.2 Standard 2: Students

Standards	Criteria	Indicators	Means of Verification – Supporting Documentation
1. Recruitment, Selection and Admission/Intake	1.1 The nursing education institution/department has a student recruitment policy, which includes the method, time frequency, target population and personnel required for recruitment	1.1.1 Collaboration with Ministries of Health, Education Faculty, Information, Nursing Council Professional Nursing Association and other relevant agencies	1.1.1.1 Brochures, Website, Flyers, Newspaper notices and advertisements
		1.1.2 Budgetary and human resources provision for recruitment	1.1.1.2 Report of career guidance and showcase at primary and secondary schools
	1.2 The nursing education institution/programme has a student selection policy, which states entry requirements and the procedure for selection	1.2.1 Selection procedure established by the nursing education institution/programme faculty	1.2.1.1 Written policy and procedure for student selection
		1.2.2 The final responsibility for selecting students for admission to the nursing education institution/programme resides with a duly constituted faculty committee	1.2.2.1 A pool of applicants sufficiently large and possessing the published qualifications to meet the required student intake
	1.3 The nursing education institution/programme and parent university publishes the requirements for admission and the	1.3.1 Students meet established university requirements for admission to the nursing education programme	1.3.1.1 Written policies and procedures for admission of students.

	qualifying degree offered	<p>1.3.2 The size and characteristics of the student intake is related to the capacity of the nursing education institution/programme and the adequacy of critical resources:</p> <ul style="list-style-type: none"> • 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 	1.3.2.1 Adequate resources
2. Student Welfare, Student Services, Student-Teacher standards of conduct	2.1 The nursing education institution/programme has a system of confidential counselling and health services that includes programmes to promote students well-being and adjustment to the physical and emotional demands of nursing	2.1.1 Students welfare programmes	2.1.1.1 Policies and procedures published in Student Handbook
		2.1.2 Human, physical and financial resources to support student welfare programmes	
		<p>2.1.3 Student health programme to include:</p> <ul style="list-style-type: none"> • Arrangements for health examination prior to admission and periodically 	

		<p>during programme: physical</p> <ul style="list-style-type: none"> • Physical, dental, optical and mental status examinations, • Immunizations, • Laboratory and radiology and imaging tests, • Policy/procedure related to illness, injury and hospitalization, • Sick leave, maternity leave, • Financial assistance 	
	2.2 The nursing education institution/programme offers efficient and relevant student services	<p>2.2.1 Student services include but are not limited to:</p> <ul style="list-style-type: none"> • Academic advisement and career counselling • Tutorial and mentor 	2.2.1.1 Catalogues, student handbooks, faculty handbooks, personnel manuals, or equivalent information, including, among other things, academic calendar, recruitment and admission policies, grading policies, and degree completion requirements
	2.3 The nursing education institution/programme defines and publishes the standards of conduct for the teacher-student relationship, and have written policies for addressing violations of these standards	<p>2.3.1 Standard for dealing with inappropriate behaviour such as:</p> <ul style="list-style-type: none"> • Academic dishonesty • Sexual harassment • Discrimination • Horizontal violence and bullying 	2.3.1.1 Written mechanisms for reporting violations of standards and handling of complaints in place. Included in Student Handbook
3. Visiting and Transfer Students	3.1 The nursing education institution/programme has a policy for visiting and transfer students	<p>3.1.1 Visiting and transfer student policy includes:</p> <ul style="list-style-type: none"> • all policies that apply to existing enrolled students 	3.1.1.1 Visiting and transfer student records

4. Student Assessment and Progress	4.1 The nursing education institution/programme has written policy regarding assessment of students' performance in the cognitive, affective and psychomotor domains at all levels of the educational programme.	4.1.1 Assessments include both summative assessment, which results guide student progression, and formative assessment; results of which guide students in the learning process.	4.1.1.1 Written policy on assessment available <ul style="list-style-type: none"> • Assessment tools • Student performance evaluation reports
		4.1.2 Assessment methods are clear, concise, congruent with curriculum and known to students.	4.1.2.1 Record of students' grades and other evaluation results.
4. Notification to the Council regarding students entry and completion of programme	4.2 The nursing education institution/programme makes formal notification to the Nursing Council of students' entry to and completion of programme.	4.2.1 Student Nurses apply to the Council for provisional registration	4.2.1.1 Proof of Provisional Registration of students with the Council 4.2.1.2 Copies of memoranda, circular, letters, student applications sent to the Council
5. Student participation and representation	5.1 Students actively participate in all activities	5.1.1 Students organize and manage student organization	5.1.1.1 Documents that reflect decision-making (e.g. minutes, memoranda, reports).
	5.2 The nursing education institution/programme has student representation on appropriate committees, policy development activities and other matters relevant to the students	5.2.1 Representatives on committees, e.g. <ul style="list-style-type: none"> • Curriculum • Policy making • Disciplinary • Library • Other 	5.2.1.1 Named student representatives on various committees
6. Student Records	6.1 The nursing education institution/programme maintains a record system for students indicating:	6.1.1 Permanent student records are kept confidential and in a secure location	6.1.1.1 Records available for inspection

	<ul style="list-style-type: none"> • Enrolment • Performance • Promotion • Discipline, grievances • Transfers and withdrawals; termination • Graduation • Health status • Graduation 	6.1.2 There are policies for student transfer, withdrawal and termination	6.1.2.1 Documented policies and procedures
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7.3 Standard 3: Curriculum and Teaching-Learning Practices

Standard	Criteria	Indicators	Means of Verification – Supporting Documentation
1. Written Curriculum	1.1 The curriculum is developed, implemented, and revised to reflect clear statements of expected individual student learning outcomes that are congruent with the programme's mission, goals, and expected student outcomes	1.1.1 All components of curriculum included: Vision, mission, philosophy, conceptual framework, goals, objectives, course outlines, etc.	1.1.1.1 Vision and mission strategically posted 1.1.1.2 Knowledge and use of the philosophy 1.1.1.3 Philosophy displayed 1.1.1.4 Written aims, purpose and objectives displayed 1.1.1.5 Written curriculum available
2. Curriculum Committee	2.1 The development of the total curriculum is the responsibility of a designated curriculum committee which is chaired by a nurse educator from the nursing education institution/programme	2.1.1 Curriculum committee is comprised of: nursing representative from school, (student and teacher) • hospital, community, professional groups, • Nursing Council, • Nurse educators should be in the majority 2.1.2 Co-opted consultants with clinical, education and professional expertise.	2.1.1.1 Minutes of meeting of curriculum committee
3. Curriculum – Legal reference (Laws)	3.1 Regulations of the country give direction for curriculum development	3.1.1 Nursing Council guidance 3.1.2. knowledge of nursing laws and regulations	3.1.1.1 Use of national, regional and international nursing laws, regulations and conventions noted in relevant documents

		3.1.3. Knowledge of pertinent laws of the country, regional and international nursing laws, conventions, and regulations.	
4. Curriculum – Philosophy, aims and objectives	4.1 Statements of curriculum philosophy, aims and objectives are formulated and provide the guidelines for further curriculum development	4.1.1 Written philosophical statements.	4.1.1.1 Curriculum Profile
		4.1.2 National health policy, status of nursing education of the country	
		4.1.3 Beliefs regarding the individual, family, community, society, health-illness, health care, art and science of nursing, education, teacher/teaching, learner /learning, etc.	
		4.1.4 justification for type of curriculum	
		4.1.5 Curriculum goals	
		4.1.6 Objectives- realistic, relevant, attainable, and measureable	
5. Curriculum – Conceptual Framework	5.1 The conceptual framework is derived from nursing, biological, physical and behavioural sciences, communication, problem-solving, management and education theories and	5.1.1 Curriculum Statements	5.1.1.1 Curriculum Profile
		5. 1.2 Nursing arts and sciences	5.1.1.2 Conceptual framework (narrative or diagram)
		5. 1.3 Behavioural and life sciences	
		5.1.4 Other concepts and theories	

	reflects the philosophy of the curriculum	5.1.5 Conceptual framework in narrative and/or diagrammatic form	
6. Curriculum Design	6.1 Curriculum design is directed by a conceptual framework and focuses on the student's critical, analytic and clinical skills, and professional values	6.1.1 Conceptual/theoretical framework shows arrangement and sequence of courses to reflect concepts.	6.1.1.1 Curriculum Profile
		6.1.2 Curriculum mapping	
		6.1.3 Teaching methodology and teacher/student interaction.	
		6.1.4 Congruence in theory and practice	
7. Curriculum – curriculum minimum standards	7.1 The nursing education institution/programme curriculum meets the minimum standards, applicable for programmes of fulltime study for a Bachelor of Science degree in nursing	7.1.1 Bachelor of Science Degree in Nursing leading to registration with a national or regional regulatory body: At least – <ul style="list-style-type: none"> • 140 weeks of instruction delivered over at least 3 calendar years or 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. 	7.1.1.1 BScN curriculum available for inspection
8. Curriculum – Total programme of study	8.1 The curriculum describes the total programme of study	8.1.1 Course sequence	8.1.1.1 Programme sequence Terminal objectives
		8.1. Courses for all four years (nursing and non-nursing)	

9. Curriculum – Clinical Skills Laboratory	9.1 The nursing education programme Clinical Skills Laboratory (CSL) shall provide the learning environment for students to achieve beginning clinical skills prior to placement in the clinical areas.	9.1.1 Fully equipped clinical skills laboratory	9.1.1.1 Clinical skills lab equipment and supplies available for inspection
		9.1.2 Adequate instruction, supervision, practice and assessment of students in the CSL	9.1.2.1 Clinical skills lab faculty including clinical instructors and preceptors in adequate numbers and qualifications.
10. Curriculum evaluation	10.1 The nursing institution/programme evaluates the curriculum based on the Standards for Nursing Education set by the Council and the RNB	10.1.1 Students, faculty, and key stakeholders participate in the systematic and continuous evaluation of all curriculum components.	10.1.1.1 Reports of Curriculum Evaluation Committee

7. 4: Standard 4: Nursing Faculty/Teaching Staff

Standard	Criteria	Indicators	Means of Verification-Supporting Documentation
1. Faculty – Adequacy	4.1 The faculty is adequate to accomplish the mission, goals and educational outcomes of the programme, the learning needs of the students, and the safety of the recipients of health care services	4.1.1 Faculty is: <ul style="list-style-type: none"> • Sufficient in number • Academically prepared for the areas in which they teach; and • Experientially prepared for the areas in which they teach. 	4.1.1 Faculty and Staff list, CVs and other relevant records

		<p>4.1.2 Recommended faculty-student ratio:</p> <ul style="list-style-type: none"> • Classroom teaching, not to exceed 1: 50; • Tutorial, not to exceed 1:25; • Clinical experience, not to exceed 1:12 	
2. Faculty – Policies and procedures	<p>4.2 The nursing institution/programme has written, approved policies and procedures related to faculty</p>	<p>4.2.1 Faculty policies include, among others:</p> <ul style="list-style-type: none"> • Recruitment • Appointment • Terms of employment and job description • Performance management • Ongoing clinical involvement • Continuing education and development • Research activities 	<p>4.2.1.1 Copies of appointment, promotion, and tenure policies or other documents defining faculty expectations</p>
3. Faculty - Professional qualifications, experiences and specialties	<p>4.3 (i) The director and faculty of the nursing education institutions are appointed by, or on the authority of the governing body of the school or its parent institution</p> <p>4.3(ii) The director and faculty is academically and experientially qualified to accomplish the mission, goals, and expected programme outcome</p>	<p>4.3.1 Qualifications of the director:</p> <ul style="list-style-type: none"> • Graduate nursing degree • Be registered and currently licensed by the Nursing and Midwifery Council of the Cayman Islands to practice nursing/midwifery in the jurisdiction <p>4.3.2 The nursing faculty shall be:</p> <ul style="list-style-type: none"> • qualified at least one degree above the students being prepared; and • registered and currently licensed by the Nursing and Midwifery Council of the Cayman Islands to practice nursing/midwifery in 	<p>4.3.1. Records that include name, title, educational degrees with area of specialization, certification, relevant work experience, and teaching responsibilities of director and each faculty member associated with the nursing education institution/programme.</p>

		the jurisdiction	
		4.3.3 Inter-professional faculty teaching non-clinical nursing courses have advanced preparation appropriate for the content being taught.	
4. Faculty – Professional affiliation	4.4. Nursing institution/programme faculty maintains professional affiliation and ethical behaviour	4.4.1 Nurse educators are active members of their professional and other related organizations	4.4.1.1 Professional organization membership card
		4.4.2 Nurse educators adhere to the national and International Council of Nurses (ICN) Ethical Code.	

7.5 Standard 5: Clinical Teaching-Learning Programmes

Standards	Criteria	Indicators	Means of Verification – Supporting Documentation
1. Clinical teaching	1.1 The clinical teaching programme is consistent with the curriculum statements, courses, and objectives and define the clinical objectives, related student placements, teaching, supervision and evaluation	1.1.1 (i) Tutors, Clinical Inspectors, Preceptors, Students and all other relevant stakeholders know of and understand the clinical teaching-learning programme (ii) Orientation programme for faculty, preceptors, students, and approved staff from the affiliated institutions/agencies	1.1.1.1 Course curriculum Written clinical teaching programme 2. Course syllabi 3. Examples of student work 4. Current affiliation agreements with institutions at which student instruction occurs.
2. Clinical experiences	2.1 Clinical experiences cover the continuum of wellness to ill-health and include health promotion, illness prevention, restoration of well-being and rehabilitation in primary, secondary and tertiary care facilities	2.1.1 Required number of clinical hours for students in the BSc Nursing programme = 2,000 hours.	2.1.1.1 Student Rosters; Assignment sheets
3. Clinical Faculty	3.1 All faculty teaching clinical or practicum courses shall be experienced in the clinical area of the course and maintain clinical expertise	3.1.1.1 Identification of specialist areas in the programme. 3.2.1 Evidence of knowledge and skills and experience in area of specialty	3.3.1.1 Faculty records of qualification and experience (Curriculum Vitae)
4 Clinical Instructors and Preceptors	4.1 Clinical Instructors and Preceptors, who teach, supervise and evaluate students are academically and experientially qualified for their role	4.1.1 Clinical Instructors/Preceptors are: • Familiar with the educational objectives of the course	4.1.1.1 Clinical Instructors records of qualification and experience (Curriculum Vitae)

	in assisting in the achievement of the mission, goals, and expected student outcomes	<ul style="list-style-type: none"> • Competent in their assigned specialty • Prepared for their roles in teaching, supervision and evaluation 	
	4.2 All facilities used for students' clinical learning experiences shall be approved by The Council prior to their use	4.2. 1 Council conducts health facility evaluation	4.2.1.1 Result of Council evaluation (Approval)
5. Contractual Agreements	5.6 (i) There shall be written contracts between the nursing education programme and the approved clinical facilities where students gain clinical experience. (ii)The right of health care facilities to refuse students placement shall be upheld at all times	5.6.1 Contracts are: <ul style="list-style-type: none"> • Developed by the programme • Reviewed annually by the cooperating health care entity. • Renewed at least every third year 	5.6.1.1 Written contracts
6. Clinical Skills Laboratory	6.1 Students shall achieve mastery in clinical procedures in the Clinical Skills Laboratory prior to engaging in actual patient care	6.1.1 The Clinical Skills Laboratory contains updated learning resources such as: <ul style="list-style-type: none"> • Audio-visual equipment • Scientific charts and models • Disposable and non-disposable equipment and supplies utilized in patient care • Where possible, a simulated clinical environment with various equipment and life size manikins to 	6.1.1.1 Faculty evaluations of students' clinical laboratory skills.

		simulate patient care situations	
7. Students supervision	7.1 During the clinical experiences, the ratio of faculty/preceptor to student should be according to established standards	7.1.1 Recommended Faculty/preceptor to student ratio: <ul style="list-style-type: none"> • 1:8 for junior years (1st & 2nd years) when direct supervision is required • 1:15 for senior year (3rd year) when students are expected to provide direct patient care under minimum supervision • 1:20 for final year (4th) when students are preparing to be beginning practitioners 	7.1.1.1 Duty rosters and student assignment
		7.1.2 The student-to-patient ratio shall be determined by the patient acuity and level of the students' educational preparation	
8. Clinical teaching – Evaluation	8.1 Clinical experiences shall be continuously evaluated throughout the clinical teaching programme Comprehensive clinical assessment shall be conducted in the final year	8.1.1 Students' progression from year-to-year shall be subject to the results of the clinical evaluation indicating successful completion of the clinical experiences and assignments	8.1.1.1 Faculty evaluations of students' clinical experience 8.1.1. 2 Student and faculty evaluations of clinical sites. 8.1.1.3. Course/faculty evaluations

		8.1.2 A written profile of each student's clinical experiences shall be kept to ensure coverage of experiences in a variety of settings, with patients across the lifespan and at different levels of acuity	
		8.1.3 Feedback from students shall be sought during and after each clinical placement. This feedback shall be recorded and collated.	

7.6 Standard 6: Graduates

Standards	Criteria	Indicators	Means of Verification – Supporting Documentation
1. Graduates – Competences and scope of practice	<p>1.1 (i) Graduates of the nursing education institution/programme achieve entry-to-practice competencies and the professional practice requirements as stipulated by The Council</p> <p>(ii) Graduates are prepared to provide safe, legal, and ethical care across the lifespan as an entry level practitioner</p>	<p>1.1.1 Graduates may also be evaluated by:</p> <ul style="list-style-type: none"> • End-of-programme students' evaluation provides evidence of students' achievement of competence • Employers' performance rating at least 12 months after graduation • Job satisfaction as evidenced by self-assessment at least 12 months after graduation. • Success in the Regional Examination for Nurse Registration. 	<p>1.1.1.1 Evaluation reports</p> <ul style="list-style-type: none"> • Examination results • Anecdotal records

7.7 Standard 7: Programme Effectiveness/Evaluation

Standards	Criteria	Indicators	Means of Verification Supporting Documentation
1. Programme effectiveness/evaluation	1.1 The nursing education institution/programme has a plan for its monitoring and evaluation	1.1.1 Programme outcomes include student outcomes, faculty outcomes, and other outcomes identified by the institution/programme	1.1.1.1 Written evaluation plan
	1.2.1 Data on programme effectiveness are used to foster ongoing programme improvement	1.2.1 The programme uses a systematic process to obtain relevant data to determine programme effectiveness.	1.1.1.2 Written evaluation report
			1.2.1.1 Evaluation reports
	1.3 There is a mechanism in place to measure the effectiveness of the nursing education institution/programme	1.3.1 Mechanism to measure effectiveness include: <ul style="list-style-type: none"> • Graduation and attrition rates • Graduates demonstrate established competencies in nursing • Success rate on RENR. • Frequency of evaluation of nursing programme • Tracking of graduates: <ul style="list-style-type: none"> (a) professional success/employment rates (b) continued professional education (c) Upward mobility <i>These indicators (1.3.1) are not applicable to new</i>	1.3.1.1 Reports and records

		<i>programmes without graduates</i>	
	1.4 The nursing education institution/programme, in consultation and collaboration with national and regional authorities, provides for the continuing nursing education (CNE) of its graduates, faculty and staff	1.4.1 The Council stipulates the number of CNE hours required for re-licensure	1.4.1.1 CNE certificates
	1.5 Evaluation data are utilized to modify programme for revision and inclusion of trends for programme upgrading	1.5.1 <ul style="list-style-type: none"> • Performance appraisal by employer • Student satisfaction. Programme review and revision	1.5.1.1 Performance appraisal reports and student satisfaction survey reports

8. Guidelines and Procedures for the Evaluation and Approval Process

The purpose of these guidelines is to specify procedures and criteria related to the requirements for evaluation and approval of a nursing institution/programme by the Council. These guidelines serve as a means for evaluating the success of a nursing programme in achieving its mission, goals, and expected outcomes. The procedure for modification and withdrawal of approval if a nursing education institution/programme fails to meet required standards is also elaborated. The following are the components of the evaluation and approval process:

8.1 Development of Standards of Education

The **development of standards of education** by the Council forms the basis for evaluating the nursing education institution/programme, to determine whether or not the nursing education institution/programme achieves and maintains these established standards.

The nursing education standards included in sections six and seven of this document are developed by the Council to guide nursing education institutions/programmes in their development and continuous improvement. The standards along with their criteria, indicators and means of verification are used as an evaluation tool for assessing the quality of the nursing education institution/programmes and to establish compliance with the Council's requirement for approval. Information received from the evaluation may also be used for long term planning and development of the institution/programme.

Seven areas are included in the standards: 1. Physical Facilities/Nursing Education Institution/Programme; 2. Students; 3. Curriculum and Teaching-Learning Practices; 4. Nursing Faculty/Teaching Staff; 5. Clinical Teaching-Learning Programmes; 6. Graduates; and 7. Programme Effectiveness/Evaluation. The standards are applied and the nursing education institution/programme is assigned a score according to the Council's established guideline. See the scoring guideline at Appendix E.

8.2 Approval Committee

An *Approval Committee* is appointed by the Council. It is made up of five members to include the Chairperson or Deputy Chairperson of the Council, one nurse educator (not on faculty of the nursing institution/programme being evaluated), a member appointed by the Chief Nursing Officer and a representative of the Professional Association. The Approval Committee's responsibility is to study the Self-Evaluation Report of the nursing education institution/programme, the visiting team's supplementary report and other supporting documents and to present a report based on evidence provided.

The Approval Committee reviews the self-evaluation and visiting team's report to ascertain whether the nursing education institution/programme has met the standards and criteria set by the Council. The Approval Committee makes recommendations to the Council regarding the status of evaluation and level of approval attained by the nursing education institution/programme (PAHO/WHO, et al. 2013).

Specifically, the Approval Committee shall:

- 1) Review the Council's process for approval of nursing education institutions/programmes as delegated to the Nursing Education Programme Approval Committee.
- 2) Consult, as necessary or appropriate, with individuals who have expertise related to a programme or any other matter considered by the Committee.
- 3) Following a nursing education programme approval review, make a decision regarding its recommendation to the Council on the subject of programme approval. The Committee will forward its report to the Chairman of the Council.
- 4) Maintain processes to ensure due process, procedural fairness and an open, transparent process for resolution of issues and/or concerns. (Saskatchewan Registered Nurses' Association, 2015)

8.3 Nursing Institution /Programme Self Evaluation

The **self-evaluation** of the nursing education institution which is designed to assist faculty members to further improve and develop their programmes and to prepare a report, expresses clearly the stage attained by the nursing education institution/programme and how it intends to maintain progress to achieve the established standards.

The nursing education institution/programme conducts the self-evaluation utilizing the Council's Standards for Nursing Education. The Council provides the Template for the Self- Evaluation Report, and Guide for Preparing the Self- Evaluation Report to the nursing education

institution/programme for use in conducting the self- evaluation and preparing the report (Appendix D)

The completed report is returned to the Council, within three months, which in turn forwards it to its Approval Committee.

8.4 Site Visit

The **site visit** – The evaluation and approval visit is organized by the Council in collaboration with the nursing education institution/programme. A team visits the institution/programme and performs an independent evaluation. This is to determine if the self-evaluation report prepared by the faculty is accurate, reflecting conditions as they exist in the nursing education institution/programme.

The Council appoints a five-member committee that comprises the *Visiting Team* whose function is to carry out the site visit and conduct the evaluation of the nursing education institution/programme. Members of the Visiting Team should include two nurse educators and two nurse administrators, one of whom should be a community/public health nurse. **No faculty member of the nursing education institution/programme under evaluation/review should be a member of the visiting team.**

The visiting team also has the responsibility to visit and evaluate health care facilities where students gain clinical experience. The Council has to approve these clinical sites before student placement. See Appendix E for the guidelines for evaluation of health care facilities.

8.5 Written Report of the Visiting Team

The **visiting team's report**, which is supplementary to the self-evaluation report and highlights the strengths and weaknesses of the nursing education institution/programme, is the fourth component of the evaluation and approval process.

Within 30 days of the Site Visit, a written report of the Site Visit is submitted to the nursing education institution/programme for comment. Such comments shall be submitted by the education institution/programme within 30 days of the date of the report. The Site Visit report and comments are presented to the Council at the next regularly scheduled Council meeting.

8.6 Recommendations of the Approval Committee

The Nursing Education Institution/Programme Approval Committee shall receive a copy of the following:

- Visiting Team's report(s) with the educational institution's response;
- Visiting team report that addresses programme approval standards and criteria that do not align with the Nursing Education Standards.

The Nursing Education Programme Approval Committee reviews all documents and makes a reasoned recommendation regarding the approval rating.

A copy of the Nursing Education Programme Approval Committee's draft report is forwarded to the Director of the nursing education programme to afford the programme an opportunity to respond to the tentative approval rating recommendation.

The nursing education programme may provide a response verbally, via e-mail, or may request a face to face meeting with the Nursing Education Programme Approval Committee.

The Nursing Education Programme Approval Committee forwards its report to the Chairperson of the Council, who in turn makes a recommendation to the Council regarding the report of the Nursing Education Programme Approval Committee.

8.7 Notification of Nursing Education Institution/Programme of Approval Rating

The Chairperson of the Council shall notify the nursing education institution/programme of the Council's reasoned decision in writing regarding the programme approval rating.

In the event the nursing education institution/programme is not satisfied with Council's decision regarding the programme approval rating, it may seek in writing, within 30 days, a review by Council. The programme will be allowed to file further material for Council's consideration. Council's decision following a review regarding the programme approval rating shall be final. Details of the appeals process may be found in **Section 11** of this document.

9. Process of Approval by the Nursing and Midwifery Council of the Cayman Islands

Nursing education and training requirements are regulated by the Council under the provisions of the Health Practice Law (2017 Revision) at sections 21(1) (iii) and 33(b) and the Nursing Regulations at section 3(3). A school of nursing in the Cayman Islands that offers a professional nursing education programme that leads to a degree in nursing, and whose graduates require registration by examination may apply to the Council for, and be granted the approval to operate under the provisions of the Law.

The Council will periodically review the nursing education programme and conduct onsite visits when it deems necessary. Any changes that are made in the administration of the nursing education programme, for example, the appointment of the new director shall be submitted to the Council, accompanied by a summary of the appointee's qualifications. The Council shall verify that the appointee meets the qualifications.

9.1 Approval of Nursing Education Institutions/Programmes

All nursing education institutions/programmes that prepare graduates for registration by examination must be approved by the Council in order to submit graduates for registration.

Only nursing education programmes within the structure of a college or university conducted by an educational unit in nursing leading to a baccalaureate degree in nursing are eligible for approval. The Approval Committee recommends one of several **approval ratings**. Specific steps and timelines in the approval process may be viewed in Appendix E.

9.2 Initial Approval

1. To be granted initial approval, the parent institution shall provide to the Council:
 - a. Written notice of intent to establish a programme;
 - b. A feasibility study for the planned programme, which should include the following:
 - i. applicant pool;
 - ii. graduate employment opportunities;
 - iii. educational and clinical facilities to be utilized;
 - iv. potential overlapping with other programmes in the use of clinical facilities; and
 - v. the impact on both the proposed and existing programmes;
 - c. A timeline for employment of a director and nursing faculty;
 - d. Initial hiring of the faculty shall be completed at least two (2) months prior to the proposed starting date. The director shall be actively employed at least six (6) months prior to the proposed start date. The timeline shall also identify projected future staffing needs;
 - e. A comprehensive plan for the development and implementation of the education programme, including philosophy and educational outcomes, curricula, course outlines with plans for student evaluation, resource needs, timelines, and a systematic self-evaluation; and
 - f. Any other information that the Council may reasonably request.
2. Proposed programmes shall provide detailed information relative to activities which provide the student with opportunities to attain defined competencies and demonstrate through ongoing evaluations that students are meeting defined educational outcomes on schedule.
3. The Council shall, upon receipt of all documents provided by the programme, conduct a scheduled onsite visit to review the programme. Upon determination that the documents of the onsite review are acceptable, extend initial approval
4. Pending satisfactory review of the programme's educational standards, the initial approval shall remain in effect until the results of the first registration examination for programme graduates are available. At that time, the Council will review the results and recommend full approval, conditional approval, or programme removal.

9.3 Full Approval

1. Full approval is granted by the Council after the initial period of approval based on evidence that the programme is meeting its educational outcomes as demonstrated by an acceptable level of graduates' performance, as defined in the Council's *Nursing Education Standards*.
2. An acceptable level of a programme's graduate performance shall be defined as:
 - a. Demonstrated mastery of nursing principles as evidenced by an average passing rate of at least 80% of students taking the RENR examination, upon their first attempt after graduation; and
 - b. Demonstrated mastery of nursing practice as evidenced by an evaluation of graduates' achievement of the educational outcomes required and approved by the Council.

Please Note: If the Council's Approval Committee determines that all requirements of the Standards for Nursing Education have not been met, the Council may, in its discretion, initiate the process of withdrawal of Full Approval, or allow the nursing education institution/programme to continue for a specified period of time not to exceed one (1) year.

9.4 Conditional Approval

1. Conditional approval may be granted for one year to a programme previously having initial or full approval if:
 - a. the graduates of the programme fail to achieve the standards prescribed in sections six and seven; or
 - b. the programme has initiated a major curriculum change; or
 - c. conditions previously identified in violation of these guidelines or the Council's recommendations continue to be unresolved and pose a risk to public health or safety, as determined by the Council.
2. Special progress reports or onsite visits, or both, shall be required for programmes with conditional approval, at the discretion of the Council.
3. The outcome of the Council's subsequent review of special progress reports or onsite visits or both may be:
 - a. return of the programme to full approval; or
 - b. placement of the programme on an additional one year of conditional approval; or
 - c. recommendation of programme removal from the list of approved nursing education programmes.

9.5 Approval Denied

1. Approval is **denied** when a nursing education institution/programme:
 - a. is evaluated and found to be non-compliant with five or more of the Council's seven *Standards for Nursing Education*
 - b. that has been given a deferred approval status fails to meet the twelve (12) month deadline
2. Students from a non-approved nursing education programme are not eligible for provisional registration by the Council.
3. Graduates from non-approved nursing education programme are not eligible for registration to practice nursing/midwifery by the Council.

9.6 Approval of Major Curriculum Changes

1. When a programme proposes major curriculum changes, the director shall present a comprehensive plan to the Council for approval. Plans shall include:
 - a. Rationale for the change;
 - b. Comparison of current versus proposed curriculum;
 - c. Explanation of the effects of the change on:

- i. Currently enrolled students;
 - ii. Functions and roles of graduates of the proposed programme;
 - d. Timetable for implementation of the change; and
 - e. Plan for evaluation of the change.
2. The previously approved curriculum must remain in place until the proposed curriculum is approved by the Council (See Appendix H for procedure for programme change).

9.7 Withdrawal of Full Approval

The Council, after a hearing, may rescind the approval granted to a programme and require the programme to suspend the enrolment of students, when:

1. The programme has been on conditional approval for at least two years and has failed to correct the identified deficiencies, which caused them to be placed on conditional approval
2. The Council provides written notice of such hearing to the director of the programme setting forth the particular reasons for the proposed action and fixing a date, not less than thirty days from the date of such written notice, at which time representatives of the programme shall have an opportunity for a prompt and fair hearing
3. Upon completion of the hearing the Council shall make a recommendation regarding what action should be taken regarding the nursing education institution/programme.

9.8 Restoring Full Approval to a Nursing Education Institution/Programme

1. After demonstrating compliance with the Council's Standards for Nursing Education and the requirements contained herein, a nursing education institution/programme with Conditional Approval may petition the Council in writing for restoring Full Approval.
 - The decision to restore Full Approval rests solely with the Council.
 - If the Council does not restore Full Approval, the Nursing Education Programme may petition the Council for an extension of Conditional Approval not to exceed one (1) year.
 - As part of its petition, the Nursing Education Programme must submit a corrective action plan that includes a timetable to correct the identified deficiencies.
2. This **Section 9.8** of these Guidelines does not apply to programmes closed by the Council. Such closed programmes must submit initial application and comply with all requirements of the Council's Approval Process.

9.9 Programme Closure

When a decision is made to close a nursing education institution/programme, the relevant authority shall:

1. Notify the Council and submit a written plan and timetable for termination
2. Maintain all requirements and standards for students until the last student is transferred or graduated from the programme

3. With the parent institution, develop and implement a policy providing for the safe storage of vital programme records, including transcripts of all graduates and of students who fail to graduate
4. Notify the Council of the person, by title, name and address, responsible for providing transcripts and references for students

10. Annual Nursing Education Institution/Programme Updates

The nursing education institution/programme is required to submit an annual update to the Council. The purpose of this is to provide new information or changes that occur during the year or since the previous submission to the Council.

The Council reserves the right to initiate a review of the nursing education programme at any time when the Committee, upon reviewing the annual report or other relevant information, has reason to believe that the programme may not be meeting the standards for nursing education programmes or there is evidence that the programme's ability to meet the current standards for nursing education is compromised due to substantive changes in the programme (e.g. courses, clinical practice).

Information to be included in the annual update is as follows:

1. Any significant changes, revisions, or other updates, including strategic initiatives for the programme (in the immediate future) since the previous submission. This may include programme and faculty achievements.
2. Description of the progress and ongoing development in meeting identified recommendations from the Approval Report.
3. Description of the analysis of programme evaluation data (course evaluations, student and faculty feedback) as well as an identified plan regarding how the programme intends to integrate this data into the future programme development.
4. Description of challenges and opportunities for improvement in the content and/or ongoing delivery of the nursing education programme that reflect current trends.
5. Description of challenges in meeting programme objectives.
6. Impact of change on ability of graduates to meet the Council's nursing education standards and registered nurse core competencies.
7. Any other information deemed relevant by the school of nursing. All annual updates are to be submitted to the Council and are due 1st June of each year.

11. The Appeal Process

Any nursing education institution/programme that is dissatisfied with the decision of the approval process may appeal to the Council, who refers the matter to its Appeals Tribunal, which is structured along the lines of the Appeals Tribunal in the Health Practice Law (2017 Revision)– Schedule 2.

11.1 Composition of the Appeals Tribunal

The Appeals Tribunal is appointed by the Council for the purpose of hearing appeals of decisions from nursing education institution/programmes regarding the approval process. The Appeals Tribunal consists of five members as follows:

- a. two registered nursing education practitioners (one of whom shall be a specialist in Measurement and Evaluation), not being members of the Council;
- b. one attorney-at-law;
- c. one representative of the professional organization; and
- d. one community representative, who shall not be qualified to practise nursing.

No member of the Approval Committee or of the faculty of the nursing education institution/programme making the appeal shall be a member of the Appeals Tribunal. All members shall be acceptable to the nursing education programme requesting the appeal.

11.2 Procedures of the Appeals Tribunal

- 1) A written notice of intent to appeal along with the reason for appeal is to be submitted to the Council within 30 days of receipt of the evaluation and approval report.
- 2) Two weeks upon receipt of the notice of appeal, the Council shall appoint an Appeals Tribunal
- 3) The Appeals Tribunal shall:
 - i. Review documents relevant to the evaluation and approval process submitted by the Council;
 - ii. Hear representation from both the nursing education programme and the Council;
 - iii. Solicit expert advice as required;
 - iv. Make a decision regarding the appeal. That is, either to uphold the original status or to change the status, stating the rationale for the decision; and
 - v. Submit a written report to the Council regarding its decision within two weeks of its ruling.

11.3 Notes on the Appeal Process

- Representatives for the nursing education programme may be required to meet with the Appeals Tribunal to answer questions and provide additional information.
- The ruling of the Appeals Tribunal is final.
- The Council shall notify the nursing education programme of the decision of the Appeals Tribunal
- When a decision is appealed, the previous approval status of the nursing education institution/programme shall remain in force until the disposition of the appeal.

12. Evaluation of the Approval Process

The Council undertakes formative evaluation of the Approval Process during its application and at the end of the process (Summative). Evaluation feedback is provided by the Approval

Committee and the nursing education institution/programme to allow for necessary revisions and upgrading of the Approval Process.

13. Provisional and Initial Registration of Student Nurses, Licensure and Re-licensure

The Council is empowered to register and license nursing professionals, who make up the largest group of health professionals, per the Health Practice Law (2017 Revision), Section 21 (1) i-v, which reads as follows:

There is a Council which shall –

- i. register and licence practitioners in accordance with this Law
- ii. regulate the professional conduct and discipline of registered practitioners
- iii. regulate the training of requirement of registered practitioners in the Islands
- iv. have the general functions of promoting high standards of professional conduct and performance of registered practitioners
- v. have such other duties and powers as set out in the following provisions of the Law.

The Council reserves the right to determine who is duly qualified for registration, licensure and/or re-licensure.

13.1 Provisional Registration of Student Nurses

The Health Practice Law under section 25 (1), states that any person who –

- (a) satisfies the Council of the matters specified in section 24(2)(a), (b), (c), (e) and (f);
- (b) has, or is working towards, a relevant qualification recognized by the Council; or
- (c) is enrolled in an institution recognized by the Council, may apply to be registered provisionally under this section, and that person shall be so registered. (p.19)

This section provides for provisional registration of student nurses. In addition to the conditions stated in the above sections of the Law, student nurses must meet the following requirements in order to be provisionally registered by the Council:

- 1 Must be at least 17 years' old
- 2 Must be formally accepted into the nursing education institution/programme having met the following minimum entry requirements:
 - a. A minimum of five (5) or more CXC, IGCSE, GCSE* passes (grades 1- 3/A - C) or equivalent, including Mathematics, English and a pure science (Biology, Human and Social Biology). Among the five subjects: no more than 2 subjects at grades III CXC or C GCE. See list of approved subjects on following pages.

Or

 - b. The Registered Nursing Assistant Certificate (or its equivalent) with five (5) years relevant experience and an examination pass in Mathematics (CXC, IGCSE, GCSE), plus a recommendation from an employer;

Or

- c. College students and college graduates are encouraged to apply and are required to present a copy of their transcript. Acceptance into the BScN programme is subject to the programmes compulsory subject requirements (University College of the Cayman Islands, 2013).
- 3 Complete the relevant application form and provide all additional documentation required by the Council (See Appendix F).

The Director of Nursing is required to submit a list of all students enrolled in the nursing education programme to the Council at the start of each academic year. The following information should be included for each student:

Student's Name
 Provisional Registration Number
 Age and Date of Birth
 Current Address
 Academic Qualifications

All students must be provisionally registered by the end of the second year or at least before they commence clinical practicum.

13.2 Initial Full Registration

The Nursing Council has a statutory role in determining if nursing students are qualified and fit* for registration. Registration is a onetime act. Under the Health Practice Law (2017 Revision) a student nurse (StdN) seeking initial full registration as a registered nurse under section 3 (1) (a) & (b), of the Nursing Regulations, 2016, must meet the following requirements:

- 1 Completion of the theoretical and clinical experience requirements of an approved programme in the registered nurse scope of practice
- 2 Verification from the University College of the Cayman Islands regarding successful completion of the nursing education programme
- 3 Completion of 140 weeks (130 credits) of theoretical instruction
- 4 Completion of a minimum of 2,000 hours of clinical experience
- 5 Demonstrated competency against the Nursing Council's Competencies for the registered nurse scope of practice
- 6 Passed the approved registration examination, the RENR, for registered nurses, which is administered twice per year
 - No StdN may sit the RENR on more than **three** occasions.
 - Nursing Students must sit and pass the examination within two years of completion of their programme
- 7 Produced the required character references, proof of health insurance, and police clearance certificate
- 8 Completed the required forms, paid the required fees, and provided the required documentation (See Appendix F).
- 9 Submitted the completed form and all attachments to the Council for review and determination of eligibility for registration.

*** *Fitness for Registration***

Nurses often work with people in vulnerable situations requiring a high level of integrity and trust. Through the process of registration, the Nursing Council undertakes its statutory obligation and responsibility to the public by ensuring all persons placed on the register are ‘fit for registration’.

When applying for registration and to sit the nurse registration examination, both the student and the Director of Nursing are required to declare that the student:

- is able to communicate effectively in order to practise nursing;
- is able to communicate in and comprehend English sufficiently to protect the health and safety of the public;
- does not have a physical or mental condition that means the student is unable to practise as a registered nurse;
- is not the subject of disciplinary proceedings or a disciplinary order in the Cayman Islands or in any other country;
- registration would not endanger public health or safety; and
- the information provided is true and accurate (Nursing Council of New Zealand, 2017, p. 96).

13.3 Licensure

The purpose of a professional license is to protect the public from harm by setting minimal qualifications and competencies for safe entry-level practitioners. Nursing is regulated because it is one of the health professions that pose a risk of harm to the public if practiced by someone who is unprepared and/or incompetent.

The general public may not have sufficient information and experience to identify an unqualified health care provider, and is vulnerable to unsafe and incompetent practitioners. A license issued by the Council provides assurance to the public that the nurse has met predetermined standards. Licensure benefits both the public and the individual nurse because essential qualifications for nursing practice are identified; a determination is made as to whether or not an individual meets those qualifications; and an objective forum is provided for review of concerns regarding a nurse’s practice when needed.

Licensure benefits nurses because clear legal authorization for the scope of practice of the profession is established. Licensure also protects the use of titles. Only a licensed nurse is authorized to use certain titles or to represent themselves as a licensed nurse (National Council of State Board of Nurses, 2011).

In order to practice nursing legally in the Cayman Islands a person has to be issued a licence to practice nursing, in accordance with the Health Practice Law (2017 Revision), Nursing Regulations (2016) and Health Practice Regulations (2017 Revision).

The licensing process is similar to the initial registration process, taking into consideration professional and legal history and evidence of medical malpractice insurance.

13.4 Re-licensure

Unlike registration, which is a onetime process, licensing is periodic with the frequency of re-licensure set by the Council in accordance with the Health Practice Law, Section 27A. The relevant parts are as follows:

- 1) A registered practitioner shall only practise as a practitioner while he is in possession of a valid practising licence, issued to him by the Council in the prescribed form on payment of the prescribed fee to the registrar.
- 2) **A practising licence shall be valid for a period of *two years* commencing on the date of its issue, or re-issue, as the case may be.**
- 3) The Council may, upon the recommendation of the Governor, waive the prescribed fee payable by a registered practitioner who is in full-time employment in the Government service, if the Council is satisfied that the registered practitioner is not also engaged in private practice.
- 4) A practising licence shall not be issued to a registered practitioner unless the Council is satisfied that the registered practitioner has adequate malpractice insurance, liability insurance, other relevant insurance or indemnity cover obtained from an authorised insurer and approved by the Commission.
- 5) If the name of a registered practitioner is removed from the register, any practising licence issued to him shall cease to be in force,
- 6) If, for a period of not less than five consecutive years, a registered practitioner ceases to be in possession of a practising licence, the name of the registered practitioner shall be removed from the register, unless he applies to the relevant Council (Nursing) to be registered and pays the prescribed fees.

Re-licensure of nurses (renewal of license) is done by the Council every two years and besides the professional, legal and medical malpractice insurance requirements, nurses must show proof of having completed at least Basic Life Support and 25 hours of continued professional education in order for their license to be renewed.

Glossary of Terms/Abbreviations/Acronyms

Academic Semester: the semester length as established by policy by the parent institution.

Accreditation: a level of quality achieved by educational programmes and clinical facilities which have participated in voluntary evaluation by recognized agencies using predetermined criteria.

Admission with advanced standing: academic credit for previous education or experience is given to a student advanced degree in nursing: a master's or doctoral degree in nursing.

Advanced levels of students: students in the final year of study in a registered nursing education programme.

Approval: the process of reviewing and accepting that a nursing education programme and clinical facilities meet the requirements of the Cayman Islands Nursing & Midwifery Council.

Council: the Cayman Islands Nursing and Midwifery Council (Council).

Client: the focus of nursing care, including individuals, families, groups, and communities.

Collaborative judgment: shared decision making.

Contact hour: a fifty (50) or sixty (60) minute period of time spent by students in the presence of programme faculty.

Data collection: the process of collecting information, observing the client, recording, and reporting to the appropriate person signs, symptoms, and other pertinent data which may indicate that the client's condition deviates from normal or that there is a change in the client's condition.

Director: the registered nurse educator responsible for policies, contracts, curriculum, and overall administration of a nursing education programme.

Direct client care experience: student learning that involves the provision of primary nursing services to clients.

Educational outcomes: behaviours demonstrated by the graduate of a registered nurse education programme.

Grandfathering: A term used to recognize current nurses' qualifications when the laws and regulations change. It allows transitions to take place within a profession.

Initial Registration – that a person who meets the requirements to be recognized as a “nurse” has been entered into the official register of the Council, in accordance with the Health Practice Law (2017 Revision –Nursing Regulations, 2016 and Nursing Regulations Amendments 2017.

Laboratory experience: student learning that involves the manipulation of concepts or materials within a controlled environment.

Licensure – A person has been issued a licence to practise nursing, in accordance with the Health Practice Law (2017 Revision) –Nursing Regulations, 2016 and Nursing Regulations Amendments 2017.

Major curriculum changes: significant deviations in content or length from a currently approved education programme.

Nursing education programme: means a school of nursing.

Nursing process: a problem-solving approach consisting of five sequential and interrelated phases: assessment, which involves the gathering of data related to a client’s health needs; diagnosis, which involves the analysis of the data obtained; planning, which involves the design of nursing interventions to address client needs; implementation, which involves performing the interventions; and evaluation, which involves determining whether the diagnosis was accurate, the plan appropriate, and the interventions effective in addressing the client’s needs.

Observational experience: a structured student learning experience in which learners observe but do not provide direct client care services.

Parent Institution: the single agency or institution that administers the nursing education programme in its entirety.

Precepted clinical experience: student learning that involves the provision of primary nursing services to clients under the guidance and direction of a preceptor in collaboration with nursing education programme faculty.

Preceptor: a registered nurse with the required experience, approved by the faculty of the school of nursing who guides and directs students in the provision of nursing services to clients.

Recognition of Previous Learning (RPL): RPL involves recognizing and giving credit for learning that has occurred through previous experience. This may include qualifications, life experience, work experience or other educational experience. This learning is measured against the learning outcomes of the programme (Nursing Council of New Zealand, 2017).

Re-Licensure – The process of renewing a license to practice nursing on a periodic basis as determined by the Council, after complying with the continuing professional education requirements.

Registration examination: the registration examination for nurse registration approved by the Nursing and Midwifery Council.

Requirements: the minimum standards that must be met in order for a nursing education institution/programme to be approved.

Simulated experience: student learning that involves interaction with computer-generated or other lifelike models of clinical nursing situations.

Supervision: the acceptance by a registered nurse educator of the responsibility and accountability for the health care delivered to clients by students under his or her onsite direction.

Rating: A status given to a nursing education programme as a result of the approval process.

Therapeutic nursing measures: those actions taken to implement the plan of care for a client.

Transfer: use of pre-admission coursework to seek admission to a programme.

Unexpected resignation: an unanticipated resignation effective within an academic year or after hiring.

Unencumbered: No current restriction on a license to practice on any professional or practical nursing license.

References

- American Nurses Association (2008). *Position statement on professional role competence*. Washington, DC: American Nurses Publishing.
- Barbados Accreditation Council (2010). *Standards for institutional and programme accreditation*. Retrieved from: <https://bac.gov.bb/Services/SkillsCertificate/Competent-Authorities.aspx>
- Benton, D.C. (2013) *Review of legislation relating to the introduction of nurse education at the University College of the Cayman Islands*. Unpublished.
- Burkhardt, M., & Nathaniel, A. K. (2013). *Ethics and issues in contemporary nursing*. (4th ed). USA: Nelsons Education Ltd.
- Caribbean Accreditation Authority for Education in Medicine and other Health Professions CAAM-HP (2010). *Standards for the accreditation of degree nursing programmes in the Caribbean Community (CARICOM)*.
- College of Nurses of Ontario (2014). *Entry to practice competencies for Ontario registered practical nurses; The standard of care*. Retrieved from: http://www.cno.org/globalassets/docs/reg/41042_entrypracrpn.pdf
- Colorado Department of Regulatory Agencies: Division of Professions and Occupations (2014). *Rules and regulations for approval of nursing education programmes*. Retrieved from: <https://www.colorado.gov/pacific/dora/dpo>
- Commission of Collegiate Nursing Education (2013). *Standards for accreditation of baccalaureate and graduate nursing programmes*. Retrieved from <http://www.aacn.nche.edu/ccne-accreditation/Standards-Amended-2013.pdf>
- Government of the Cayman Islands (2017). *Cayman Islands Health Practice Law (2017 Revision)*. Cayman Islands: Governor in Cabinet
- Ireland Law Reform Commission (2011). *Nurses and Midwives Act*. Retrieved from <http://www.irishstatutebook.ie/eli/2011/act/41/enacted/en/print>
- Lindeman, C. (2000). The future of nursing education. *Journal of Nursing Education*; Jan 2000; 39, 1; ProQuest Medical Library pg. 5
- Nursing Council of New Zealand (2017). *Handbook for nursing departments offering programmes leading to registration as an enrolled nurse or a registered nurse*. Retrieved from: <http://www.nursingCouncil.org.nz/>

- Royal College of Nursing (2002). *Helping students get the best from their practice placement*. Retrieved from:
<http://www.qmu.ac.uk/hn/docs/RCNHelpingStudentsgettheBestfromtheirPracticePlacements.pdf>
- Saskatchewan Registered Nurses' Association (2015). *Program approval for established RN education programs*. Retrieved from:
http://www.srna.org/images/stories/Registration/Admin_Manual_Program_Approval_Established_RN_FINAL_2015_06_11.pdf
- The Nursing Council of Hong Kong (2012). *Core competencies of the Registered Nurse (General)*. Retrieved from:
http://www.nchk.org.hk/filemanager/en/pdf/core_comp_english.pdf
- The Nursing Council of Jamaica (2011). *Manual of approval nursing & midwifery education programmes. Standards, criteria evaluation and approval process*. Jamaica: Author.
- The Pan American Health Organization/World Health Organization Caribbean Community Secretariat, & the Regional Nursing Body (2013). *The Standards for Nursing Education in the Commonwealth Caribbean: Accountability*. Barbados: Author.
- The Pan American Health Organization/World Health Organization, Caribbean Community Secretariat, & the Regional Nursing Body (2013). *Policies and procedures for evaluation and approval of basic nursing education programmes in the Commonwealth Caribbean*. Barbados: Author.
- Understanding Accreditation* (2016). Retrieved from
<http://www.collegesanddegrees.com/accreditation>
- University College of the Cayman Islands (2013). *Bachelor of Science degree in nursing curriculum*. Cayman Islands: Author.
- Wisconsin Department of Safety and Professional Services - Board of Nursing (2014). Nursing school self-evaluation report for initial board of nursing approval. Retrieved from:
<http://165.189.64.111/Documents/Credentialing%20Forms/Education%20Forms/Nursing%20Information%20Page%20Documents/RN%20and%20LPN/Self-Eval%20Initial%20Approval%20fm3029.pdf>
- World Health Organization (2009). *Global standards for the initial education of professional nurses and midwives*. Retrieved from:
<https://www.google.com/bz/search?q=Global+standards+for+the+initial+education+of+professional+nurses+and+midwives&oq>

Appendices

Appendix A Graduate Profile

1. Graduates demonstrate established competencies in nursing practice.
2. Graduates demonstrate sound understanding of the determinants of health.
3. Graduates of an initial programme in nursing meet regulatory body standards leading to professional licensure/registration as a nurse.
4. Graduates are awarded a professional degree.
5. Graduates are eligible for entry into advanced education programmes.
6. Nursing education institution/programme employ methods to track the professional success and progression of education of each graduate.
7. Nursing school graduates are knowledgeable practitioners who adhere to the code of ethics and standards of the profession.
8. Nursing education institution/programme prepares graduates who demonstrate:
 - use of evidence in practice,
 - cultural competence,
 - the ability to practice in the health-care systems of the Cayman Islands to meet population needs,
 - critical and analytical thinking,
 - the ability to manage resources and practice safely and effectively,
 - the ability to be effective client advocates and professional partners with other disciplines in health-care delivery,
 - community service orientation,
 - leadership ability and continual professional development.

Nursing Education Programme Objectives

The programme is designed to prepare **graduates** with capabilities to:

1. Practice within ethical and legal frameworks of the nursing profession;
2. Integrate scientific and technological advances and evidence-based practice into clinical decision-making for the care of individual, families and communities
3. Establish therapeutic partnerships with patients and families to enhance health promotion and illness management
4. Assume advocacy roles in partnership with patients, families and the health care team, challenging inequities that impact on the health of the patient system;
5. Contribute to the body of nursing knowledge through an inquiring approach to practice;
6. Meet future challenges, including changes in science and technology, which impact health care in the 21st century (UCCI BScN Curriculum: Profile, 2013).

Appendix B

Registered Nurse Scope of Practice

- Registered nurses utilise nursing knowledge and complex nursing judgment to assess health needs and provide care, and to advise and support people to manage their health.
- Registered nurses practise independently and in collaboration with other health professionals, perform general nursing functions and delegate to and direct registered nursing assistants, healthcare assistants and others.
- Registered nurses provide comprehensive assessments to develop, implement, and evaluate an integrated plan of health care, and provide interventions that require substantial scientific and professional knowledge, skills and clinical decision making.
- Registered nurses practice in a range of primary, secondary, and tertiary care settings in partnership with individuals, families, and communities.
- Registered nurses may practise in a variety of clinical contexts depending on their educational preparation and practice experience.
- Registered nurses may use their expertise to manage, teach, evaluate and research nursing practice.
- Registered nurses are accountable for ensuring that all health services they provide are consistent with their education and assessed competence, meet legislative requirements and are supported by appropriate standards.
- There will be conditions placed in the scope of practice of some registered nurses according to their qualifications or experience limiting them to a specific area of practice

Adapted from the Nursing Council of New Zealand

Appendix C

Registered Nurse Core Competencies

Curriculum Objectives/Competencies

The curriculum objectives or competencies of the graduates are organized under three domains reflecting the International Council of Nurses (ICN) framework for competencies* and in support of the major concepts and sub-concepts of the conceptual framework.

At the completion of the programme, the graduates will be able to:

Professional, Ethical, Legal Practice

- 1 Demonstrate knowledge of policies and procedures that have legal implications for practice;
- 2 Provide care and service that reflects the standards of the professional, ethical and relevant legislative requirements;
- 3 Practice within the limits of own competence, accepting accountability for her/his nursing practice;
- 4 Accept accountability for delegation and direction of nursing care to nursing and other auxiliary staff;
- 5 Satisfy the Nursing Council of Jamaica requirements for registration and licensure;

Care Provision and Management

- 6 Synthesize theoretical and empirical knowledge from the humanities, the physical, biological and behavioural sciences as a basis for making nursing decisions;
- 7 Recognize the dimensions of environment, culture, lifestyle and other factors, which affect the health of individuals, families, groups and communities;
- 8 Integrate the caring ethic as the foundation of nursing practice;
- 9 Perform comprehensive assessment of patients across the lifespan, their families, and their communities;
- 10 Analyze, interpret and record accurately, data collected;
- 11 Use critical thinking and clinical judgment in the preparation of a care plan to reflect established priority of care based on patient's needs;

- 12 Manage patient care in a manner that is responsive to the patient's needs, stated outcomes, and which is supported by nursing knowledge, national health policies and programmes;
- 13 Demonstrate skills in teaching individuals, families and groups to achieve satisfying productive lifestyle;
- 14 Use health care technology and informatics in the provision of service and care to individuals, families and groups;
- 15 Collaborate and participate with colleagues, other members of the health care team, and sectors to facilitate and coordinate care;
- 16 Evaluate patient's progress toward expected outcomes in partnership with families and other stakeholders;
- 17 Maintain accurate records necessary for continuity of care, confidentiality, and a legal framework;
- 18 Communicate effectively with patients, families, groups, and members of the health team to promote effective interpersonal relationship and team-work;
- 19 Demonstrate leadership and basic management skills within practice settings to improve the quality of health services and care;
- 20 Incorporate the process of continuous quality improvement in practice settings;
- 21 Demonstrate the ability to discuss and to evaluate contemporary issues related to health, health care and nursing;
- 22 Recognize the importance of research in the development of nursing and in improving patient outcomes;

Professional Development

- 23 Demonstrate self-directedness for life-long learning in maintaining personal and professional development;
- 24 Participate in community activities in carrying out her/his responsibilities as a professional and as a citizen.

Taken from the (UCCN BScN) Curriculum 2013, pp.31-33.

*International Council of Nurses (2003). *An implementation model for the ICN framework of competencies for the generalist nurse*. Geneva: ICN Standards and Competencies Series

Appendix D

Nursing Institution/Programme Self-Evaluation Report



CAYMAN ISLANDS NURSING AND MIDWIFERY COUNCIL

FOR INITIAL APPROVAL BY THE NURSING AND MIDWIFERY COUNCIL

As indicated in The Health Practice Law (2013 Revision) 21(1) (iii) and 33(b) the Council shall regulate the training requirements; and The Nursing Regulations, 2016 3(3) The Council may designate an educational programme offered in the islands that leads to a degree in nursing as an approved nursing programme - a school of nursing may apply to the Cayman Islands Nursing and Midwifery Council for approval of the school of nursing.

The school of nursing shall submit a self-evaluation report setting forth evidence of compliance with Health Practice Law (2013 Revision), Health Practice Regulations (2013 Revision) and the Nursing Regulations, 2016.

This form must be completed as part of the self-evaluation report for initial approval by the Council.

Directions for completing the Self-Evaluation Report: On the line next to each requirement, please indicate the date of compliance or anticipated compliance, or “NA” for not applicable. For each “NA” indicated, please explain why the requirement does not apply to the nursing school in the space provided or on attached clearly labelled pages.

After receiving the Self-Evaluation Report, the Council may conduct a site survey of the School of Nursing to verify compliance with the standards set by the Council.

Please submit this completed and signed report to: The Registrar, Cayman Islands Nursing and Midwifery Council, 3rd Floor Government Administration Building – hpbusers@gov.ky

Name of Nursing School: _____

Name of the Director of the School of Nursing and Professional designation:

Address: _____

Title of Programme of study:

Certificate, diploma, degree awarded: _____

ORGANIZATION AND ADMINISTRATION

Governing Institution

NOTE: The Council may examine administrative policies during a site survey to ensure that the Council's standards are being met.

1. _____ Institution assumes legal responsibility for overall conduct of the school of nursing.
2. _____ Institution has a designated educational administrator, established administrative policies and fiscal, human, physical, clinical and technical learning resources adequate to support school processes, security and outcomes.
3. _____ Programme has a budget; attach a copy to Self-evaluation Report.
4. _____ Programme duration, rationale, goals, objectives, philosophy, vision, mission and core values are documented; attach evidence of accreditation to Self-evaluation Report.
5. _____ Institution has an organizational chart which depicts the hierarchy of the programme administration and the relationship of the nursing programme to the parent institution; attach evidence of accreditation to Self-evaluation Report.
6. _____ Institution has maintained institutional accreditation; attach evidence of accreditation to Self-evaluation Report.
7. _____ Institution has developed and maintained written school of nursing administrative policies which are in accord with the institution.
8. _____ Faculty personnel policies are available
9. _____ Institution has written contracts in place between the school of nursing and institutions which offer associated academic study, clinical facilities and agencies for related services for students.
10. _____ Institution has a written document detailing graduation requirements of the parent institution policy on promotion between academic years.

11. _____ Nursing education programme committees: Advisory Committee, Curriculum Committee, etc. have written terms of reference;
12. _____ Institution has a system that safeguards the records of students, faculty and staff against breach of confidentiality, fire, theft etc.

PROGRAMME DESCRIPTION

NOTE: The Council will examine programme documents during a site survey to ensure that the standards are being met.

13. _____ Nursing School has documented policies for admission, re-admission, student absences, grading system, progression and payment of fees.
14. _____ Nursing School has availability of student services – health, counselling, financial assistance, student organizations.
15. _____ Nursing School has a Student Handbook that students receive on admission to the programme.
16. _____ Nursing school has a documented process to inform students of the requirements for progression, graduation and eligibility to write the Regional Exam for Nurse Registration.
17. _____ Nursing School has the following documented – total credit hours for the programme, number of semesters and duration of each; number of credits dedicated to professional and non-professional course work.
18. _____ Nursing school has the following documented: students’ involvement in committees such as curriculum planning and evaluation, academic policies and procedures, evaluation of teaching effectiveness.
19. _____ Nursing School records the number of students per academic year and the projected student enrolment
20. _____ Programme capacity and faculty to student ratio is documented.

NURSING EDUCATION DIRECTOR

21. _____ Nursing education director holds a current, active registered nurse license or privilege to practice in the Cayman Islands that is not encumbered.
22. _____ Nursing education director has evidence of a graduate degree with a major in nursing.
23. _____ Nursing education director has knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation, and either educational preparation or 2 years' experience as an instructor in a nursing education programme within the last 5 years.
24. _____ Nursing education director has current knowledge of nursing practice.
25. _____ Institution must notify the Council within 48 hours of the termination, resignation or retirement of an educational administrator and designate the interim educational administrator within 5 business days. The institution may request Council approval of an interim educational administrator who does not meet the qualifications specified, but the interim educational administrator may serve no longer than 6 months. The institution may request an extension of time based upon hardship.

FACULTY

NOTE: Evidence of meeting faculty standards must be kept on file in the School of Nursing office and may be examined by the Council representative(s) during the survey.

26. _____ School of nursing has evidence of the faculty meeting the educational standards on file in the school of nursing office and available to the Council upon request.
27. _____ All faculty of the school of professional nursing hold a current, active registered nurse license with the privilege to practice in the Cayman Islands that is not encumbered.
28. _____ All faculty of the school of professional nursing have a graduate degree with a major in nursing. Inter-professional faculty teaching non-clinical nursing courses all have advanced preparation appropriate for the content being taught.
29. _____ If faculty exceptions are utilized, all were requested for approval.

PROGRAMME RESOURCES

30. _____ The number of classrooms, conference rooms, laboratories and offices available meet the purpose and needs of the programme, faculty, students and administrative staff.

31. _____ Clinical skills laboratory, content and staff meet the requirements of the curriculum.
32. _____ Library, learning and other resources required by faculty and students are appropriate and accessible.
33. _____ Structure, functions and responsibilities of the faculty are documented.
34. _____ Professional development policies and goals of faculty are documented.
35. _____ Record system for students, faculty and the programme is in place.

CURRICULUM

36. _____ Curriculum structure for each year of the programme is documented and the sequencing of required courses is evident.
37. _____ Course outlines for all required courses include:
- (a) _____ Course number and title
 - (b) _____ Course duration – theory, practical and practicum (clinical) hours for each course
 - (c) _____ Credit value
 - (d) _____ Pre-requisites/Co-requisites
 - (e) _____ Course description
 - (f) _____ Course objectives
 - (g) _____ Teaching/learning methods
 - (i) _____ Areas used for learning
 - (j) _____ Required skills
 - (k) _____ Learning experiences
 - (l) _____ Assignments to be completed by students
 - (m) _____ Evaluation process
38. _____ Curriculum enables the student to develop the nursing knowledge, skills and abilities necessary for the level, scope and standards of competent nursing practice expected at the level of registration and licensure.
39. _____ Curriculum is developed by nursing education professional member with a graduate degree and is revised as necessary to maintain a programme that reflects advances in health care and its delivery.
40. The curriculum includes all of the following:

- (a) _____ Evidence-based learning experiences and methods of instruction consistent with the written curriculum plan.
- (b) _____ Diverse, didactic and clinical learning experiences consistent with programme outcomes.

41. Coursework includes all of the following:

- (a) _____ Content in the biological, physical, social and behavioural sciences to provide a foundation for safe and effective nursing practice.
- (b) _____ Content regarding professional responsibilities, legal and ethical issues, and history and trends in nursing and health care.
- (c) _____ Didactic content and supervised clinical experiences in the prevention of illness and the promotion, restoration and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social and economic backgrounds.

CLINICAL LEARNING EXPERIENCES

NOTE: The Council may inspect clinical facilities during a site survey to ensure that standards set by the Council are being met.

42. Patient experiences occur in a variety of clinical or simulated settings and include all of the following:

- (a) _____ Integration of patient safety principles throughout the didactic and clinical coursework.
- (b) _____ Implementation of evidence-based practice to integrate best research with clinical expertise and patient values for optimal care, including skills to identify and apply of best practices to nursing care.
- (c) _____ Provision of patient-centred culturally competent care that recognizes that the patient or designee is the source of control and full partner in providing coordinated care by doing the following:
 - 1) _____ Respect of patient differences, values, preferences, and expressed needs.
 - 2) _____ Involvement of patients or designees in decision-making and care management.
 - 3) _____ Coordination and management of patient care across settings.
 - 4) _____ Explanation of appropriate and accessible interventions to patients and populations that may positively affect their ability to achieve healthy lifestyles.

- (d) _____ Collaboration of inter-professional teams to foster open communication, mutual respect and shared decision-making in order to achieve quality patient care.
- (e) _____ Participation in quality improvement processes to monitor patient care outcomes, identify possibility of hazards and errors and collaborate in the development and testing of changes that improve the quality and safety of health care systems.
- (f) _____ Use of information technology to communicate, mitigate errors and support decision-making.
43. _____ All cooperating agencies selected for clinical experiences have standards which demonstrate concern for the patient and evidence of the skilful application of all measures of safe nursing practices.
44. _____ List of all clinical sites and criteria for evaluation is documented and completed annually; attach evidence of accreditation to Self-evaluation Report.
45. _____ Facilities utilised for clinical experience are approved by the Council and meet the programmes criteria for selection.
46. _____ All faculty teaching clinical or practicum courses are experienced in the clinical areas of the course and maintain clinical expertise.
47. _____ Faculty-supervised clinical practice includes all of the following:
- (a) _____ Development of skills in direct patient care.
 - (b) _____ Making clinical judgments.
 - (c) _____ Care and management of both individuals and groups of patients across the lifespan.
 - (d) _____ Delegation to and supervision of other health care providers.
48. _____ Clinical experiences shall be supervised by qualified faculty.
49. _____ All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.

PRECEPTORS

50. _____ Preceptors shall be approved by the faculty of the school of nursing:
51. _____ School of nursing shall provide each preceptor with an orientation concerning the roles and responsibilities of the students, faculty and preceptors. The preceptor shall have clearly documented roles and responsibilities.
52. _____ Clinical preceptors shall have an unencumbered license or privilege to practice in the Cayman Islands as a nurse at or above the licensure level for which the student is being prepared.

53. _____ Preceptors shall demonstrate competencies related to the area of assigned clinical teaching responsibilities.

54. _____ Preceptor to student ratio, qualification and orientation is documented.

55. _____ Annual evaluation for each clinical site and the experiences provided is documented.

EVALUATION

56. _____ Educational administrator shall implement a comprehensive, systematic plan for ongoing evaluation and evidence of implementation shall reflect progress toward or achievement of programme outcomes.

57. _____ Nursing school must provide a self-evaluation of RENR success rate, including any current steps being taken to improve RENR success rate.

58. _____ Nursing School documents the attrition rate and students who do not meet the criteria for graduation.

SELF-EVALUATION NOTES

For each “NA” indicated in this report, please provide an explanation as to why this does not apply to the nursing school on a separate page. Please write the corresponding report item number for each explanation. Attach clearly labelled additional pages as necessary.

Report Completed by:

School of Nursing Director Name _____

Nursing Director Signature _____

Date: _____

Date Received by the HPC _____

Date reviewed by the Registrar _____

Date reviewed by the Council _____

Adapted from: Wisconsin Department of Safety and Professional Services Board of Nursing:
Nursing School Self-evaluation Report for Initial Board of Nursing Approval

Appendix E

Standards of Nursing Education – Scoring Guidelines

Standard 1: Nursing Education Institution/Programme Setting

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
1. Need, Location, Physical Facilities 1.1. The nursing programmes emanate from a demonstrated need of the society 1.2 The environment is conducive and accessible to community services and affiliating agencies 1.3 The design of the physical facility is according to national standards for safety and spacing in tertiary education institutions 1.4 There is adequate space and amenities to accommodate students, staff and institution/programme activities 1.5 The institution/programme has suitable lighting, ventilation, temperature regulation	1.1.1 Nursing and health care human resources studies				
	1.1.2 Request for approval from the Council				
	1.2.1 Suitable geographic location				
	1.3.1 Knowledge of the building standards				
	1.3.2 Nurse Educator's involvement in architectural design of new buildings				
	1.4.1 Identifiable space and provision of amenities				
	1.4.2 Learning laboratories, including simulation lab				
	1.5.1 Planning and budgetary allocation				
	1.5.2 Seating				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
(natural/artificial), which makes it conducive to teaching/ learning.	<p>accommodation in relation to the standards of the nursing education institution/programme.</p> <p>1.5.3 Adjustable and moveable facilities.</p>				
<p>2. Academic environment</p> <p>2.1 The nursing education programme is a part (faculty, department) of an accredited tertiary educational institution.</p> <p>2.2 Faculty and students participate in research and other scholarly activities of the nursing education institution/programme and the parent institution (university)</p> <p>2.3 Faculty members work mutually in teaching, research, and appropriate health care delivery programmes.</p> <p>2.4 The nursing education institution/programme meets approval and/or accreditation / registration requirements as</p>	<p>2.1.1 Nursing education institution/programme is a part of a parent institution</p> <p>2.2.1 Research work undertaken by the faculty/students is presented</p> <p>2.3.1 There is evidence of close interaction among faculty members in the various disciplines</p> <p>2.4.1 Evaluation of nursing education institution /programme conducted by the Council initially and thereafter every three years.</p>				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
outlined by the Council					
<p>3. Safe and Positive Practice Environments</p> <p>3.1 The nursing education institution/programme creates and maintains a safe and positive work environment for faculty, staff and students.</p>	<p>3.1.1 The nursing education institution/programme 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.</p> <p>3.1.2 There are 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</p>				
<p>4. Vision, Mission, Goals and expected programme outcomes</p> <p>4.1The nursing education institution/programme'</p>	<p>4.1.1 Vision and Mission and theoretical</p>				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
<p>has defined statements of its vision, mission, values, goals expected programme outcomes, which are congruent with those of the parent institution, and the guidelines for the preparation of the curriculum</p> <p>4.2 The programme's mission statement, goals, and expected programme outcomes are written and accessible to current and prospective students, faculty, and other constituents.</p>	<p>values, goals, expected programme outcomes of the nursing education programme are stated and are in congruence with the parent institution</p> <p>4.2.1 Vision, mission goals and expected programme outcomes are stated, circulated and prominently displayed</p>				
<p>5. Governance and Administration</p> <p>5.1 The parent institution assumes legal responsibility for overall conduct of the school of nursing.</p> <p>5.2 The organizational structure includes a nurse administrator who has the authority and responsibility for decisions related to the nursing education programme and its</p>	<p>5.1.1 Nursing education institution/programme is included in the legal charter, vision, mission and other administrative structure of the parent institution</p> <p>5.2.1 The nursing director is a registered nurse (RN) who holds a graduate degree in nursing</p>				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
<p>resources</p> <p>5.3 The governance and administrative committees of the school has representation from academic staff, students and other stakeholders.</p> <p>5.4 The nursing education institution/programme has 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.</p> <p>5.5 The nursing education institution/programme has signed contractual agreements with cooperating health care entities</p>	<p>5.3.1 Faculty and students' role in the governance of the programme are clearly defined and promote participation.</p> <p>5.3.2 Nursing faculty is involved in the development, review, and revision of academic programme policies.</p> <p>5.4.1 Joint meetings, circulars, telephone and electronic communication</p> <p>5.5.1 Contracts reviewed annually by the cooperating health care entity. Contracts renewed at least every third year.</p>				
<p>6. Resources</p> <p>6.1 Fiscal and physical resources are sufficient to enable the nursing institution/programme to fulfil its mission,</p>	<p>6.1.1 Review of fiscal and physical resources occurs and improvements are made as appropriate.</p>				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
goals, and expected outcomes. . 6.2 Information resources and library facilities and services support the nursing education institution/programme needs of students and faculty.	6. 2.1 There is physical or electronic access to scientific and professional journals, periodicals, available to faculty and students. 6.2.2 The library and other learning resource centres are equipped to allow faculty and students to access information electronically and for self-instructional materials.				

Standard 2: Students

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
1.Recruitment, Selection and Admission/Intake 1.1 The nursing education institution/department has a student recruitment policy, which includes the method, time frequency, target population and personnel required for recruitment.	1.1. 1 Collaboration with Ministries of Health, Education Faculty, Information, Nursing Council Professional Nursing Association and other relevant agencies 1.1.2 Budgetary and human resources provision for				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
<p>1.2 The nursing education institution/programme has a student selection policy, which states entry requirements and the procedure for selection.</p> <p>1.3 The nursing education institution/programme and parent university publishes the requirements for admission and the qualifying degree offered.</p>	<p>recruitment</p> <p>1.2.1 Selection procedure established by the nursing education institution/programme faculty.</p> <p>1.2.2 The final responsibility for selecting students for admission to the nursing education institution/programme resides with a duly constituted faculty committee.</p> <p>1.3.1 Students meet established university requirements for admission to the nursing education programme.</p> <p>1.3.2 The size and characteristics of the student intake is related to the capacity of the nursing education institution/programme and the adequacy of critical resources:</p> <ul style="list-style-type: none"> • Finances • Size of the faculty and the variety of specialties they represent • Library and 				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
	information systems resources <ul style="list-style-type: none"> • Number and size of classrooms, student laboratories, and clinical experience sites and facilities • Student services • Instructional equipment • Space for the faculty 				
<p>2. Student Welfare, Student Services, Student-Teacher standards of conduct</p> <p>2.1 The nursing education institution/programme has a system of confidential counselling and health services for that includes programmes to promote students wellbeing and adjustment to the physical and emotional demands of nursing.</p>	<p>2.1.1 Students welfare programmes</p> <p>2.1.2 Human, physical and financial resources to support student welfare programmes</p> <p>2.1.3 Student health programme to include:</p> <ul style="list-style-type: none"> •arrangements for health examination prior to admission and periodically during programme: physical, •dental, optical and mental status examinations, •immunizations, •laboratory and radiology and imaging tests, •policy/procedure related to illness, injury and 				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
<p>2.2 The nursing education institution/programme offers efficient and relevant student services</p> <p>2.3 The nursing education institution/programme defines and publishes the standards of conduct for the teacher-student relationship, and have written policies for addressing violations of these standards.</p>	<p>hospitalization.</p> <ul style="list-style-type: none"> •Sick leave, maternity leave <p>2.2.1 Student services include but are not limited to:</p> <ul style="list-style-type: none"> •academic advisement and career counselling •Tutorial and mentorship •Financial assistance <p>2.3.1 Standard for dealing with inappropriate behavior such as</p> <ul style="list-style-type: none"> •academic dishonesty •sexual harassment •discrimination •horizontal violence and bullying 				
<p>3.Notification to the Council regarding students entry and completion of programme</p> <p>3.1 The nursing education institution/programme make formal notification to the Nursing Council of students' entry to and completion of programme</p>	<p>3.1 Student Nurses apply to the Council for provisional registration</p>				
<p>4. Visiting and Transfer Students</p>	<p>4.4.1 Visiting and transfer student policy</p>				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
4.1 The nursing education institution/programme has a policy for visiting and transfer students	includes: • all policies that apply to existing enrolled students				
5. Student Assessment and Progress 5.1 The nursing education institution/programme has written policy regarding assessment of students' performance in the cognitive, affective and psychomotor domains at all levels of the educational programme.	5.1.1 Assessments include both summative assessment, which results guide student progression, and formative assessment; results of which guide students in the learning process. 5.1.2 Assessment methods are clear, concise, congruent with curriculum and known to students.				
6. Student participation and representation 6.1 Students actively participate in all activities 6.2 The nursing education institution/programme has student representation on appropriate	6.1.1 Students organize and manage student organization 6.2.1 Representatives on committees, e.g.: •curriculum •policy making •disciplinary •library				

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
committees, policy development activities and other matters relevant to the students	•other				
7. Student Records 7.The nursing education institution/programme maintains a record system for students indicating: •Enrolment •Performance/grades •Performance on National Examination and Regional Examination for Nurse Registration •Promotion •Discipline, grievances; •Transfers and withdrawals; termination •Graduation •Health status •Graduation	7.1 Permanent student records are kept confidential and in a secure location 7.2 There are policies for student transfer, withdrawal and termination				

Standard 3: Curriculum and Teaching-Learning Practices

Standard/Criteria	Indicators	Met (2 points)	Partially Met (1 point)	Not Met (0 point)	Supporting Documentation Presented
3. Written Curriculum	3.1.1 All components of				

Standard/Criteria	Indicators	Met (2 points)	Partially Met (1 point)	Not Met (0 point)	Supporting Documentation Presented
3.1 The curriculum is developed, implemented, and revised to reflect clear statements of expected individual student learning outcomes that are congruent with the programme's mission, goals, and expected student outcomes.	curriculum included: Vision, mission, philosophy, conceptual framework, goals, objectives, course outlines, etc.				
3. Curriculum Committee 3.2 The development of the total curriculum is the responsibility of a designated curriculum committee which is chaired by a nurse educator from the nursing education institution/programme	3. 2.1 Curriculum committee is comprised of : <ul style="list-style-type: none"> • nursing representative from school, (student and teacher) • hospital, community, professional groups, • Nursing Council, •Nurse educators. should be in the majority 3. 2.2 Co-opted consultants with clinical, education and professional expertise.				
1. Curriculum – Legal reference (Laws) 1.1 Nursing laws and regulations of the country give direction	1.1.1Nursing Council guidance 1.1.2. knowledge of nursing laws and				

Standard/Criteria	Indicators	Met (2 points)	Partially Met (1 point)	Not Met (0 point)	Supporting Documentation Presented
for curriculum development.	regulations 1.1.3. Knowledge of pertinent laws of the country, regional and international nursing laws, conventions, and regulations.				
2. Curriculum – Philosophy, aims and objectives 2.1 Statements of curriculum philosophy, aims and objectives are formulated and provide the guidelines for further curriculum development.	2.1.1 Written philosophical statements. 2.1.2 National health policy, status of nursing education of the country. 2.1.3 Beliefs regarding the individual, family, community, society, health-illness, health care, art and science of nursing, education, teacher/teaching, learner /learning, etc 2.1.4 justification for type of curriculum 2.1.5 Curriculum goals 2.1.6 Objectives- realistic, relevant, attainable, and measureable				
3. Curriculum – Conceptual Framework 3.1 The conceptual framework is derived from nursing, biological, physical and behavioural	3.1.1 Curriculum Statements. 3. 1.2 Nursing arts and sciences. 3. 1.3 Behavioral and life sciences. 3.1.4 Other concepts and theories. 3.1.5 Conceptual				

Standard/Criteria	Indicators	Met (2 points)	Partially Met (1 point)	Not Met (0 point)	Supporting Documentation Presented
sciences, communication, problem-solving, management and education theories and reflects the philosophy of the curriculum.	framework in narrative and/or diagrammatic form.				
<p>4. Curriculum – Design</p> <p>4.1 Curriculum design is directed by a conceptual framework and focuses on the student’s critical, analytic and clinical skills, and professional values</p>	<p>4.1.1 Conceptual/theoretical framework shows arrangement and sequence of courses to reflect concepts.</p> <p>4.1.2 Curriculum mapping</p> <p>4.1.3 Teaching methodology and teacher/student interaction.</p> <p>4.1.4 Congruence in theory and practice.</p>				
<p>5. Curriculum – curriculum minimum standards</p> <p>5.1 The nursing education institution/programme curriculum meets the minimum standards, applicable for programmes of fulltime study for a Bachelor of Science degree in nursing</p>	<p>5.1.1 Bachelor of Science Degree in Nursing leading to registration with a national or regional regulatory body: At least –</p> <ul style="list-style-type: none"> • 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 				

Standard/Criteria	Indicators	Met (2 points)	Partially Met (1 point)	Not Met (0 point)	Supporting Documentation Presented
	practicum • 135 credits, at least 60% of these credits are dedicated to professional course work.				
6. Curriculum – Total programme of study 6.1 The curriculum describes the total programme of study	6.1.1 Course sequence 6.1.2 Courses for all four years (nursing and non-nursing)				
7. Curriculum – Clinical Skills Laboratory 7.1 The nursing education programme Clinical Skills Laboratory (CSL) shall provide the learning environment for students to achieve beginning clinical skills prior to placement in the clinical areas.	7.1.1 Fully equipped clinical skills laboratory 7.1.2 Adequate instruction, supervision, practice and assessment of students in the CSL				

Standard 4: Nursing Faculty/Teaching Staff

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
1. Faculty – Adequacy 1.1 The faculty is adequate to accomplish the mission, goals and	1.1.1 Faculty are: • sufficient in number • academically prepared for the areas in which they teach; and • experientially				

<p>educational outcomes of the programme, the learning needs of the students, and the safety of the recipients of health care services</p>	<p>prepared for the areas in which they teach.</p> <p>1.1.2 Recommended faculty-student ratio:</p> <ul style="list-style-type: none"> • Classroom teaching, not to exceed 1: 50; • Tutorial, not to exceed 1:25; • Clinical experience, not to exceed 1:12 				
<p>2. Faculty – Policies and procedures</p> <p>2.1 The nursing institution/programme has written, approved policies and procedures related to faculty</p>	<p>2.2.1 Faculty policies include, among others:</p> <ul style="list-style-type: none"> • recruitment • appointment • terms of employment and job description • performance management • ongoing clinical involvement • continuing education and development • research activities 				
<p>3. Faculty – Qualifications and experience</p> <p>3.1 (i) The director and faculty of the nursing education institution are appointed by, or on the authority of the governing body of the school or its parent institution</p> <p>(ii) The director and</p>	<p>3.1.1 Qualifications of the director:</p> <ul style="list-style-type: none"> • a graduate degree • Be registered and currently licensed by the Nursing and Midwifery Council of the Cayman Islands to practice nursing/midwifery in the jurisdictions. 				

<p>faculty are academically and experientially qualified to accomplish the mission, goals, and expected programme outcome</p>	<p>3.1.2 The nursing faculty shall be qualified at least one degree above the students being prepared. •Be registered and currently licensed by the Council to practice nursing/midwifery in the jurisdictions.</p> <p>3.1.3 Inter-professional faculty teaching non-clinical nursing courses have advanced preparation appropriate for the content being taught.</p>				
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Standard 5: Clinical Teaching-Learning Programmes

Standard/Criteria	Indicators	Met	Partially Met	Not Met	Supporting Documentation Presented
<p>1. Clinical teaching</p> <p>1.1 The clinical teaching programme is consistent with the curriculum statements, courses, and objectives and define the clinical objectives, related student placements, teaching, supervision and evaluation.</p>	<p>1.1 (i) Tutors, Clinical Inspectors, Preceptors, Students and all other relevant stakeholders know of and understand the clinical teaching-learning programme.</p> <p>(ii) Orientation programme for faculty, preceptors, students, and approved staff from the affiliated institutions/agencies</p>				
<p>2. Clinical experiences</p> <p>2.1 Clinical experiences cover the continuum of wellness to ill-</p>	<p>2.1 Required number of clinical hours for students in the BSc Nursing programme = 2,000 hours.</p>				

<p>health and include health promotion, illness prevention, restoration of well-being and rehabilitation in primary, secondary and tertiary care facilities.</p>					
<p>3. Clinical Faculty</p> <p>3.1 All faculty teaching clinical or practicum courses shall be experienced in the clinical area of the course and maintain clinical expertise.</p>	<p>3.1.1 Identification of specialist areas in the programme.</p> <p>3.1.2 Evidence of knowledge and skills and experience in area of specialty</p>				
<p>4. Instructors and Preceptors</p> <p>4.1 Clinical Instructors and Preceptors, who teach, supervise and evaluate students are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.</p>	<p>4.1.1 Clinical Instructors/Preceptors are:</p> <ul style="list-style-type: none"> •familiar with the educational objectives of the course, •competent in their assigned specialty, • prepared for their roles in teaching, supervision and evaluation. 				
<p>5. Clinical facilities approved by Council</p> <p>5.1 All facilities used for students' clinical learning experiences shall be approved by The</p>	<p>5.1.1 Council conducts health facility evaluation</p>				

Council prior to their use.					
<p>6. Contractual Agreements</p> <p>6.1 (i) There shall be written contracts between the nursing education programme and the approved clinical facilities where students gain clinical experience.</p> <p>(ii) The right of health care facilities to refuse students placement shall be upheld at all times</p>	<p>6.1.1</p> <ul style="list-style-type: none"> • Contracts developed by the programme • Contract reviewed annually by the cooperating health care entity. • Contracts renewed at least every third year. 				
<p>7. Clinical Skills Laboratory</p> <p>7.1 Students shall achieve mastery in clinical procedures in the Clinical Skills Laboratory prior to engaging in actual patient care.</p>	<p>7.1.1 The Clinical Skills Laboratory contains updated learning resources such as:</p> <ul style="list-style-type: none"> • audiovisual equipment • scientific charts and models • disposable and non-disposable equipment and supplies utilized in patient care. • Where possible, a simulated clinical environment with various equipment and life size manikins to simulate patient care situations. 				
<p>8. Students supervision</p> <p>8.1 During the clinical experiences, the ratio of faculty/preceptor to student should be according to established standards</p>	<p>8.1.1 Ratio = 1:8 for junior years (1st & 2nd years) when direct supervision is required; 1:15 for senior year (3rd year) when students are expected to provide direct patient care under minimum supervision; 1:20 for final year (4th) when students are preparing to be</p>				

	<p>beginning practitioners</p> <p>8.1.2 The student-to-patient ratio shall be determined by the patient acuity and level of the students' educational preparation</p>				
<p>9. Clinical teaching – Evaluation</p> <p>9.1 Clinical experiences shall be continuously evaluated throughout the clinical teaching programme Comprehensive clinical assessment shall be conducted in the final year</p>	<p>9.1.1 Students' progression from year-to-year shall be subject to the results of the clinical evaluation indicating successful completion of the clinical experiences and assignments</p> <p>9.1.2 A written profile of each student's clinical experiences shall be kept to ensure coverage of experiences in a variety of settings, with patients across the lifespan and at different levels of acuity</p> <p>9.1.3 Feedback from students shall be sought during and after each clinical placement. This feedback shall be recorded and collated.</p>				

Standard 6: Graduates

Standard/Criteria	Indicators	Met (2 points)	Partially Met (1 point)	Not Met (0 point)	Supporting Documentation Presented
<p>1. Graduates – Competences and scope of practice</p> <p>1. 1 Graduates of the nursing education institution/programme achieve entry-to-practice competencies and the professional practice requirements as stipulated by The Council</p>	<p>1.1.1 Graduates may also be evaluated by:</p> <ul style="list-style-type: none"> •End –of-programme students’ evaluation provides evidence of students’ achievement of competence •Success on the National Examination and Regional Examination for Nurse Registration. 				
<p>1.2 Graduates are prepared to provide safe, legal, and ethical care across the lifespan as an entry level practitioner</p>	<p>1.2.1 Employers’ performance rating at least 12 months after graduation</p> <ul style="list-style-type: none"> •Job satisfaction as evidenced by self-assessment at least 12 months after graduation 				

Standard 7: Programme Effectiveness/Evaluation

Standard/Criteria	Indicators	Met (2 points)	Partially Met (1 point)	Not Met (0 point)	Supporting Documentation Presented
<p>1.1 The nursing education institution/programme has a plan for its monitoring and evaluation.</p>	<p>1.1.1 Programme outcomes include student outcomes, faculty outcomes, and other outcomes identified by the institution/programme.</p> <p>1.1.2 The programme</p>				

	uses a systematic process to obtain relevant data to determine programme effectiveness.				
1.2. Data on programme effectiveness are used to foster ongoing programme improvement	<p>1.2.1 Mechanism to measure effectiveness include:</p> <ul style="list-style-type: none"> • Graduation and attrition rates • Graduates demonstrate established competencies in nursing. • Success rate on RENR. • Frequency of evaluation of nursing programme. • Tracking of graduates: <ul style="list-style-type: none"> (a) professional success/employment rates (b) continued professional education (c) Upward mobility <p>* These indicators are not applicable to new programmes without graduates</p>				
1.3 There is a mechanism in place to measure the effectiveness of the nursing education institution/programme	<p>1.3.1</p> <ul style="list-style-type: none"> • Performance appraisal by employer • Student satisfaction. • Programme review and revision 				
1.4 The nursing education institution/programme, in consultation and collaboration with national and regional authorities, provides for the continuing	<p>1.4.1 The Council stipulates the number of CPE hours required for re-licensure</p>				

<p>professional education (CPE) of its graduates, faculty and staff.</p> <p>.</p>					
<p>1.5 Evaluation data are utilized to modify programme for revision and inclusion of trends for programme upgrading.</p>	<p>1.5.1</p> <ul style="list-style-type: none"> •Performance appraisal by employer •Student satisfaction. •Programme review and revision 				

Scoring Method

The total number of criteria and indicators is tallied and assigned a score as follows:

Standard met = 2 points

Standard partially met = 1 point

Standard not met = 0 point

Standards	Number of Criteria/Indicators
1. Nursing Education Institution/Programme Setting	6
2. Students	7
3. Curriculum and Teaching-Learning Practices	9
4. Nursing Faculty/Teaching Staff	4
5. Clinical Teaching-Learning Programmes	9
6. Graduates	2
7. Programme Effectiveness/Evaluation	5

To qualify for full approval the nursing education institution/programme must attain 70% on at least five of each of the seven standards.

70 - 100% = Full approval

50 - 69% = Conditional approval

49% and Below = Approval Denied

Appendix F

Guidelines for Evaluation of Health Care Facility

The evaluation of the health care facilities where student nurses gain clinical experience focus on the facility's capacity to provide:

1. Physical accommodation for students and faculty on each shift, ensuring that practice placement opportunities are clearly written and reflect current practice and available experiences.
2. Opportunities for students to experience the 24 hours, seven days a week pattern of care where appropriate
3. Meaningful clinical learning opportunities for students using the Nursing Process in direct sustained contact with patients;
4. Effective clinical teaching opportunities, encouraging students to make decisions about nursing interventions and to participate in the delivery of nursing care that reflects their level of experience;
5. Professional guidance, role model, exemplary nurse-patient relationships;
6. Professional examples of effective staff relationship and teamwork;
7. Clinical nursing expertise, best practice, evidence-based practice, leadership and management
8. Exemplary record keeping and reporting;
9. Standard of care commensurate with safety, quality and ethical conduct;
10. A system of monitoring and evaluating feedback from students;
11. Close and effective links with the nursing education institution/programme

The following template* for the evaluation of clinical practice sites is used to assess the health care facilities to determine if they are suitable for students' clinical practice placement.

* Source:

The Nursing Council of Jamaica (2011). *Manual of approval nursing & midwifery education programmes. Standards, criteria evaluation and approval process*. Jamaica: Author. pp. 89-96.

Health Care Facility Profile

1. Name and address: _____

2. Name (s) and title of officer liaising with the nursing education programme:

3. Type of facility:

a. Hospital/Category: Specialist A B C

b. Health Centre/Type: Comprehensive 4 3 2 1

c. Other (specify): _____

4. Ownership: Government Private University

5. Written and signed agreement between facility and nursing education programme for use of facility for students' clinical learning experiences:

Yes No

If Yes, date of agreement: _____

If No, arrangements for use of facility (describe): _____

6. Period of agreement update/renewal: Yearly Yes No

If Yes, date of last update/renewal: _____ By whom _____

Health Centre

7. Type of services (list): _____

8. Average number of patients treated daily: _____

Hospital

9. Occupancy: _____

10. Occupancy rate: _____

11. Type of service provided: _____

12. Range of medical diagnoses: _____

13. Range of surgical interventions: _____

14. Facility data (*Please expand below in Table format for data collection*)

Name and type of ward	Bed capacity	Av. Daily census	Av. Length of stay	Av. Number of patient in *age range	Type of clinical experience provided	Student/Preceptor ratio

*Average number of patients in age range:

0-2 []

2-18 []

19-40 []

41-65 []

66+ []

Name and type of department	Range of service provided	Category of staff	Student /Preceptor ratio

Patient Care Management

15. Organizational Chart displayed: Yes [] No []
16. Philosophy: Yes [] No [] Available []
17. Objectives: Yes [] No []
If YES, Available [] Realistic [] Understandable [] Measureable []
Behavioural [] Achievable []
18. Standards of Care: Yes [] No [] Available []
19. Policy and Procedure Manual: Yes [] No [] Available []
20. Date of last Nursing Audit: _____ Copy available: Yes [] No []
21. Standard Infection Control Precautions practiced: Yes [] No []
 - a. Hand hygiene facility:
 - b. Hand washing (sink, soap, etc.): Present [] Convenient [] Absent []
Handrub (alcohol, etc.): Present [] Convenient [] Absent []

- c. Safe injection practices observed: Yes [] No []
22. Nursing Process: The required forms are available and in use: Yes [] No []
- a. Assessment: History [] Observation [] Physical examination []
- b. Nursing Diagnoses []
- c. Nursing Care Plans []
- d. Nursing Intervention/Implementation []
- e. Nursing Care Evaluation []
- f. Documentation []
- g. Follow-up Care Plan []
23. Individual Patient Acuity Assessment/Patient Classification: Yes [] No []
If Yes, categories of patients on ward: 1 [] 2 [] 3 [] 4 []
24. Model of patient care practiced: Tasks [] Team Nursing [] Primary []
Other (specify) []
25. Care provision based on relevant research-based and evidence-based findings where available: Yes [] No []
26. Handing over report on each patient for each shift: Yes [] No []
27. Handing over report used as teaching round for All staff and student: Yes [] No []

Nurse Staffing

28. Structured in-service education programmes for staff: Yes [] No []
If Yes:
- a. Describe staffing: _____
- b. Frequency of programmes: _____
29. In-service programmes mandatory for all staff: Yes [] No []
30. Communication of in-service education programme staff with the nursing education programme faculty: Yes [] No []
If Yes, method (s):
- a. Meetings []
- b. Seminars []
- c. Workshops []
- d. Exchange of staff []

31. Availability of continuing education programmes for nursing staff: Yes [] No []

If Yes, give examples of programmes: _____

32. **Nursing Cadre** (check (√) as appropriate):

Category	Posts			
	Qualification	Established	Actual	Loss
Director of Nursing				
Assistant Director/Director of Nursing				
Departmental Sister				
Ward Sister				
Staff Nurse				
Public Health Nurse				
Advanced Practice Nurse				
Registered Midwife				
Registered Nursing Assistant				
Ward Assistant				
Community Health Aide				
Other (specify)				

33. Present staff adequate to meet patients' needs: Yes [] No []

If No, strategies to cope with shortages: Part time employment [] Sessions []

34. Staffing (check (√) as appropriate)

Shift	Number										
	Supervisor	APN	FNP	RGN	RN	RMN	RNM	RM	RNA	CHA	Other
Day											
Afternoon											
Night											

Key:

PHN: Public Health Nurse

APN: Advanced Practice Nurse

RGN: Registered General Nurse

RM: Registered Midwife

CHA: Community Health Aide

FNP: Family Nurse Practitioner

RN: Registered Nurse

RNM: Registered Nurse Midwife

RNA: Registered Nursing Assistant

35. Current licensure status written record of each RN, RNM, and enrolment status of each Enrolled Assistant Nurse:

36. Nurse Committees with written terms of reference (specify committees):

37. Research agenda (topic and status): _____

Learning Environment

- 39 Nursing services kept informed of the educational programme for students;

Yes [] No []

- 40 Student's written clinical learning objectives are conveyed by nursing education programme to:

- | | | |
|-------------------------------|---------|--------|
| a. students | Yes [] | No [] |
| b. Faculty | Yes [] | No [] |
| c. Preceptor | Yes [] | No [] |
| d. Health care facility staff | Yes [] | No [] |

41. Nursing Services involved in planning and selection clinical experience for students:

Yes [] No []

42. Criteria used in selection of student's clinical learning activities (describe):

43. Clinical experience enables students to experience the roles of the registered nurses/ registered midwife/ enrolled assistant nurses in a range of contexts.

44. The sequencing and balance between the nursing education programme theory and student's clinical experience promote the integration of knowledge, attribute and skills:

Yes [] No []

45. Students are assisted in linking theory and practice and using a research base for practice, by faculty, preceptors and clinical staff. Yes [] No []

46. Maximum number and type of students accommodated at any one time in a placement:

	Ward	Health Centre	Other (Specify)
1st year	[]	[]	[]
2nd year students	[]	[]	[]
3rd year students	[]	[]	[]
4th year students	[]	[]	[]

44. Skills required by the student before beginning the practice experience (describe):

45. Period student are usually present: day [] evening [] night []

46. Duration of students' stay/hours per/evening/ night in this area: _____

47. Student received consistent teaching, supervision and evaluation during all practice placements: Yes [] No []

If Yes, responsible officers: Preceptor [] Faculty [] Clinical Staff []

48. Clinical staff in practice area received preparation in teaching, supervising and evaluating students' clinical learning experiences Yes [] No []

49. Students' clinical experiences reviewed regularly: Yes [] No []

50. Student's clinical experiences evaluated at end of each placement: Yes [] No []

51. Evaluation strategy and results reflect progress, integration and coherence:
Yes [] No []

52. A written portfolio of each practice placement experience and outcomes for each student is kept by the programme: Yes [] No []

53. Nursing education programme representatives visit the facility Yes [] No []

If YES, frequency: _____

54. Student's feedback on the quality of clinical sites and experiences including supervisors, teaching, supervision and evaluation contribute to the ongoing evaluation the learning environment and the students' clinical experiences:

Yes [] No []

55. The Director of Nursing Service is satisfied with the quality of supervision and guidance given to students by:

- a. Preceptor Yes [] No []
 b. Faculty Yes [] No []
 c. Clinical Staff Yes [] No []

If NO, please comment:

56. Orientation programme for new student, faculty, and staff
 Yes [] No []

Space to Accommodate Students

57. The nursing/ midwifery education programme meets the requirements for professional practice as needed by the Cayman Islands health service: Yes [] No []

58. Nursing Service involved in the revision of nursing education programme:
 Yes [] No []

If Yes, describe:

59. Nursing Services represented on the:

- a. Selection Committee for student Yes [] No []
 b. Evaluation Committee for student Yes [] No []
 c. Disciplinary Committee for student Yes [] No []
 d. Curriculum Committee Yes [] No []

60. Joint meeting between the nursing education and nursing service (*School/Service Committee*):

Yes [] No []

If Yes

- a. Example of topic for discussion: _____

- b. Frequency of meeting:

- I. Weekly []
 II. Monthly []
 III. Quarterly []

Evaluation Status

Summary of findings/ Areas of Concerns:

Approved []

Not Approved []

Recommendations: _____

Name and Signature of Interviewer:

Appendix G

Procedures for Approval of Nursing Education Institutions/Programmes

Approval Process for a Proposed Nursing Education Institution/Programme

1. Notification of the Council of the Intent to Establish a New Programme

At least one year in advance of the commencement date, the proposed programme official shall provide written notification of intent to the Council. The notification shall demonstrate the programme's capacity to meet The Nursing Council of the Cayman Island's Nursing Education Standards (Section 7 of this manual).

2. Self- Evaluation Report

The Self -Evaluation instrument shall be forwarded to the nursing education programme by the Council. The Report shall be completed and returned to the Council within three months. Thereafter, the Council forwards it to its Approval Committee.

The Council's Template for the Self- Evaluation Report) and Guide for Preparing the Self- Evaluation Report (Appendix D) shall be used in conducting the self- evaluation and preparing the report.

3. Review of Self- Evaluation Report

The Approval Committee reviews the Self-Evaluation Report submitted, and forwards its decisions to the nursing education programme within six weeks of receipt of the report. The nursing education programme may be required to submit additional information at the discretion of the Committee. The Approval Committee forwards its draft report to the Council.

The Council shall provide the nursing education programme with a copy of the draft approval status and recommendation report. On receipt of the report, the nursing education programme may respond verbally or in writing, or request a meeting with the Council.

4. Site visit

The Approval Committee/Site Visit Committee conducts a site visit to verify the findings of the Self- Evaluation Report. The visit shall be conducted within a one- week time frame.

5. Preparation of the Final Report

Following the site visit, the Council prepared its final report outlining decision within a three week time frame.

6. Notification to the Programme

The Council shall provide written notification to the nursing education programme regarding the approval rating, and notifies the Ministry of Health of the programme's approval status.

Approval Process for an Existing Nursing Education Institution/Programme

1. Notification of Intent to Evaluate Programme

One year in advance of the programme approval deadline, the Council shall notify the Director of the nursing education programme in writing of the intent to evaluate the programme. Following this notification, a mutually agreed date for the site is established.

2. Self- Evaluation Report

The self- evaluation in relation to The Nursing Council Standard and Criteria is designed to provide the Council with the relevant data to assist in the evaluation and approval decision-making process. The Council shall forward the Self- Evaluation instrument to the nursing education programme for completion within three months.

The Self- Evaluation Report shall be submitted to Council prior to the proposed site visit by the Approval Committee.

3. Review of the Self – Evaluation Report

The Approval Committee shall review the Self Evaluation Report submitted. The nursing education programme may require to submit additional information at the discretion of the Committee. The period of review by the Council is six) weeks.

4. Site Visit

The purpose of the site visit by the Approval Committee is to verify the accuracy and completeness of the Self- Evaluation Report submitted by the nursing education programme.

The site visit shall be planned for a period that will accommodate the nursing education programme and its affiliates. The visit shall be conducted for at least a week at each programme site.

The site visit(s) schedule shall be established collaboratively between the Council and the nursing education institution/programme. The programme is responsible for detailing the schedule and the Council grants final approval. At the end of the site visit, the Committee shall discuss its findings with the programme and the Council.

5. Review of Approval Committee's Report and Recommendation by the Council.

The Report of the Approval Committee's site visit, which is supplementary to the self-Evaluation Report, shall highlight the strengths and weakness of the nursing education programme. The Committee prepared the draft report and makes recommendation to the Council regarding the approval status. The programme shall be provided with a copy of the draft report, and encouraged to submit feedback in relation to the factual content of the document. The programme may respond verbally or in writing, or may request a meeting with the Council.

Following the feedback received on the draft report, the Approval Committee shall submit the Final Self Evaluation Report of the approval status recommendation to the Council.

6. Notification to the Nursing Education Institution/Programme

The submission of the Council's Final Report to the director of the nursing education programme shall be done within at least six weeks following the site visit.

The Council's shall notify the Ministry of Health of the programme approval status.

The Council's Report outlines the outcome of the evaluation and approval process, indicating the approval rating and recommendation, if any.

Adapted from: *The Jamaica Nursing Council Nursing Education Approval Manual, 2011.*

Appendix H

Approval of Programme Changes

Requirement

The following two types of programme change require application to the Council for updating programme and component records and/or quality assurance approval.

Type 1 changes relate to one or more components of a programme which do not have an impact on the overall programme and where the qualification to which the programme leads is unchanged. A component means the course, paper, module or assessment standard that make up the programme leading to the qualification. Details of the changes are submitted to Council to ensure accurate records are maintained and the criteria for programme approval continue to be met, they do not require the Council's approval.

However, if there are changes to more than one programme component which, when taken together, the Council considers impact on the overall programme, then Council will consider the application as a type 2 change.

Type 2 changes may occur as a result of a review of the qualification which means the programme leading to the qualification consequently needs to be changed to meet the new qualification requirements and require Council approval.

Type 2 changes may apply to certificates and diplomas, which have an integrated qualification and programme.

Information for inclusion in the application

The application must provide sufficient information to enable NZQA to confirm that the criteria for approval of the programme will continue to be met following implementation of the changes. This includes:

- details of the qualification to which the programme leads
- full details of and the rationale for the changes including confirmation the programme still meets the qualification requirements
- transition arrangements for existing students where applicable

Guidance

Programme changes following a qualification review

The changes to a programme following a qualifications review may be either type 1 or type 2.

This is determined by mapping the existing programme to the new qualification level, credits and outcome statement, in particular the graduate profile.

The application must include relevant information for the type of change.

Type 1 - Component changes

Type 1 changes are minor changes to individual programme components which have no impact on the overall programme level, credit and learning outcomes. Examples of type 1 changes include changes to the:

- content of a component
- title of a component

- learning outcomes of a component
- level of a component
- pre- or co-requisites for components within the programme, that do not impact the programme entry requirements
- assessment methodologies within a component ((Nursing Council of New Zealand, 2017).

Appendix I

Cayman Islands Health Practice Law (2013 Revision) Provisional Registration

25, (1) Subject to this Law, any person who –

(a) satisfies the Council of the matters specified in section 24(2)(a), (b), (c), (e) and (f);
(b) has, or is working towards, a relevant qualification recognized by the Council; or
(c) is enrolled in an institution recognized by the Council, may apply to be registered provisionally under this section, and that person shall be so registered.

(2) A person provisionally registered under this section may engage as an intern in a health care facility in the Islands approved by Council and recognized by relevant universities or such other institutions.

(3) Reference to employment as an intern shall be construed as references to employment which enables a person to complete his training and employment only in an approved post and for a specific duration under the direction and supervision of a fully registered practitioner.

(4) Registration under this section shall be for a period not exceeding two years and a person who is provisionally registered under this section and who wishes to renew his registration shall apply for such renewal not less than sixty days prior to the expiration of his registration.

pp. 19-20.

Appendix J
Requirements for Provisional Registration for Student Nurses



CAYMAN ISLANDS
NURSING AND MIDWIFERY COUNCIL

Information to the Guidelines for Registration
Health Practice Law (2017 Revision), Health Practice Regulations (2017 Revision)
and Nursing Regulations, 2016

1. The student must provide a local address and contact information.
2. **Letter of Verification**
 - A letter from the University College of the Cayman Islands to verify that they are currently enrolled and maintaining the Nursing programme.
3. **Police (Clearance) Certificate**
 - (i) dated no earlier than six months prior to application.
4. **One Character Reference Letter**
 - (i) dated no earlier than six months prior to application;
 - (ii) from a person unrelated to the applicant by birth or marriage;
 - (iii) from a person of good standing in the community such as an attorney-at-law, a notary public, justice of the peace, minister of religion, doctor or policeman who has known the applicant for at least four years.
 - (iv) notary public who certifies any document for the applicant is NOT acceptable as a referee;
 - (v) The Nursing Director is not acceptable as a referee.
5. **Photograph - one (1) full-face passport-size photo**
 - (i) no earlier than six months prior to application;
 - (ii) certified by this office or dated and stamped by the photo studio on the back;
 - (iii) use paperclip or staple to affix the photo to the application.
6. **Health Insurance – Proof of Health Insurance in the Cayman Islands**
7. **Photo page of Passport – a copy of the photo page of the passport or a copy of current local driver’s license**

- with photograph and personal information presented in person to the Health Practice Commission, together with the original for verification; or a notarized copy if the application is mailed.

Appendix K
BScN Programme Entry Requirements
(Joint UCCI & the Nursing Council of the Cayman Islands Programme Entry Requirements)

1. Applicants to the Bachelor of Science in Nursing (BScN) Programme must satisfy any of the following requirements:

a. A minimum of five (5) or more CXC, IGCSE, GCSE* passes (grades 1- 3/A - C) or equivalent, including Mathematics, English and a pure science (Biology, Human and Social Biology). Among the five subjects: no more than 2 subjects at grades III CXC or C GCE. See list of approved subjects on following pages.

Or

b. The Licensed Practical Nurse (LPN) Certificate with five (5) years relevant experience and an examination pass in Mathematics (CXC, IGCSE, GCSE), plus a recommendation from an employer;

Or

c. College students and college graduates are encouraged to apply and are required to present a copy of their transcript. Acceptance into the BScN programme is subject to the programme compulsory subject requirements.

Students who have earned college credits and/or who have obtained a college degree from a recognized institution are eligible to apply to the BScN programme.

Students would need to have a minimum, cumulative GPA of 3.0.

Students would also need to have passing grades in the compulsory subject areas of **Math, English & Biology** at the college level.

Additionally, transferability of course credit hours will be evaluated on a case by case basis and may be awarded in accordance to UCCI's policy and procedures.

Compulsory Subjects (3)

- English Language or Communication Studies at CAPE' (grades 1-4) (CAPE, if applicable)
- Mathematics or Pure Mathematics or Applied Mathematics at CAPE (grades 1-4) (CAPE, if applicable)
- Science: Biology, Human and Social Biology or Biology at CAPE (grades 1-4) (CAPE, if applicable)

In addition, all applicants are required to satisfy the following:

1. Minimum age of seventeen (17) years at time of entry into the programme;
2. Every applicant is required to submit an essay or personal statement as part of their application;
3. An interview is required.

List of *Approved* Subjects**CXC/IGCSE**

- Agricultural Studies (double/single)
- Caribbean History
- Chemistry
- Economics
- English Literature OR Literatures in English
- Food and Nutrition • French OR Modern Languages
- Geography
- Home Economics Management
- History
- Information Technology (general/technical) OR Computer Science OR Computer Studies
- Physics
- Principles of Accounting
- Principles of Business OR Management of Business
- Religious Education
- Social Studies OR Caribbean Studies OR Sociology
- Spanish OR Modern Languages

GCE

- Accounts ■ Business Studies ■ Chemistry ■ English Literature ■ Food & Nutrition
- French ■ Geography ■ History • Information Technology
- Physics
- Psychology
- Religious Education/Bible Knowledge
- Spanish

List of *Unacceptable* Subjects

The following subjects are not accepted for entry into the Bachelor of Science degree in Nursing Programme:

- Visual and Performing Arts (Courses)
- Clothing and Textiles
- Office Procedures/Office Administration
- Electrical Installation
- Building Technology
- Technical Drawing ■ Physical Education and Sports
- Shorthand
- Typing/Electronic Document Preparation and Management (EDPM) ■ Music
- Cookery.

Legend:

CXC - Caribbean Examinations Council

IGCSE - International General Certificate of Secondary Education

GCSE - General Certificate of Secondary Education

CAPE - Caribbean Advanced Proficiency Examination

Source: University College of the Cayman Islands BScN Curriculum 2013, pp. 4-6.

