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# Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions

*Report of Regional Workshop  
Malé, Maldives, 9–11 July 2007*

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## Executive summary

The health workforce plays an important role in strengthening of the health system. However, this workforce must be adequate in number, competent and motivated. Nursing and midwifery educational institutions (NMEI), nursing councils and authoritative bodies can play a significant role in producing qualified graduates. The Inter-country Workshop on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions was organized from 9 to 11 July 2007 in Malé, Maldives. The workshop aimed to improve the quality of nursing and midwifery education. There were 32 participants from 21 NMEI and councils and the ministries of health of the Member countries in the South-East Asia (SEA) Region, two resource persons, one representative from the Canadian Association of Schools of Nursing Accredited Programme, one staff from the World Health Organization (WHO) Country Office, Nepal, and one from the WHO Regional Office for South-East Asia (SEARO).

The workshop discussed the concepts of quality assurance and accreditation. Countries' experiences in the area of quality improvement were shared. The principles, components and procedures of quality assurance and accreditation were deliberated. The workshop adopted draft guidelines on quality assurance and accreditation. The six quality components were mission/governance, teaching faculty, students, curriculum and instructions, resources and quality assurance. The basic standard and quality management guidelines of each component were presented. Roles were proposed for NMEI in quality assurance and preparation for accreditation, and for the NMC or national authority in educational standards and accreditation of NMEI.

## Recommendations

### *Recommendations to Member countries*

- (1) Member countries should affirm their commitments to the World Health Assembly Resolution WHA 59.23 on rapid scaling-up of health workforce production regarding the promotion of training in accredited institutions of a full spectrum of quality professionals.

- (2) NMEI should establish a quality assurance system.
- (3) Nursing and midwifery councils or authoritative bodies should set standards of nursing and midwifery curriculum and educational institution as well as mechanisms for accreditation of NMEI.

***Recommendations to WHO***

- (1) Finalize and distribute the Regional Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions to countries in the SEA Region.
- (2) Provide technical support to countries in implementing or adapting the Regional Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions.

## **1. Introduction**

An adequate, competent and motivated health workforce can save lives and is an important building block for health system strengthening. However, the health workforce in the SEA Region, especially nurses and midwives, faces many challenges that prevent it from becoming fully effective. Member countries were urged to invest more resources to strengthen nursing and midwifery and to train their workforces in accredited institutions. The South-East Asia Nursing and Midwifery Educational Institutions Network (SEANMEIN) was formed to strengthen the capacity of nursing and midwifery education in the Region through institutional capacity building. One of its recommendations was that the institutions should develop a quality assurance system and become accredited in order to ensure the quality of education and to produce graduates who would be a capable workforce in the health care system. The Intercountry Workshop on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions was organized from 9-12 July 2007 at the Institute of Health Science, Malé, Maldives. There were 32 participants from 21 NMEI and councils and the ministries of health of the Member countries in the South-East Asia (SEA) Region, two resource persons, one representative from the Canadian Association of Schools of Nursing Accredited Programme, one staff from the World Health Organization (WHO) Country Office, Nepal, and one from the WHO Regional Office for South-East Asia (SEARO). There also were five observers from the Institute of Health Science, Male, Maldives.

## **2. Inaugural session**

The inaugural session began with a recitation from the holy Quran by a nursing student followed by the welcome speech by Mr Ilyas Ibrahim, Minister of Health, Maldives. Dr Prakin Suchaxaya, Regional Adviser, Nursing and Midwifery, WHO/SEARO, introduced the workshop. Dr Jorge Mario Luna, WHO Representative (WR) to Maldives, read a message from Dr Samlee Plianbangchang, Regional Director, WHO, SEA Region. Dr Samlee communicated that health systems are faced with a number of

issues concerning the health workforce, including shortage, maldistribution, low motivation and incompetency due to poor quality of education and training. Incompetent health workers may lead to unsafe care, delays in patient recovery, complications arising from treatment and subsequent hospitalization. This can make national health goals or the Millennium Development Goals (MDGs) difficult to achieve.

The World Health Assembly Resolution WHA 59.23 on rapid scaling-up of health workforce production urged Member States to affirm their commitment to competency-building of health workforces by promoting training in accredited institutions of a full spectrum of quality professionals. In WHO's framework for scaling-up of production of the health workforce, quality is the key component that must be strictly adhered to.

Nursing and midwifery schools were urged to develop viable quality assurance systems and to regularly monitor, evaluate and strengthen them in order to continuously improve the quality of education. Quality of education can be measured with many indicators, including the number of students that pass the national examination, the number of those securing jobs in the nursing and midwifery sector in recognized health facilities immediately after they graduate, the level of satisfaction of employers, supervisors and clients of the care providers, and the percentage of students who further their education at the graduate level.

In addition to quality assurance, schools should be accredited by nursing and midwifery councils or national regulatory bodies to ensure quality. The authorities concerned should develop guidelines for the schools to follow and should accredit the schools. The results of the accreditation are usually made available to the public.

The Regional Consultation on Accreditation Guidelines for Educational/Training Institutions and Programmes in Public Health was organized in Chennai, India in 2002. It concluded that public health institutions must have a mission statement and objectives and must prescribe the educational process required to produce professional and student competencies. The accreditation process should take into account curriculum models, instructional methods and staffing policy of public health institutions; educational resources for the student population and for the delivery of the curriculum, including library, lecture halls, laboratories, computers and provision for field practice; description of methods used for assessment of their students; and a mechanism for programme evaluation.



This intercountry workshop focused on four important issues: institutional experience in quality improvement of nursing and midwifery education; the concepts and framework of quality assurance and accreditation; the draft guidelines on quality assurance and accreditation of NMEI; and the role of educational institutions, regulatory bodies and national authorities in improving the quality of nursing and midwifery education. The message of the Regional Director ended with WHO's commitment to provide technical assistance and support to strengthen the quality of nursing and midwifery education in the SEA Region.

Honourable Mr Abdul Rasheed Hussain, Minister in Charge of the Ministry of Higher Education, Employment and Social Security delivered the inaugural address. He emphasized the importance of the quality of education, particularly the quality of nursing and midwifery education. He encouraged the countries to set up mechanisms to ensure quality and promote training of the health workforce in accredited institutions. He thanked WHO for organizing the meeting in Maldives and urged WHO to continue assisting Member countries in development of quality of nursing and midwifery education for better health care services.

### **3. Objectives**

#### **3.1 General objective**

To improve quality of nursing and midwifery education in the countries of the SEA Region.

#### **3.2 Specific objectives**

- (1) To review the strategies used for quality improvement in nursing and midwifery education in the countries of the SEA Region;
- (2) To agree upon guidelines on quality assurance and accreditation of NMEI; and
- (3) To provide recommendations on the roles and function of nursing and midwifery educational institutions, nursing and midwifery councils or regulatory bodies and national authorities on the quality of education.

## 4. Expected outcomes

- (1) The development of guidelines on quality assurance and accreditation of NMEI;
- (2) The NMEI and councils have guidelines in establishment of quality assurance and accreditation systems in their own organizations.

## 5. Technical sessions

### 5.1 Quality in nursing and midwifery education

Dr Prakin Suchaxaya presented definitions of quality, quality of education and quality of nursing and midwifery education. Quality can be defined in various ways based on interpretation, for example:

- technical interpretation: a specific characteristic of an object, its properties
- philosophical interpretation: the essence of an object
- practical interpretation: achievement or excellence
- metaphysical interpretation: the meaning of excellence itself
- scientific interpretation: something to be desired

Quality is subjective and is based on an individual's background, perspectives and standards. It is everyone's wish or desire to have quality or to be of quality. The pursuit of quality is a continuous cycle which involves the development of standards, quality audit, quality assessment, quality assurance, quality improvement and accreditation.

In the era of quality orientation, human rights and a consumer-driven society, the quest is for the best quality of education. The NMEI are expected to provide quality education and perform their roles effectively in producing qualified graduates who will meet the needs and expectations of society. Each institution is required to develop its own mechanism to ensure quality; this is sometimes called quality assurance. The national authoritative body or NMC ensures quality by setting the standards of education, approving the curriculum and recognizing and accrediting the school. In Thailand there is an Office for National Education Standards and

Quality Assessment, which is an independent body created by the 1999 Education Act and Royal Decree to set objective standards and key performance indicators and conduct external quality assessment of educational institutions at all levels. It is an autonomous body and reports directly to the Prime Minister.

The quality of nursing and midwifery education could be evaluated by many indicators such as standard curriculum, number of qualified teachers, number of students passing the national examination, number of students receiving a nursing licence upon graduation, number of students getting jobs upon graduation, number of research grants and number of publications in peer review journals.

The workshop participants presented strategies or methods used for quality improvement in their educational institutions. These were:

- standards for curriculum and educational institution
- upgrading of student admission criteria, i.e from grade 10 to grade 12
- recruitment of students by central examination
- curriculum revision
- upgrading of level of nursing education, i.e. from diploma to degree programme
- external committee to review the test or sit in on the final examination
- formal study for higher degree of teachers
- refresher courses for teachers
- Nursing Council offering comprehensive examination to all schools

The Indian Nursing Council prescribes the syllabus, including unit plan and hours of each subject, scheme of examination and admission criteria. This ensures that the education offered in all nursing institutions is uniform. Minimum standards are also set for the physical facility, teaching facility and clinical facility to start a nursing programme. The Indian Nursing Council

conducts yearly or periodic inspections of the institutions in order to ensure that the set standards are being implemented.

In Myanmar, the Department of Medical Science, Ministry of Health is responsible for setting a policy on nursing and midwifery education based on the government's policy. It monitors quality through university and school visits, feedback from students, consumers and service users [hospitals, clinics, non-governmental organizations (NGOs)] and provides feedback to the schools and faculties. It also periodically reviews and revises the curriculum.

Nursing councils in India and Thailand set standards of curriculum and educational institutions and accredit nursing and midwifery schools.

## **5.2 Quality assurance**

The goal of education is to prepare people to function properly in society according to societal needs. Quality assurance (QA) is one of the mechanisms developed by educational institutions to ensure that graduates attain adequate standards of education and training. It may consist of internal and external QA. Internal QA refers to the audit and assessment done by a team from within the organization. External QA refers to the audit and assessment done by a team from outside the organization, with the purpose of making the evaluation more objective. There should be tools for audit and assessment. The audit examines whether the school has performed the activities described in the checklist. The auditor simply checks a "yes" or "no" column. The assessment aims to judge the level of quality. On the assessment form, criteria and a score for achievement are given for each item. The assessor selects the column that reflects the level of achievement. The total score indicates the readiness or level of quality. The school must review the results and improve the quality in areas that are not yet at the highest level, while maintaining the quality of those that already meet the standards.

Dr Muzaherul Huq, Medical Officer, WR Office, Nepal, shared the QA mechanism of the medical school in Bangladesh which was introduced in 1998. The aim of a quality assessment of medical schools was to have effective implementation of the medical education programme. The Ministry of Health established a National Quality Assurance Body (QAB) to conduct the assessment process, headed by the Director-General of Health

Services. The organizational framework includes an academic council at the university level, course committee and phase coordinator groups at the school level, and an external examiner and external assessors. Assessment is based on a self-assessment critical review document. The team of reviewers which visits the school comprises senior medical teachers, senior members of the medical council, medical association and senior officials from the Ministry of Health.

The scope of assessment includes curriculum; student guidance, teaching and assessment; teaching and learning environment; available resources; and standards, quality control and procedures. The assessment results range from “excellent”, “highly satisfactory” and “satisfactory” to “improvement required”. In case of a grade of “improvement required”, a repeat visit after one year is planned to assess the status of recommendations for improvement.

### **5.3 Guidelines on quality assurance of nursing and midwifery educational institutions**

Professor (Dr) Rutja Phuphaibul, Temporary Adviser (WHO) who drafted the Guidelines on Quality Assurance of Nursing and Midwifery Educational Institutions, presented a framework and components of QA which were: mission/governance, NMEI faculty, students, curriculum and instruction, resources and quality assurance. For each component, basic standards and criteria for quality management and examples of evidences were illustrated. The QA system, internal and external QA, quality improvement and the self-assessment report were highlighted.

After the presentation, the participants divided into three groups to review the draft and make comments and observations on the presentation. Some comments on revision were made, but overall the participants agreed with the proposed quality components and the QA system.

### **5.4 Accreditation of nursing and midwifery education**

Associate Professor (Dr) Tassana Boontong, a resource person and former President of the Thailand Nursing Council (TNC), gave a presentation on the standard of nursing and midwifery education and process of

accreditation of nursing and midwifery schools in Thailand. The key points of the presentation were:

- The role of TNC in quality of education and accreditation of the school was clearly stated in the Nursing and Midwifery Professional Act, B.E. 2528 (1985) and Royal Decree. This provides a legal framework for this work.
- A series of regulations and proclamations was developed regarding standards of nursing and midwifery curricula, standards of NMEI, accreditation of nursing and midwifery institutes, and the institutes' accreditation fee.
- The TNC appoints a committee on accreditation of nursing and midwifery schools which reviews the application, sends a team to visit schools, reviews reports of the visit and submits comments to the TNC Executive Board.
- The TNC Executive Board decides on accreditation and the number of years for accreditation based on the scores and informs the school.
- The results of the accreditation are announced in the National Gazette.
- The TNC organizes a training course for quality assessors.

Dr Lise Talbot, President, Canadian Association of Schools of Nursing (CASN) Accredited Programme and board member of the Global Alliance Nursing Education and Scholarship (GANES), shared the work of CASN in accreditation of nursing programmes. GANES founder members were CASN, the Council of Deans and Heads of UK University Faculties for Nursing and Health Professionals, the American Association of Colleges of Nursing and the Council of Deans of Nursing and Midwifery (Australia and New Zealand). The mandate of GANES is excellence in quality nursing education for quality nursing practice and research.

In Canada there are 10 provinces. Each province has its own regulatory body with provincial legislation and quality assurance for the population via competencies and standards. Colleges and universities have autonomy to develop, improve and update nursing and midwifery programmes (students, courses, resources) and to be accountable (through internal evaluation/audit) to respond to the standards. The Ministry of

Education approves and finances the programmes, provides the workforce and validates education programmes. The CASN is a national independent accreditation body. The work of CASN is built on the values of mutual respect, fairness, open communication, confidentiality, trust, transparency, accountability and integrity.

There are 91 nursing schools in Canada and 60 are accredited. The accreditation process takes four-five days. The cost is CAN\$ 35 000 – 50 000. The process includes setting of accreditation date and team selection, school preparation for accreditation, preview teleconference, on-site visit, accreditation report, school response to the report, and Board of Accreditation review and decision. The quality dimensions include relevance, relatedness, accountability and uniqueness. Accreditation initiatives for 2006-2010 include comprehensive evaluation of 2005 accreditation programme pilot testing; accreditation standards of excellence to assess graduate nursing education programmes, nurse practitioner programmes and clinical placements; linking standards to “best practice”; and examining the feasibility of using the CASN accreditation programme to assist with the credentialing of internationally educated nurses.

## **5.5 Guidelines on Accreditation of Nursing and Midwifery Educational Institutions**

Dr Rutja Phupphaibul presented a draft of the Guidelines on Accreditation of Nursing and Midwifery Educational Institutions. These included the definition and significance of accreditation of NMEI. The quality components to be accredited were highlighted along with the accreditation process and the roles of NMC and NMEI in accreditation. A sample form for accreditation was also included.

After the presentation, participants were divided into three groups to review the draft. Comments were provided for revision. Overall the participants agreed with the process of accreditation and role of NMEI and NMC in accreditation. As QA and accreditation are a process that should be developed together, it was recommended that the two guidelines be combined into one document to avoid repetition and to facilitate better understanding of the relationship between the two processes.

## 5.6 Roles of educational institutions and regulatory bodies

It is clear that NMEI and NMC should work together in ensuring the quality of nursing and midwifery education. The role and responsibilities of each organization could be proposed as follow:

NMC	NMEI
Has nursing and midwifery Act that supports the role of NMC in quality of education and accreditation of NM school.	Has the school mission or objective of high quality of education.
Sets standard of NM educational institutions.	Operates/is developed based on the set criteria.
Sets standard of NM curriculum for all types of programmes.	Develops curriculum based on the agreed national standard.
Approves opening of new NM schools.	Applies for opening of the new school and implements when the approval from NMC is granted.
Issues a Regulation for curriculum approval and approves the new/revised curriculum when it applies.	Submits a new/revised curriculum for NMC approval before implementation.
Withdraws/closes the school or programme.	Closes the school or programme as per NMC's order.
Develops accreditation procedures.	Develops QA system and has quality audit and assessment.
Visits school after receiving application for accreditation from NMEI.	Applies for accreditation and prepares for the visit.
Decides on the number of years of accreditation.	Improves quality of education based on the recommendations.
Monitors quality of education and enhances quality of NM education to meet universal standards.	Improves quality continuously and maintains educational and professional standards.



## **5.7 Country actions**

The participants unanimously agreed that there was an urgent need to have an adequate mechanism to ensure the quality of nursing and midwifery education and training. Quality assurance and accreditation are mechanisms that countries might develop and implement. Further discussions with authoritative bodies in countries were needed to decide on the mechanism for quality improvement that was appropriate for each country. It was very important for government, nursing and midwifery councils, associations and educational institutions to work together for quality improvement.

The actions that the country/institutions agreed to take were:

- Bangladesh and Nepal: Finalize their respective drafts on QA and pilot it in some nursing institutions.
- Bhutan: Set standard of nursing education, form QA Committee consisting of members from Royal Institute of Health Sciences (RIHS), Ministry of Health, Royal Bhutan University and hospital; develop a checklist for internal audit.
- Democratic People's Republic of Korea, Sri Lanka: Discuss the development of QA in nursing schools.
- Indonesia: Nursing schools to establish QA system when the Act comes into effect.
- India, Maldives: Nursing Council may integrate some new components in current accreditation guidelines, may encourage some nursing schools to establish a QA system.
- Myanmar: Development of QA system, mechanism and process in the country context.
- Nepal: Advocate with policy-makers on the role of nursing council in accreditation to be included in the regulations; pilot the draft accreditation guidelines and establish QA committee in the council.
- Thailand: Nursing council to train more assessors/evaluators to assist in quality control and accreditation of education and services, encourage nursing schools to set benchmark.
- Timor-Leste: Set standards of Diploma III Nursing Programme.

## 6. Conclusions

The quality cycle and the relationship between QA and accreditation could be described as in Figure 1 and 2.

Figure 1: *Quality assurance and accreditation*

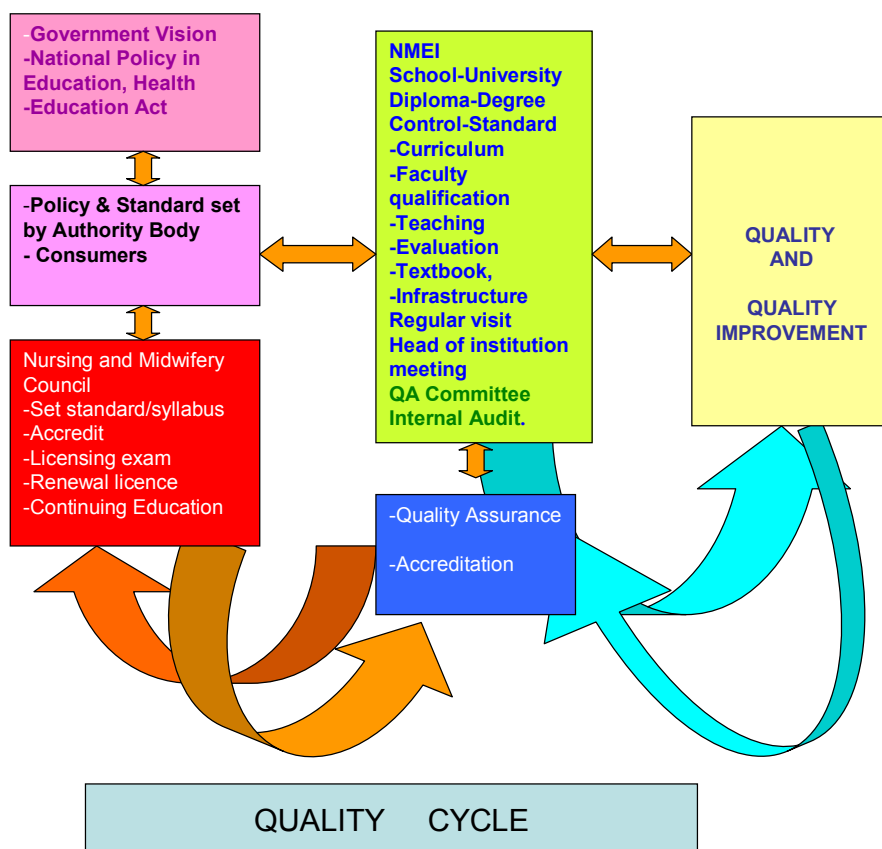
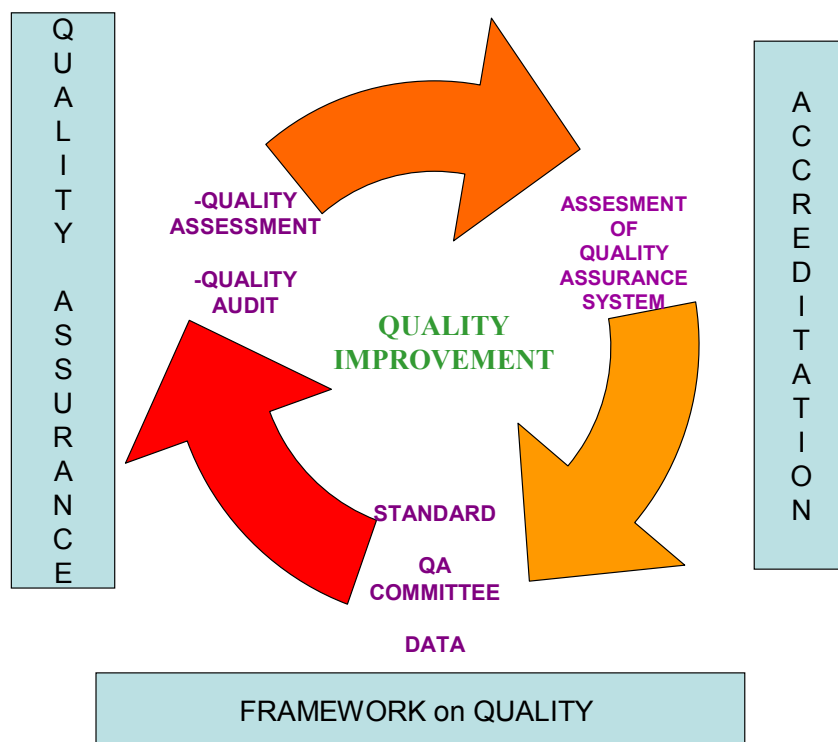


Figure 2: *Cycle of quality improvement in education*



## 7. Recommendations

### 7.1 Recommendations to Member countries

- (1) Member countries should affirm their commitments to the World Health Assembly Resolution WHA 59.23 on rapid scaling-up of health workforce production regarding the promotion of training in accredited institutions of a full spectrum of quality professionals.
- (2) NMEI should establish a quality assurance system.
- (3) Nursing and midwifery councils or authoritative bodies should set standards of nursing and midwifery curriculum and educational institution as well as mechanisms for accreditation of NMEI.

## **7.2 Recommendations to WHO**

- (1) Finalize and distribute the Regional Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions to countries in the SEA Region.
- (2) Provide technical support to countries in implementing or adapting the Regional Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions.

## **Annex 1**

# **Programme**

**9 July 2007**

**Theme: Quality and Quality Assurance of Nursing and Midwifery Educational Institutions**

- |             |   |
|-------------|---|
| 08:00–09:30 | Inaugural Session   |
| 09:30–10:00 | Registration  |
| 10:00–10:15 | Introduction of the Meeting Objectives and Expectation<br>– Dr Prakin Suchaxaya, RA NUR, SEARO  |
| 10:15–10:30 | Quality in Nursing and Midwifery Education<br>– Dr Prakin Suchaxaya, RA NUR, SEARO  |
| 10:30–12:30 | Country Presentation on Quality Improvement of Nursing and Midwifery Education and Discussion   |
| 13.30–13:50 | Quality Assurance: Concept and Mechanism<br>– Dr Prakin Suchaxaya, RA NUR, SEARO  |
| 13:50–14:10 | Quality Assurance in Medical Education – Bangladesh Model<br>– Prof. M.M. Huq, Medical Educationist, WRO Nepal  |
| 14:10–15:10 | Country Presentation on Development of Quality Assurance in Nursing and Midwifery Education   |
| 15:30–16:00 | Presentation: Draft Guidelines on Quality Assurance of Nursing and Midwifery Educational Institutions<br>– Prof. Dr Rutja Phuphaibul, Temporary Adviser |
| 16:00–16:30 | Discussion on the Draft Guidelines on Quality Assurance of Nursing and Midwifery Educational Institutions   |

## **10 July 2007**

### **Theme: Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions**

- 08:30–08:50 Reflection on Day 1
- 08:50–10:30 Group work I: Review the Draft Guidelines on Quality Assurance of Nursing and Midwifery Educational Institutions
- 10:50–11:50 Group work presentation and discussion
- 11:50–12:30 Discussion on “Role of Institutions and Concerned Organizations in Development and Implementation of Quality Assurance System in Nursing and Midwifery Educational Institutions”  
– Moderator Prof. M.M. Huq, Medical Educationist, WCO Nepal
- 13:30–13:50 Accreditation: Concept and Mechanism  
– Dr Prakin Suchaxaya, RA NUR, SEARO
- 13:50–15:00 Country Experience in Accreditation of Nursing and Midwifery Educational Institutions
- 15:20–16:00 Country Presentation on Accreditation of Nursing and Midwifery Educational Institutions
- 16:00–16:30 Presentation: Draft Guidelines on Accreditation of Nursing and Midwifery Educational Institutions  
– Prof. Dr Rutja Phuphaibul, Temporary Adviser

## **11 July 2007**

### **Theme: Regulatory Body and Accreditation of Nursing and Midwifery Educational Institutions**

- 08:30–08:50 Reflection on Day 2
- 08:50–10:00 Group work II: Review a Draft Guideline on Accreditation of Nursing and Midwifery Educational Institutions
- 10:20–11:00 Group Work Presentation and Discussion

- 11:00–11:30      Nursing Council and Accreditation of Nursing and Midwifery Educational Institutions  
– Dr Tassana Boontong, Temporary Adviser
- 11:30–11:50      CASN Accreditation Process of Excellence Since 1987 for GANES  
– Dr Lise R. Talbot, President, Global Alliance for Nursing Education and Scholarship (GANES)
- 11:50–12:30      Discussion on the Role of Stakeholders in Accreditation  
Moderator: Dr Tassana Boontong, Temporary Adviser
- 12:30–13:00      Conclusions, recommendations and closing  
– Dr Prakin Suchaxaya, RA NUR, SEARO

## Annex 2

# List of participants

### Bangladesh

Ms Tahatun Nahar  
Principal, Nursing Institute  
Mymensingh

Ms Shamsun Nahar  
Registrar  
Bangladesh Nursing Council  
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### Bhutan

Ms Sapna Basnet  
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Royal Institute of Health Sciences  
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Dr O Rong Chol  
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Ministry of Public Health  
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Mr Kim Kang Chol  
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### India

Mr T Dileep Kumar  
President, Indian Nursing Council and  
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Dr Rosita Gusfourni  
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### Maldives

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### Myanmar

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### **Nepal**

Ms Jaya Laxmi Shakya  
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Ms Daya Laxmi Vaidya Joshi  
President, Nepal Nursing Council  
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### **Sri Lanka**

Mrs D L L Peris  
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Mrs P.L. Jayawardane  
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### **Thailand**

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### **Timor-Leste**

Mr Lorenzo Camanahas  
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Mr Jorge Guterres  
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### **Resource Persons**

Dr Tassana Boontong  
Dean Faculty of Nursing  
Mae Fah Luang  
Chiang Rai and former President  
Thailand Nursing Council  
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Dr Rutja Phuphaibul  
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Regional Adviser for Nursing and Midwifery  
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Prof. Muzaherul Huq  
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Dr Lise R. Talbot  
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(President, Global Alliance for Nursing  
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