Quality of nursing and midwifery workforce can contribute to the quality of health-care services and health outcomes. Quality assurance and accreditation are the two key mechanisms of ensuring the quality of education which is the foundation to building workforce capacity. Quality assurance is the internal process established by the education institution based on the national education standards and guidelines. It is a continuous process aiming for quality improvement. Accreditation is the external process performed by a national authority or independent organization to assess and evaluate the performance of the institution to ensure the quality of the graduates. It is done periodically.

The guidelines provide the information on the definition, process and roles of organizations concerned in quality assurance and accreditation of nursing and midwifery education institutions. Seven key concerned quality components are suggested, namely vision/mission/goal and objectives, organization/administration, academic staff, students, curriculum, resources and a quality assurance system. Examples of standards, indicators and the self-assessment report are also provided.
Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions
Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>iv</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>v</td>
</tr>
<tr>
<td>Abbreviations and acronyms</td>
<td>vi</td>
</tr>
<tr>
<td>Chapter 1: Quality of Nursing and Midwifery Education</td>
<td>1</td>
</tr>
<tr>
<td>Chapter 2: Standards and Criteria for Nursing and Midwifery Education</td>
<td>8</td>
</tr>
<tr>
<td>Chapter 3: Quality Assurance of Nursing and Midwifery Educational Institutions</td>
<td>16</td>
</tr>
<tr>
<td>Chapter 4: Accreditation of Nursing and Midwifery Educational Institutions</td>
<td>28</td>
</tr>
<tr>
<td>Annexes</td>
<td></td>
</tr>
<tr>
<td>1. Accreditation Form</td>
<td>37</td>
</tr>
<tr>
<td>2. Example of the Self-assessment Report for Accreditation</td>
<td>44</td>
</tr>
</tbody>
</table>
The quality of nursing and midwifery education is a key factor for producing a qualified and competent nursing and midwifery workforce for the health-care system. Issues and challenges related to the quality of nursing and midwifery education in countries of South-East Asia have long been recognized. They include an outdated curriculum, an inadequate number of qualified teachers, inappropriate teaching methodologies and educational aides, inadequate infrastructure, lack of opportunities for students to practise, poor school management and limited resources. As a result, graduates cannot effectively perform the roles of nurse and midwife.

In 2006, the Fifty-ninth World Health Assembly adopted Resolution WHA 59.27 on rapid scaling up of the public health workforce and Resolution WHA 59.23 on strengthening nursing and midwifery. Both resolutions urged Member States to build a competent workforce and support training in accredited institutions. WHO in collaboration with national governments has made considerable effort to improve the quality of nursing and midwifery; the achievements are visible, but more needs to be done.

Quality assurance and accreditation are two mechanisms that could be used to enhance the quality of nursing and midwifery education in countries of the Region. This document provides guidelines on quality assurance and accreditation of nursing and midwifery educational institutions that can be used by institutions to design a quality assurance system. The guidelines cover the concepts and processes of accreditation to assist national authorities or nursing and midwifery councils; the accreditation of nursing and midwifery educational institutions can help to ensure the quality of the institution and nursing and midwifery graduates. WHO is strongly committed to assist Member States in strengthening the health system and its workforce. Such assistance includes support for Member States in utilizing or adapting these guidelines to their nursing and midwifery educational system.

Dr Samlee Plianbangchang
Regional Director
Acknowledgements

The Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Education have been developed with the assistance of two WHO collaborating centres for nursing and midwifery development – the Department of Nursing, Ramathibodi Hospital, Mahidol University, and the Faculty of Nursing, Mahidol University, Thailand, based on their long experience in having both quality assurance and accreditation embedded in their education system. Both these institutions are gratefully acknowledged for their efforts.

The Guidelines were reviewed and finalized for their practicality and relevance at the Intercountry Workshop on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions on 6-8 July 2007 in Male, Maldives, and were shared in other regional nursing and midwifery meetings for additional inputs. WHO gratefully acknowledges all participants and resource persons for their valuable inputs and commitment in initiating the quality assurance and accreditation systems in their respective countries.

Deep appreciation is also due to Associate Professor Dr Tassana Boontong, former President, Thailand Nursing and Midwifery Council, and Professor Dr Rutja Phupaibul, Director, WHO Collaborating Centre for Nursing and Midwifery Development, Department of Nursing, Ramathibodi Hospital, Mahidol University, for their valuable inputs to the development of these Guidelines.
Abbreviations and acronyms

CAI computer-assisted instruction
CQI continuous quality improvement
IT information technology
LRC learning resource centre
MDG Millennium Development Goal
NMC Nursing and Midwifery Council
NMEI nursing and midwifery educational institution
P-D-C-A plan-do-check-act
QA quality assurance
QAS quality assurance system
SAR self-assessment report
SEAR South-East Asia Region
WHO World Health Organization
Chapter 1

Quality of Nursing and Midwifery Education

Introduction

Human resources for health or the health workforce play an important role in the health-care system to achieve health outcomes and health-related Millennium Development Goals (MDGs). Since the nursing and midwifery workforce is a major health workforce in many countries of South-East Asia, with proper training it could make a significant difference to the health of individuals, families and the community. Nursing and midwifery educational institutions (NMEIs) are in a critical position to produce qualified nurses and/or midwives who acquire the knowledge, skills and attitudes set by the professions and are able to perform their roles as expected by society.

A “nurse” is a person who has completed a nursing education programme and is qualified and authorized in her country to practise as a nurse.\(^1\)

A “midwife” is a person who has been regularly admitted to a midwifery educational programme duly recognized in the country in which it is located, has successfully completed the prescribed course of studies in midwifery, and has acquired the requisite qualifications to be registered and/or legally licensed to practise midwifery. She must be able to give the necessary supervision, care and advice to women during pregnancy, labour and the postpartum period, to conduct deliveries on her own, and care for the newborn and infant. She may practise in hospitals, clinics, health units, domiciliary conditions or in any other setting.\(^2\)

Every country in South-East Asia has NMEIs, ranging from one to more than 1000 one thousand in a country. NMEIs refer to those public or private nursing, midwifery or nursing–midwifery organizations that offer nursing and/or midwifery programmes approved by the Nursing and Midwifery Council (NMC) or a national authority. The status of NMEIs may be a unit or department in a school, faculty or hospital; a faculty in the university; or an independent nursing and midwifery school, college, institution or university. They are mainly under the Ministry of Education or Ministry of Health. NMEIs may provide only a nursing programme, midwifery programme or nursing and midwifery programmes. The programmes offered may range from a certificate course or diploma to a Bachelor’s, Master’s and doctoral degree, depending on the status and capacity of the institution.

The goals and objectives of nursing and midwifery programmes may vary. For the basic level, the goal should be to educate nursing and midwifery students on nursing, midwifery and related knowledge, develop skills and attitudes to enable


them to demonstrate basic nursing and midwifery competencies in working with individuals, families and the community.

At the end of the programme, it is expected that the students should:

- acquire knowledge, skills and positive attitudes for the practice of basic nursing and midwifery;
- be eligible to sit in the national examination to become a certified nurse/certified midwife/certified nurse-midwife;
- be able to work as a member of an intra- or interprofessional health team;
- be able to provide knowledge-based care for all patients and pregnant women during the antenatal, childbirth and postnatal periods, and for the woman and her newborn, including conducting normal deliveries;
- be able to identify illnesses and conditions detrimental to the health of the people/women and/or newborns, carry out first-line management in emergency situations, and arrange for timely referral as needed; and
- acquire an attitude of lifelong learning through continuing education and other means.

Nursing and midwifery education is the foundation of a qualified and competent nursing and midwifery workforce. The World Health Organization (WHO) has a commitment to assist Member States in strengthening nursing and midwifery education and training. Improvement in the quality of nursing and midwifery education can be done in various ways, including establishing a standard of education, building the capacity of teachers, developing and revising the curriculum, developing innovative teaching methods, strengthening libraries and laboratories, improving clinical settings as well as instituting mechanisms for quality improvement.

Quality nursing and midwifery education can be achieved through various mechanisms including the following:

- Having a national standard on education, and nursing and midwifery education;
- Establishing a quality assurance system in NMEIs;
- Accreditation of NMEIs by the nursing and midwifery council or national authority.

To carry out the above activities, effective coordination and collaboration is required among the government, professional bodies, educational institutions, nursing and midwifery services, and members of all sectors. The government should have strong commitment and provide support in setting up a policy on nursing and midwifery education, establishing organizations/units with people who understand both higher education and the nursing and midwifery profession to ensure proper planning and quality development; mobilizing resources, building partnerships and allocating adequate budgets to support the availability of human resources and infrastructure development.
One of the functions of the nursing and midwifery council is to maintain the quality of nursing and midwifery education. The council should play a role in setting standards for education, educational institutions and curricula; setting and implementing mechanisms and guidelines for the opening of new schools, and accreditation of nursing and midwifery educational institutions periodically. The council should be authorized to carry out its full functions and be respected by the government and other professional bodies.

Educational institutions should develop their own policies and mechanisms to adhere to government policies, and actively implement quality assurance systems with continuing monitoring and evaluation. The nursing and midwifery services should provide feedback to educational institutions for improvement and work in collaboration with them to produce the desired nursing and midwifery workforce. Most important, the understanding and collaboration of all members in each related sector are required for an optimum outcome.

In many countries of South-East Asia with a trend of shortages in the nursing and midwifery workforce and migration of nurses and midwives, it is important to maintain the quality of education while increasing the number of students enrolled. An adequate number of teachers, teaching spaces, and appropriate infrastructure and clinical experience should be ensured.

These guidelines on quality assurance and accreditation of NMEIs have been developed to assist countries in strengthening and improving the quality of nursing and midwifery education within their country context. The use or adaptation of the guidelines should lead to a situation where:

- The nursing and midwifery curriculum meets the national standard. It is regularly updated and incorporates the latest evidence in line with the health problems and issues of the country;
- NMEIs have a mechanism for continuous quality improvement;
- NMEIs are accredited by the NMC or national authority;
- There should be qualified nursing and midwifery students who are eligible to register and have a licence to practise nursing and midwifery;
- There is a competent nursing and midwifery workforce to deliver health services to the people.

1.1 Nursing and midwifery educational institutions (NMEIs)

NMEIs refer to schools, colleges, faculties, departments or institutes, or any other organizations which provide nursing and midwifery education to produce general nurses and midwives who are qualified to register and get licensed as practitioners of the nursing and midwifery profession according to the laws governing these professions.

Institutions are able to develop programmes and pathways for accreditation which meet the professional development needs of their staff and provide opportunities for recognition of students completing the courses.
As part of the accreditation process, the institution is expected to demonstrate how the programme develops the understanding of students, provides learning experience through engagement with core knowledge and professional values, develops the ability for students to engage in practices related to their areas of activity, and incorporates research, scholarship and/or professional practice into those activities.3

1.2 Nursing and midwifery programme/curriculum

The nursing and midwifery programme prepares graduates to enter the health-care delivery system at the beginning or practitioner level in structured health-care settings. Nursing and midwifery is a health-care profession with the goal of assisting clients to achieve a level of wellness through a holistic approach. The development of nursing and midwifery programmes is based on a body of knowledge where the arts and sciences are integrated.

Nursing and midwifery programmes seeking accreditation should be designed to incorporate areas of professional activity, core knowledge and professional values underpinning the National Professional Standards Framework from which the accreditation criteria are developed and aligned. The number of staff responsible for delivering the nursing and midwifery programme and number of support staff involved with the programme, their responsibilities, brief details of qualifications, experience, research interests and relevant publications must be indicated.

Programmes/curricula submitted for accreditation should:

- Have a clear philosophy, mission, goals and expected outcomes
- Be nationally or internationally approved and meet standards.
- Have appropriate resources.
- Have a quality assurance system.

Programmes should be designed to cover the six areas of the professional standards framework:

- Designing and planning of learning activities and/or programmes of study.
- Teaching and/or supporting student learning.
- Assessing and giving feedback to learners.
- Developing effective learning environments and student support and guidance.
- Integrating scholarship, research and professional activities with teaching and supporting learning.
- Evaluating practice and continuing professional development.

1.3 Standards and criteria of nursing and midwifery programmes

Standards and criteria are a set of specifications defined by the national nursing and midwifery organization/council. Such standards and criteria should be adopted by nursing and midwifery institutions in order to shape the programme, and are required for accreditation, which is based specifically on the ability to meet national standards and criteria. For accreditation, NMEIs should have the following seven components to ensure that they are able to meet the accreditation requirements:

1. Mission/governance
2. Academic staff or teachers
3. Students
4. Curriculum and instruction
5. Resources
6. Quality assurance system
7. Administration.

1.4 Nursing and midwifery council/organization

The NMC has a mandate to ensure, as far as practicable, that all nurses and midwives are able to practise in a safe and competent manner. As part of its multiple functions, the NMC has the responsibility for the initial and ongoing accreditation of an NMEI and its programme, designing accreditation systems and running the accreditation processes. It sets up a committee/body to accredit an institute, and also sets standards and criteria for the duration of the granted accreditation.

In general, the responsibilities of the NMC include:

1. setting institutional and programme standards for NMEIs, and establishing and conducting nursing and midwifery education programmes, including the clinical facilities used to gain learning experience;
2. granting developmental approval to a proposed institution and education programme;
3. granting conditional approval to an NMEI or programme with developmental approval. Obtaining conditional approval is a prerequisite for enrolment of the first students entering the programme. The Council may grant full approval to an NMEI or programme that meets its requirements;
4. denying or withdrawing approval of an institution or nursing or midwifery education programme that either does not meet, or fails to continue to meet, the Council’s requirements within a defined period specified by the Council;
5. establishing appeal and reinstatement procedures that comply with the laws of the nation.
1.5 Accreditation system

Accreditation is a status granted to an educational institution or a programme that has been found to meet the defined criteria of educational quality. It has two fundamental purposes: first, to assure the quality of the nursing and midwifery institution or programme, and second, to assist in improving the institution or programme.

In the accreditation system, the national nursing and midwifery organization sets up a committee or accreditation body. Within the committee or body, there may be a separate visiting teams for site evaluation. The accreditation committee or body conducts the accreditation process using a common pattern. The pattern requires primary study of the institution or programme, followed by an onsite visit by an auditors’ team, and a subsequent review and decision by a central committee. Within this general pattern, the accrediting body will develop a variety of individual procedures adapted to its own circumstances. Attention has also been given to educational outcomes as a basis for evaluation.\(^4\)

The major purposes of accreditation include:

(1) promoting competent practices and protecting the public from unsafe practices by requiring that the NMEI and its nursing and midwifery programme achieve certain agreed upon standards that are congruent with the knowledge, skills and behaviours required for qualified practice;

(2) fostering the nursing and midwifery profession by setting and enforcing measurable standards for education nationwide which contribute to promoting the profession’s development, identity and status;

(3) assuring the quality of the institution or programme; and

(4) assisting in the improvement of the institution or programme.

1.6 Quality assurance system

By and large, a quality assurance system (QAS) refers to a formal managing system used to strengthen the management of routine work in an organization and ensure that everything is done systematically. In the context of nursing and midwifery education, QAS refers to systems management of the daily practices in the nursing and midwifery institution in order to ensure that the institution runs the nursing and midwifery programme according to the standards defined by the national nursing and midwifery organization. The quality of the programme must develop and improve continuously in order to ensure that clients being cared for by nurses/midwives who have graduated from accredited institutions are safe.

NMEIs should establish their own QAS and develop effective teaching processes so that they produce qualified nursing and midwifery graduates who are able to effectively provide care of the best quality.

Figure 1: A framework for improving quality of a nursing and midwifery educational institution

- Government vision
  - National policy in education, health
  - Education Act

- Policy and standards set by the Authority/Body
  - Consumers

NMEI
- School/university
- Diploma/degree
- Control/standard
  - Curriculum
  - Faculty qualification
  - Teaching
  - Evaluation
  - Textbooks
  - Infrastructure
- Regular visits
- Head of NMEI meeting
- QA Committee
- Internal audit

Nursing and Midwifery Council
- Sets standards/syllabi
- Accredits
- Conducts licensing exam
- Renews licences
- Provides continuing education

- Quality assurance
  - Accreditation

QUALITY AND QUALITY IMPROVEMENT
Chapter 2

Standards and Criteria for Nursing and Midwifery Education

Nursing and midwifery education within and among countries of the South-East Asia Region is varied. These variations are seen in the institutions’ goals and objectives, curriculum, student admission criteria, faculty qualification, teaching and learning activities, infrastructure and management system. This is due to countries being at different stages of educational development and a lack of national and regional standards for nursing and midwifery education. Each country is, therefore, encouraged to set its own standards for nursing and midwifery education or programmes as a basis for its establishment, monitoring, evaluation and improvement.

WHO and Sigma Theta Tau International Honor Society of Nursing organized an expert group meeting in 2006 to identify key elements and issues critical to the development of a set of standards for initial nursing and midwifery education. Five areas specific to the development of global standards for initial nursing and midwifery education are programme admission criteria, programme development requirements, components of programme content, faculty qualifications and programme graduate characteristics.

The parameters of these standards depend on the country’s decision on the key quality components in nursing and midwifery education. Each standard consists of a statement of a standard and criteria. Evidence to support the criteria has to be clearly identified in order to guide data collection, monitoring and evaluation. To be consistent with quality assurance and accreditation, NMEIs should have standards and criteria for at least seven components as given below:

1. Vision/mission/goal and objectives,
2. Organization/administration,
3. Academic staff,
4. Students,
5. Curriculum,
6. Resources, and
7. QAS
2.1 Vision, mission, goal and objectives

**Standard**
There is a clear and publicly stated vision, mission, goal and objectives appropriate to nursing and midwifery education

**Criteria for quality management**
- Criterion 1: The vision of the NMEI is clearly stated.
- Criterion 2: The mission of the NMEI is congruent with the institution’s regulations or rationale for its establishment.
- Criterion 3: The goals and objectives of the NMEI are achieved through activities identified in the institutional plan.
- Criterion 4: The administrative, academic and support staff understand the vision, mission, goal and objectives of the NMEI.

**Examples of evidence**
- Clearly stated vision, mission, goal and objectives of the NMEI, which are aligned with those of the parent institution and institutional regulation.
- The context in which the programme is offered is explained, including analysis of the demographic and institutional characteristics that influence the mission, vision, goal and expected outcomes of the programme.
- Strategic plan of the NMEI.
- Interviews of administrators and staff on the vision, mission, goal and objectives of the NMEI.

2.2 Organization/administration

**Basic standard**
There is an administrative structure which has the responsibility for carrying out the policies of the organization in accordance with the vision, mission, goal and objectives of the organization.

**Criteria for quality management**
- Criterion 1: The organogram, responsibilities and functions of the NMEI unit are clearly written and displayed in an organizational chart.
- Criterion 2: The NMEI administrator should have a basic educational background in nursing or midwifery.
- Criterion 3: The NMEI administrator has leadership capability.
Criterion 4: The management of the NMEI is implemented, monitored and evaluated by committees.

Criterion 5: The administration of academic work, personnel, budget and finances is in compliance with rules and regulations, announcements, and guidelines issued by the NMEI.

Criterion 6: The administrative staff is adequate and competent in their work.

Criterion 7: The general administrative body holds regular meetings, takes minutes and communicates pertinent information to staff.

**Examples of evidence**

- The organizational chart displaying the organizational structure and their relationships.
- Educational qualifications of the NMEI administrator.
- Description of the leadership of administrators.
- Appointment of committees and their functions.
- Related rules, regulations, announcements and guidelines on administration.
- Profile of administrative staff and their performance evaluation.
- Minutes of administrative meetings.

### 2.3 Academic staff

**Basic standard**

There is qualified academic staff with credentials that are appropriate for the NMEI and who can strengthen its educational effectiveness.

**Criteria for quality management**

- Criterion 1: The academic staff has adequate hours of teaching in the classroom and/or clinical settings (suggested time 10–12 hours/week for lectures or 10–15 hours/week for practice).
- Criterion 2: The academic staff develop the syllabus of the course she/he is the chairperson of and a teaching plan for every class.
- Criterion 3: The academic staff who teach nursing and midwifery core courses has an educational background in nursing and/or midwifery.
- Criterion 4: The academic staff conducts research, publishes or gives presentations on their scientific work periodically.
- Criterion 5: The academic staff update their knowledge and clinical competence in the area they teach through continuing education.
Ø Criterion 6: The ratio of academic staff/preceptors to students is appropriate for classroom, laboratory and clinical teaching (suggested ratio is 1:8 in the clinical setting).

Ø Criterion 7: The academic staff is evaluated on their performance every year.

Ø Criterion 8: The academic staff receives awards, grants and other forms of recognition.

Examples of evidence

Ø Table/graph of academic staff indicating their educational backgrounds, academic qualifications, teaching responsibilities, number of research projects undertaken/grants received and continuing education courses attended.

Ø The teaching programme for the academic year with hours, names of responsible persons and course syllabus.

Ø Teaching plan for each class.

Ø Faculty/preceptor-to-student ratio.

Ø Research studies, papers published or presentations by academic staff.

Ø Rewards and scholarships granted to academic staff.

Ø Academic staff’s performance assessment forms.

Ø Awards, grants or recognition received.

2.4 Students

Basic standard

The teaching and learning environment is conducive to academic achievement by students.

Criteria for quality management

Ø Criterion 1: Students are recruited based on a written test.

Ø Criterion 2: Student policies of the NMEI are congruent with those of the governing organization and take into account the sociocultural diversity of the students.

Ø Criterion 3: Students have access to support services administered by qualified individuals, which include but are not limited to health, counselling, advice on academics, career placement and financial aid.

Ø Criterion 4: Students are supported to develop a student club and engage in extracurricular activities.

Ø Criterion 5: The academic adviser arranges time for students to meet her/him and advise them at least once a term.
Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions

- Criterion 6: There are plans for student development.

**Examples of evidence**

- Admission criteria and results of student recruitment.
- Availability of internal, external rewards/scholarships for excellent students and Dean’s list of excellence.
- Availability of internal and external financial support/scholarships.
- Students’ alumni and students’ organizations.
- Documentation of graduation rates, licensing pass rates, job placement rates, and other measures of student success, as deemed appropriate by the programme.

### 2.5 Curriculum

<table>
<thead>
<tr>
<th>Basic standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>The curriculum should accomplish its educational and related purposes.</td>
</tr>
</tbody>
</table>

**Criteria for quality management**

- Criterion 1: The curriculum developed by the NMEI flows from the vision/philosophy, mission, goal and objectives of the NMEI through an organizational framework in a logical progression of course outcomes and learning activities to achieve the desired programme objectives/outcomes.
- Criterion 2: The programme designed provides opportunities for students to achieve programme objectives, competencies and values necessary for nursing and midwifery practice.
- Criterion 3: Practice environments are selected and monitored by the NMEI and provide opportunities for a variety of learning options appropriate for the practice of contemporary nursing and midwifery.

**Examples of evidence**

- Documentation of curriculum management structure and the sequence used for curriculum formulation.
- Teaching and learning plans for the entire programme.
- Documentation of course syllabi and student work.
- Explanation of how professional nursing and midwifery standards and guidelines for practice are incorporated into the curriculum.
- Documentation of ongoing and systematic programme evaluation, survey response and summary of the data.
- Explanation of how the NMEI and students are involved in the evaluation of their individual performance, and how performance evaluation is communicated to the students and used to foster improvement.

- Documentation of nursing and midwifery graduates achieving the competencies congruent with professional nursing and midwifery standards.

- Documentation of policies regarding the review and maintenance of records of student (dis)satisfaction and complaints.

- Description/documentation of how the results of comprehensive student performance are analysed and how they are used to change or improve the curriculum.

- A summary of NMEI outcomes for the past three years and analysis of the data in relation to expected programme outcomes, and examples of how aggregate data are used for improvement.

- Examples of how inputs from the community of interest is used in curriculum development and revision.

- Availability of lesson plans.

### 2.6 Resources

<table>
<thead>
<tr>
<th>Basic standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resources are sufficient to fulfil the purposes of the NMEI.</td>
</tr>
</tbody>
</table>

#### Criteria for quality management

- Criterion 1: Fiscal resources are sufficient to support the purposes of the NMEI and are commensurate with the resources of the governing organization.

- Criterion 2: Programme support services and staff are sufficient for the operation of the nursing and midwifery education unit or institution.

- Criterion 3: Teaching/learning resources and staff are comprehensive, current, developed with NMEI input, and accessible to the NMEI and students.

- Criterion 4: Physical facilities including information technology (IT) and the environment are safe, clean and appropriate to support the purposes of the NMEI.

- Criterion 5: Clinical resources including hospital and community role models, patient-student ratio, and nursing and midwifery equipment are appropriate to support the purposes of the NMEI.

- Criterion 6: Students are provided opportunities to practise in essential areas.
Examples of evidence

- Documentation of institutional policies and practices for resource allocation to enable the nursing and midwifery programme to achieve its mission, goal and expected outcomes.
- Documentation of how academic support services facilitate the achievement of its mission, vision, goal and expected outcomes.
- Documentation of how the programme and parent institutions provide resources for the professional growth and development of the NMEI.
- Programme budget documents for the previous two fiscal and current years.
- Rationale for the adequacy of the number and qualifications of NMEI staff to accomplish the mission, vision, goal and expected outcomes.
- Policies and practices regarding teaching assignments and the number and size of classes to support the achievement of the mission, goal and expected outcomes.
- The contract and policy regarding teaching assignments.
- Demonstration of IT, computer and programme software, library including textbooks and journals, learning resource centre (LRC) including nursing skills laboratory, audiovisual aids provided for teaching and learning in the NMEI.
- Demonstration of classrooms, clinical placement both in hospitals and the community, laboratory room, instructors’ offices, dormitory, cafeteria provided for teaching and learning in the NMEI.
- Checklist of students’ clinical performance.

2.7 Quality assurance system

**Basic standard**

|There is an identified plan for systemic quality assurance (QA) and its evaluation.|

**Criteria for quality management**

- Criterion 1: There is a written plan for a systematic QA programme for nursing and midwifery education, which is used for continuous programme evaluation and improvement.
- Criterion 2: There is a written plan for systematic evaluation of the programme’s purposes and product outcomes.
- Criterion 3: A QA committee is appointed, and there is a personnel unit and internal auditing and monitoring control.
- Criterion 4: There is documentation of the implementation plan of the QAS.
Examples of evidence

- Documentation of the QA policy and its revision.
- Current self-assessment documents/reports relevant to the programme.
- Methods used for monitoring, reviewing and evaluating the programme.
- A brief description of the institution’s staff development policies.
- Documentation of how the policies are currently implemented and how this is reflected in the programme.
- Documentation of the institution’s teaching-learning strategy and guideline or operational plan both in the classroom and for clinical practice.
- Annual programme reports.
- Names and positions of external examiners/reviewers, a current external examiner’s/adviser’s report and the response from the programme team.
- Documentation of arrangements for the pruning of outdated material from the programme and inclusion of future needs.
- Documentation of the views of any committee(s) which oversees the programme.
Chapter 3

Quality Assurance of Nursing and Midwifery Educational Institutions

3.1 Definition

All nursing and midwifery programmes aim to provide quality education. NMEIs are encouraged to establish a QAS in the school. QAS refers to a formal managing system used to strengthen the management of routine work in the organization and ensure that everything is systematically implemented. It ensures that mechanisms, procedures and processes which are in place are executed as planned and leads to continuous improvement.

In nursing and midwifery education, QAS refers to the systems management of the daily practices in the NMEI in order to guarantee that the institution has the requisite quality to operate the programme and achieve the standards defined by the Nursing and Midwifery Council/Organization. It thus is aimed at providing nursing/midwifery educators and policy-makers with information to improve and control the educational quality of the nursing and midwifery programme/curriculum. Improvement implies that QA is aimed at diagnosing weaknesses in the curriculum. Control implies that QA also aims to ensure accountability. In sum, QA must include the processes of both improvement and control.

3.2 Significance of a QAS

A QAS is believed to increase the efficiency and effectiveness of the work of the NMEI. It is used to assess how the work in the institution is done and whether it is consistently and effectively performed. For a nursing and midwifery programme, the purpose of the QAS is to establish and develop an effective teaching-learning process to produce qualified graduate nurses/midwives/nurse-midwives. This ensures that graduates from the institution will have the capability to effectively provide safe care for clients, families and communities.

The QAS includes internal and external QA. For external assessment, the QA authority which sets standards for QA will audit the quality of the NMEI and accredit the NMEI after it meets predetermined standards (Figure 2).
Figure 2: The quality assurance system (QAS) and accreditation

The important key concept of working with a QAS is to improve the quality of routine jobs. Each member in the NMEI should have responsibilities for developing QA by putting their routine tasks into an effective system which can be assessed at any time.

The main focus of the NMEI is on clients' needs. Accordingly, NMEIs must begin benchmarking and comparing data to maximize improvements within the educational community. While health-care organizations use various QA models successfully, NMEIs have to implement the model that can be used to assure the quality of their curricula, institutions, and teaching and learning processes.

3.3 Quality model used in nursing education

The ultimate goal of QA in nursing and midwifery education is to achieve total quality improvement in education. The quality improvement programme requires institutions of higher education to use a continuous quality model as its base with a plan–do–check–act (P-D-C-A) quality improvement process, a quality model widely used in the health-care services.5

Process of quality assurance

An NMEI that intends to assure the quality of its education is recommended to follow the steps given below.

➢ Establish the QA committee of the NMEI to carry out quality audit and assessment of the institute.

---

Prepare and develop the QA committee’s competency in QA.

- Develop the NMEI plan under the guidelines of the regulatory body.
- Implement the QA plan and conduct self-evaluation annually.
- Develop a database and monitor the system so that it is available for self-evaluation and accreditation by the regulatory body.

Components

The QA model is a cyclical process with three components (Figure 3):

1. Measuring the educational quality: In this step, the focus is on gathering data that can reflect the quality of the NMEI. Appropriate measuring tools are used for accurate data collection.

2. Judging: The data collected are judged against standards to make decisions about their strengths and weaknesses.

3. Improvement using P-D-C-A: Priorities and plans for improvement are defined.

The conditions that can be used to ensure a cyclical process are:

1. **Systematic**, which implies that QA is related to all aspects of education and that all stakeholders are systematically involved. Within education, different stakeholders can be distinguished, such as students, teachers, alumni and policy-makers. These stakeholders can be involved in different ways.

   Students are the consumers of education; therefore, they serve as an important source of information for collecting data.

   Instructors are very important, because they are the key persons who develop, implement, and improve teaching and learning activities. Their attitudes toward nursing and midwifery education influence the quality of the teaching and learning process.

   Alumni in professional practice can evaluate the relevance of the educational programme against their professional activities.

   Policy-makers can use the information collected from these stakeholders to strengthen and improve the curriculum. Moreover, it is suggested that in order to create real involvement with QA, communication with these stakeholders is vital.

2. **Structured**, which implies that evaluations are carried out at regular intervals with proper frequency and not on an ad hoc basis, and that standards are defined, against which data can be compared and judged. It is recommended that the standard used as reference should be one declared by a professional organization such as the professional council or the professional association.

---


3. **Integrated**, which implies that responsibilities are clearly defined, and that QA is an integral part of the organization’s regular work patterns. QA activities are compatible with regular teaching and learning activities or other activities of the educational institute. Previous studies have demonstrated that integration is most difficult to achieve. However, if responsibilities are defined and all members involved with the educational organization have awareness and good communication, integration can be achieved.

The QA model illustrated in Figure 3 shows that only when and if the three conditions – systematic, structured and integrated – are met and QA results in continuous improvement, can it be ensured that the total quality management system in nursing schools is comprehensive and has been achieved.

**Figure 3:** The QA model (modified from Rohlin et al. 2002) and its continuous quality improvement (CQI)

![Diagram showing QA model with integration, measuring, improving, and judging cycles.

**Methods of QA evaluation**

Two methods of quality evaluation are important for nursing and midwifery education. These are:

1. Internal evaluation
2. External evaluation

**1. Internal quality evaluation: Institution’s committee or authorized persons belonging to the institution**

Internal quality evaluation refers to formal assessment and judgement of quality that is conducted within the NMEI by the QA committee. The institution appoints a QA committee or auditors who are responsible for planning, implementing and

---

evaluating the QAS in the faculty. The faculty as representatives of nursing/midwifery departments will be pooled, trained and assigned to assess and judge the quality of each nursing and midwifery department against predetermined standards and criteria as per the team’s opinion. The auditors should be from different departments to prevent bias in the auditing process.

The QA committee must include educators in nursing and midwifery to act as peer reviewers. They must be prepared to be auditors by attending a course in QA provided by an institute responsible for the quality of higher education or professional education in the country.

Criteria, standards and forms used for quality evaluation must be identified by the system of the NMEI or the education regulatory body of the profession and the country.

2. **External quality evaluation: Independent body outside the institution**

External quality evaluation refers to formal assessment and judgement of the quality of nursing and midwifery education in the NMEI conducted by a regulatory body outside the parent institution such as experts from the Ministry of Education, Ministry of Health, an independent organization responsible for the quality of education, or a professional organization.

Experts external to the NMEI are appointed by the authority to evaluate the quality of education in the institution. Criteria and standards of the quality of nursing and midwifery education must be laid down at the national level. Therefore, the regulatory body must be appointed from the Ministry of Education, Ministry of Health or equivalent organization. The process of external audit is shown in the following diagram:

**Process of external quality evaluation**

![Diagram](image)

**Pre-auditing**

<table>
<thead>
<tr>
<th>Auditors</th>
<th>Auditees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provide criteria for accreditation at least three months prior to the auditing processes.</td>
<td>1. Request for accreditation.</td>
</tr>
<tr>
<td>2. Identify issues and scope to be evaluated.</td>
<td>2. Prepare the annual report and SAR.</td>
</tr>
<tr>
<td>3. Prepare the auditors.</td>
<td>3. Prepare the documents relevant to the curriculum, personnel, teaching and learning processes, and teaching and learning outcomes.</td>
</tr>
<tr>
<td>4. Collect and study data from annual reports, self-assessment reports (SARS), standard dataset and related data.</td>
<td>4. Inform involved stakeholders.</td>
</tr>
<tr>
<td>5. Make an appointment for auditing.</td>
<td>5. Inform stakeholders that they should be available during the visit; they may be invited for meetings/ interviews.</td>
</tr>
</tbody>
</table>
Auditing

<table>
<thead>
<tr>
<th>Auditors</th>
<th>Auditees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Visit the NMEI.</td>
<td>1. Prepare for the accreditation procedure.</td>
</tr>
<tr>
<td>2. Interview administrators.</td>
<td>2. Report to the auditors as requested.</td>
</tr>
<tr>
<td>3. Inspect and examine data.</td>
<td>3. Clarify particular issues as requested.</td>
</tr>
<tr>
<td>4. Meet and interview the involved stakeholders (e.g. students, faculty, instructors and office staff).</td>
<td>4. Gather feedback information.</td>
</tr>
<tr>
<td>5. Analyse data, evaluate and judge the quality.</td>
<td></td>
</tr>
<tr>
<td>6. Provide feedback to the NMEI board.</td>
<td></td>
</tr>
</tbody>
</table>

Post-auditing

<table>
<thead>
<tr>
<th>Auditors</th>
<th>Auditees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Summarize the findings and document the report.</td>
<td>1. Verify the accreditation report.</td>
</tr>
<tr>
<td>2. Send draft report to NMEI for verification.</td>
<td>2. Inform NMEI board members of the accreditation results.</td>
</tr>
<tr>
<td>3. Complete the final report.</td>
<td>3. Conduct an NMEI board meeting to analyse strengths and weaknesses of the curriculum.</td>
</tr>
<tr>
<td>4. Submit the report to the regulatory body/national authority.</td>
<td>4. Develop an improvement plan on the basis of the accreditation report, with consideration of the NMEI’s strengths and weaknesses using P-D-C-A.</td>
</tr>
</tbody>
</table>

3.4 What is to be evaluated?

Both internal and external quality evaluation must examine the following issues.

- **Mission and governance**

  A clear and publicly stated mission and/or philosophy and purposes appropriate for post secondary or higher education in nursing

- **Institution/faculty**

  Qualification, credentials, number, ratio of faculty to students, teaching load, faculty development, and academic outcome such as research, textbooks, etc.

- **Students**

  Number of students enrolled, admission policy, recruitment methods, student activities, and number/percentage of graduates
➢ **Curriculum, teaching and learning technique**

Student credit hours, learning objectives, method of teaching, teaching-learning techniques (lesson plan), participation of students, evaluation method.

➢ **Resources**

Availability of teaching facilities, such as classrooms, clinical units, computers and technology, teaching media, library and access to facilities, accommodation, etc.

➢ **Quality assurance**

Mechanisms, procedures and processes in the NMEI to ensure that the desired quality of curriculum is delivered, the desired quality of teaching outcomes is achieved and continuous improvement of teaching and learning takes place.

### 3.5 Frequency of evaluation

Evaluation of the quality of nursing and midwifery education provided by an NMEI must be regularly carried out annually for internal quality evaluation. For external quality evaluation, the frequency of evaluation is according to the regulatory body’s requirement.

### 3.6 Quality improvement

The most important function of continuous quality improvement (CQI) is an analysis of the strengths and weaknesses. This should lead to transparency in instituting improvements. Therefore, after the evaluation is done and recommendations are received, the next steps for the NMEI are:

- to decide on the follow up of the evaluations;
- to plan what needs to be done with the recommendations from site visits; and,
- to apply the circular process of P-D-C-A in CQI.\(^8\)

In the CQI process, results and recommendations from internal and external evaluations should be used in an integrated way to bring about improvements. These improvements should lead to new or at least adapted goals and measures that will be the start of a new process of evaluation.

The QA model used in NMEI is presented in Figure 4.
3.7 Self-assessment report (SAR): Outcome of internal quality evaluation

The SAR is a report of the workplans, processes and their outcomes in the previous year at the NMEI, which are presented to outsiders, stakeholders and the assessment team. These are used as initial information for accreditation and issued to the nursing and midwifery council/organization. After carrying out internal quality evaluation, the SAR must be written by the regulatory body in accordance with each standard/guideline and criterion/indicator defined by the nursing and midwifery council/organization. A report on the results of the quality evaluation processes is an important mechanism in providing accountability.

The components of a SAR are:

1. Pre-content
   - Outer coversheet
   - Inner coversheet
   - Preface
   - Executive summary
(2) Content

2.1 Background of the NMEI: Type, function and personnel in the NMEI, number of students in a year

2.2 Outcomes: Summary report of achievement/non-achievement of each standard/criterion required by the nursing and midwifery council/organization in relation to:

- NMEI and facilities.
- Nursing and midwifery programme/curriculum and its methodology.
- Nursing and midwifery students.
- Classroom lecturers and clinical instructors.
- Performance assessment of skills and competencies of students.
- Nurses/midwives/nurse-midwives who have graduated.
- QAS

2.3 Analysis of working outcomes: identification of the institution’s strengths and weakness

2.4 Summary of work outcomes

2.5 Annex of SAR

- Names, work positions, workplaces of board members.
- Names of theory and clinical instructors.
- Acceptance, collaboration and referral letters.
- Names and addresses of students.
- Study time-table/schedule and rotations in clinical/community practice.
- Records of training and logbooks of students.
- Meeting reports and working assignment sheets or the structural diagram of the work.

3.8 Responsibilities of the nursing and midwifery programme board and instructors

To implement the QAS effectively, the programme/curriculum board and instructors need to understand, support and have a positive attitude to the system used in the NMEI. They are thus key persons in implementing the QAS. The responsibilities of the programme/curriculum board and instructors are as follows:

**Head/Director of the NMEI**

The head/director of the NMEI should:

- have a positive attitude to the QAS;
understand the mechanism and process of the QAS and be able to guide the programme/curriculum board and instructors;

understand the standards and criteria for the NMEI and nursing and midwifery programme defined by the nursing and midwifery council/organization;

formulate a clear policy for implementation of the QAS in the institution and announce it to the curriculum/programme board and instructors;

define the committee or persons responsible for monitoring the QAS in the institution;

arrange meetings to identify and explain about the policy of the QAS in the programme;

assign persons responsible for arranging workshops of the QAS implementation mechanism and process for involved persons;

support implementation of the QAS and the process to enhance the quality of work in the institution;

periodically follow and monitor the progress of QAS implementation in the institution;

assign persons responsible for writing the SAR, and preparing data/evidence for accreditation;

present the summary of work of the institution of the previous year in relation to the nursing and midwifery programme;

facilitate and cooperate with the auditors by supporting and providing the evidence/data required;

discuss the findings and recommendations with the auditors;

arrange meetings for involved persons to discuss the results and define persons responsible for making new action plans for quality improvement;

periodically follow up and monitor the progress of implementation of the new plan;

define persons responsible for writing the SAR for the next accreditation.

Committee responsible for monitoring the QAS

The committee or persons responsible for monitoring the QAS should:

have a positive attitude to the QAS and be willing to implement it;

understand the mechanism and processes of the QAS, and continuously enhance their knowledge of these;

have the skills to work in collaboration with administrators and instructors;
respond to the QAS policy and make action plans of how to implement the QAS based on the standards and criteria defined by the NMEI, and how to systematically organize data/evidence;

arrange meetings for involved persons to identify the mechanism and process of QAS implementation at the institution as per plans;

collect and establish data/evidence/document system of the institution;

monitor the QAS and assist persons involved in implementing it in the programme;

write a SAR and submit it to the nursing and midwifery council/organization with a request for accreditation;

distribute the SAR to every department and all relevant units;

collaboratively work with the auditors from the nursing and midwifery council/organization for site assessment;

prepare data/evidence for accreditation;

facilitate and help the administrative team of the institution to provide data/evidence to the auditors;

discuss the findings with the auditors;

make an action plan for quality improvement to achieve the standards and criteria defined by nursing and midwifery council/organization;

monitor and follow the progress of implementation of the new plan.

Theory and clinical instructors

According to the P-D-C-A concept, persons concerned in the NMEI can be important key factors for the quality of work. Instructors who are directly responsible for nursing and midwifery students are inevitably involved in the QAS for developing the quality of teaching and learning. In implementing the QAS, the instructors should:

have a positive attitude towards the QAS and be willing to implement it;

understand the mechanism and process of the QAS and continuously enhance their knowledge of these;

respond to the QAS policy and follow action plans of how to implement the QAS based on the standards and criteria defined by nursing and midwifery council/organization, and how to systematically organize data/evidence;

self-assess work under their responsibility if it is in the plan and check to see that it meets the standards and criteria defined by the nursing and midwifery council/organization;

perform their responsibility as per the plan;

systematically keep and organize data/evidence;
➢ provide data/evidence to the committee for writing the SAR;
➢ collaboratively facilitate and provide data/evidence to the auditors;
➢ collaboratively make plans for quality improvement of their work to achieve the standards and criteria defined by the nursing and midwifery council/organization;
➢ monitor and follow the progress of implementation of the new plan.
Chapter 4

Accreditation of Nursing and Midwifery Educational Institutions

The national nursing and midwifery council/organization is responsible for accrediting all NMEIs to see whether each meets and maintains the standards defined by the council/organization or needs to be developed further. This is to enhance the quality of the programme and to produce nurses/midwives/nurse-midwives with competence in providing care. Thus, under the accreditation process, the essential criteria and standards of each component will be assessed to ensure that students achieve the desired objectives and the requirements for certification and registration by the nursing and midwifery council/organization.

4.1 Accreditation of the NMEI

Definition

Accreditation implies official recognition, general acceptance and assurance of the quality of a particular training programme. It basically refers to the process of granting recognition to an educational institution that can maintain suitable standards. For the NMEI, the accreditation process incorporates procedures of assessment in order to judge the quality of the institution and its nursing and midwifery programme.

Rationale for accreditation

To improve the health of the people and to maintain the quality of the programme, the nursing and midwifery council/organization in countries of the South-East Asia (SEA) Region should implement an operational mechanism for accreditation of NMEIs and other standard components by a participatory process of self-assessment. To achieve sustainable scaling up of the nursing and midwifery programme, the quality of the standard components needs to be assessed through an accreditation processes.

Once the accreditation mechanism is in place, all essential components that meet the accreditation criteria can be listed to run the programme. Such accreditation processes will assure the quality and standards of the programme at all government and private institutes.

Objectives of accreditation

The overall objective of accreditation is to ensure the quality of all components of the standards and criteria. The specific objectives of accreditation under the nursing and midwifery programme are:

1. to ensure acceptable standards of the programme of the NMEI at the national level to implement the nursing and midwifery programme.
(2) to evaluate the success of the nursing and midwifery programme in achieving its mission, goals and outcomes

(3) to ensure the technical quality of the teaching and learning processes

(4) to report to the public, government and related stakeholders on the purposes and values of accreditation, and to identify nursing and midwifery programmes that meet accreditation standards.

Significance of accreditation

According to the mentioned objectives, accreditation provides benefits to NMEIs, the nursing and midwifery professions, students and the public.³⁹

First, an NMEI benefits from accreditation as follows:

- Accreditation acts as the stimulus for self-evaluation and self-directed institutional and thus programme improvement.
- Self-evaluation and assessment, and the counsel provided by the accrediting body, strengthen the NMEI and the teaching and learning processes in its programme.
- The application of criteria for accrediting bodies, which are generally accepted throughout the programme, help guard against external encroachments harmful to institutional or programme quality by providing benchmarks independent of forces that might impinge on individual institutions.
- The use of accreditation is a means by which an institution can gain eligibility to participate in the nursing and midwifery programme.

Second, accreditation serves the nursing and midwifery professions by:

- Providing a means for practitioners to participate in determining the preparatory requirements for entering the nursing and midwifery professions.
- Contributing to the unity of the professions by bringing together practitioners, teachers and students in an activity directed at improving professional preparation and practice.

Third, for students, accreditation provides:

- An assurance that the teaching and learning activities of an accredited NMEI or its programme have been found to be satisfactory, and therefore meet the needs of students.
- Assistance in the transfer of credits between NMEIs, or in the admission of students to advanced degrees through the general acceptance of credits among accredited institutions when the performance of the

³ Florida College of Interactive Medicine. What benefits to students does accreditation provide? 2006. Available at: http://www.fcim.edu/accreditation
student has been satisfactory and the credits to be transferred are appropriate for the receiving institution.

Last, for the public, the values of accreditation include:

- An assurance of external evaluation of the NMEI or the nursing and midwifery programme, and conformity with the general expectations from professional education.
- Identification of an NMEI and its nursing and midwifery programme that has voluntarily undertaken explicit activities directed at improving the quality of the institution and its professional programmes, and is carrying them out successfully.
- An improvement in the professional services available to the public, as accredited NMEIs and their programmes modify their requirements to reflect changes in knowledge and practice generally accepted in the field.
- A decreased need for intervention by public agencies in the operations of educational institutions, since through accreditation these institutions contribute to the maintenance and enhancement of educational quality.
- A prerequisite in many cases for entering a profession.

4.2 Accreditation of the nursing and midwifery curriculum

Curriculum design is the primary factor in a qualified programme. A high-quality curriculum of the nursing and midwifery programme should be accredited by the council and organizations. The main objective of this accreditation is to ensure that the objectives and philosophy of the nursing and midwifery programme are in harmony with the goals of the approved curriculum, which enables students to be knowledgeable and competent to provide care. The curriculum must serve to develop a positive attitude in students to work in their communities and conduct home deliveries. The curriculum must also define suitable lesson plans, and teaching and evaluation methodologies for students.

Accreditation process

Process of curriculum accreditation

1. The nursing and midwifery council/organizations set up a framework for accreditation.
2. The nursing and midwifery council/organizations appoint the committee and set up key quality components of and criteria or standards for the nursing and midwifery curriculum.
3. The curriculum committee establishes the accreditation process/mechanism.
4. The curriculum committee advocates for accreditation.
5. The curriculum committee sets up the assessors or auditors for school visits.
(6) The assessors or auditors report to the board committee on the results of the visits and the scores.

(7) The board takes a decision on the number of years for which accreditation should be granted.

4.3 Accreditation of the NMEI

The NMEI accreditation process

The NMEI accreditation system involves both auditors and auditees. The auditors perform a formal assessment and judge the quality of nursing and midwifery education in the NMEI. This is conducted by a regulatory body outside the parent institution such as experts from the Ministry of Education, Ministry of Health, independent organizations responsible for the quality of education, or a professional organization.

The processes are as follows:

(1) The auditing organizations set up the accreditation committee to develop the accreditation standards of the nursing and midwifery programme and run the accreditation process. The accreditation body/committee should be developed under the legal and functional framework of the nursing and midwifery council/organization. The function of an accreditation committee is to set criteria and approve the standards of the NMEI, students, protocols, teaching and learning methodology, and conduct an assessment and grant certification.

(2) The auditing organizations propose accreditation to the NMEI and stakeholders.

(3) The auditing organizations define and provide standards and guidelines for auditing the nursing and midwifery programme for the NMEI and stakeholders.

(4) The NMEI prepares a self-assessment report based on (SAR) the SAR guidelines and requests the nursing and midwifery council/organization for accreditation.

(5) After receiving the SAR, the relevant accrediting organization passes it to the accreditation committee for processing.

(6) The accreditation committee appoints a team of auditors to visit and assess the NMEI.

(7) The auditors’ team visits and assesses the NMEI and reports to the accreditation committee.

(8) A meeting of the accreditation committee is then held to consider the findings of the auditors’ team and judge if the NMEI being assessed should be accredited and assigned a level of approval (duration of accreditation).

(9) The relevant accrediting organization releases the final results to the NMEI and issues the accreditation certificate. NMEIs that do not fulfil the required standards are re-assessed after they have implemented the required improvements.
Figure 5: Accreditation process of an NMEI

NMEI

- Develop the programme according to the standards/criteria
- Develop a quality assurance system for the NMEI to run the N&M programme
  - Plan
  - Do
  - Act
  - Check
- Write an SAR and propose to N&M council/organization
- Prepare evidence/data for accreditation
- Facilitate visits/assessment visit
  - Present the teaching-learning process and outcomes to the auditors' team
  - Provide more information if requested
  - Discuss assessment outcomes with the auditors' team

N&M council/organization

- Accredit the NMEI
  - Develop standards/criteria for accreditation
  - Develop guidelines for accreditation and distribute to stakeholders
  - Appoint an auditors' team which is trained in site visits and assessment
  - Visit and assess the NMEI
  - Auditors' team reports the findings to the accreditation committee
  - Accreditation committee primarily considers and approves of the findings
  - Accreditation committee submits the results to N&M council/organization for approval
  - Accreditation granted

Inform
Accreditation committee

Criteria:

(1) The accreditation committee must be appointed by the nursing and midwifery council/organization.

(2) The accreditation committee should be composed of members from within and outside the nursing and midwifery council/organization and be trained or attend workshops on accreditation by the nursing and midwifery council/organization.

(3) The number of members in the accreditation committee depends on the regulations of the organization.

(4) The accreditation committee is responsible for:

- Developing accreditation guidelines for the accreditation committee, nursing and midwifery council/organization committee, and the NMEI.
- Developing guidelines for writing SARs.
- Developing standards, assessment tools and a scoring method for accreditation.
- Appointing an auditors'/visiting/assessment team for site visits and assessment of the NMEI and its programme.
- Training the auditors/visiting/assessment team to conduct site visits and on the criteria of assessment.
- Developing guidelines for the accreditation process for the accreditation committee and the nursing and midwifery council/organization committee.
- Setting up meetings to consider the workplans and results of the site visits and assessment before proposing to the nursing and midwifery council/organization.
- Submitting the final findings of assessment to the nursing and midwifery council/organization committee.

Accreditation site auditors'/visiting/assessment team

Criteria:

(1) The site auditors'/visiting/assessment team must be appointed by the accreditation committee and be trained in the process of accreditation.

(2) The minimum number of members in the site auditors'/visiting/assessment team should be at least three persons.

(3) At least one site auditor/visiting/assessment team member should come from the accreditation committee and the others could be qualified persons.
(4) The site auditors'/visiting/assessment team is responsible for:
- Reviewing the SARs of all programme components of each NMEI.
- Working with the NMEI to arrange the date for accreditation and prepare data/facilities for assessment.
- Visiting and assessing the NMEI.
- Presenting a summary of the findings to the accreditation committee.

Site visit and assessment process

The processes of conducting a site visit and assessment at the NMEI for the site auditors'/visiting/assessment team are as follows.

(1) Before visiting:
- Review the SARs of all programme components of each NMEI site and find out what data/information/evidence needs to be given and explored on the day of the visit.
- Ensure clear agreement within the team on the visiting/assessment processes and what should be done on the day of the site visit.
- Work with the NMEI to arrange the accreditation date.
- Inform the NMEI to prepare data for assessment. Designated persons in the NMEI should participate in this event so that they can provide more information if needed.

(2) On the day of the site visit:
- The concerned person from the NMEI reports on how the nursing and midwifery programme is being run. If the information provided is not clear, questions can be asked by the auditing team.
- The visiting team:
- examines the data/evidence related to the nursing and midwifery programme;
- interviews the persons concerned with the nursing and midwifery programme such as the director of the institute, instructors and students to gain more information;
- assesses the NMEI and its teaching-learning facilities including classrooms and clinical sites to see whether they fulfil the standards/criteria required for the nursing and midwifery programme;
- discusses and summarizes the findings among the team;
- presents the findings and proposes what improvements need to be made to the persons concerned with the nursing and midwifery programme.
(3) After the visit:

- The auditors’ team presents a summary of the findings to the accreditation committee within two weeks.
- The accreditation committee reviews and considers the data (findings) before submitting the final assessment report to the Nursing and Midwifery Council/Organization for final consideration.

**Accreditation**

After consideration, the Nursing and Midwifery Council/Organization issues a certificate of accreditation to the accredited NMEI. The duration of validity of the certificate depends on the accreditation scores from the site assessment. When the duration of validity ends, the school needs to send a written request for re-accreditation within three months.

**Results of accreditation**

(4) NMEIs, related ministries, the authorities and public recognize the level of quality of the NMEI.

(5) Students or others can make a better decision on whether or not to study or work with the NMEI.

(6) The NMEI receives directions on how to change/improve.

(7) NMEIs can use the results to request for more support and human resources.

(8) The quality of nursing and midwifery graduates improves.
Bibliography


References


Annex 1

Accreditation Form

1. Name of the Nursing and Midwifery Educational Institution (NMEI): ……………………

2. Names of auditors:

   1…………………………………………………………………………………………….
   2…………………………………………………………………………………………….
   3…………………………………………………………………………………………….
   4…………………………………………………………………………………………….

3. Methods of assessment:

   1…………………………………………………………………………………………….
   2…………………………………………………………………………………………….
   3…………………………………………………………………………………………….

4. Information providers:

   1…………………………………………………………………………………………….
   2…………………………………………………………………………………………….
   3…………………………………………………………………………………………….
   4…………………………………………………………………………………………….

5. Date: ……………………………………………………………………………………………….

6. Data:

<table>
<thead>
<tr>
<th>Components</th>
<th>Criteria</th>
<th>Outcomes</th>
<th>Scores</th>
<th>Examples of evidence</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission/Vision/Goals/Objectives</td>
<td>Mission, vision, goals, objectives and philosophy of the nursing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>and midwifery education units are congruent with those of the</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>governing organization.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty, administrators and</td>
<td>Students participate in governance as defined by the governing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>students participate in</td>
<td>organization and nursing and midwifery units.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>governance as defined by the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>governing organization and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>nursing and midwifery units.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing and midwifery education</td>
<td>Units are administered by a nurse and/or a midwife who is</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>units are administered by a</td>
<td>nurse and/or a midwife who is</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>nurse and/or a midwife who is</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>academically</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Components</td>
<td>Criteria</td>
<td>Outcomes</td>
<td>Scores</td>
<td>Examples of evidence</td>
<td>Remarks</td>
</tr>
<tr>
<td>------------</td>
<td>----------</td>
<td>----------</td>
<td>--------</td>
<td>----------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Mission/Vision/Goals/Objectives (contd.)</td>
<td>Nurses/midwives are top administrators.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NMEI faculty</td>
<td>NMEI members (full-time and part-time) are academically qualified and have experience, and maintain expertise in their areas of responsibility and teaching skills.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adequate number of full-time and part-time NMEI staff meet the needs of the nursing and midwifery education unit to ensure competency.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Faculty/preceptor–student ratio is appropriate and ensures patient safety during clinical practice. (suggested ratio 1:8).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NMEI performance is periodically evaluated to ensure ongoing development and competence.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Teaching load should be appropriate. (suggested time 10–15 hours/week for lectures or 20 hours/week for practice).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The collective talents of the NMEI reflect scholarship through teaching, application,</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

• A list of names, titles, educational credentials and teaching responsibilities of each faculty member and administrative officer associated with the programme.
• Faculty/preceptor–student ratio.
• Copies of NMEI members' curriculum vitae.
• Copies of rewards and scholarships granted to the NMEI.
• Copies of NMEI staff’s performance assessment forms.
<table>
<thead>
<tr>
<th>Components</th>
<th>Criteria</th>
<th>Outcomes</th>
<th>Scores</th>
<th>Examples of evidence</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>and the integration and discovery of knowledge as defined by the institution and the nursing and midwifery education unit.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organization/</td>
<td>The composition, responsibilities and function of the general administrative body are defined in writing.</td>
<td></td>
<td></td>
<td>• The organizational chart displaying the organizational structure and outlining overall reporting relationships • The administrative chart/organigram.</td>
<td></td>
</tr>
<tr>
<td>Administration</td>
<td>Nurses/Midwives are top-level decision-makers and should be leaders of the nursing and midwifery organization.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The general administrative body holds regular meetings, takes minutes and communicates pertinent information to staff.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The organization is in compliance with all applicable legislation, including the provisions of the NMEI.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The organizational structure is outlined in an organizational chart.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The organizational structure and organizational chart is regularly reviewed and/or revised. The date of the last review/revision is recorded.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Students</td>
<td>Student policies of the nursing and midwifery education unit must be congruent with those of the governing organization, publicly accessible, non-discriminatory and consistently applied.</td>
<td></td>
<td></td>
<td>• Availability of internal and external rewards/scholarships for excellence to students. • Availability of internal and external financial support/scholarships</td>
<td></td>
</tr>
<tr>
<td>Students (contd.)</td>
<td>Student should have access to support</td>
<td></td>
<td></td>
<td>• Documentations of graduation rates, licensing</td>
<td></td>
</tr>
<tr>
<td>Components</td>
<td>Criteria</td>
<td>Outcomes</td>
<td>Yes</td>
<td>No</td>
<td>Scores</td>
</tr>
<tr>
<td>------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
<td>-----</td>
<td>----</td>
<td>-------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Services provided by qualified individuals which include, but are not limited to: health, counselling, academic advancement, career placement and financial aid.</td>
<td>Policies concerned with educational and financial records must be established and followed.</td>
<td></td>
<td></td>
<td></td>
<td>erin the sequence used for curriculum formulation.</td>
</tr>
<tr>
<td></td>
<td>Admission criteria are clearly stated.</td>
<td></td>
<td></td>
<td></td>
<td>Documents of curriculum management structure, the sequence used for curriculum formulation.</td>
</tr>
<tr>
<td></td>
<td>Plans for student activity and development are indicated.</td>
<td></td>
<td></td>
<td></td>
<td>Copies of the teaching and learning plan for the entire programme.</td>
</tr>
<tr>
<td></td>
<td>Curriculum</td>
<td></td>
<td></td>
<td></td>
<td>Explanation of how professional nursing and midwifery standards and guidelines for practice are incorporated into the curriculum.</td>
</tr>
<tr>
<td></td>
<td>Curriculum developed by the NMEI flows from the philosophy/mission, vision, goals and objectives of the nursing and midwifery education unit through an organizational framework into a logical progression of course outcomes and learning activities to achieve desired programme objectives/outcomes.</td>
<td></td>
<td></td>
<td></td>
<td>• Documentations of curriculum management structure, the sequence used for curriculum formulation.</td>
</tr>
<tr>
<td></td>
<td>The programme designed provides opportunities for students to achieve programme objectives, skills, values and competencies necessary for the practice of nursing and midwifery.</td>
<td></td>
<td></td>
<td></td>
<td>• Copies of the teaching and learning plan for the entire programme.</td>
</tr>
<tr>
<td></td>
<td>Curriculum (contd.)</td>
<td></td>
<td></td>
<td></td>
<td>• Explanation of how professional nursing and midwifery standards and guidelines for practice are incorporated into the curriculum.</td>
</tr>
<tr>
<td></td>
<td>Practice learning environments are selected and monitored by the NMEI and provide opportunities for a variety of learning options appropriate for contemporary nursing and midwifery.</td>
<td></td>
<td></td>
<td></td>
<td>• Documentations of ongoing and systematic programme evaluation, survey response and summary of the data.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Explanation of how the NMEI and students are involved in the evaluation of their individual performances, and how the performance evaluation is communicated to the students and used to</td>
</tr>
</tbody>
</table>
### Guidelines on Quality Assurance and Accreditation of Nursing and Midwifery Educational Institutions

**Components** | **Criteria** | **Outcomes** | **Scores** | **Examples of evidence** | **Remarks**
--- | --- | --- | --- | --- | ---
|  |  | **Yes** | **No** |  | 

<table>
<thead>
<tr>
<th>Components</th>
<th>Criteria</th>
<th>Outcomes</th>
<th>Scores</th>
<th>Examples of evidence</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resources</td>
<td>Fiscal resources are sufficient to support the purposes of the nursing and midwifery education unit and are commensurate with the resources of the governing organization.</td>
<td></td>
<td></td>
<td>Documentations of institutional policies and practices for resource allocation to achieve the mission, goals and expected outcomes of the programme.</td>
<td></td>
</tr>
<tr>
<td>Resources (contd.)</td>
<td>Programme support services and staff are sufficient for the operation of the nursing and midwifery education unit or institutions.</td>
<td></td>
<td></td>
<td>Documentations of how academic support services facilitate achievement of its mission, goals, and expected outcomes.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Teaching/learning resources and staff are comprehensive, current, developed with NMEI inputs, and accessible to the NMEI and students.</td>
<td></td>
<td></td>
<td>Documentations of how the programme and parent institutions provide resources for the professional growth and development of the NMEI.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical facilities including information technology (IT) and environment are safe, clean and appropriate to support the purposes of the nursing and midwifery education</td>
<td></td>
<td></td>
<td>Copies of the programme budget documents for the previous two fiscal and current years.</td>
<td></td>
</tr>
</tbody>
</table>

- Foster improvement.
- Documentations of nursing and midwifery graduates achieving competencies congruent with professional nursing and midwifery standards.
- Descriptions/documentations of how the results of comprehensive student performance are analysed and how they are used to change or improve the curriculum.
- A summary of NMEI outcomes for the past three years and analysis of the data in relation to expected programme outcomes, and examples of how aggregate data are used for improvement.
- Examples of how input from the community of interest is used in curriculum development and revision.
- Availability of lesson plans.
<table>
<thead>
<tr>
<th>Components</th>
<th>Criteria</th>
<th>Outcomes</th>
<th>Scores</th>
<th>Examples of evidence</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical resources</td>
<td>including hospital- and community role models, patient- student ratio,</td>
<td>Yes</td>
<td>No</td>
<td>Copies of the contract and the policy regarding teaching assignments.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>and nursing and midwifery equipment are appropriate to support the</td>
<td></td>
<td></td>
<td>Demonstration of IT, computer and programme software, library</td>
<td></td>
</tr>
<tr>
<td></td>
<td>purposes of the nursing and midwifery education unit.</td>
<td></td>
<td></td>
<td>including textbooks and journals, learning resource centre (LRC)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>including nursing skills laboratory, audiovisual aids provided for</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>teaching and learning in the NMEI.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Demonstrations of classrooms, clinical placement both in the</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>hospital and community, laboratory room, instructors’ offices,</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>dormitory, cafeteria provided for teaching and learning in the NMEI.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Checklist of students’ clinical performance.</td>
<td></td>
</tr>
<tr>
<td>Students are provided</td>
<td>opportunities to practise in a variety of essential areas.</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resources (contd.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality assurance</td>
<td>There is a written plan for a systematic quality assurance programme for</td>
<td>Yes</td>
<td>No</td>
<td>Documentation of QA policy and its revision.</td>
<td></td>
</tr>
<tr>
<td>system</td>
<td>nursing and midwifery education, which is used for continuous programme</td>
<td></td>
<td></td>
<td>Copies of current self-assessment document/report relevant to the</td>
<td></td>
</tr>
<tr>
<td></td>
<td>improvement.</td>
<td></td>
<td></td>
<td>programme.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>There is a written plan for systematic evaluation of the programme’s</td>
<td>Yes</td>
<td>No</td>
<td>Methods used for monitoring, reviewing and evaluating the programme.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>purposes and product outcomes.</td>
<td></td>
<td></td>
<td>A brief description of the institution’s staff development policies.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>There is an appointed QA committee.</td>
<td>Yes</td>
<td>No</td>
<td>Documentations of how policies are currently implemented and how</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>this is reflected in the programme.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Documentations of the institution’s teaching-learning strategy and</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>guidelines or operational plans both in the classroom and for clinical</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>practice.</td>
<td></td>
</tr>
<tr>
<td>Components</td>
<td>Criteria</td>
<td>Outcomes</td>
<td>Scores</td>
<td>Examples of evidence</td>
<td>Remarks</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>----------</td>
<td>--------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>personnel unit, and internal auditing and monitoring control.</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is documentation of the implementation plan of QAS.</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality assurance system (contd.)</td>
<td>• Copies of annual programme reports</td>
<td></td>
<td></td>
<td>• Copies of annual programme reports</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Copies of names and positions of external examiners' reviewers, a current external examiners'/adviser's report and the response from the programme team</td>
<td></td>
<td></td>
<td>• Copies of names and positions of external examiners' reviewers, a current external examiners'/adviser's report and the response from the programme team</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Documentations of arrangements for the pruning of outdated material from the programme and future needs</td>
<td></td>
<td></td>
<td>• Documentations of arrangements for the pruning of outdated material from the programme and future needs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Documentations of the overview of any committee(s) which oversees the programme</td>
<td></td>
<td></td>
<td>• Documentations of the overview of any committee(s) which oversees the programme</td>
<td></td>
</tr>
</tbody>
</table>

Comments

........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
Annex 2

Example of the Self-assessment Report for Accreditation

The Nursing and Midwifery Education Institute (Name)

I. Introduction to the Nursing and Midwifery Education Institute

The Nursing and Midwifery Education Institute (NMEI), West Bangkok University, is a premier nursing education institute in Thailand located on the bank of a river. The school was founded in 1896 as the first nursing school in the country. It is now over 50 years old and has long been regarded as a leading nursing and midwifery institution in Thailand. The school began with a midwifery programme only. A nursing curriculum was introduced later. A programme of nursing education was not fully established until 1960 when two American nurse-educators came to further develop and improve the nursing and midwifery curriculum with support from the Rockefeller Foundation.

In 1965, a three-year Diploma Programme for General Nursing and Public Health was offered with a Certificate in Midwifery issued after an additional six months’ study. A four-year programme leading to a degree of Bachelor of Science in Nursing was established in 1970. It was the first baccalaureate nursing programme in the country.

In 1972, the school separated from the Faculty of Medicine. The school expanded its portfolio with a Master’s in Nursing Science and a Doctorate in Nursing Science in 1977 and 1989, respectively. In 2001, the NMEI offered a programme of Doctor of Philosophy in Nursing as an international programme. Another important development was the Nursing Specialty Programme for national and international nurses who wish to gain further expertise in clinical practice. The NMEI is currently responsible for preparing educators, administrators, clinical experts and researchers to serve as leaders in the nursing profession.

1.1 Philosophy

The NMEI believes that the nursing profession has a vital role to play in providing essential health services to Thai society. Clients of nurses include individuals, families and communities. We believe that the human being is a biological, psychological, social and spiritual being who interacts with the environment and is unique, with dignity, rights, and responsibilities. The client may be an individual, family, group, community or society, all of whom have diverse and changing needs. We believe that the client is self-determining and has the right to informed choice about his/her health.
Nursing aims to assist clients in maintaining optimal health through effective interaction between themselves and their environment. Nursing knowledge is built upon knowledge bases from nursing practice and related sciences and arts. Nurses utilize this to assist clients in resuming their optimal health through health promotion, prevention of illness, care and rehabilitation. Our students are expected to develop these competencies as well as creative thinking, leadership and a positive attitude towards the profession.

1.2 Vision

The NMEI aspires to become one of the world’s leading academic nursing institutions, providing leadership among the health team to promote health for the betterment of Thai society. It is strongly believed that the NMEI and other nursing and midwifery institutions should be operated exclusively by nurses.

1.3 Mission

The missions of the school are:

(1) To prepare nurses with academic excellence and moral standards of the highest level.
(2) To conduct research in order to enhance new knowledge in nursing.
(3) To promote national and international networking for education, research and other academic activities
(4) To provide academic services for nursing professionals and the community in order to improve the health of all people.
(5) To promote and preserve Thai culture, religion and a healthy environment.

1.4 Educational programme

The NMEI offers many programmes in nursing and midwifery education. Besides the four-year generic nursing programme, the NMEI currently provides different nursing programmes, both locally and internationally, as follows:

(1) Bachelor of Nursing Science (a four-year international programme).
(2) Bachelor of Nursing Science (a continuing programme for international students).
(3) Master of Nursing Science (MNS).
(4) Doctor of Philosophy in Nursing (a collaborative, international PhD programme).
(5) Four-month Nursing Specialty Programmes in various areas for Thai Nurses.
(6) A three-month Nursing Specialty Programme in various areas for international nurses and midwives.
Consistent with the university and school's mission, the NMEI fosters individuality, self-directed learning, and commitment to lifelong learning. Continuing professional learning opportunities assist nurses and midwives in developing professional expertise. Creative and flexible programming in education is essential to meet the diverse and changing needs of learners and the profession.

1.5 Organizational structure

The Dean of the NMEI takes full responsibility for administration through the Faculty Board Committee which comprises the Dean, Associate Deans, Heads of Departments as well as representatives from the faculty. Administratively, the NMEI is divided into seven departments and one Dean’s secretariat office (Figure 6).

1.6 Departments

The head of each department is responsible for the excellence of its academic area of specialty. These departments include:

(1) Department of Fundamental Nursing
(2) Department of Medical Nursing
(3) Department of Mental Health and Psychiatric Nursing
(4) Department of Obstetric and Gynaecological Nursing
(5) Department of Paediatric Nursing
(6) Department of Public Health Nursing
(7) Department of Surgical Nursing.

1.7 Scope of work of the departments

Each department has scope of work as follows:

(1) Manage teaching and learning activities according to the responsibilities assigned by the school.
(2) Promote and provide support for capacity-building of faculty members in conducting research and continuing lifelong learning.
(3) Provide educational services for the public to promote the health of the people in society, as well as for the nursing community to enhance their contribution to the health-care services and development of the nursing profession.
(4) Encourage nurse students to develop self-discipline, self-reliance, morality and an attitude of lifelong learning.
(5) Coordinate and collaborate with other involved units/organizations to facilitate or support education, research and preservation of Thai culture and art.
Figure 6. Organizational structure of the NMEI
1.8 **Dean’s Secretariat Office**

To facilitate teaching and learning activities for both teachers and students, the NMEI organizes supporting staff units with provision for an appropriate number of qualified support staff to serve in the following working units.

1. **Administrative and Secretariat Unit**—responsible for all administrative work including personnel, ground and transportation, public relations, academic services, human resource development, and school dormitory

2. **Finance and Accounting Unit**—responsible for the NMEI budget, and annual income and expenses

3. **Educational Service Unit**—responsible for registration and evaluation of student performance, educational programme management, audiovisual aids, information technology and computers, and library systems

4. **Policy and Planning Unit**—responsible for developing the strategic and action plans of the NMEI, as well as evaluating these plans.

2. **Faculty**

2.1 **Faculty members’ credentials**

Most faculty members of the NMEI are academically qualified to accomplish the expected outcomes of the programmes. In 2007, the NMEI had 175 full-time faculty members. Of this number, 63 (36%) held a PhD or doctoral degree and 112 (64%) a Master’s degree. Furthermore, 14 (out of 112) faculty members with a Master’s degree were on educational leave in the pursuit of a PhD or Doctoral degree. As a consequence, only 61 faculty members were on duty.

All faculty members have clinical experience in their area of expertise (such as medical and surgical nursing, psychiatric and mental nursing, fundamental nursing). Their clinical experience ranges from six to 35 years, with an average of 15 years.

2.2 **Faculty member–student ratio**

In 2007 the total number of students for all programmes (Bachelor’s, Master’s, Nursing Specialty and doctoral programmes) was 1216. On average, the faculty member–student ratio for classroom teaching was 159:1216 (1:7.65). During clinical practice, the faculty member-to-student ratio ranged from 1:2 to 1:8, depending upon the clinical setting. To maximize client safety and prevent unnecessary mistakes during students’ client practice, the NMEI does not allow a faculty-to-student ratio greater than 1:8.

2.3 **Faculty members’ performance**

The NMEI strongly encourages faculty members to utilize their scholarship through four major missions: (a) teaching, (b) research and research utilization, (c) provision of educational/professional services to societies, and (d) preservation of arts and
In 2006, the NMEI conducted 38 projects related to educational/professional services. Examples of these projects are counselling services for students and the general population, a health promotion project for the elderly, a health centre for the elderly, health promotion through the mass media, sex education for teenagers at school, among others. Examples of cultural projects include New Year’s celebrations, farewell party for retiring personnel, commencement ceremonies, an art and classical dance project for students, a cultural tour project, among others.

### 2.4 Ongoing evaluation of faculty members’ performance

All faculty members are required to submit their performance record every six months to the NMEI. In this record, they need to elaborate their tasks in detail and the number of working hours associated with each task. They need to rate the quality of their own and others’ performance on the self-rating scale provided. Administrative personnel review these files (including performance record, rating scale and actual performance) and provide feedback to faculty members.

### 2.5 Faculty development

The Faculty of Nursing encourages faculty members to constantly update their knowledge and professional skills. Financial support is provided annually for all faculty members to attend conferences or trainings at national and international levels at least once a year. In 2006, two faculty members were on sabbatical leave in order to produce their academic work (such as research and textbooks). Three faculty members pursued their post-master and post-doctoral training in the United States of America. Another three took academic leave to pursue advanced education at the doctoral level.

### 3. Students

#### 3.1 Student recruitment policies

To ensure the quality of prospective students, the committee board of the NMEI has prepared a formal recruitment plan and revises it every five years. At the undergraduate level, students who complete grade 12 from secondary schools are potential candidates. Two hundred and fifty students are recruited annually based on their Grade Point Average, scores on the national standardized tests, individual interviews, and results of physical examination. At the graduate level, 100–150 students are recruited for the Master’s programme; and 10 students for the Doctoral programme. All students are treated equally and fairly without discrimination or prejudice in the recruitment process.

#### 3.2 Students’ support services

There are multiple support services in the NMEI such as medical clinics, counselling services, libraries, computer rooms, LRCs, audiovisual equipment, academic advisory services, financial aid, Office of Student Affairs, and so on. All students are eligible to access and utilize these services.
3.3 Performance measures of graduates

Graduation rate

The numbers and percentages of nurses who graduate within the expected timeframe are illustrated in the following table.

<table>
<thead>
<tr>
<th>Programme</th>
<th>Total No. of students</th>
<th>No. of students who graduated within expected time frame</th>
<th>No. of students who do not graduate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate programme (4-year programme)</td>
<td>251</td>
<td>244 (97.2)</td>
<td>7</td>
</tr>
<tr>
<td>Nursing Specialty programme (4-month programme)</td>
<td>150</td>
<td>150 (100)</td>
<td>0</td>
</tr>
<tr>
<td>Master’s programme (2-year programme)</td>
<td>77</td>
<td>50 (64.93)</td>
<td>12</td>
</tr>
<tr>
<td>Doctoral programme (3.5-year programme)</td>
<td>30</td>
<td>19 (63.3)</td>
<td>5</td>
</tr>
</tbody>
</table>

Nursing licence examination pass rate

All nursing graduates from the undergraduate programme are required to take a national nursing licence examination in order to practise legitimately in health-care settings. In 2007, the number of graduates who passed such an exam and obtained a nursing licence was 186 out of 252, a pass rate of 73.81%. Those who failed took the second and third exams provided in the same year and passed, leading to a pass rate of 100%.

Employment rate

The number of graduates who were employed as registered nurses and continued their education in 2005–2007 is shown in the following table. All graduates work for university hospitals.

<table>
<thead>
<tr>
<th>Academic year</th>
<th>No. of graduates</th>
<th>No. of employed graduates</th>
<th>No. of graduates who continue advanced education</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>252</td>
<td>252 (100%)</td>
<td>-</td>
</tr>
<tr>
<td>2006</td>
<td>206</td>
<td>206 (100%)</td>
<td>-</td>
</tr>
<tr>
<td>2005</td>
<td>205</td>
<td>202 (98.53%)</td>
<td>3 (1.47%)</td>
</tr>
</tbody>
</table>

Quality of work performance

The NMEI evaluates graduates in terms of their work performance. A survey is conducted annually by sending questionnaires to employers (including administrative personnel, nurse supervisors, head nurses, etc.). The questionnaire aims to examine employers’ satisfaction with graduates’ work performance, their sense of responsibility, interpersonal relationships, leadership skills, ethics and so on. Employers were asked to rate on a self-reported Likert scale, ranging from “1”
(very dissatisfied) to “5” (very satisfied). Results of the 2006 survey are displayed in the following table.

<table>
<thead>
<tr>
<th>Year</th>
<th>Work performance</th>
<th>Responsibility</th>
<th>Interpersonal relationships</th>
<th>Leadership</th>
<th>Ethics</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>3.73 (1.23)</td>
<td>3.94 (1.09)</td>
<td>4.42 (0.51)</td>
<td>3.47 (1.11)</td>
<td>4.53 (0.42)</td>
</tr>
</tbody>
</table>

Note: Numbers in parentheses are standard deviation.

4. Curriculum and instruction

4.1 Curriculum management

Committee

The Dean of the NMEI appoints the Undergraduate Nursing Education Committee to effectively conduct the programme in nursing and midwifery. The committee consists of the following:

1. Associate Dean for Academic Affairs, as the committee chair.
2. Heads of departments as committee members.
3. Secretary.

Roles and responsibilities

The Undergraduate Nursing Education Committee has the following roles and responsibilities:

1. Develop the curriculum and send a proposal to the Educational Institute Board and finally the University Board for approval.
2. Manage issues related to the curriculum in the monthly committee meeting.
3. Design study plans for students in each academic year and apply for their approval to the Educational Institute Board.
4. Develop guidelines and forms used in education such as course syllabus and evaluation forms, and distribute these to the departments and course coordinators. The course syllabus must be written under the NMEI guidelines (see course syllabus form).
5. Develop a master plan for students’ rotation and send the proposal to the Educational Institute Board for approval.
6. Approve of the course coordinators proposed from various departments.
7. Monitor the efficiency of the curriculum by conducting course evaluation and instructor evaluation during every term, and organize a curriculum seminar annually.
8. Conduct a follow-up study to evaluate graduates by collecting data from involved stakeholders such as employers.
Course syllabus

1. Programme of study:

.................................................................................................................................

Nursing and Midwifery Educational Institute, ........... University

2. Course code: ................. Course title: ......................

3. Number of credits: Lecture/Lab: ......................

4. Prerequisite: ......................

5. Type of course: Professional education course

6. Session/Academic year: Semester 2/ Year 2

7. Course description

.................................................................................................................................

8. Course objective(s) (learning outcomes):

.................................................................................................................................

Specific objectives: At the end of the course, students are able to:

1. ..............................................................

2. ..............................................................

3. ..............................................................

9. Course outline

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Hour/room</th>
<th>Instructor</th>
</tr>
</thead>
</table>

10. Teaching method(s)

1. Lecture

2. Discussion

3. Presentation

11. Teaching media

1. Textbooks, handouts

2. Situations, cases

3. LCD/visualizer, computer

12. Measurement and evaluation of student achievement

Assessment criteria

A = 80% and above

B = 70-79%

C = 60-69%

D = 50-59%
13. Course evaluation
   1. Examination (take home, tests) 60%
   2. Discussion/Presentation 20%
   3. Term paper 20%

14. Reference(s)

15. Instructor(s)

16. Course coordinator
### 4.2 Methods of study and evaluation

The NMEI requires a written lesson plan for each session in each course. The lesson plan includes five topics (see the following format):

1. Objectives
2. Contents
3. Teaching and learning method
4. Media
5. Evaluation

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Contents</th>
<th>Teaching and learning method</th>
<th>Media</th>
<th>Evaluation methods</th>
</tr>
</thead>
</table>

Objectives, contents, teaching and learning method, media and evaluation are written congruously.

Teaching and learning methods in theory include activities other than lectures such as analysing a situation/scenario, problem-based learning, group work and discussion.

The marks allotted for examination in the theory course should not exceed 70% of the total score. Other evaluation methods are included such as term paper, presentations and participation.

Evaluation in practicum courses consists of 3 parts.

1. Performance in the clinical setting 75%–80%
2. Case study 10%–20%
3. Performance in carrying out nursing procedures 5%–10%

### 4.3 Revision of the curriculum

There is a plan for curriculum revision to enhance the quality of education. The committee organizes a seminar for revision of the curriculum every five years. Instructor evaluations, course evaluations by students and the faculty’s opinions are used as inputs for the revision. The revised curriculum is submitted to the Educational Institute Board and University Board for approval.
5. Resources

5.1 Fiscal resources

The NMEI receives financial support annually from the following sources: (1) governmental subsidy, (2) university, (3) tuition fees, and 4) research grants from the government and private sector. In 2006, the entire financial support was 280 million baht, which is sufficient to support school activities and expenses.

5.2 Programme support services

Office of Student Affairs

The NMEI has three separate offices of student affairs, one each for the undergraduate and nursing specialty, Master’s and Doctoral programmes.

Audiovisual centre

The audiovisual centre provides equipment necessary for the teaching–learning process, and includes computers, scanners, CD writers, visualizers, LCD and overhead projectors, still and video cameras, tape players and recorders, television sets, microphones, and so on. Five staff in the centre assists faculty members and students to produce teaching–learning materials.

5.3 Learning resources

Library

The NMEI operates its own library, which is located on the first floor. There are various library resources and services located in the University to which the NMEI has access. Such resources include inter-library and international library services, and computer searches through numerous databases. Wireless and regular Internet services are also provided for students and faculty members.

Computer and information centre

The computer centres are fully equipped with computers and necessary accessories to facilitate faculty members, staff and students to fulfil their responsibilities. In addition, the centre provides training through many short courses to promote competency in using computers for faculty members, staff as well as students.

Learning resource centre and skills laboratories

The main purpose of this centre is to provide students with practical experience in basic nursing skills such as physical examination. The LRC facilitates an education process by utilizing multimedia techniques, development of educational materials, and utilization of computerized educational programmes such as computer-assisted instruction (CAI). This centre is located on the sixth floor of the faculty of nursing.
Clinical placement

The NMEI recognizes the importance of safe, qualified and well-equipped clinical practice settings. All clinical settings have been approved by Hospital Accreditation ISO 9002 in Thailand. Currently, there are 34 clinical placements, including four general hospitals, 25 community hospitals, two health institutions, and three community health centres. Students have opportunities to work with experienced health personnel in the area of medical-surgical, obstetric-gynaecological, psychiatric and paediatric nursing.

5.4 Physical facilities

School buildings

The NMEI has three buildings that contain 40 classrooms, 100 faculty offices, 13 non-faculty offices, three student lounges, two computer labs, two counselling rooms, an LRC, library and audiovisual centres. The cafeteria meets the national standards of food safety (approved by the Ministry of Public Health) and is located on the first floor. An open-air, 150 sq.m. multipurpose area, also located on the first floor, is used for various activities such as aerobic exercise, special day celebrations (e.g. New Year), and other health promotion activities.

Faculty members’ offices

Offices of the faculty members, which vary in size, are located in the NMEI buildings. The Dean’s and associated dean’s offices are on the second floor. Other offices are on the third to the sixth floors.

University dormitories

Dormitories for nursing students are located approximately five kilometers away from the Faculty of Nursing. There are four dormitory buildings guarded by university personnel. Single/double furnished or unfurnished rooms with ample common areas, including a shared living room and bathroom provide for safety and comfortable living. In each room, occupants are provided with beds (together with mattress and bed sheets), closets, desk lamps, chairs and writing tables. Appliances such as a television set, telephone, refrigerator and microwave are provided for each floor. Other facilities include a laundry room, fitness centre, sports area and computer room.

5.5 Student support systems

The NMEI has created multiple support systems for nursing students. First of all, an academic adviser system is utilized in order to provide assistance for education and other issues. Each student has his/her own academic advisor from admission to graduation. Students are encouraged to meet their advisor periodically (i.e. every month or two) or as needed. Second, the Centre for Student Affairs provides help to students and also organizes extracurricular or social activities. Finally, the school counselling service is available for students who need to discuss their problems, stress-related issues, emotional disturbances, and so on.
6. **Quality assurance system**

The NMEI maintains the quality of the curriculum under the quality standards of the university. The university quality standard is in accordance with the policy and guidelines for quality assurance of the Ministry of Education. The Quality Assurance Committee has the responsibility for planning and implementing the quality assurance system in the educational institute to enhance the quality of education. Consequently, the educational institute developed a QAS that requires an annual internal audit and preparation for an external audit.

### 6.1 Committee

The Dean of the School of Nursing and Midwifery appoints the Quality Assurance Committee to effectively conduct nursing and midwifery education according to quality standards. Appointed committee members are prepared to be auditors by attending a course in quality assurance provided by the university. The committee consists of:

1. Associate Dean for Quality Assurance, as the committee chair,
2. Associate Deans in related fields as committee members,
3. Deputy Heads of Departments as committee members,
4. Representatives from departments as committee members, and
5. Secretary.

**Subcommittee for internal audit**

The NMEI appoints a Subcommittee for internal audit to assess and evaluate the quality of all departments and units annually. Appointed Subcommittee members are prepared to be auditors by attending a course in quality assurance provided by the university.

The Subcommittee for internal audit first studies and examines the SAR, annual report, related documents, and visits each department as scheduled. The Subcommittee then arrives at conclusions and recommendations, and provides the results of the evaluation as feedback to each department and unit. Last, a complete report is written by the committee and submitted to the Educational Institute Board.

### 6.2 Manual for educational quality assurance

The Quality Assurance Committee has developed a manual to be used as guidelines for educational quality assurance of all departments and the educational institute. The national guidelines and professional guidelines are integrated in the manual, including the process of quality development (Plan–Do–Check–Act). The form for SAR is included.
6.3 Policy and guidelines for quality assurance

Policies of the NMEI for quality assurance are:

1. To develop a master plan for quality assurance in education of the NMEI.
2. To develop a system and mechanism for quality assurance of the NMEI, which can be clearly examined and precisely evaluated.
3. To develop supporting factors to effectively operate the QAS.
4. To promote involvement of the faculty and other personnel in the educational institute to develop the system and mechanism of quality assurance.
5. To use the results of the annual evaluation to improve the quality of education and other performance of the NMEI as recommended.

Guidelines for quality assurance: The Quality Assurance Committee develops and provides guidelines to evaluate the quality of nursing education. Internal audit is done annually. The auditors’ team provides feedback and recommendations to the nursing departments. The department analyses the feedback and recommendations, and uses these as inputs for quality improvement. Each nursing department formulates a formal annual report that includes a plan for quality improvement.

The departments and the educational institute use the guidelines to evaluate themselves and write the complete SAR. Objectives of the internal audit are:

1. To evaluate the quality of the department/performance of the educational institute against predetermined standards.
2. To inform the results of the quality evaluation to the department/educational institute in order to improve the quality of nursing education.
3. To learn the strengths, weaknesses, opportunities for quality development including recommendations for the department/educational institute.

6.4 Method of internal audit

The subcommittee conducts the internal audit in the NMEI according to the following steps.

1. Identifies guidelines for auditing; organizes a meeting to identify the steps of the audit, studies quality standards and forms used.
2. Studies the SAR and relevant documents.
3. Visits departments as planned, interviews personnel and students, and examines relevant documents.
6.5 Conclusion and report

The auditors’ meeting is organized to examine, discuss and evaluate data/information from departments/units before arriving at a conclusion and proposing recommendations as per the team’s opinion. The auditors’ team presents the results of the audit to administrators and members of various departments and provides opportunities for them to discuss or explain. The results of the evaluation are collected and a written report submitted to the Educational Institute Board.

6.6 Self-assessment report (SAR) for external audit

The Quality Assurance Committee is responsible for writing the SAR of the NMEI annually. After the internal audit is carried out, data from the departments are collected and pooled. The Quality Assurance Committee gathers data and writes the SAR according to the guidelines of the quality institute/parent institute. The educational institute and departments prepare relevant documents required by the auditors’ team such as course syllabi, lesson plans, course evaluation results, instructor evaluation results, etc. and update other data in the educational institute database such as publications by the faculty. External audit is conducted every five years.
Quality of nursing and midwifery workforce can contribute to the quality of health-care services and health outcomes. Quality assurance and accreditation are the two key mechanisms of ensuring the quality of education which is the foundation to building workforce capacity. Quality assurance is the internal process established by the education institution based on the national education standards and guidelines. It is a continuous process aiming for quality improvement. Accreditation is the external process performed by a national authority or independent organization to assess and evaluate the performance of the institution to ensure the quality of the graduates. It is done periodically.

The guidelines provide the information on the definition, process and roles of organizations concerned in quality assurance and accreditation of nursing and midwifery education institutions. Seven key concerned quality components are suggested, namely vision/mission/goal and objectives, organization/administration, academic staff, students, curriculum, resources and a quality assurance system. Examples of standards, indicators and the self-assessment report are also provided.