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## GOVERNMENT NOTICES

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### SOUTH AFRICAN QUALIFICATIONS AUTHORITY

No. 921

5 October 2007



### SOUTH AFRICAN QUALIFICATIONS AUTHORITY (SAQA)

In accordance with Regulation 24(c) of the National Standards Bodies Regulations of 28 March 1998, the Standards Generating Body (SGB) for

#### Nursing

registered by Organising Field 09 – Health Sciences and Social Services, publishes the following Qualification for public comment.

This notice contains the titles, fields, sub-fields, NQF levels, credits, and purpose of the Qualification. The full Qualification can be accessed via the SAQA web-site at [www.saqqa.org.za](http://www.saqqa.org.za). Copies may also be obtained from the Directorate of Standards Setting and Development at the SAQA offices, SAQA House, 1067 Arcadia Street, Hatfield, Pretoria.

Comment on the Qualification should reach SAQA at the address below and **no later than 5 November 2007**. All correspondence should be marked **Standards Setting – Nursing** and addressed to

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## SOUTH AFRICAN QUALIFICATIONS AUTHORITY

### QUALIFICATION: *Masters Certificate: Nursing*

SAQA QUAL ID	QUALIFICATION TITLE		
59297	Masters Certificate: Nursing		
ORIGINATOR		PROVIDER	
SGB Nursing			
QUALIFICATION TYPE	FIELD	SUBFIELD	
Masters Degree	9 - Health Sciences and Social Services	Curative Health	
ABET BAND	MINIMUM CREDITS	NQF LEVEL	QUAL CLASS
Undefined	141	Level 8 and above	Regular-ELOAC

### PURPOSE AND RATIONALE OF THE QUALIFICATION

#### Purpose:

This qualification provides a career path for Professional Nurses who want to stay in a clinical context, but who would like to specialise, focus on an area and add to their depth of knowledge and skill. Persons learning towards this qualification become expert in an area. The sector needs qualified specialists both to improve practice, and to train other nurses. Achievement of this qualification will provide the learner with direct access to a Master's degree.

The focus of the qualification will be to extend theory and its application in practice. Typical learning pathways will need to include case studies and practice based project work. Learning in a clinical context, under the supervision of an advanced health specialist, will guide practice towards higher skills levels with progress and performance measured against set criteria.

Task shifting in South Africa, because of a shortage of other professionals, means nurses must be better trained. In addition, there are increasing demands for technical competence, given the complex machinery which is now commonplace. The nature of health care means that nurses must be more broadly competent than was previously the case, with requirements covering a broad spectrum ranging from medical to surgical:

- There is huge demand for emergency care in a South African context.
- HIV and cancer are on the increase and caring for the dying is a trend in South Africa that specialists must cope with.
- There are shortages of skilled persons in Occupational Health and Safety and an increased need for nursing skills.
- The community health nurse is a further demand area, and with requirements for analysis, immunisation/preventive health, and the provision of primary health care, community nursing has become a specialist area.
- Midwifery is an essential area of specialisation: in rural areas, nurse midwives provide obstetric and neonatal care in the absence of medical doctors (maternal death rates have increased, and it is essential to have the right skills in the right place at the right time - this area is still a key measure of the health care levels in a country).
- Family practice nursing is another essential area for specialisation - with a particular emphasis on diagnosis, treatment and care in under-served and/or under-resourced areas.

Learners credited with this qualification will be able to function with advanced intellectual and practical competencies in specialized nursing settings as leaders, consultants, educators and specialist practitioners in providing evidence-based care with other team members. Qualifying

persons will be able to work as clinical nurse specialists in the health sector, and hospitals already have specialization units/areas which need specialist nursing leadership.

These specialists are critical analytical thinkers. They are trendsetters, able to change the scope of an area: for example, changing the scope from pathological to therapeutic. They determine needs, and initiate policy and procedures.

Research shows that the higher the ratio of registered nurses in a team, the higher the level of health care. The lower number of doctors available means that there is need for a higher ratio of nurse specialists. The specialist sets the level of care and hands it to professional nurses to execute. The specialist defines what should happen to patients.

Nowadays, with the high cost of medicine, and earlier discharge of less critical patients, there is a higher ratio of seriously ill and unstable patients in care. There is a consequent need for higher levels of diagnosis; the needs encountered in care contexts are more critical and complex. Decisions around discharge are important, and include pre-discharge evaluation and post discharge planning of rehabilitation and recovery, education, and preparation for home care (demonstrating how to move/change dressings, etc).

Nursing specialists are important in that they form a strong basis for referral from staff and professional nurses. Their role in consultancy is important and in this way they contribute to expanding the theory base. The skills expected of specialists are higher order-they will do higher level things (individual and family therapy, for example). They are required to work with highly unstable patients. They provide leadership of the health team, rather than just the nursing team. The South African context needs the right skills at the point of service. They contribute to policy changes; they would work at regional, provincial and even national level, and be drawn into planning. The specialist helps to maintain the excellence of practice.

More specifically, the qualification aims to:

- Produce high quality specialists who are able to be competent specialist nursing practitioners in a range of health service settings.
- Provide specialists with a range of skills, knowledge and attitudes that will enable them to set trends, and take leadership roles in a meaningful and sustained contribution to health services.
- Equip specialists with a developed sense of equity, justice and service ethics that will ensure that they work in an accountable manner irrespective of their chosen work place.
- Offer a wide range of transferable skills for application in other professions, disciplines and general life. These include:
  - Capacity to assess and implement health and other policy.
  - An ability to affect areas of policy change, development and implementation.
  - Ability to plan and implement and manage projects of a varied nature.
  - An ability to work independently and as part of a team.

This qualification will be useful for:

- Professional nurses who wish to progress within the field.
- Persons at a commensurate level in Health and Allied Health Sciences who wish to change direction and move into nursing.
- Those wishing to progress towards qualification such as a Master's Degree in Nursing and beyond.

This qualification articulates:

- All competency requirements and outcomes (academic, specialist theory and practical/workplace experience) that are necessary to achieve professional registration.
- The requirements and provisions of the Professional Body for professional registration.

- Designation/s that may be achieved.
- The ongoing requirements (including the Code of Ethics and the requirement for Continuing Professional Development) for retention of registration as stipulated by SANC, and the implications of non-compliance on use of the Professional Designation and right to practice and/or licence to practice.

Scope of practice:

- Learners will function within the current scope of practice of the specialist nurse as formulated by the South African Nursing Council, in conjunction with the policies of the institutions of employment.

Specialists carry out their duties:

- As a member, or leader, of a team or unit.
- In accordance with the Professional Code of Ethics for Nurses.
- In accordance with the provisions of the norms and standards for nursing.
- They will take responsibility for specialist areas in the health sector.

Rationale:

There is rarely any exposure of pre-registration nurses to the complex, and dynamic context of specialized nursing practice. The changing context of health care practice with a growth in debilitating health conditions demands a cadre of clinical nurse specialists who are able to provide nursing care to patients in need of specialized nursing care.

The ongoing complexity of technology and the increasing acuity levels of the patients being cared for demand a capacity to self-evaluate, to exercise personal responsibility and initiative and indicate a depth of knowledge and a high level of skill and competence in specialized health care units.

High levels of trauma and critical illness in the country lead to complex demands on nurses to utilize rapid meta-cognitive problem solving skills in the resolution of concrete and abstract critical issues.

A significant report by Pick, Nevhutalu, Cornwall, and Masuku (2001, July) on the current situation of human resources in health in South Africa outlines a background of extreme economic and health inequalities of the past, and describes the current landscape still characterised by complex distortions of supply, production, distribution, and development of health personnel.

Pick et al (2001) found that some of the professional categories (doctors, professional nurses, and therapists) were not available at all points of Primary Health Care delivery. Furthermore, 80% of midwifery and neonatal services in the country are delivered by midwives and in view of the high peri-natal and maternal mortality and morbidity rates, it is essential to have an advanced practitioner able to build the knowledge base and improve practice in midwifery and neonatal nursing. Specialist nurse practitioners will frequently function independently within their specialised scope of practice. Concerns around the inability to hold professionals accountable for their actions can be addressed by building a hierarchy of skills in which, as professionals advance up the hierarchy, they fulfil their roles at the highest level but are not excluded from assisting in roles at lower levels.

In practice, supply falls short of demand, and the gap is growing. According to the statistics published by the South African Nursing Council, in 1996, 2 259 learners graduated as professional nurses, with the qualification: Nursing Science (General, Community and Psychiatry) and Midwifery. In 2005, the number had dropped to 1533.

The decline of learners entering the nursing profession has been a matter of great concern to the South African Nursing Council and to the Ministry of Health. The problem is discussed in the Human Resources Plan for Health, which the Minister of Health launched in April 2006 and emphasis is given to recruitment of more learners into professional nursing. The registration of a Masters Certificate: Nursing is seen as important in providing an extended learning pathway, and promoting the uptake of graduate and postgraduate qualifications.

### **RECOGNIZE PREVIOUS LEARNING?**

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### **LEARNING ASSUMED IN PLACE**

Competence must include competence equivalent to that of the professional nurse:

- Developing, implementing and evaluating population based health care.
- Planning, implementing and evaluating nursing care for individuals and groups based on thorough assessment.
- Delivering nursing care to sick or disabled individuals and groups.
- Promoting rehabilitation in individual and groups with disabilities.
- Diagnosing and treating minor ailments and common illnesses.
- Maintaining professional nursing in practice.
- Managing a health care unit.
- Delivering safe midwifery care.
- Demonstrating basic understanding of research.
- Integrating and applying knowledge of biomedical sciences, including body functioning, microbiology, pharmacology and socio-psychology in the provision of nursing, care within a comprehensive health care system.
- For the specialisation of Occupational Health Nursing, competency in the following unit standards is required:
  - Perform an audiometric screening test in the occupational setting.
  - Perform a spirometric screening test in the occupational setting.

Recognition of Prior Learning:

Learners may provide evidence of prior learning for which they may receive credit towards the qualification by means of portfolios, other forms of appropriate evidence and/or challenge examinations, as agreed to between the relevant provider and relevant ETQA or ETQA that has a Memorandum of Understanding in place with the relevant ETQA.

RPL is particularly important, as there are people in the profession with a variety of qualifications of differing quality and scope. It is important that an RPL process be available to assist in making sense of existing qualifications, and helping to standardise qualifications around a common standard. A related issue is that the nursing profession is facing a new scope of practice, based on international standards. It is essential that existing qualifications and all new provision are aligned to the new scope of practice, and the vision for health care in South Africa.

A further consideration is that there is a big change in the needs of the community that nurses have to serve; this partly explains the 'migration' amongst practitioners to other qualifications. Nurses are finding that their existing qualifications do not meet emerging needs or requirements, and they move to another to meet those needs.

Existing registered nurses, as well as professional nurses qualified under the new Professional Degree may wish to obtain this qualification.

In addition, there are gaps between old qualifications and the requirements of the new scope of practice, and a consequent need to upgrade qualifications. RPL is seen as vitally important in

every case to give recognition to learning already in place, make sense of the plethora of different levels and standards in the field, and provide a means for all to gain access to, and progress within, a common learning pathway for the profession.

There is a strong need to bring about alignment to the profession, with nationally recognized qualifications providing for different areas of specialisation. Specialist Nurses are the managers of health care units in all settings for health care delivery. They are independent practitioners, exercising judgement and make decisions around nursing care, and there is a strong need for critical and analytical thinkers to build the scientific knowledge base of nursing.

#### Access to the Qualification:

- An equivalent of a diploma or degree in nursing at NQF Level 7.
- Current registration with the South African Nursing Council (SANC) as a professional nurse.
- Relevant clinical experience:
  - Proven evidence of 1 year of clinical experience as a Professional Nurse (typically during the one year of community service).
  - Placement in a clinical practice setting relevant to speciality of choice.

#### **QUALIFICATION RULES**

In order to be credited with this qualification, learners are required to achieve:

##### Fundamental:

- All 15 Fundamental component credits.
- Fundamental in this qualification is the ability to conduct research, critical for any person engaged in a research qualification.

##### Core:

- All 176 Core component credits. These are compulsory, regardless of the area of specialisation selected.

Elective: [At present each elective option is registered as a separate qualification]:

- Candidates can choose from 16 different elective options.
- Each elective is an area of specialisation, and carries a minimum of 80 credits.
- Candidates must select whole elective options, and complete all of the exit level outcomes for that elective.

#### **EXIT LEVEL OUTCOMES**

##### Core:

1. Function effectively as a clinical nurse specialist with other members of the health team within the health care system.
2. Analyse a range of research methods and approaches with regard to their appropriateness for investigating particular research problems in specialized nursing and midwifery.
3. Manage and evaluate specialized nursing services in a variety of settings for individuals, families and communities at district, provincial and national level within the context of national health policy and international guidelines.

##### Electives:

- Note: The numbers of criteria per exit level outcome vary according to the requirements of the particular outcome. They are not indicators of the size of the outcome, but rather directives for assessors and providers on critical evidence of competence.

**Elective 1: Orthopaedic Nursing:**

- 4. Work as a specialist practitioner with other team members within the health care system for the promotion of healthy musculo-skeletal functioning, rehabilitation and the prevention of orthopaedic morbidity.
- 5. Demonstrate an informed and critical understanding of the principles, theories, issues and debates emerging in orthopaedic nursing.
- 6. Apply specialist knowledge and skills in orthopaedic nursing in the care of individuals, groups and communities with orthopaedic problems.

**Elective 2: Operating Theatre Nursing:**

- 7. Work as a specialist practitioner with other team members within the operating theatre and surgical environment.
- 8. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in operating theatre nursing.
- 9. Apply specialist knowledge and skills in peri-operative care of individuals.

**Elective 3: Palliative and Oncology Nursing:**

- 10. Work as a specialist practitioner with other team members within the health care system for the promotion of health, management of malignant conditions and care of the dying patient.
- 11. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in palliative and oncology nursing.
- 12. Apply specialist palliative care and oncology nursing knowledge and skills in the care of individuals, groups and communities.

**Elective 4: Ophthalmic Nursing:**

- 13. Work as a specialist practitioner with other team members within the health care system for the promotion of ophthalmological health and the prevention of visual impairment and blindness.
- 14. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in ophthalmic nursing.
- 13. Apply specialist knowledge and skills in the ophthalmological health care of individuals, groups and communities.

**Elective 5: Emergency Nursing [Can be registered to practice in trauma nursing]:**

- 16. Work as a specialist practitioner with other team members within the health care system for the prevention of morbidity and mortality, before, during and after emergencies.
- 17. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in emergency nursing.
- 18. Apply specialist knowledge and skills in the emergency nursing of individuals and groups.

**Elective 6: Occupational Health Nursing:**

- 19. Work as a specialist practitioner with other team members within the health care system for the promotion of occupational health and the prevention of occupational illness.
- 20. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in occupational health nursing.
- 21. Apply specialist knowledge and skills in the occupational health care of individuals and groups.
- 22. Maintain excellence in practice as a specialist practitioner in a variety of settings.
  - Range: Private, public, self-employed, urban and rural.

**Elective 7: Nephrology Nursing:**

- 23. Work as a specialist practitioner with other team members within the health care system for the promotion of renal health and the prevention of renal dysfunction.
- 24. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in renal nursing.
- 25. Apply specialist knowledge and skills in the renal nursing care of individuals, groups and communities with renal health problems.

**Elective 8: Paediatric Nursing:**

- 26. Work as specialist practitioner with other team members within the health care system in the assessment of the health status of children, from healthy to very ill, with specific understanding of the maturation and development of children.
- 27. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in paediatric nursing.
- 28. Apply specialist knowledge and skills in the provision of nursing care to sick children and their families.

**Elective 9: Critical Care Nursing (Adult):**

- 29. Demonstrate a practice-based knowledge and understanding of bio-medical technologies and nursing skills utilized in support of care of the critically ill person.
- 30. Apply evidence-based knowledge and skills in understanding, interpreting and mediating in the physical and emotional environment of the critical care unit, for patients, their families and staff.
- 31. Demonstrate a coherent understanding of principles, theories and emerging national and global issues in critical care nursing.
- 32. Interpret and apply information and data correctly to assess the critically ill adult.
- 33. Apply specialist knowledge and skills in the care and physiological support of critically ill and high-risk adults and their families.

**Elective 10: Critical Care Nursing (Child and Adolescent) [Competent persons can be registered to practice-new separation, though]:**

- 34. Demonstrate a practice-based knowledge and application of bio-medical technologies and nursing skills utilized in support of care of the critically ill child and/or adolescent.
- 35. Apply evidence-based knowledge and skills in understanding, interpreting and mediating in the physical and emotional environments of the critical care unit for patients, their families and staff.
- 36. Demonstrate a coherent understanding of principles and theories of both national and global emerging issues in critical care nursing.
- 37. Interpret non-verbal information and other data presented by children of varying developmental phases and their families, to completely assess children who require critical care.
- 38. Demonstrate specialist knowledge of child specific physiology and congenital pathophysiology that requires critical care.
- 39. Demonstrate the ability to respond to rapidly changing clinical conditions, including the recognition and management of emerging health crises, organ dysfunction and failure, in critically ill children and adolescents.

**Elective 11: Psychiatric Nursing:**

- 40. Work as a specialist practitioner with other members of the health team within the health care system for the promotion of mental health and prevention of mental illness.
- 41. Demonstrate a coherent and critical understanding of the principles, theories, emerging issues and debates in psychiatric nursing.



- 42. Apply specialist knowledge and skills in the nursing of individuals, groups and communities with mental health problems.
- 43. Enhance the functioning of the individual, group and community through expert psycho-education.

**Elective 12: Midwifery and Neonatal Nursing:**

- 44. Work as a specialist practitioner with team members within the health care system for the promotion of maternal and neonatal health and the prevention of maternal and neonatal morbidity and mortality.
- 45. Demonstrate a coherent and critical understanding of the principles, theories and emerging issues and debates in specialized midwifery and neonatal nursing.
- 46. Apply specialist knowledge and skills in the provision of reproductive health care for individuals, groups and communities.

**Elective 13: Community Health Nursing:**

- 47. Work as a specialist practitioner with other members of the health team for the promotion of health for groups, communities and populations, in striving to resolve public health issues that impact negatively on the attainment of optimal health for the population as a whole.
- 48. Demonstrate a coherent and critical understanding of the principles, theories, emerging issues and debates in public health, both nationally and globally.
- 49. Apply specialist knowledge and skills in population-based care to meet the health needs of groups, communities and populations.
- 50. Use advanced epidemiological research methods and epistemological thinking to assess needs, determine strategies to meet identified needs and identify best practices in public health and community-based nursing.

**Elective 14: Nursing and Health Services Management:**

- 51. Demonstrate a comprehensive and systematic knowledge and understanding of the components of the management process in the management of a health service.
- 52. Demonstrate a coherent and critical understanding of the principles and theories of management and leadership.
- 53. Organize the management of a defined health care unit by identifying, analysing and dealing with complex issues, using evidence-based solutions and theory driven arguments.
- 54. Control the quality of management and performance of health care in the defined service by means of scientific-based solutions.
- 55. Conduct fair and cost effective human resource management by engaging with current research and scholarly literature pertaining to sound human resource management.
- 56. Formulate and implement an effective strategic plan for a defined health care service by taking cognisance of internal strengths and weaknesses and external threats and opportunities.
- 57. Evaluate the effectiveness of the implemented strategic plan for the defined health care service by critical analysis, synthesis and independent evaluation of quantitative and qualitative data.
- 58. Demonstrate coherent and in-depth understanding of principles of business management pertaining to the private health sector.

**OR:**

- 59. Demonstrate coherent and critical understanding of the structure and functions of the public health services.

**Elective 15: Nursing Education:**

60. Create active learning environments in the teaching of nursing and midwifery both in clinical and classroom settings based on comprehensive and systematic understanding of adult development, learning and motivation theories.

61. Lead curriculum change and/or transformation in the education of nurses and midwives based on critical analysis of educational philosophy, national and global policies and discourses such as managing diversity, RPL, and globalization with regard to their implications for nursing and midwifery education.

62. Design, implement and assess classroom and clinical learning outcomes based on expected learning outcomes and a comprehensive understanding of principles and strategies of assessment of learning outcomes with specific reference to professional education.

63. Develop, in collaboration with peers, a coherent curriculum for a particular nursing and/or midwifery programme whilst taking into account the principles of the NQF and the stipulations of the South African Nursing Council (SANC).

64. Demonstrate a comprehensive and critical understanding of theories and approaches of educational management, including quality management systems, with specific reference to managing any nursing education institution.

#### **Elective 16: Family Nurse Practice:**

65. Work as a specialist practitioner with other team members within the primary care setting providing comprehensive clinical care.

66. Demonstrate an informed and critical understanding of the principles, theories and emerging issues and debates in family nursing.

67. Apply specialist knowledge and skills in providing advanced clinical care to individuals of all ages, and families, in a primary care setting.

#### **Critical Cross-Field Outcomes:**

This qualification addresses the following critical cross-field outcomes, as detailed in the associated unit standards:

- Identifying and solving problems in which responses indicate that responsible decisions using critical and creative thinking have been made.
- Working effectively with others as a member of a team, group, organisation or community.
- Organising and managing oneself and one's activities responsibly and effectively.
- Collecting, analysing, organising and critically evaluating information.
- Communicating effectively using visual, mathematical and/or language skills in the modes of oral/written persuasion.
- Using science and technology effectively and critically, showing responsibility towards the environment and health of others.
- Demonstrating and understanding of the world as a set of related systems by recognising that problem-solving contexts do not exist in isolation.

Learning programmes directed towards this qualification will also contribute to the full personal development of each learner and the social and economic development of the society at large, by making individuals aware of the importance of:

- Reflecting on and exploring a variety of strategies to learn more effectively.
- Participating as responsible citizens in the life of local, national and global communities.
- Being culturally and aesthetically sensitive across a range of social contexts.
- Exploring education and career opportunities; and developing entrepreneurial opportunities.

#### **ASSOCIATED ASSESSMENT CRITERIA**

Core:

## Associated Assessment Criteria for Exit Level Outcome 1:

- 1.1 Specialised health information needs are identified and addressed through structured and unstructured health education.
- 1.2 Formal and in-service education programmes for a specific category of clinical nurse specialists and other team members are designed and presented to ensure best practice in specialized nursing and health services.
- 1.3 Programmes for personal and professional growth are designed, implemented and evaluated in collaboration with colleagues and other members of the specialized health care team.
- 1.4 Developmental programmes and/or projects in area of speciality are provided through advisory and facilitative processes.
- 1.5 Consultancy and referral are provided to colleagues through a client, consultee and service-centred process.

## Associated Assessment Criteria for Exit Level Outcome 2:

- 2.1 The analysis of research approaches and methods is comprehensive and coherent and includes theoretical and or philosophical orientations about knowledge, reality and truth, as well as the implications of these theoretical orientations for selection of techniques and strategies based on particular research problem(s) and questions.
- 2.2 Analysis and interpretations of research reports (quantitative and qualitative) indicate comprehensive and systematic understanding of data collection techniques, data analysis procedures and principles and the current professional and clinical discourse in a specific area of nursing and midwifery specialization.

## Associated Assessment Criteria for Exit Level Outcome 3:

- 3.1 Specialized health care units, programmes and services at district, provincial and national levels are evaluated and managed in an efficient and effective manner according to accredited assessment tools.
- 3.2 Documented short and longer-term relationships and role modelling provide mentorship to others in the specialized health team.
- 3.3 Development of team members and support to cope with the emotional demand of the speciality are indicated through actions and reports.
- 3.4 Professional excellence and competence is maintained through application of continuing education and encouragement of life long learning.
- 3.5 Limitations in ethical, legal and policy guidelines are timeously identified with particular reference to a human rights approach on transforming legislation and civil structures through lobbying and advocacy.
- 3.6 Patients, families and communities are empowered to access existing appropriate resources through application of continuing health education.
- 3.7 The specialized disease profile at district, provincial and national levels and in different settings is correctly determined and interpreted in the formulation of specialized nursing needs of these communities and/or regions.
- 3.8 Quality assurance activities are conducted regularly to enhance quality in specialized health services.
- 3.9 Information systems at an aggregate level are developed and maintained.

## Electives:

- Note: The numbers of criteria per exit level outcome vary according to the requirements of the particular outcome. They are not indicators of the size of the outcome, but rather directives for assessors and providers on critical evidence of competence.

## Elective 1: Orthopaedic Nursing:

Associated Assessment Criteria for Exit Level Outcome 4:

- 4.1 Factors, which promote or threaten mobility are identified, assessed and addressed by conducting appropriate screening methods.
- 4.2 Musculo-skeletal health promotion, functioning, rehabilitation and illness prevention strategies are developed, implemented and evaluated in collaboration with other members of the orthopaedic health team.

Associated Assessment Criteria for Exit Level Outcome 5:

- 5.1 Critical understanding of current discourse in the field of orthopaedic nursing practice is demonstrated in the nursing care recommended and given.
- 5.2 A substantiated point of view regarding emerging issues and debates relevant to orthopaedic nursing is demonstrated through the applied nursing care.
- 5.3 Presentations on issues in the field reflect an understanding of the dynamic and tentative nature of most forms of knowledge.

Associated Assessment Criteria for Exit Level Outcome 6:

6.1 Assessments of orthopaedic patients are carried out through use of specialist techniques relevant to the client's orthopaedic health problem.

- Range:

- Ergonomic assessment.
- Bone scan.
- Bone marrow specimen collection.
- Haematological studies.
- Biochemical tests.
- Serological tests.
- Electromyography.

6.2 Advanced procedures of orthopaedic nursing as required by the client's condition are effectively implemented.

- Range:

- Application and removal of plaster of Paris.
- Application of tractions.
- Application of splints/orthotics.
- Use of special beds, lifters mattresses.
- All relevant assistive devices.

6.3 Patients with specific orthopaedic conditions are competently managed using various competencies as applicable to the specific orthopaedic health problem.

- Range:

- Arthritic conditions.
- Amputations.
- Para/quadruplegic conditions.
- Congenital and developmental deformities/abnormalities.
- Post-traumatic deformities.
- Exercise and sport related disorders.
- Neoplasms of the musculoskeletal system.
- Soft tissue injury.

6.4 Rehabilitation of people with new or established orthopaedic disability is promoted using evidence-based strategies.

6.5 Patients with orthopaedic problems or illnesses, referred from primary health care practitioners, are accepted and effectively managed.

6.6 Needs of orthopaedic patients and their families are championed through advocacy of the orthopaedic nurse.

## Elective 2: Operating Theatre:

### Associated Assessment Criteria for Exit Level Outcome 7:

7.1 Peri-operative factors that threaten the health of the patient are identified and evaluated through appropriate assessment methods.

7.2 Risk management strategies are developed, implemented and evaluated by assessing the overall health of peri- operative patients.

### Associated Assessment Criteria for Exit Level Outcome 8:

8.1 Appropriate theoretical frameworks in clinical practice are identified and integrated.

8.2 A substantiated point of view regarding emerging issues and debates relevant to operating theatre nursing is articulated.

8.3 The presentations of the learners on issues in the field reflect an understanding of the dynamic and tentative nature of specialist knowledge.

### Associated Assessment Criteria for Exit Level Outcome 9:

9.1 Assessment of peri-operative patients is carried out accurately according to the prescribed institutional protocols.

- Range: Pre-, intra- and post- operative.

9.2 Procedures associated with the role of a scrub nurse are competently implemented. These include but are not limited to:

- Preparing the theatre, instruments and equipment as well as medical and surgical sundries.
- Scrubbing, gowning and gloving.
- Preparing and setting up for the surgical intervention.
- Effective co-ordination of the surgical team.
- Timeous provision of all requirements during surgery through anticipation of needs.
- Transporting and/or moving patients.

9.3 Required procedures associated with assisting the anaesthetist are competently implemented.

9.4 Cultural sensitivity is demonstrated at all times, including, but not limited to:

- Patient assessment.
- Preparation for surgery.
- Disposal of any tissue.
- Preparing and assisting with all methods of anaesthesia.
- Anticipating special needs based on the condition of the patient.

9.5 Procedures associated with the care of the patient in the recovery room are competently implemented.

- Range:

- Identifying and managing complications.
- Managing pain.

9.6 The needs of clients are championed through advocacy by the operating theatre nurse.

9.7 Quality assurance activities are conducted regularly to ensure the quality of peri-operative services.

## Elective 3: Palliative and Oncology Nursing:

### Associated Assessment Criteria for Exit Level Outcome 10:

10.1 Factors, which cause malignant conditions, and those which encourage protection are identified and evaluated.

10.2 Cancer prevention strategies are developed, implemented and evaluated by assessing the overall health of the community, using, inter alia, screening and genetic counselling.

10.3 Cultural sensitivity is demonstrated in the assessment, process and documentation of oncology care by utilizing and comparing various cultural customs pertaining to chronic illness and dying.

Associated Assessment Criteria for Exit Level Outcome 11:

11.1 Appropriate theoretical frameworks are identified and integrated in theoretical and practical work.

11.2 A substantiated point of view regarding emerging issues and debates relevant to palliative care and oncology nursing is articulated.

11.3 The presentation on issues in the field reflects an understanding of the dynamic and tentative nature of specialised knowledge.

Associated Assessment Criteria for Exit Level Outcome 12:

12.1 Assessments of cancer patients whose care is complicated by bio-psycho-social or other factors are carried out accurately, through means such as:

- Pain assessment.
- General and specific side effects of treatment.
- Pre-treatment assessment.
- Client's response to life threatening illness.

12.2 Management of cancer treatment is carried out effectively using the following competencies:

- Life-threatening complications related to treatment are anticipated and identified.
- Safe handling and accurate administration of drugs.
- Maintenance of safe practice with regard to radiation therapy.
- Specialised counselling of clients undergoing treatment, reconstructive surgery and rehabilitation.

12.3 Quality assurance activities are regularly conducted to enhance quality oncology and palliative care services.

12.4 Needs of oncology and dying patients and their significant others are championed through advocacy by the oncology nurse.

Elective 4: Ophthalmic Nursing:

Associated Assessment Criteria for Exit Level Outcome 13:

13.1 Factors, which promote or threaten ophthalmological health are identified, addressed and evaluated by conducting appropriate assessment and management methods, e.g. ocular screening.

13.2 Ophthalmological health promotion and illness prevention strategies are developed, implemented and evaluated, e.g. eye care information.

Associated Assessment Criteria for Exit Level Outcome 14:

14.1 Appropriate theoretical frameworks are identified and integrated in theoretical and practical work.

14.2 Point of view regarding emerging issues and debates relevant to ophthalmic nursing is articulated and accurately substantiated.

14.3 The presentation on issues in the field reflects an understanding of the dynamic and tentative nature of specialist knowledge.

Associated Assessment Criteria for Exit Level Outcome 15:

15.1 Specialist procedures of ophthalmic treatment are competently implemented.

- Range:

- Emergency eye care.
- Removing foreign objects.
- Prescribing of corrective devices.
- Selected surgical procedures.
- Providing pharmacological information regarding the use of prescribed medication.

15.2 Rehabilitation of visually impaired clients is optimally implemented within real life settings, e.g:

- Activities of daily living.
- Coping with new environments.
- Using assistive devices.
- Accessing resources, e.g. special training for use of Braille.

15.3 Quality assurance activities are conducted regularly to enhance quality ophthalmic health services.

15.4 Needs of visually impaired clients are championed through advocacy by the ophthalmic nurse.

Elective 5: Emergency Nursing [Competent persons can be registered to practice - trauma nursing]:

Associated Assessment Criteria for Exit Level Outcome 16:

16.1 Patterns of emergencies prevalent in specific areas are identified and analysed.

16.2 Preventive strategies are planned, implemented and evaluated.

16.3 Cultural sensitivity of individuals and their families is demonstrated in the assessment, process and documentation of emergency care.

Associated Assessment Criteria for Exit Level Outcome 17:

17.1 Appropriate theoretical frameworks regarding the prevention and management of emergencies are identified and integrated in theoretical and practical work.

17.2 A substantiated point of view regarding emerging issues and debates relevant to emergency nursing is articulated.

17.3 The presentation on issues in the field reflects an understanding of the dynamic and tentative nature of specialised knowledge.

Associated Assessment Criteria for Exit Level Outcome 18:

18.1 Emergency situations and casualties/patients are accurately assessed.

- Range:

- Accident scene.
- Disaster scene.
- Primary and secondary survey.

18.2 Advanced procedures of emergency care are competently implemented.

- Range:

- Creating or ensuring a safe environment.
- Airway management.
- Breathing and circulation management.
- Injury management.
- Stabilization and transport of patients.

18.3 Complicated emergency cases are effectively managed using various competencies:

- Range:

- Assisting with and interpreting blood tests.
- Deep peritoneal lavage.

- Immobilization procedures.
  - Preparation and management of aero-medical events.
  - Management of specific poisoning.
  - Initiating pharmacological and technological measures to promote homeostasis.
- 18.4 Quality assurance activities are conducted to enhance quality of emergency services.
- 18.5 Needs of emergency clients are championed by advocacy.

**Elective 6: Occupational Health Nursing:**

**Associated Assessment Criteria for Exit Level Outcome 19:**

- 19.1 Policies and procedures appropriate for the protection of the health of both employees and community are analysed, developed and implemented.
- 19.2 Risk related and disaster management programmes appropriate for specific industry and hazards are developed in collaboration with essential interdisciplinary team members, including Occupational Hygienists, Toxicologists, Environmentalists, Safety and Ergonomic specialists.
- 19.3 Management of occupational health issues demonstrates a knowledge of legislation applicable to the occupational environment.
- 19.4 Health promotion programmes are based on a needs assessment and are relevant to and accepted by both the organisation and employees.
- 19.5 A realistic health campaign, such as, community safety; HIV/AIDS prevention, is planned and the plan presented for scrutiny.

**Associated Assessment Criteria for Exit Level Outcome 20:**

- 20.1 Theoretical frameworks, appropriate to the specific location, are identified and integrated in clinical practice.
- 20.2 A substantiated point of view regarding emerging issues and debates relevant to occupational health nursing is articulated.
- 20.3 The presentations of the learner on issues in the field reflect an understanding of the dynamic and tentative nature of knowledge.

**Associated Assessment Criteria for Exit Level Outcome 21:**

- 21.1 Specialist assessments relevant to practice are carried out and referred for further treatment where necessary.
- Range (Inter alia): Audiometry, lung function testing, vision testing, Electro-cardiography.
- 21.2 Differentially susceptible groups, and individuals vulnerable to risk are identified and their special needs in the occupational setting defined.
- Range: Reproductive health risk; genetic vulnerability with identified hazards.
- 21.3 Relative risk of hazards are identified and priorities in specific occupational contexts and appropriate management policies, recommended through tools such as workplace risk assessments.
- 21.4 A rehabilitation programme, relevant to the needs of specific clients or groups, is designed in terms of international standards for occupational injury or disease, and with the cooperation of the employer, and is applied with the assistance of the multidisciplinary health care team.

**Associated Assessment Criteria for Exit Level Outcome 22:**

- 22.1 A business plan to address specific occupational health service needs is developed and presented.
- 22.2 A private practice plan, in accordance with ethical and legal guidelines and business registration requirements, is developed and presented.
- Range: Tax laws and requirements; Labour requirements; equity issues and requirements; corporate governance.



### Elective 7: Nephrology:

#### Associated Assessment Criteria for Exit Level Outcome 23:

23.1 Factors, which promote or threaten renal health are identified, addressed and evaluated by conducting appropriate assessment methods.

23.2 Renal health promotion and illness prevention strategies are developed, implemented and evaluated by assessing the overall renal health care of the community.

23.3 Cultural sensitivity is demonstrated in the assessment of clients, canvassing of organ donors and counselling of transplant donors and recipients.

#### Associated Assessment Criteria for Exit Level Outcome 24:

24.1 Appropriate theoretical frameworks are identified and integrated in clinical practice.

24.2 A substantiated point of view regarding emerging issues and debates relevant to nephrology nursing is articulated.

24.3 The presentation of the learners on issues in the field reflects an understanding of the dynamic and tentative nature of specialised knowledge.

#### Associated Assessment Criteria for Exit Level Outcome 25:

25.1 Detailed assessments of renal function and the effects of renal failure on body systems are accurately carried out.

- Range:

- Initiating specific laboratory tests.
- History of transplantation and dialysis.
- Disease progression.
- Nutritional assessment.

25.2 All types of dialysis for children and adults are initiated timeously and maintained effectively using the following competencies:

- Specialist counselling about renal replacement, therapy and rehabilitation.
- Choosing and preparing apparatus.
- Initiating, maintaining and terminating dialysis.
- Providing pharmacotherapy.
- Managing complications.
- Providing water treatment.
- Sterilizing and maintaining apparatus and dialysers.
- Long term client management.
- Home-based treatment.

25.3 Paediatric and adult patients preparing for and undergoing kidney transplantations are competently managed using the following competencies:

- Donor selection.
- Pre-transplantation preparation.
- Organ procurement.
- Caring for immuno-suppressed patients.
- Identifying and dealing with post kidney transplant complications.
- Fluid and electrolyte management.
- Immediate and maintenance pharmacotherapy.
- Legal and ethical competence.

25.4 Quality assurance activities are conducted to enhance quality renal care, e.g. infection control.

25.5 Needs of renal patients are championed through advocacy by the specialist nephrology nurse.

### Elective 8: Paediatric Nursing:

**Associated Assessment Criteria for Exit Level Outcome 26:**

26.1 Assessments of the complex developmental and maturation statuses of children at physical, socio-emotional, intellectual and spiritual levels are carried out competently and confidently without unduly upsetting either the patient or parent.

- Range: Fine and gross motor coordination, hearing and sight capabilities and general behaviour.

26.2 Primary assessment of a child is carried out to identify less common childhood conditions.

26.3 Nursing assessment of ill children to identify basic needs is carried out and documented.

- Range: Hydration status; nutritional status; developmental status; presence and location of pain; presence and possible cause of anxiety; recognition of and meeting of attachment and safety needs.

**Associated Assessment Criteria for Exit Level Outcome 27:**

27.1 Appropriate theoretical frameworks are identified and integrated in theoretical and practical work.

27.2 Point of view regarding emerging issues and debates relevant to paediatric nursing is articulated and accurately substantiated.

27.3 The presentation of the learner on issues in the field reflects an understanding of the dynamic and tentative nature of knowledge.

**Associated Assessment Criteria for Exit Level Outcome 28:**

28.1 Planned evidence-based nursing care provided to children with various conditions is based on a comprehensive knowledge of anatomy, physiology and pathophysiology related to children; as well as genetics, embryology; congenital and inherited conditions, including complex pathological and/or differentially-abled conditions.

- Range:

- Conditions of the various body systems including, cardiac, respiratory, fluid and electrolyte, neurological etc.

- Children who require surgery including informed consent.

- Acute illness including dehydration, pyrexia, seizure disorders.

- Chronic illness.

- Palliative care.

- Child with special needs and disability.

- HIV/AIDS in neonates and children.

- Communicable diseases in children.

28.2 The quality of childcare practice is ensured in providing competent, family-centred care in child-particular care issues.

- Range:

- Injury and disease prevention including immunisation.

- Nutrition in children -feeding, food supplementation, weaning.

- Hospitalisation.

- Preparation for and positioning for invasive procedures.

- Gaining cooperation from a child.

- Limit setting and discipline.

- Transporting infants and children.

- Parental support, counselling and participation in care.

28.3 Knowledge of pharmacotherapy related to children, including specific dosages and drug interactions in children is demonstrated during the planned nursing of the child.

28.4 Familiarity with specialized procedures related to life support including cardio-pulmonary resuscitation and intra-osseous infusion is demonstrated in accordance with set procedures.

28.5 Quality assurance activities are conducted to enhance quality child and adolescent health services.

28.6 Needs of sick children and their families are championed through advocacy by the specialist paediatric nurse.

**Elective 9: Critical Care Nursing (Adult):**

**Associated Assessment Criteria for Exit Level Outcome 29:**

29.1 Principles of ventilation are maintained in the application of various modes of ventilation.

29.2 Technologically assisted assessment and support of the various organ systems in critically ill patients (adults and children) is accurately demonstrated.

• Range:

- Advanced monitoring techniques for all body systems.
- Evaluation of laboratory tests.
- Microbiological surveillance.
- Evaluation of diagnostic tests including electro-cardiogram and chest x-Ray.
- Evaluation of pain.

29.3 Specialized skills and knowledge in advanced life support and resuscitation techniques of both adult and child are correctly demonstrated.

29.4 Principles of renal replacement therapies are applied in the provision of nursing care to individuals with severe and life threatening renal health problems.

29.5 Understanding of the causes and pathophysiology of shock are demonstrated during the interventions of life support and resuscitation procedures.

**Associated Assessment Criteria for Exit Level Outcome 30:**

30.1 The risks of the technological environment are effectively managed and incidents prevented, to ensure a safe and therapeutic environment.

• Range:

- Correct use of equipment.
- Noise management.
- Sensory overload.
- Sensory deprivation.

30.2 Implementation of infection control measures is promoted in order to enhance the safety of the critical care environment.

30.3 The psychosocial, cultural and emotional needs of the critically ill patients and their families, (including patient rights and advocacy) are anticipated, identified and managed.

30.4 Informed contributions within a cohesive multi- disciplinary critical care team are clearly demonstrated.

30.5 Knowledge and skills for effective management of death, dying, and complex ethical issues, (e.g. withdrawal of therapy), within a high stress environment, are correctly developed and demonstrated.

30.6 Skills for the effective coaching, support and mentorship of members of the critical care team are demonstrated, and the importance thereof accurately explained.

**Associated Assessment Criteria for Exit Level Outcome 31:**

31.1 Theoretical frameworks that underpin critical care nursing practice are described and integrated into clinical practice.

31.2 Articulated points of view regarding emerging national and global issues and policies demonstrate in-depth and critical understanding of relevant discourses in critical care nurses.

31.3 Contributions on complex and controversial debates on critical care nursing issues reflect an appreciation of the dynamic and tentative nature of most human knowledge.

**Associated Assessment Criteria for Exit Level Outcome 32:**

32.1 In-depth knowledge of anatomy and physiology of the adult, including metabolic and biochemical processes of all body systems, is demonstrated during all interventions for - and interactions with - the patients.

32.2 Assessment of the critically ill and high-risk patient is conducted in an integrated manner and includes measures of physical, psychosocial emotional and spiritual needs.

32.3 Specialist nurse competences are utilized effectively and correctly in the assessment of the functioning of specific body systems in critically ill patients.

- Range:

- Cardiovascular System, including haemodynamic and cardiac monitoring.
- Respiratory System, including arterial blood gas analysis.
- Neurological System, including invasive intracranial pressure monitoring.
- Renal System, including acid-base balance.
- Metabolic/Endocrine System, including glycaemic control, sleep/rest cycles.
- Gastro-intestinal System, including nutritional assessment and elimination.
- Integumentary System, including the assessment of wounds.
- Haematological system, including coagulation studies.
- Evaluation of immune system.
- Assessment of pain and anxiety.

32.4 Laboratory results and special investigations and procedures are interpreted with the clinical interface, accurately recorded and correctly acted upon.

#### Associated Assessment Criteria for Exit Level Outcome 33:

33.1 An in-depth knowledge of the pathophysiological basis for compromised organ systems in critical illness is applied during the care of the critically ill adult.

33.2 An in-depth knowledge of the specialised care required by critically ill adult is demonstrated during evidence-based interventions in respect of the following.

- Airway management and respiratory support.
- Cardiac support, including pacemakers and intra-aortic balloon pumps (IABP).
- Haemodynamic support.
- Fluid therapy.
- Electrolyte imbalance.
- Acid base imbalance.
- Nutritional support.
- Endocrine and metabolic derangements.
- Pain management and sedation.
- Thermoregulation.
- Sepsis surveillance.
- Fundamental hygiene and comfort needs.

33.3 Competence in nursing management of patients who require critical care, (including promotive, preventive and rehabilitative measures) is demonstrated in terms of the following:

- Compromised cardio-vascular system (CVS) function:
  - Range: Acute coronary syndrome, valvular disease, cardio-thoracic surgery, vascular surgery.
- Compromised respiratory function e.g. acute respiratory failure, ventilator dependency, obstructive and restrictive disorders, and adult respiratory distress syndrome.
- Compromised neurological function e.g. head and spinal cord injuries, cerebro vascular accidents, neuromuscular disorders.
- Compromised renal function e.g. acute renal failure.
- Compromised endocrine function e.g. diabetic keto-acidosis.
- Compromised gastro-intestinal and hepatic function e.g. abdominal trauma, acute pancreatitis, severe GIT haemorrhage, liver failure.
- Compromised haematological function e.g. disseminated intra-vascular coagulopathy.
- Obstetric related illness e.g. haemolysis- elevated liver enzymes- low platelets (HELLP) syndrome.
- Compromised Immune system e.g. immunosuppressive therapy, infectious diseases, Human Immuno virus/Autoimmune deficiency syndrome (HIV/AIDS) related illnesses.

- Multisystem Disorders:
  - Range:
    - Multiple organ dysfunction syndrome.
    - Severe sepsis and related syndromes, including.
    - Systemic Inflammatory Response Syndrome.
    - Polytrauma.
    - Physiological shock - all types.
    - Acute Intoxications, including.
      - > Accidental poisoning.
      - > Recreational drug abuse.
      - > Intentional drug overdose.
      - > Burns.

33.4 A comprehensive knowledge of the pharmacotherapy (including pharmacodynamics and pharmacokinetics) of the various drugs used in the management of the critically ill adult is demonstrated in the actions taken by the learner.

Elective 10: Critical Care Nursing (Child and Adolescent):

Associated Assessment Criteria for Exit Level Outcome 34:

- 34.1 Principles of ventilation are maintained in the application of various modes of ventilation.
- 34.2 Technologically assisted assessment and support of the various organ systems in critically ill adolescents and children is accurately demonstrated:
- Range:
    - Advanced monitoring techniques for all body systems.
    - Evaluation of laboratory tests.
    - Microbiological surveillance.
    - Evaluation of diagnostic tests including electro-cardiograph and chest x-Rays.
    - Evaluation of pain.
- 34.3 Knowledge and application of specialized life support and resuscitation techniques of both adolescent and child is demonstrated.
- 34.4 Principles of renal replacement therapies are applied in the provision of nursing care to individuals with severe and life threatening renal health problems.
- 34.5 The causes and pathophysiology of shock are explained and demonstrated during the relevant interventions.

Associated Assessment Criteria for Exit Level Outcome 35:

- 35.1 The risks of the technological environment are effectively managed and prevented to ensure a safe environment (e.g. correct use of equipment, noise management, sensory overload and/or deprivation etc.).
- 35.2 Implementation of infection control measures is promoted in order to enhance the safety of the critical care environment.
- 35.3 The psychosocial, cultural and emotional needs of the critically ill patients and their families (including patient rights and advocacy) are anticipated identified and managed.
- 35.4 Knowledge and skills for effective management of death, dying, and complex ethical issues, (e.g. withdrawal of therapy), within a high stress environment are continuously developed and demonstrated.

Associated Assessment Criteria for Exit Level Outcome 36:

- 36.1 Theoretical frameworks that underpin critical care nursing practice are integrated into clinical practice.
- 36.2 Articulated points of view regarding emerging national and global issues and policies demonstrate in-depth and critical understanding of relevant discourses in critical care nurses.

36.3 Contributions on complex and controversial debates on critical care nursing issues reflect an appreciation of the dynamic and tentative nature of most human knowledge.

**Associated Assessment Criteria for Exit Level Outcome 37:**

37.1 Competence in the assessment of the physiological, emotional, psycho-social and spiritual needs of children with complex acute and chronic health conditions is demonstrated.

• **Range:**

- Vital indicators.
- Respiratory effort, including monitoring of pulse oximetry and arterial blood gases.
- Invasive and non invasive haemodynamic monitoring.
- Monitoring cardiac sufficiency and electrocardiography.
- Fluid and electrolyte monitoring.
- Age-appropriate neurological assessment, intracranial pressure monitoring and seizure activity.
- Hyper/hypoglycaemia.
- Assessment of pain and anxiety.
- Assessment of immune function.
- Thermodynamics.
- Comfort and sleep needs.
- Interpretation of laboratory results & clinical interface.

37.2 Comprehensive understanding of developmental challenges and responses of various age groups to life threatening or critical illness and ICU admission, including the responses of the parents and family is demonstrated.

**Associated Assessment Criteria for Exit Level Outcome 38:**

38.1 Specialist knowledge of anatomy and physiology of the newborn infant, including peri-natal challenges and the range of congenital and inherited (e.g. metabolic) conditions that result in medical emergency or high level care interventions is demonstrated and applied in the care of critically ill infants.

38.2 Specialist knowledge of the challenges of physiological and psychological maturation and development as these present in the current South African situation, including AIDS related illnesses, malnutrition and trauma, is demonstrated and applied.

38.3 Knowledge of advanced pathophysiology and insults of surgery, trauma and severe illness, especially as these present in children's immature systems is demonstrated and applied in the care of critically ill children.

- **Range:** Differing cardiac conditions such as congenital, infective (myocarditis), toxins (organophosphate poisoning) and rheumatic heart conditions.

**Associated Assessment Criteria for Exit Level Outcome 39:**

39.1 Competence in the monitoring and management of the care of critically ill and/or high-risk children and adolescents is demonstrated through performance of the following:

- Oxygenation, artificial airway and ventilation.
- Renal support in the regulation of fluid, acid-base and electrolyte balance.
- Pain and anxiety management.
- Metabolic and Nutritional support.
- Cardiac and circulatory support.
- Advanced life support.
- Thermoregulation.
- Comfort and prevention of injury.
- Sleep and rest needs.
- Parental and family stress responses and needs.

39.2 Competence is demonstrated in diagnostic reasoning, clinical decision-making and advanced therapeutic interventions for children and adolescents with.

- Range:
  - Complex and extended surgery including reconstructive surgery related to congenital conditions, cardiac surgery, neurosurgery, transplantation.
  - Multi-systems trauma e.g. burns, near drowning, child abuse and neglect.
  - Acute respiratory distress and failure e.g. caused by infective, obstructive congenital and inherited conditions.
  - Cardiac insufficiency e.g. caused by congenital, infective, toxic and rheumatic conditions, pulmonary hypertension.
  - Severe infections and care in immune compromised conditions, e.g. AIDS.
  - Gastrointestinal malabsorption and congenital anomalies, e.g. acute gastroenteritis, severe dehydration and necrotising enterocolitis.
  - Renal and hepatic insufficiency, e.g. congenital and infective causes, peri-operative and post transplant care.
  - Neurological conditions, e.g. head injuries, congenital, infective conditions and seizure disorders.
  - Perinatal adaptation challenges for the Neonate who requires surgery or perinatal intensive care unit (PICU) admission.
  - Psychiatric emergencies, including suicide attempts, delirium, acute confusion states, especially in adolescents.

39.3 The quality of child care practice while providing family-centred care is ensured with specific reference to child-particular care issues.

- Range:
  - Injury prevention.
  - Gaining compliance from the child.
  - Preparation for and positioning for procedures.
  - Limit setting and discipline.
  - Transporting infants and children.
  - Participative decision making and informed consent.
  - Parental participation in care and decision making.
  - Post Trauma responses.
  - Managing emotional and attachment disturbance in children.

39.4 An in-depth knowledge of pharmacotherapy and safe administration of drugs in children, including side effects, problems of dilution of drugs (especially volume of fluid administration), the different pharmacodynamics of drugs in different age groups (drug dose per kg may be different depending on age group) is demonstrated and applied.

#### Elective 11: Psychiatric Nursing:

##### Associated Assessment Criteria for Exit Level Outcome 40:

- 40.1 Factors, which promote or threaten mental health are identified, addressed and evaluated by conducting appropriate assessment methods.
- 40.2 Mental health promotion and illness prevention strategies are developed, implemented and evaluated, e.g. stigma prevention.
- 40.3 The psychosocial well being of the community is facilitated, promoted and maintained through community upliftment programmes.
- 40.4 Cultural sensitivity is demonstrated in the assessment, process and documentation of psychiatric nursing and mental health care by utilizing, understanding and comparing the various cultural customs pertaining to the practice of psychiatric nursing and mental health care.

##### Associated Assessment Criteria for Exit Level Outcome 41:

- 41.1 Appropriate theoretical frameworks are identified and integrated in theoretical and practical work.
- 41.2 A substantiated point of view regarding emerging issues and debates relevant to psychiatric nursing is articulated.

41.3 The presentation of the learners on issues in the field reflects an understanding of the dynamic and tentative nature of knowledge.

Associated Assessment Criteria for Exit Level Outcome 42:

42.1 Specialised mental health assessment instruments and techniques are utilized during assessment of patients with mental health or psychiatric illnesses.

42.2 Complicated cases are referred or competently managed using various competencies.

- Range:

- Develop, test and implement evidence-based high risk protocols.

- Personality disorders.

- Dual diagnosis.

- Uncommon conditions.

42.3 Specialist psychiatric nursing therapy is carried out by using a specific therapeutic method:

- Individual therapy.

- Play therapy (if specializing in child psychiatric nursing).

- Group therapy.

- Family/marital therapy.

42.4 Referrals from primary health care practitioners of patients with mental health problems or illnesses are accepted and effectively managed.

42.5 Quality assurance activities are conducted to enhance quality mental health practice and psychiatric nursing.

42.6 Needs of mental health clients and their significant others are championed through advocacy by the specialist psychiatric nurse.

Associated Assessment Criteria for Exit Level Outcome 43:

43.1 Complex health education needs are identified and addressed in the form of structured and unstructured mental health education.

43.2 Formal and in-service education programmes for psychiatric nurses and other team members to ensure best practice in mental health services are designed and presented.

43.3 Programmes for personal and professional growth of psychiatric nurses are presented on a continuous basis.

43.4 Evaluation of learners is carried out in a valid and reliable manner to ensure competent mental health practitioners.

Elective 12: Midwifery and Neonatal Nursing:

Associated Assessment Criteria for Exit Level Outcome 44:

44.1 Factors, which promote or threaten maternal and neonatal health are identified and evaluated by conducting appropriate assessment methods.

44.2 Through interrogating the overall reproductive health of the community, maternal and neonatal health promotion and illness prevention strategies are developed, implemented and evaluated.

44.3 Cultural sensitivity is demonstrated in the assessment, process and documentation of maternal and neonatal health care by utilization and comparing the various cultural customs pertaining to the practice of midwifery nursing and maternal health care.

Associated Assessment Criteria for Exit Level Outcome 45:

45.1 Appropriate theoretical frameworks are identified and integrated in theoretical and practical work.

45.2 A substantiated point of view regarding emerging issues and debates relevant to midwifery nursing is articulated.



45.3 The presentation of the learners on issues in the field reflects an understanding of the dynamic and tentative nature of knowledge.

Associated Assessment Criteria for Exit Level Outcome 46:

46.1 Assessments of mothers and neonates complicated by psychosocial, physical, service related or other factors are accurately carried out.

46.2 Specialized procedures of reproductive health are competently implemented.

- Range:

- STD Management.
- Family planning.
- Prescribe or administer specific medication.
- Internal foetal monitoring.

46.3 Complicated cases at ante-, intra- and postnatal stages are referred or competently managed using the following competencies.

- Range:

- Development, testing and implementation of evidence-based high risk protocols.
- Assisted delivery.
- Resuscitation of the neonate.
- Assisting with operating theatre procedures.

46.4 Referrals from primary health care practitioners of patients with midwifery problems or illnesses are accepted and effectively managed.

46.5 Quality assurance activities are conducted to enhance reproductive services.

46.6 Needs of mothers and neonates with high risk pregnancy and/or deliveries are championed by advocacy.

Elective 13: Community Health Nursing:

Associated Assessment Criteria for Exit Level Outcome 47:

47.1 Factors, which promote or threaten public health are identified and evaluated by means of:

- Epidemiological surveys.
- Population based studies.
- Participatory research.

47.2 Public prevention strategies are developed, implemented and monitored against specific indicators and factors.

47.3 Cultural sensitivity is demonstrated during interaction with team members and communities.

Associated Assessment Criteria for Exit Level Outcome 48:

48.1 Appropriate theoretical frameworks are identified and integrated in theoretical and practical work.

48.2 A substantiated point of view regarding emerging issues and debates relevant to public health nursing is articulated.

48.3 The presentation by the learners on issues in the field reflects an understanding of the dynamic and tentative nature of knowledge.

Associated Assessment Criteria for Exit Level Outcome 49:

49.1 Complex public health issues are applicably referred or effectively managed, within a multi-disciplinary team approach. The following competencies are demonstrated:

- The development, testing and implementation of evidence based protocol.
- Environmentally focused strategies.
- Health behaviour strategies.

- Project/programme planning, implementation and evaluation, according to specific population group needs.
  - Human resource analyses and plans.
- 49.2 Supportive environments are promoted through targeted strategies addressing specific needs.
- 49.3 Quality assurance activities are conducted to enhance quality public health service.
- 49.4 Public health needs are made visible through advocacy by the community health nurse.
- 49.5 Epidemiological principles are applied in developing strategies to meet those needs.

Associated Assessment Criteria for Exit Level Outcome 50:

50.1 Principles and theories of causal analysis, conditional, individual and collective relationships, genetic and environmental factors, and their inter-relationships are identified and analysed in order to establish a population-based diagnosis of health status and disease burden.

50.2 Epidemiological principles and methods of the natural history (course and outcome) of identified problems are applied, in order to support preventative and clinical strategies and influence behaviour and lifestyle changes in population wellness promotion.

50.3 Appropriate and implementable control strategies for the management and prioritization of identified chronic, communicable and social pathologies are developed:

- Range includes but not limited to:

- HIV/AIDS.
- Tuberculosis.
- Carcinoma.
- Heart Disease.
- Violence in all situations.

Elective 14: Nursing and Health Services Management:

Associated Assessment Criteria for Exit Level Outcome 51:

51.1 Management of a health care system reflects the application of the management process.

51.2 Evidence based practice indicates that work related behaviour is grounded in the management processes.

Associated Assessment Criteria for Exit Level Outcome 52:

52.1 Management and leadership theories/models are critically analysed and compared.

52.2 The choice of appropriate management and leadership theories relevant to a particular context are identified, implemented and combined with insight into the clinical realities.

52.3 Analysis and interpretation of management research reports (quantitative and qualitative) provides evidence of comprehensive and systematic understanding of data collection techniques, data analysis procedures and principles and the current scholarly discourse in management.

Associated Assessment Criteria for Exit Level Outcome 53:

53.1 The principles of organizing are applied to ensure the achievement of objectives in the defined health care service.

53.2 Essential resources to implement managerial plans or programmes are mobilised within and outside the health care system through effective networking and access to grants.

53.3 Critical thinking, problem solving and decision-making skills are applied to optimize the organisation and functioning of the defined health care service.

Associated Assessment Criteria for Exit Level Outcome 54:

54.1 The quality control criteria for management and performance applicable to the service are selected and applied to improve the quality of the management and service delivery of the defined service.

54.2 Professional excellence and competence is maintained through continuing education and life long learning.

Associated Assessment Criteria for Exit Level Outcome 55:

55.1 Planning and provision of human resources is executed within the relevant legislation and policy guidelines.

55.2 Maintenance of human resources is undertaken by taking cognizance of personal and professional needs.

55.3 Effective utilisation of human resources is ensured by means of correct placement and appropriate skill application.

55.4 Assessment and development of human resources is undertaken on a continuous basis, in line with needs.

Associated Assessment Criteria for Exit Level Outcome 56:

56.1 The vision, mission, generally accepted practices (GAP) analysis, objectives and action plans are developed on the basis of an assessment.

56.2 The strategic plan developed and implemented promotes the likely achievement of organisational goals.

56.3 The organisational structure designed for the defined service is appropriate to needs and plans. Plans for implementation are realistic and coherent.

56.4 Applicable policies and procedures are formulated to address the implementation of the action plan.

56.5 The human resource plan includes task analyses, job descriptions, personal and professional development plans, as well as a skills development plan.

56.6 A customer care plan incorporates all the relevant stake holders.

56.7 Information and quality management programmes developed are consistent with needs, explained to stakeholders, and implemented in accordance with planning.

56.8 An industrial relations policy and plan is developed and implemented for the health care service.

56.9 The financial plan developed includes capital, operational and human resource budgets facilitating cost effective, quality patient care.

Associated Assessment Criteria for Exit Level Outcome 57:

57.1 The performance appraisal system developed and implemented contains appropriate measures to determine productivity. The system is handled effectively.

57.2 Customer and stakeholder satisfaction is determined through appropriate measures and rectified where necessary.

57.3 Trends identified by means of the information system accurately reflect the performance within the defined service.

57.4 A meta-assessment of the evaluation process is performed.

Associated Assessment Criteria for Exit Level Outcome 58:

58.1 Knowledge and understanding of a health care organisation as a business and the implementation of general management principles are demonstrated in line with accepted business principles.

58.2 The functional management of marketing and public relations within a health care service context is applied in line with accepted marketing and public relations principles.

58.3 The financial function of a health care unit as a business, in terms of asset management, financial decisions, operations management, purchasing functions and activities, and the provision of human resources, are applied in line with accepted business principles.

58.4 Contemporary health care management issues such as absenteeism and high turnover rates, extreme staff shortages, private practice, diverse health environments and commissioning of a health service are critically analysed.

OR:

Associated Assessment Criteria for Exit Level Outcome 59:

59.1 An understanding of the nature, content, and scope of public health is accurately demonstrated.

59.2 The typical clients and the available resources of public health, welfare and housing services in South Africa are accurately described.

59.3 The provision and organisation of public services are critically analysed.

59.4 The interrelationship between management of public service provision, power and public functions are discussed.

Elective 15: Nursing Education:

Associated Assessment Criteria for Exit Level Outcome 60:

60.1 Critical analysis of adult development, learning (cognitive, behavioural, social, transformative and experiential) and motivation theories shows comprehensive understanding of a range of aspects including, conceptualisations of knowledge, teaching, learning, basic assumptions, and andragogical implications for nursing and midwifery education and is valid in accordance to current discourses about teaching/learning in professional education.

60.2 Teaching practice in nursing and midwifery is based on understanding of adult development, learning and motivation theories as evidenced by the creation and maintenance of an active learning environment and thus allowing learners space to question their meaning perspectives about health and illness.

Associated Assessment Criteria for Exit Level Outcome 61:

61.1 Critical analysis and synthesis of the philosophical basis of nursing is based on recognized contemporary nursing theories and models and is relevant to the current socio-political context of nursing practice.

61.2 Analysis of nursing and midwifery decisions is supported by a particular model or theory of nursing and takes into consideration the legal and ethical frameworks of nursing practice as well as the socio-political, economic and cultural context in which such decisions have to be made.

61.3 Critical analysis of educational philosophy with regard to its implications for nursing and midwifery education is in accordance with rules of consensual validation.

61.4 Inferences on the implications of educational theory on teaching nursing and midwifery are based on comprehensive analysis of the current discourses on the nature and purpose of professional education.

61.5 Critical analysis, synthesis and independent evaluation of global policies and issues impacting on nursing and midwifery education is supported by an extensive and integrated review of literature and current research on such issues, e.g., managing diversity in the learning environment, globalization and the nursing workforce, global health, RPL.

Associated Assessment Criteria for Exit Level Outcome 62:

62.1 A coherent and critical understanding of the importance of congruency between expected learning outcomes and the teaching/learning process supports evaluation of various teaching

strategies with regard to their effectiveness in facilitating deep and self-directed learning in clinical and classroom setting.

62.2 Teaching plans and implementation thereof, place emphasis on collaborative learning, learner needs and differences, development of self-directed learning, inquiring minds, as well as the complexity and unpredictability of clinical learning environments.

62.3 Identification, selection and combinations of assessment approaches and strategies is based on a coherent and logical understanding of the requirements of applied competence and integrated assessment and meets the criteria for credible, trustworthy, feasible, and valid assessment.

62.4 Assessment of clinical learning in particular is largely undertaken in a real-world practice environment where appropriate, and/or simulated clinical learning environments are utilized.

62.5 Competence according to the current required assessment criteria for assessor accreditation is proven in terms of requirements.

62.6 Teaching expertise is evident in the identified areas of research as well as application of best-practice evidence in nursing and midwifery education.

#### Associated Assessment Criteria for Exit Level Outcome 63:

63.1 Critical analysis of curriculum development theory and models includes philosophical underpinnings, and implications thereof for the curriculum development process in nursing and midwifery education.

63.2 The curriculum, designed in collaboration with peers, is comprehensive and includes all the steps of curriculum development as verifiable with any standard curriculum development text in nursing and midwifery education.

63.3 The designed curriculum is appropriate in terms of SANC guidelines and regulations for a particular programme of nursing and/or midwifery, SAQA requirements and current national health policies on human resource development for health.

#### Associated Assessment Criteria for Exit Level Outcome 64:

64.1 Approaches and theories of educational management are interrogated and critically analysed in terms of their applicability and relevance to managing nursing education institutions within the context of the current situation in nursing education in South Africa with regard to governance, programmes, financing and provision.

64.2 Analysis of the current situation in nursing and midwifery education evidences a comprehensive and reflective understanding of the implications of the dual systems of governance and provision of nursing education for coherent programming and financing of nursing education.

64.3 Evaluation of a nursing education institution's quality management system shows a broad understanding of principles and aims of institutional quality management systems in higher education in South Africa and globally, with specific reference to the requirements of the relevant ETQA for quality improvement and assurance.

#### Elective 16: Family Nursing:

#### Associated Assessment Criteria for Exit Level Outcome 65:

65.1 Individual, family and community factors that influence and threaten the health of the patient are identified and evaluated through appropriate methodology.

65.2 Risk management strategies are developed, implemented and evaluated by assessing the overall health of individuals and families.

65.3 Facilitation and coordination of clinical care provides leadership.

#### Associated Assessment Criteria for Exit Level Outcome 66:

66.1 Appropriate theoretical frameworks are identified and integrated in clinical practice.

66.2 A substantial point of view regarding emerging issues and debates relevant to family nursing is articulated.

66.3 The presentations of the learners on issues in the field reflect an understanding of the dynamic and tentative nature of specialist knowledge.

- Range: Evaluate research findings; analyse useful new knowledge; integrate research findings into practice; interpret research, pharmacology, pathophysiology of illnesses affecting all systems of the body; evidence based practice.

Associated Assessment Criteria for Exit Level Outcome 67:

67.1 Advanced health assessment of patients is carried out accurately (history taking, assessment, differential diagnosis).

- Range:

- Individual assessment; physical; cardio-vascular; respiratory; ear, nose & throat; ophthalmic; gastro intestinal; renal; reproductive; endocrine; muscular-skeletal; abdominal; dermatology; neurological and mental health assessment.

- Health assessment is conducted on a sound understanding of pathophysiology, determinants of health (social, cultural, political, economic, psycho-social, family and community dynamics), epidemiology and biostatistics.

67.2 Procedures associated with the role of a family practitioner are competently implemented. These include but are not limited to:

- Physical assessment/examination of all systems.

- Conduct/order and interpret investigations relevant for primary health care settings.

- Range: Biochemical; haematological; microbiological; pharmacological.

- Order, read and interpret x-rays and sonars.

- Perform and interpret ECG.

- Carry out emergency procedures relevant for a primary care setting.

- Range: Life support; management of ingestion of poisons and exposure to hazardous chemicals and body fluids; prophylaxis.

67.3 Final clinical diagnosis, for health problems managed in a primary health care setting, is accurate and according to standards.

67.4 A range of specialised care, treatment and services are provided according to established nursing standards:

- Case management.

- Health & risk surveillance.

- Teaching, counselling & advocacy.

- Communication, networking, referral and follow-up.

- Treatment adherence.

- Prescription of non-pharmacological and pharmacological treatment based on advanced pharmaco-therapeutic knowledge in accordance with professional prescripts.

67.5 Continuity of care in a primary care setting is maintained by means of consultation, conferring, referring, acceptance of referrals and collaboration with relevant members of the health care team.

67.6 The special health needs of individuals; families and communities are championed through advocacy by the family practitioner.

67.7 Quality assurance activities are conducted regularly to ensure the quality of primary care services.

Assessment Criteria:

For award of the whole qualification, candidates must achieve the required number of credits as specified in the rules of combination in point 11 as well as the criteria specified for the elective specialisations and accompanying exit level outcomes in point 12 above.

Integrated Assessment:

The South African Nursing Council (SANC) guidelines for assessment, and the competency framework are used as a reference for assessing clinical competence.

**Formative:**

A variety of assessment strategies and approaches must be used. This could include tests, assignments, projects, demonstrations or clinical assessments and/or any applicable method. Formative assessments can include a mix of simulated and actual (real) clinical practice or care settings.

Work Based learning hours under the supervision of a unit manager and registered nurse, are not credit earning hours but are important to become truly skilled as learners during clinical placement in health services. Work placement allows for the practicing of work/professional roles and competencies to a safe level under the supervision of unit managers or registered nurses. The required number hours and nature work-based learning are clearly stipulated by the SANC for each nursing specialization.

There are an additional 300 work based learning (non-credit bearing), indirectly supervised, essential to licensing to practice as a specialist nurse.

**Summative:**

Summative assessment can take the form of oral, written and practical examinations as agreed to by the relevant ETQA or ETQA that has a Memorandum of Understanding in place with the relevant ETQA. All summative practical assessments must be conducted in actual clinical practice or care settings.

Assessment should take place within the context of:

- Given Quality Assurance policies, procedures and processes.
- A guided and supported learning environment.

There will be some areas of specialisation where people will need a license to practice. These will be specified in regulations issued by the SANC.

**Assessment principles:**

Assessment should be in accordance with the following general and specific principles:

- The initial assessment activities should focus on gathering evidence in terms of the main outcomes expressed in the exit level outcomes within each specialisation area to ensure assessment is integrated rather than fragmented. Where assessment at outcome level is unmanageable, then the assessment can focus on each specific outcome, or groups of specific outcomes. Take special note of the need for integrated assessment.
- Evidence must be gathered across the entire range specified in each unit standard, as applicable. Assessment activities should be as close to the real performance as possible, and where simulations or role-plays are used, there should be supporting evidence to prove that the candidate is able to perform in the real situation.
- All assessments should be conducted in accordance with the following universally accepted principles of assessment:
  - Use appropriate, fair and manageable methods that are integrated into real work-related or learning situations.
  - Judge evidence on the basis of its validity, currency, authenticity and sufficiency.
  - Ensure assessment processes are systematic, open and consistent.

### **INTERNATIONAL COMPARABILITY**

Attempts to benchmark South African nursing practice have seen a review of international best practice, as well as best practice on the African continent. The quality and scope of South African qualifications is endorsed by the fact that most 1st world countries readily accept South African nursing qualifications, and the UK, USA, New Zealand, Australia, Canada, Holland, and the UAE are keen to employ South African nurses. South African nursing standards exceed those in comparable economies such as Brazil, Indonesia, and India. In Africa, South Africa accepts nursing qualifications from Botswana, Swaziland, Tanzania, Namibia (which has only a diploma at present, although they are moving towards a degree in nursing), Zimbabwe and Zambia. These nations, in turn, accept South African qualifications.

South Africa is a longstanding and active member of the International Council for Nursing (ICN) as well as the International Labour Organisation (ILO), member of the African Union (AU), formerly the Organisation of African Unity (AOU), Southern African Development Community (SADC) and the Commonwealth. The proposed qualification would meet recognition requirements in most of the member countries of these organisations and throughout Sub-Saharan Africa.

In all these countries, nursing qualifications are similar in terms of content and duration. This qualification compares favourably with others at this level across all member countries of the ICN and AU where this qualification is offered.

These areas are all used in SA hospitals and work.

This qualification is recognised for specialised clinical practice in the UK, Canada, Australia, and NZ and the UAE; and 3rd world countries including Botswana, Swaziland, Tanzania, Namibia, Zimbabwe and Zambia.

#### **Review of the Scope of Practice in South Africa:**

The Review of the Scope of Practice of Nursing and the profession of nursing began in 1999 when the South African Nursing Council prioritised the need to revise the scope of practice. The factors that influenced the review of the scope of practice was a changing health care system identified in the White Paper for the Transformation of Health and the changes in education system brought about by the National Qualifications Framework and the South African Qualifications Act.

The purpose of the review is to align the practice of nursing to the changes in the national health policy and the legislative framework. Purpose includes:

- Ensure that nursing practice is in keeping with and is responsive to a changing health care delivery system.
- Develop a scope for nursing practice that is informed by the core competencies required for nursing practice.
- Review the scope applicable to different categories of nurse to ensure that each category of nurse is enabled to practice independently within their scope.
- The new scope of practice and the competencies required for nursing practice will then inform the education and training of nurses required for such practice. This will assist in facilitating the development of a framework for a single unitary education pathway for nursing qualifications that is in line with the principles of the National Qualifications Framework.

#### **Areas included in the scope for specialist nurses:**

- Orthopaedic Nursing.
- Operating Theatre Nursing.
- Palliative and Oncology Nursing.



- Ophthalmic Nursing.
- Emergency Nursing.
- Occupational Health Nursing.
- Nephrology Nursing.
- Paediatric Nursing.
- Critical Care Nursing (Adult).
- Critical Care Nursing (Child and Adolescent).
- Psychiatric Nursing.
- Midwifery and Neonatal Nursing.
- Community Health Nursing.
- Nursing and Health Services Management.
- Nursing Education.
- Family nurse practitioner.

#### Challenges facing Nursing Education:

The changes in both the health care system and the education system has created numerous challenges for nursing education and training and some of these challenges are:

- Promoting and maintaining a caring ethos within the nursing profession.
- Ensuring National Health Priorities are addressed in all nursing education programmes.
- Creation of a cadre of nurses who are lifelong learners and critical thinkers.
- Promote the ability in every nurse to evaluate and assure quality in this/her practice.
- Access to Nursing Education by learners is limited due to the slow implementation of the National Qualifications Framework in the Health Sector.
- Selection and recruitment criteria in many instances remain restrictive limiting access to nursing qualifications.
- The distinct nursing qualifications for each category of nurse is not in keeping with the NQF principles and thereby limiting access to higher education training opportunities for existing enrolled & auxiliary nurses.
- Recognition of Prior Learning (RPL) as a selection criterion is not widely applied because RPL assessment is complex, costly and there is a general lack of knowledge on how to give recognition to prior learning.

#### Challenges facing the profession:

South Africa requires nurses that are comprehensively trained to provide nursing care in various contexts (Primary health care, institutional/hospitals, midwifery and mental health settings) and in both rural and urban setting. To ensure that these professionals are adequately supported, and that the quality of nursing care delivery is continuously monitored and improved, increasing numbers of specialist nurses are required in clinical practice.

#### Conclusion:

An examination of the Scope of Practice, as well as those in operation in ICN signatory countries, clearly indicates the alignment of this proposed qualification with international practice.

#### **ARTICULATION OPTIONS**

This qualification-the Masters Certificate: Nursing-articulates vertically with the Master's Degree: Nursing at NQF Level 8 and the PhD in nursing at NQF Level 8+, or Masters Degrees in the health and social sciences, as determined by the provider. (Must have the research component before moving to the doctorate). Horizontal articulation would include any other Level 8 Post Graduate Certificate.

The following shows the location of this qualification in terms of other possible qualifications within the field:

- Level 1: GETC: Ancillary Health.
- Level 2: NC: Fundamental Ancillary Health.
- Level 3: NC: Auxiliary Nursing; NC: Community Health Work; NC: Health Sciences and Social Services.
- Level 4: FETC: Nursing; FETC: Community Health Work; NC: Health Sciences and Social Services.
- Level 5: Diploma: Nursing: Mental Health; Diploma: Nursing: Community Health; NC: Community Health Facilitator Training.
- Level 5: National Diploma: Nursing (leads to PD); Various: health/allied health sciences; Various: research/teaching/education/management.
- Level 7: PD: Nursing; Social sciences (social work; health/social services; C&YCW; Probation.
- Level 8: Masters Certificate: Nursing.
- Level 8: Masters Degree: Nursing.
- Level 8+: PhD: Nursing.

Learners might move horizontally into a number of other health specialist areas (such as: clinical technology; social sciences; epidemiology; public health); and other similar qualifications within nursing itself.

Learners can move vertically by using this qualification as the basis for any of the qualifications indicated at NQF Level 8 and above.

Structure of the qualification:

The following provides an overview of the qualification with different possible elective components [at present these constitute 16 separate qualifications]. It outlines the Fundamental, Core and Elective components, and indicates the way in which Exit Level Outcomes are assigned. It further indicates the credit values for each category.

Fundamental Component: Conduct research:

- Exit Level Outcomes 1, 2, 3.
- NQF Level 7.
- Credits: 15.
- Total Credits: 15.

Core Component:

- Exit Level Outcomes 1, 2, 3.
- NQF Level 8.
- Credits: 16 each.
- Total Credits: 48.

Elective Components:

Elective 1: Orthopaedic Nursing:

- Exit Level Outcomes 4, 5, 6.
- NQF Level 8.
- Total Credits: 80 minimum.

Elective 2: Operating Theatre:

- Exit Level Outcomes 7, 8, 9.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 3: Palliative and Oncology Nursing:**

- Exit Level Outcomes 10, 11, 12.
- NQF Level 8.
- Total Credits 80 minimum.

**Elective 4: Ophthalmic Nursing:**

- Exit Level Outcomes 13, 14, 15.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 5: Emergency Nursing [Competent persons can be registered to practice-trauma nursing]:**

- Exit Level Outcomes 16, 17, 18.
- NQF Level 8.
- Total Credits 80 minimum.

**Elective 6: Occupational Health Nursing:**

- Exit Level Outcomes 19, 20, 21, 22.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 7: Nephrology:**

- Exit Level Outcomes 23, 24, 25.
- NQF Level 8.
- Total Credits 80 minimum.

**Elective 8: Paediatric Nursing:**

- Exit Level Outcomes 26, 27, 28.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 9: Critical Care Nursing (Adult):**

- Exit Level Outcomes 29, 30, 31, 32, 33.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 10: Critical Care Nursing (Child and Adolescent):**

- Exit Level Outcomes 34, 35, 36, 37, 38, 39.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 11: Psychiatric Nursing:**

- Exit Level Outcomes 40, 41, 42, 43.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 12: Midwifery and Neonatal Nursing:**

- Exit Level Outcomes 44, 45, 46.
- NQF Level 8.
- Total Credits: 80 minimum.

**Elective 13: Community Health Nursing:**

- Exit Level Outcomes 47, 48, 49, 50.
- NQF Level 8.

- Total Credits: 80 minimum.

Elective 14: Nursing and Health Services Management:

- Exit Level Outcomes 51, 52, 53, 54, 55, 56, 57, 58, 59.
- NQF Level 8.
- Total Credits: 80 minimum.

Elective 15: Nursing Education:

- Exit Level Outcomes 60, 61, 62, 63, 64.
- NQF Level 8.
- Total Credits: 80 minimum.

Elective 16: Family Nursing:

- Exit Level Outcomes 65, 66, 67.
- NQF Level 8.
- Total Credits: 80 minimum.

### **MODERATION OPTIONS**

- This qualification can only be offered by a higher education and training provider as determined by the Higher Education Act. Providers must be accredited (to provide this qualification) by the relevant ETQA and meet requirements of the Nursing Act and the SANC.
- The provider must have the required clinical facilities to meet the clinical requirements of the qualification as approved by the SANC.
- Moderation of assessment will be overseen by the relevant ETQA according to moderation principles and the agreed ETQA procedures.
- Moderation is to be conducted by both internal and external moderators. Internal moderators are to be appointed by the provider. External moderation will be conducted by the ETQA for nursing and midwifery and external moderators appointed by the provider. Both internal and external moderators must be in possession of an appropriate qualification at NQF Level 8 or equivalent. Moderation must meet the requirements of the SANC.
- In order to be registered to practice as a Specialist Nurse, the learner will have to comply with the requirements set by the SANC and the legislative framework.

### **CRITERIA FOR THE REGISTRATION OF ASSESSORS**

Criteria for Assessors:

- Assessors must be registered by the relevant ETQA or ETQA that has a Memorandum of Understanding in place with the relevant ETQA.
- Assessors must have relevant clinical practice expertise and must be appointed by the provider.
- They must be in possession of a relevant postgraduate qualification at NQF Level 8 and/or above.
- The Assessor must be a person currently registered with SANC as a nurse (general, community, psychiatric) and midwife, as determined by the particular exit level outcome.

### **NOTES**

N/A

### **UNIT STANDARDS**

***This qualification is not based on Unit Standards.***