

guidelines for courses leading to registration on different parts of the register.

(i) Pre-registration education 1984 - 1995

**1985 - 1985/62/ERDB** Guidelines for the course in sick childrens nursing leading to registration in Part 8 of the professional register (Appendix 8).

From the early 1980s the most common route for nurses to gain registration in Part 8 of the Register was through undertaking a further registration programme, following their original RGN programme. This second registration was 53 weeks exclusive of holiday. The guidelines state:

“There are major and important differences between providing nursing care for children and for adults. Firstly, it must be accepted that children are children before they are patients and that their care must be provided within an appropriate environment and in a suitable style; secondly, that ill health and/or separation from home may adversely affect growth and development. A course leading to registration in part 8 of the professional register shall reflect this philosophy and encompass the competencies set out in Rule 18 (1) of the Nurses, Midwives and Health Visitors Approval Order, 1983.”

No specific academic level of achievement was required by these programmes.

**1987/38/RMHLV** - Guidelines for the 52 week programme in sick childrens nursing leading to admission to Part 8 of the Professional Register for Enrolled Nurses (General) who have successfully completed ENB course 426 “Paediatric Nursing for Enrolled Nurses” (Appendix 9).

The purpose of this programme was to:

“Enable the student to achieve the competencies stated in Rule 18 (1) of the Nurses, Midwives and Health Visitors Approval order 1983 in relation to paediatric nursing

Change the professional focus of the student

Develop existing knowledge and widen theoretical basis

Be based on ENB 1985(62) ERDB Guidelines for the course in sick children's nursing leading to registration in Part 8 of the register".

**1988/12/RMHLV** - Guidelines for the part-time course for mature Registered General Nurses leading to admission to Part 8 (RSCN) of the Register" (Appendix 10). These guidelines were in response to the Board's concern "about the lack in paediatric units of sufficient numbers of Registered Sick Children's Nurses who are required for the supervision of learner nurses gaining experience in these units and for the provision of appropriate nursing care for children".

**1988 ENB Circular 1988/53/RMHLV** - Supervision of students gaining nursing experience in children's wards (Appendix 11). The circular states:

"The Board has agreed that as from 1995 it will become a requirement, in children' wards where student nurses are gaining nursing experience, for the nursing team to be led and the students supervised by a Registered Sick Childrens Nurse at all times."

**1989/26/RMHLV** - Guidelines for the shortened course for Registered General Nurses with experience in paediatric nursing leading to admission to Part 8 of the register (RSCN) (Appendix 12). This course was to:

"enable Registered General Nurses who have had a minimum of three years full time or equivalent part time experience within the preceding six years in a position of responsibility providing direct care of sick children to become Registered Sick Childrens Nurses".

The course was 26 weeks in length.

**1989 The Nurses, Midwives and Health Visitors (Registered Fever Nurses Amendment and Training Amendment Rules) Approval Order** - This Order established an 18 month common foundation programme followed by an 18 month branch programme, leading to four new parts of the Register including:

Nurses educated in the care of adults, Part 12 of the Register (RN (Adult)).

Nurses educated in the care of children, Part 15 of the Register (RN (Child)).

Routes to Part 8 (RSCN) continued to be offered as a second registration.

**UKCC Circular - PS&D/89/04(B) UKCC requirements for the content of Project 2000 programmes** (Appendix 13). As the body charged with setting the standards for education and training the UKCC issued the requirements for the new Project 2000 programmes. The Circular states:

“The council has determined that the standard of the Project 2000 programmes should be that of a higher education diploma”.

“In general terms, Common Foundation Programme should prepare the student of nursing to demonstrate: knowledge of the core subjects to a specified standard; application of core knowledge and skills during supervised and specified experience in practice settings related to patients and clients of different age, gender, class, disability, race, culture and creed in a variety of settings, with individuals, families, groups and communities; the development of problem solving, communication, observational caring and assessment skills and the application of these to responsible decision making”.

**“A Branch Programme** should be directed to a specific area of nursing practice, ie the adult, the child, persons with mental handicap or mental health. Each should include appropriate material on legislative and administrative aspects, and develop previous learning in social, behavioural and applied sciences and apply this to the specific area of

practice in a variety of settings with individuals, families, groups, cultures and communities”.

**Adult Nursing Branch (Part 12) Learning** in this branch should be designed to enable the student to assess, plan, implement and evaluate, across any health care setting, the nursing care of those persons over the age of sixteen, with an acute or chronic physical illness which impairs their psycho-social functioning.

**Nursing:** theoretical frameworks of health, health promotion, prevention of ill health; models of nursing, priority setting and acute intervention, technical and physical skills, care in a variety of settings; priority setting and long term support/rehabilitation in a variety of settings; continuing care.

**Children’s Nursing Branch (Part 15) Learning** in this branch should be designed to enable the student to assess, plan, implement and evaluate the nursing care needs of the child within the family. The nurse of the child will also need to be able to address issues of health promotion as well as sickness, in order for each child to reach its full developmental potential.

**Nursing:** theoretical frameworks - use of models of nursing with the child and family, framework of health and illness in children; health promotion, prevention of ill health, development of physical psychosocial potential of children; priority setting, technical and physical skills adapted to meet the maturational needs of children, provide nursing in a variety of settings; priority setting, family support systems, setting maturational goals and programmes to develop full potential; continuing care.”

At the same time as the “Project 2000” (Dip HE) programmes were being developed the integration of schools of nursing into institutions was beginning. A number of Child branches were being developed and approved at first degree level.

**Extract from ENB 1989 P2000 - A new preparation for practice: Guidelines and criteria for course development** (Appendix 14). For the Branch programme in nursing the child, the aims are to:

“ prepare the students to be competent professional practitioners capable of making specific nursing interventions to enhance the health and well-being of children, 0-16 years at all stages of dependency in a variety of institutional and non-institutional settings and to be accountable for their actions.”

**1990/11/RMHLV** -Regulations and guidelines for shortened and degree course of preparation leading to parts 12, 13, 14 and 15 of the professional register (Appendix 15). This Circular sets out the requirements for students of nursing wishing to undertake a further first level registration programme leading to the newer parts of the register. This was to be a programme of “not less than one year”. Nurses on Part 1 (RGN) or Part 12 (RN(Adult)) could take this route to registration on Part 15 (RN (Child)).

For those who are registered in a different speciality from the one in which they wish to undertake the course, the length of the course will be not less than 24 months. This regulation would apply to those wishing to move from Part 2 (Enrolled Nurse General) to Part 15, as there was no enrollment programme to prepare second level children’s nurses.

This regulation also allowed students to undertake a two year route to registration provided that they held “degrees awarded following a course approved by the UKCC on the recommendation of the Board (Statutory Instrument 1989, No 1456, Rule 14A (8) (c) (I). The degrees must be health related.”

**1992/21/TS** - Guidelines for the Shortened Course for Registered General Nurses with experience in Paediatric Nursing leading to admission to Part 8 of the Professional Register (RSCN) (Appendix 16).

**Circular 1993/03/TS Jan 1993** - Guidelines relating to the minimum requirements for High Dependency and Intensive Care Nursing Experience within Courses (Appendix 17). (See also Board Paper CNC(92)28 9th Meeting 17.6.92) (Appendix 18). The Circular states:

- “1.1 In previous circulars the Board has stated that students undertaking courses leading to registration as children’s nurses must gain clinical experience in the care of children of all ages and at all levels of dependency.
- 1.2 These guidelines are intended to assist those institutions wishing to establish courses leading to Parts 8 or 15 of the register to assess the suitability of the clinical experience with particular regard to high dependency nursing.
- 1.3 The Board recognises that on completion of training, newly qualified nurses have not acquired the competence to practise independently in intensive care units. They must, however, have acquired the skills to care for highly dependent children within the hospital and/or home, in the same manner as do students undertaking courses leading to registration.”

**Circular 1994/10/SAF** - Review of ENB Circular 1992/21/TS “Guidelines for the Shortened Course for Registered General Nurses with experience in Paediatric Nursing leading to admission to Part 8 of the Professional Register (RSCN)” (Appendix 19).

**ENB 1994 Creating Lifelong Learners: Guidelines for Midwifery and Nursing Programmes of Education leading to registration** (Appendix 20).

The Guidelines quote:

“Children’s nursing practice is based on the philosophy that children should, whenever possible, be cared for within their own environment. Children and adolescents are spending shorter periods in hospital.

Children admitted to hospital tend to be more acutely or critically ill than previously and in need of highly skilled nursing care. Medical advances being made in caring for these children require the student also to learn increasingly sophisticated technical procedures.

There should be a balance of non institutional and institution based experience within the curriculum. Students must gain experience within the Paediatric Community Nursing Service where this exists and in placements associated with the needs of children, for example, play school, toddler groups, child welfare clinics, self-help groups and voluntary organisations.

The content list is not exhaustive. It should be seen as a **guide** and read in conjunction with UKCC PS&D/89/04 (B)".

(ii) Pre registration education 1995 to present day

**Education policy letter 1998/01/JM** - Guidelines for the shortened programme for registered general/adult nurses with experience in Paediatric Nursing leading to admission to Part 8 of the Professional Register (RSCN) (Appendix 21). The Circular states:

"The Board has agreed to the continued availability of a shortened programme leading to admission to Part 8 of the Professional Register for general/adult nurses with experience in children's nursing. The Board has received a wide range of information from NHS Consortia and Education Providers which has indicated a continuing need for this education provision."

"Students must hold registration on Parts 1 or 12 of the Professional Register and provide verified evidence of learning and experience relevant to the nursing of children."

“The programme will:

- (e) Incorporate practice based experience across the paediatric age range and dependency levels, up to and including high dependency care in both hospital and community settings
- (f) reflect the themes of the full length pre-registration children’s nursing programme outlined in “Creating Lifelong Learners: Guidelines for Midwifery and Nursing Programmes of Education Leading to Registration” (ENB December 1994)”.

**Education Policy Letter 1998/05/JM** - Guidelines for a new programme for Registered General Nurses/Registered Nurses (Adult Nursing) leading to Part 8 (RSCN) or Part 15 (RN Children’s Nursing) of the Professional Register and ENB Award 415, Intensive Care Nursing of Children (Appendix 22). The Circular states that:

“The two NHS Executive reports “A Bridge to the Future: Nursing Standards, Education and Workforce Planning in Paediatric Intensive Care” (6/97) and “Paediatric Intensive Care: A framework for the future” (7/97) have informed the development of these guidelines.”

- (i) Post registration education 1984 - 1995

Prior to the establishment of the UKCC and the four national Boards, the Joint Board of Clinical Nursing Studies had the role of approving programmes for post registration education for nurses. This role was assumed by the UKCC and the Boards. New programmes are added each year.

Programmes numbered 100 - 870 are programmes of 40 days or more in length and lead to a Board Post-registration Award. Each programme has an outline curriculum published by the Board.

Programmes with the prefix A or D are programmes of 40 days or more in length and lead to a Board Post-registration Award. These programmes do not have outline curricula published by the Board. However, programme outlines are available.

Programmes numbered 902-998 are programmes of less than 40 days in length and lead to a Board Post-registration Award. Each programme has an outline curriculum published by the Board.

Programmes with the prefix N or R are programmes of less than 40 days in length and lead to a Board Post-registration Award. These programmes do not have outline curricula published by the Board. However, programme outlines are available.

A number of guidelines or publications related to post registration programmes have been issued by the Board. These include:

Circular 1987/1/APS - Post basic clinical nursing studies courses : curricula designed for both registered and enrolled nurses (Appendix 23).

Circular 1991/16/RLV - Post registration courses to be made available to registered sick children's nurses (RSCNs) (Appendix 24).

(ii) Post-registration education 1995 to present day

DCL/5/APS, July 1997 - Review of entry into post-registration education programmes approved by the English National Board (Appendix 25).

Circular 1998/04/RLV - Post-registration studies programmes : list of institutions with approval to conduct the programmes (Appendix 26). The outline details of all post registration programmes are contained in this circular.

The Board's Regulations and Guidelines for the Approval of Institutions and Programmes (ENB 1996) (Appendix 5) and Standards for Approval of Higher Education Institutions and Programmes apply also to post registration educational provision (Appendix 6).

The following publications from the NHS Executive are of relevance:

**NHS Executive 1997** - A Bridge to the Future : Nursing Standards, Education and Workforce Planning in Paediatric Intensive Care (Appendix 27).

**NHS Executive 1997** - Paediatric Intensive Care " A Framework for the future" (Appendix 28).

Details are also attached in relation to the following:

ENB awards in paediatric critical care - open to registered children's nurses only - completion rates 1993-1998 (Appendix 29).

ENB awards in critical care (accessed by others) completion pattern for registered children's nurses 1996-1998 (Appendix 30).

Formal requirements or recognised professional standards or practices governing hospital staffing levels for nurses in paediatric care, intensive care and paediatric intensive care wards

The Board has issued a range of circulars in relation to the educational environment in which students undertake their learning in practice.

(i) 1984-1995

**1987/64/APS (December 1987)** - Guidelines to staffing of Neonatal Units (Appendix 31).

The content of this circular applies to all neonatal units in which student nurses and/or midwives gain experience in caring for neonates with special needs.

The circular sets out skill mix and staffing numbers in relation to the number of cots in the units where students undertake experience.

Appendix A presents “clinical categories” based on “a statement of the British Paediatric Association, British Association: of Paediatric Medicine and the British Association of Perinatal Paediatrics on Categories of Babies receiving neonatal care. 10.2 84.

**ENB Circular 1988/53/RMHLV** - Supervision of students gaining nursing experience in children’s wards (Appendix 32). The Circular states that:

“The Board has agreed that as from 1995 it will become a requirement, in children’s wards where student nurses are gaining nursing experience, for the nursing team to be led and the students supervised by a Registered Sick Children’s Nurse at all times.”

**1991/09/APS** - Guidelines for staffing of neonatal units involved in ENB Courses (Appendix 33). The Circular states:

“1.3 This circular has been revised to incorporate the requirements contained in the new training regulations. In due course the contents of this circular will be integrated into the “ENB Regulations and Guidelines”.

This circular makes reference to Registered General Nurses within the Neonatal unit and also refers to students in preparation for Part 15 of the Register, a programme which had started in 1989. There is also more explicit reference to neonatal intensive care. Students gaining practical experience were expected to be supernumerary.

**Paper CNC(92)49 9.12. 92 (11th meeting)** - A survey to identify progress made towards meeting the requirements of ENB Circular 1988/53/RMHLV Supervision of students gaining nursing experience in children's wards (Appendix 34). The survey was commissioned in January 1992. The survey was conducted to establish:

- the degree of progress made towards achieving the Board's requirements as specified in circular 1988/53/RMHLV
- the opportunities to gain the RSCN qualification
- the current position regarding client care by appropriately qualified nurses
- the perceived role of the Board in facilitating the achievement of the requirements of 1988/53/RMHLV.

The questionnaires were distributed to all 85 Board approved institutions and to paediatric clinical managers. The Circular states that:

"4.3.2 The requirement relating to the supervision of students in Circular 1988/53/RMHLV, clearly specifies that it pertains to "the supervision of students gaining nursing experience in children's wards". It is therefore applicable to all students irrespective of the course being undertaken which comprises a children's ward placement. Institutions not offering a statutory children's nursing courses did not perceive the circular as having any relevance to them".

"5.1.2 The responses established, that in 85.6% of units where children are nursed, care is provided by nurses who do not hold the RSCN qualification" (Annex 4 Areas in which children are cared for by non- RSCNs). (Annex 5 Non designated paediatric areas providing care for children).

**Circular 1993/07/TS** - Guidelines for practical experience in neonatal units involved in English National Board Courses (Appendix 35). This circular maintained the staffing levels and skill mix stated in the previous circulars.

**ENB (94) 152 140th Meeting (1.11.94)** - A report of the findings of a survey to identify progress made towards meeting the requirements of ENB Circular 1988/53/RMHLV Supervision of students gaining nursing experience in children's wards (Appendix 36). The Circular states that:

"46% of children's wards which provide experience for students have registered nurses with a qualification on either Part 8 (Registered Sick Children's Nurse) or Part 15 (Registered Nurse (Child Nursing)). The remaining 54% have indicated that they either meet the Board's minimum requirements for student supervision, or have a strategy to ensure that these requirements will be met at a future date."

**DCL/26/APS December 1994** - The requirements for the supervision of nursing students gaining experience in children's wards (Appendix 37). The Circular states that:

"The information from the national survey demonstrates that considerable progress has been made towards ensuring that "a minimum of one appropriately qualified nurse must be present, in a ward or department, to supervise students on each shift" (Regulations and Guidelines for the Approval of Institutions and Courses, April 1993)".

**ENB Publication 1995** - Supervision of students gaining children's nursing experience : guidelines for education providers, health providers and education purchasers (Appendix 38). This publication gives details of the surveys undertaken by the Board in 1992 and 1994.

(ii) 1995 to present day

**ENB 1996** - Regulations and guidelines for the approval of institutions and courses (Appendix 5). Page 3.7, paragraph 1.2 states the requirements for the supervision of students on placements within wards. Pages from section 5 giving details of the requirements for the assessment of students and requirements for assessors of students are included.

**DCL\03\97\SAF** - Report on Practice Placement Sampling: Children's Nursing (Appendix 39) contains a summary of activities undertaken during the 1995/6 academic year.

**ENB 1997** - Standards for the approval of higher education institutions and programmes (Appendix 6). Standards 8-12 relates to programme approval. Standard 8(h) states specific requirements for assessors of students. Standard 14 contains requirements in relation to activities assessors undertake with students.

**Educational Audit** - Educational audit of areas for student's practice placements is a responsibility of the individual educational institution.

The evidence base from the Board in relation to training courses in or relevant to paediatric care, intensive care, and paediatric intensive care is in Appendix 40.

### **3 The education and training of nurses: meeting standards**

The numbers of nurses following courses relevant to paediatric care, intensive care and paediatric intensive care; and (to the extent that the ENB can assist), the size of the trained workforce within England and Wales at the time

Data pertaining to the courses from 1984 to present day is included in Appendix 41.

The extent to which hospitals in England and Wales generally met the relevant professional standards or practices staffing levels, in 1984 - 1995 and thereafter.

#### **(ii) 1995 to present day**

There are a range of expectations of the placements areas in which students are placed during their programmes of education. The Board has devolved the responsibility for the educational audit of students' learning environments to the