WHO Europe Gerontological Nursing Curriculum

WHO European Strategy for Continuing Education for Nurses and Midwives

2003

Keywords

EDUCATION, NURSING, CONTINUING
STRATEGIC PLANNING
GERIATRIC NURSING
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CONTENTS

Introduction

This Gerontological Nursing curriculum has been prepared for WHO Europe as one of several post-qualifying curricula, requested by some Member States, to assist them in their progress towards implementation of the WHO European Region Continuing Education Strategy for Nurses and Midwives (WHO 2003). The Gerontological Nursing curriculum document therefore commences with a description of the context for the Continuing Education Strategy.

Context

The WHO European Region Continuing Education Strategy for Nurses and Midwives is set firmly within the context of the Second WHO Ministerial Conference on Nursing and Midwifery in Europe, which addressed the unique roles and contributions of Europe's nurses and midwives in health development and health service delivery (WHO 2001). At that Conference of Ministers of Health of Member States in the European Region, the Munich Declaration "Nurses and Midwives: A Force for Health" (WHO 2000a) was signed, and this key document, together with the WHO European Strategy for Nursing and Midwifery Education (WHO 2000) form the context for the Continuing Education Strategy.

The need for a Continuing Education Strategy

Nurses and midwives together constitute the largest proportion of the health care workforce in all Member States of the WHO European Region, numbering approximately six million at the start of this new century. The service they provide covers 24 hours of every day of the year. It is imperative that they are competent to provide the highest quality of nursing and/or of midwifery care. In order to do this, their initial nursing and midwifery education must be such that the people of their nation can be assured of their competence to practise on entry to their professions of nursing and midwifery, and that the foundation has been laid for them to continue to learn throughout their professional lives. Maintenance and further development of competence is essential to the ongoing provision of high quality nursing and midwifery care. In the rapidly changing health care services of today, with the knowledge explosion and the impact of technology upon health care, many nurses and midwives are increasingly called upon to work in expanded, specialist and/or advanced practice roles. The WHO European Strategy for Continuing Education for nurses and midwives has been developed in order to assist Member States to ensure the continuing competence of their nursing and midwifery workforce. In some cases this will be by developing new knowledge for specialist fields of clinical nursing and midwifery practice, in others by deepening their knowledge of an existing field of practice, and in yet others by gaining new competencies in the field of nursing and/or midwifery education, management or research.

The Continuing Education Strategy does not stand alone. Firstly, it builds upon the firm foundation provided by the WHO European Strategy for Nursing and Midwifery Education (WHO 2000), in which the link between initial and continuing education is clearly stated:

> The initial programme of education must prepare nurses and midwives who are not only competent to practise in today's health services, but who value and are committed to maintaining that competence. This they will achieve through continuing to update their knowledge, skills and

attitudes, in order that they can continue to meet the changing health priorities and needs of the people of the Member States (WHO 2000).

Secondly, its principles are in harmony with continuing education developments in nursing more generally in Europe and worldwide and with the growth of specialization in nursing. The International Council of Nurses (ICN) considered specialization as implying a deeper level of knowledge and skill in a specific aspect of nursing than would be acquired in initial nursing education (International Council of Nurses 1987 and 1992). The European Commission's Advisory Committee on Nursing (Commission of the European Communities 1994) recommended that specialist educational preparation was necessary in order to prepare qualified nurses to continue to meet the changing and increasingly complex needs of patients for whom advanced technology was enabling new treatment regimes, with resulting advanced practice roles for nurses. ENNO, the European Network of Nursing Organizations (2000) advocates a European Framework for Specialist Nursing Education, in recognition of the reality that the field of nursing knowledge and skills has become too vast and complex for any one individual to master in full. If quality of care is to be ensured, then specialization within nursing is essential, and they cite European Directives 89/48/CEE and 92/51/EEC, as amended in 1997, as the directives which are appropriate for specialist nurses (European Network of Nursing Associations 2000).

The aim and purpose of the Continuing Education Strategy

The key aim of the strategy is to ensure fitness for purpose of each Member State's nursing and midwifery workforce. Ongoing competence to practise can only be achieved by a commitment to lifelong learning on the part of all nurses and midwives. However, that personal and professional commitment can only be realized if each Member State accepts its obligation to ensure, or set in place plans to ensure that opportunities for continuing education are provided, and that the requirement for nurses and midwives to maintain their competence is regulated under legislation, in order to support safe, up-to-date and evidence-based practice.

The purpose of the Continuing Education Strategy is therefore twofold; it is both visionary and pragmatic. It provides the vision that will help shape the philosophy of continuing education in nursing and in midwifery, often termed continuing professional development, and it outlines and/or confirms some fundamental guiding principles. If followed, these principles should enable Member States to set up, or further develop existing systems of continuing education. In turn, this will enable nurses and midwives to maintain their competence and so feel confident that their knowledge, skills and attitudes are "fit for purpose" in the multiprofessional team in the health care services of which they are an essential part.

Background to the Continuing Education Strategy

Of crucial importance to the implementation of the Continuing Education Strategy is the implementation by Member States of the WHO Education Strategy for initial nursing and midwifery education. Of equal importance is the belief, which underpins both strategies, that education and practice are very closely related. Education and practice must move ahead together, in mutual respect and partnership, with shared values and goals. This is essential to the provision of an appropriate quality of cost-effective and efficient nursing and midwifery care and of health promotion for all the people of the Member States of the WHO European Region. This progress and partnership must be achieved within the changing structures of health care priorities

and provision in the different Member States, many of which are undergoing major political, economic, social and demographic change and are in the midst of health care reforms. Although some of these differences can be significant, the shared values were clearly demonstrated at the Second WHO Ministerial Conference on Nursing and Midwifery in Europe (WHO 2001) when, in The Munich Declaration (WHO 2000a), Ministers of Health stated their belief that:

> Nurses and midwives have **key and increasingly important roles** to play in society's efforts to tackle the public health challenges of our time, as well as in ensuring the provision of high quality, accessible, equitable, efficient and sensitive health services which ensure continuity of care and address people's rights and changing needs (WHO 2000a).

In the "Munich Declaration" which was issued by Ministers at the Conference all relevant authorities were urged to "step up their action" in order to strengthen nursing and midwifery by:

- ensuring a nursing and midwifery contribution to decision-making at all levels of **policy** development and implementation;

- addressing the **obstacles,** in particular recruitment policies, gender and status issues, and medical dominance;

- providing financial incentives and opportunities for **career advancement;**

- improving initial and continuing **education** and access to higher nursing and midwifery education;

- creating **opportunities for nurses, midwives and physicians to learn together** at undergraduate and postgraduate levels, to ensure more cooperative and interdisciplinary working in the interests of better patient care;

- supporting research and dissemination of information to develop the **knowledge and evidence base** for practice in nursing and midwifery;

- seeking opportunities to establish and support **family-focused community nursing and midwifery** programmes and services, including, where appropriate, the Family Health Nurse;

- enhancing the roles of nurses and midwives in **public health, health promotion and community development** (2000a).

Of the above actions, those of direct relevance to the Continuing Education Strategy are the need to improve continuing education and access to higher nursing and midwifery education; to create opportunities for nurses, midwives and physicians to learn together at both undergraduate and postgraduate levels in order to ensure more cooperative and interdisciplinary working in the interests of better patient care; to support research and dissemination of information in order to develop the knowledge and evidence base for practice; to provide financial incentives and opportunities for career advancement; and to ensure nurses and midwives contribute to decision-making at all levels of policy development and implementation.

On a worldwide basis, at the Fifty-fourth World Health Assembly in May 2001, delegates from the 191 countries present stressed the crucial and cost-effective role of nurses and midwives in reducing mortality, morbidity and disability in populations, in caring for those who are ill and in promoting healthier lifestyles (WHO 2001a).

If nurses and midwives are to fulfil these key roles to their maximum potential, if they are to work effectively in partnership with others in the health care team, then it is imperative that they build systematically upon their initial nursing and midwifery education, continuing their professional education in ways which ensure they maintain competence to meet the needs of the people of their nations for health care.

The Health Care context

As the Continuing Education Strategy was being prepared, all governments across Europe continued to face a wide range of complex health problems. Although in each Member State the existence and the severity of these problems varies, they include environmental pollution; the increasing gap between the rich and the poor; unacceptable levels of maternal and child morbidity and mortality; and a resurgence of diseases thought to have been conquered such as, for example, tuberculosis, cholera, typhoid fever and malaria. There are increases in the level of chronic illness, including cancer, cardiovascular diseases and mental health disorders; in lifestyle-related problems such as unhealthy diet, lack of exercise, smoking, alcohol and substance misuse and in sexually transmitted diseases. In some parts of the Region, wars and ethnic conflict continue to cause intense suffering, increasing numbers of refugees and homeless people and disruption to society's essential infrastructures. There are also the major challenges for health care systems which are inherent in the changing demography, i.e. the steady increase in the proportion of elderly people in the population which, in some Member States, is compounded by a gradual decrease in the proportion of those who normally contribute to the gross domestic product through working.

The future is likely to see continuing reforms of the health sector. These include a greater involvement of citizens and the community in decision-making about care; more people cared for at home and therefore a growing demand for community-based health services; a steady increase in the availability of new treatments and therapies; increasing costs of providing care; and more and more ethical challenges. However, whatever the reforms and changes, care which is centred upon the individual will remain the starting point of the health care organization and of the work of all nurses and midwives.

Continuing advances in practice, in the evidence-base and in the quality of care required make it imperative that the capabilities of the nursing and midwifery workforce are regularly updated, and that there is a commitment by Member States to ensure provision of appropriate continuing education. Effective implementation of the role of the nurse and of the midwife as outlined in the Strategy for Nursing and Midwifery Education is the essential first step. Effective implementation, or setting in place of plans to achieve implementation of the Strategy for Continuing Education is also essential if the workforce is to be prepared for the necessary specialist and advanced practice roles which the developments outlined above demand. Member States will be required to regularly evaluate and, if necessary, update their existing continuing education provision, to keep pace with the priority of maintaining a nursing and midwifery workforce which is fit for purpose, and which remains fit for purpose.

Just as "health care does not take place in isolation from political, economic and cultural realities" (WHO 1996), so nursing and midwifery education and practice do not take place in isolation from the political, social, economic, environmental and cultural realities of the Member States; neither must they be seen in isolation from the various stages of health care reform and the dynamic nature, or otherwise, of progress. Figure 1 depicts that complexity.

Figure 1. The dynamic context of nursing and midwifery education
Adapted from WHO 1996
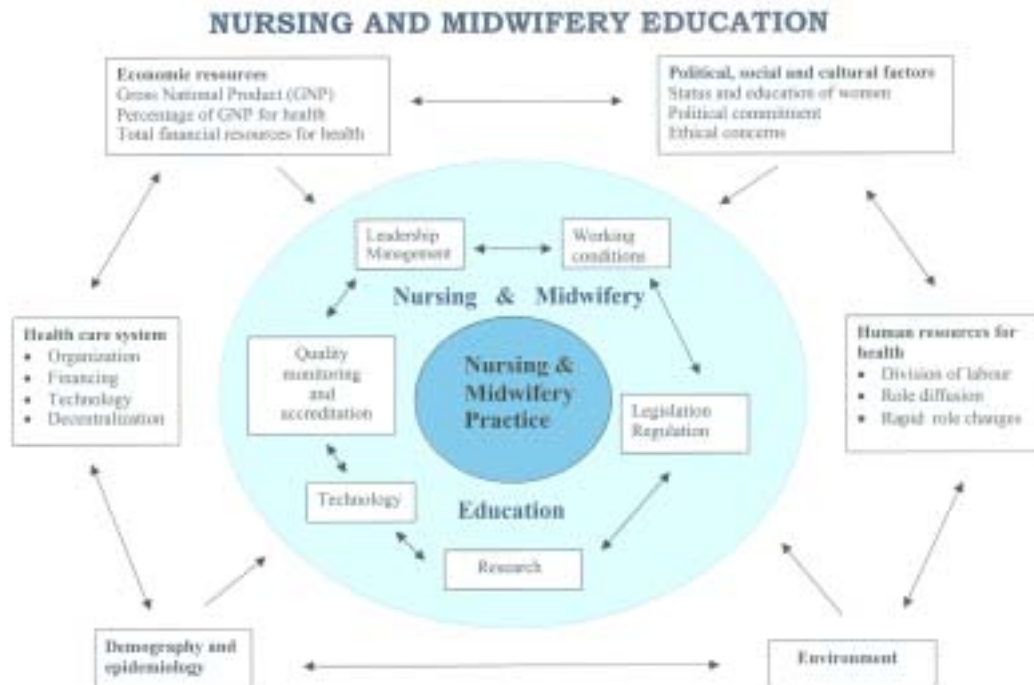
Likewise, nurses and midwives do not practise in isolation from their colleagues in the other health care professions. Although each profession contributes unique knowledge and skills to health promotion, the care of patients and to the health care system as a whole, there is a need for much more multidisciplinary and interdisciplinary work, in a spirit of recognition and respect for each other's authority, responsibility, ability and unique contribution. Thus, nurses and midwives must continue to build upon their initial professional education so as to continue to take their full part as members of the multiprofessional health care team, sharing both in decision-making and, when appropriate, in taking responsibility for leadership of the team and for the outcomes of the work of the team.

The Member States of the WHO European Region need well prepared, up to date, competent nurses and midwives, who participate in lifelong learning and who are able to work confidently, maintaining professional standards of care as the sound basis for multi-professional collaboration and partnership with patients, healthy individuals, families and communities.

The Gerontological Nursing Curriculum

All Member States are reminded that this is a sample curriculum. It should be used as guidance and be adapted as necessary to meet the Member State's specific priorities and needs for Gerontological Nursing.

1. Gerontological Nursing

Worldwide, demography is changing. In virtually every country there is a steady increase in the proportion of elderly people in the population. Advanced technology and the availability of new drugs enable older people who become ill to receive treatment and rehabilitation regimes which were not possible even two or three decades ago. Health care reforms have had to take into account the resourcing of services to meet the health care needs of the increasing number of older people who require hospital and community care and support. The new specialty of gerontology, the study of old age, the process of ageing and of older people's special needs, has emerged and become a recognized sphere of specialist knowledge and practice, which is increasingly research-based. Gerontology is considered to be both an art and a science. It has often been viewed with negativism and pessimism and some of the myths and stereotyping associated with the older person still persist. Only education and a general raising of awareness in the public as well as in health care professionals, of the rich and diverse contribution which many older people make to society can help dispel these myths and foster a positive and holistic approach to their care.

1.1 Definition of Gerontological Nursing and the Gerontological Nurse

A gerontological nurse is a nurse who works predominantly with older people, providing nursing care, as a full member of the multidisciplinary health and social care team, in a variety of settings where older people are cared for. The gerontological nurse will have successfully completed specialist post-qualification education in gerontological nursing which builds upon initial generalist nursing education.

The philosophy which underpins the provision of quality gerontological nursing care is a commitment to the belief:

- that all people, regardless of age, ability, culture, class and creed have the right to equal and equitable care throughout their lives and in no circumstances should a prejudice or bias alienate them from their rights;

- that ageing is a process separate from disease, a process which, for the majority of people, is a developmental stage of life to be enjoyed in health with a sense of wellbeing and feeling of contentment;

- that by promoting self-awareness, identifying negative attitudes and providing positive role models, gerontological nurses can contribute to the reduction of such attitudes and biases;

- that successful ageing can be enhanced by the provision of appropriate health promotion and health education;

- that in ill health, whether physical or psychological, the older person must be provided with a high quality of holistic care, which in many cases will involve the gerontological nurse in working in a cooperative and collegiate manner with members of the multidisciplinary team.

This curriculum aims to prepare gerontological nurses who support this philosophy and are able to meet the complex needs of the older person who is in their care.

2. The Gerontological Nursing course

2.1 Aims

The aims of the course are to:

- provide an advanced educational experience which will develop the student's intellectual and imaginative abilities in order to facilitate the development of independent judgement and problem-solving skills;

- provide an educational framework that will encourage the student to develop her/his skills of analysis and critical awareness in order to stimulate an enquiring and creative approach to both the theory and practice of gerontological nursing;

- develop the student's ability to respond to changing needs in gerontological nursing in an analytical way;

- develop the student's critical awareness of relevant research findings and facilitate integration of these findings into gerontological nursing practice.

2.2 Structure, length and mode of delivery

The curriculum is structured in modules or units of study, some of which combine both theory and practice elements. The length of the course must be sufficient to enable the student, on successful completion, to achieve the specified competencies or learning outcomes, the academic award and the specialist nurse qualification relevant to the course, and is normally of 40 weeks. Each week of the course is calculated as comprising 30 hours, which gives a total of 1200 hours. The preferred mode of delivery is full-time. Flexibility to deliver the course in a part-time mode or by distance/on-line learning should be open to negotiation, depending upon each Member State's resources.

The course is based on the philosophy of the gerontological nurse as a reflective, lifelong learner (Figure 2, Section 2.6). It emphasizes the importance of the integration of theory and practice, which should be, wherever possible, evidence-based.

2.3 Entry requirements

Course participants will be nurses who have successfully completed an initial nursing education programme, as described in the WHO European Strategy for Nursing and Midwifery Education entitled "Nurses and midwives for health: A WHO European strategy for nursing and midwifery

education" (WHO 2000) or its equivalent. They should have a minimum of two years post-qualifying experience.

2.4 Competencies or learning outcomes

The competencies or learning outcomes of the course have been developed to demonstrate achievement of both theoretical and clinical learning in the following areas:

- Specialist clinical practice
- Care and programme management
- Clinical practice leadership
- Clinical practice development.

These are detailed in the Continuing Education Strategy (WHO 2003) and are based upon the United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC 1998) standards for specialist education and practice, as adapted to gerontological nursing. Underpinning knowledge will be delivered in the theoretical component of the course and the students will be expected to integrate and apply this knowledge in gerontological nursing practice.

On successful completion of the course, the student will be competent, within the following broad areas, of:

Management, Administration and Teaching

- to demonstrate, by application within the clinical area, a knowledge of the roles and responsibilities of the members of the multidisciplinary team who provide care and of the roles of different categories of support staff;
- to propose, implement and evaluate a strategy of quality assurance, to address issues of service provision;
- to identify any area of need for information and initiate, using research-based evidence, an information service for patients and their family or carers;
- to analyse management and leadership theories and demonstrate their application in professional practice;
- to analyse professional and legal issues in gerontological nursing care and apply these to clinical practice;
- to demonstrate knowledge and understanding of policies regarding health and safety, infection control and moving and handling procedures and monitor adherence to these policies, taking appropriate action to correct any deficiencies;
- to apply knowledge of patients' rights in professional clinical practice;
- to apply knowledge of ethical theories and principles in the consideration of ethical dilemmas and their legal implications in clinical practice;
- to identify a need for, provide and evaluate research-based clinical teaching sessions for staff new to gerontological nursing.

Collaborative Working

- to liaise with relevant disciplines in order to maintain and/or improve organizational, managerial and professional practice in order to ensure a safe environment for both staff and patients;

- to demonstrate a collaborative approach to care in the assessment and rehabilitation of patients, in order to promote maximum possible functional independence, competence in self care activities, psychological wellbeing and confidence;

- to foster positive team working and maximize the potential of staff in providing high standards of care.

Assessment, Treatment and Management of Care

- to demonstrate a problem-solving approach to the care and promotion of maximum rehabilitation and independence of patients, utilizing where relevant an evidence-based individualized nursing model;

- to assess, plan, implement and evaluate research-based methods of nutritional assessment suitable for older people;

- to assess the sensory abilities and disabilities of patients receiving nursing care and treat and/or refer the patient as appropriate;

- to carry out approved nursing procedures, demonstrating knowledge and skill in the use of aids and equipment available;

- to assess and manage a clinical emergency/critical event ensuring prompt, effective care and referral where appropriate;

- to demonstrate knowledge of the pharmacokinetics and pharmacodynamics of drugs commonly used in the treatment of elderly patients;

- to demonstrate knowledge and skill in administration of drugs by all routes, including intravenous;

- to assess, plan, implement and evaluate health promotion and health education interventions for older people;

- to ensure effective pain control, using reliable and valid assessment tools, and acting on the results of the assessment;

- to explore the issues surrounding the expression of challenging behaviours in older people and carry out appropriate interventions to reduce or ameliorate such behaviours;

- to ensure appropriate assessment of cognitive function in the elderly confused patient, using valid and reliable assessment tools;

- to explore, using current research findings, the issues surrounding mental health problems in the older person and undertake a programme of care designed to promote and maximize the social, psychological and functional abilities of the patient;

- to complete nursing documentation accurately and in timely fashion;

- reflect on and critically evaluate her/his own gerontological nursing practice.

2.5 Curriculum Content

The curriculum will be delivered in a series of eight modules. In order to complete the course, the student must successfully complete all modules. While all of the modules offer the knowledge needed to develop a reflective and competent gerontological nurse, modules one, four, five and six specifically focus on generic transferable knowledge and skills which are applicable for all nurses working in a specialist role. These modules form the "core curriculum" and feature as part of all the other WHO European Specialist Nursing curricula.

## 2.6 Teaching/learning and assessment strategies

These strategies will stimulate learning at all six levels of cognitive skills, as described by Bloom (1956) in his seminal text. The teaching/learning and assessment strategies employed in the course should be congruent with the principles of androgogy, the rationale for which is that teachers and students will bring to the course existing competencies – relevant knowledge, skills and attitudes – to contribute to a mutually educative process. Overall, emphasis will be placed on interactive approaches. Active student participation, facilitated by nurse teachers (who have a role both in the university setting and in clinical practice) and by mentors (in practice/clinical areas) is considered to be the optimum way of achieving learning outcomes. There will continue to be a place for the didactic lecture, but it is envisaged that this will constitute a relatively minor proportion of the curriculum. The latest educational technology available in the particular Member State, including where feasible on-line or E-learning and video-conferencing, should be used to enhance teaching and learning.

A key objective will be the use of "reflection" as a means of learning from and developing expert practice (Figure 2). This will require the student to maintain a reflective diary/journal for the duration of the course. Case studies, critical incidents and care scenarios will form the focus for a reflective, problem-solving approach to learning.

Assessment methods should be supportive of the adult learning approach, should promote the integration of theory and practice, be research/evidence based and include a variety of methods. Assessment will enable the measurement of the student's progress and achievement in relation to the prescribed competencies/learning outcomes of the gerontological nursing course.

The success of the teaching/learning and assessment strategies will depend critically on the availability and deployment of appropriately qualified and prepared nurse educators who are committed to the philosophy of adult learning approaches. In addition, such interactive and problem-solving approaches must be supported by an environment which is conducive to learning. This must include attention to the provision of adequate space, library facilities and other technological resources, all of which should be borne in mind at the planning stage.

Figure 2. The Reflective Cycle
Gibbs 1988
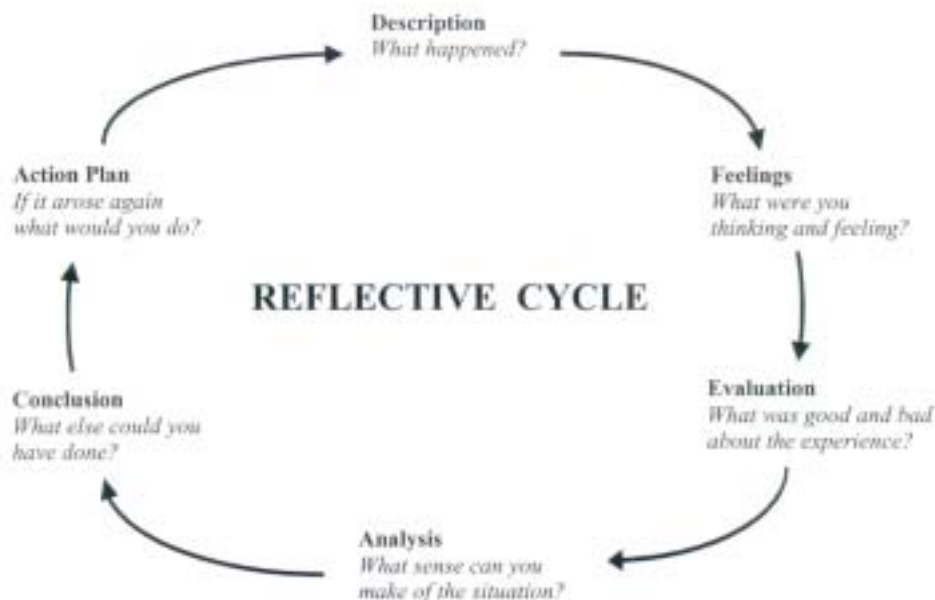
2.7 Supervision of practice

Clinical practice should be undertaken under the auspices of a suitably experienced gerontological nurse, who will ensure that the students gain the relevant experience during the period of clinical practice. The clinical practice assessment should be designed to demonstrate achievement of the clinical learning outcomes.

Supervisors are responsible for guiding students through clinical practice periods as well as making an assessment of the student's competence to practise by the end of the clinical experience. The course leader should retain responsibility for the student throughout this period and should liase with the student and supervisor as appropriate.

2.8 Optimum student intake and teacher/student ratio

As interactive adult teaching/learning and assessment strategies will be used throughout the course, which will include the requirement for clinical supervision, the optimum intake per course is likely to be 30 students. The ideal teacher-student ratio should not exceed 1:10, i.e. one teacher per ten students.

2.9 Accreditation with ECTS points

Each module is assigned credit points using the European Credit Transfer System (ECTS). The ECTS system has been chosen because the European Community Directives guide nursing and midwifery education for all European Union countries and those accession countries which become members of EU (European Commission 1989). Credits are "a numerical value allocated to course units (modules) to describe the student workload required to complete them"

(European Commission 1995). In other words the number of points does not reflect only the direct contact hours, e.g. while the student is attending a lecture, seminar, practical skills demonstration or tutorial and is in direct contact with the teacher, but also includes the number of hours which the student is expected to devote to independent study or practising of skills. Credit points take into account the learning in both the university, i.e. the theory component of a module, and in practice placements. The total number of ECTS credits for an academic year is 60. Their apportionment per module reflects the length of that module, calculated in weeks and number of hours. A week is taken as comprising 30 hours, and 20 hours equates to one ECTS credit point. Thus, a two-week, 60-hour module earns three credit points and a 16-week, 480-hour module earns 24 credit points. The overall length of the course is 40 weeks or 1200 hours which equate to 60 ECTS credit points. Further information on this system and its application to nursing education can be found in Section 8 of the Guidelines prepared to assist Member States with implementation of the initial Education Strategy (WHO 2001b).

2.10 Quality control and evaluation

External audit will be essential to evaluate the quality and standards of the course, as evidenced by the curriculum design, the teaching/learning strategies, the marking of student assessments and the results in both academic work and in practice learning outcomes. Curriculum evaluation should be carried out by teachers, students and also by those providing the service, i.e. gerontological nursing managers and existing gerontological nurses.

3. Teachers and mentors

The types of teaching/learning and assessment strategies considered essential for this curriculum are challenging for teachers, mentors and students. It is therefore important, if they are to be effectively delivered, that only qualified nurse teachers and mentors are involved. The setting up of structures to ensure peer group support and close liaison between teachers and mentors will be particularly important in the early years, as there may be no role models either in education or in practice.

Teachers of the gerontological nursing course must:

- hold a degree at an academic level equivalent to the requirements for university or equivalent institute teachers in the country;

- hold a teaching qualification in order to apply appropriately the full range of research-based teaching, learning and assessment strategies within the theory and clinical components of the curriculum;

- hold the qualification to which the programme leads, or be able to provide evidence of updating of knowledge, skills and attitudes relevant to gerontological nursing;

- teach and/or work within gerontological nursing;

- take responsibility for the clinical supervision of the nurse on practice placement and share this responsibility with their clinical mentor.

The gerontological nurse who is acting as mentor must be experienced in gerontological nursing and must hold the appropriate academic qualification.

4. Location of the course

The theoretical component of the course should be delivered in a university or equivalent institute. Practice elements will take place in hospitals, day centres for the elderly and/or in nursing home settings.

5. Qualification on successful completion of the course

On successful completion of the curriculum the nurse will receive the specialist qualification and postgraduate academic award of "Gerontological Nurse". The specialist qualification will be formally recorded in accordance with the country's legislative and regulatory system for nursing and nurses.

6. Course content – Modules One to Eight

An overview of the curriculum, and descriptions of the modules which comprise the curriculum are given in the following pages. It should be noted that a number of concepts and subjects introduced in one module are revisited and further developed in another. As knowledge and experience are gained, students will be able to view these concepts and subjects from different aspects and build upon their earlier learning and experience.

<table>
<tr><td colspan="2" align="center">GERONTOLOGICAL NURSING CURRICULUM

OVERVIEW</td></tr>
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Module One	**Module Two**
INTRODUCTORY MODULE: Concepts, Practice and Theory	GERONTOLOGICAL NURSING I Psychological and Social Aspects
2 weeks – 60 hours ECTS credits – 3	8 weeks – 240 hours ECTS credits – 12
Module Three	**Module Four**
GERONTOLOGICAL NURSING II Practice module – Psychological and Social Aspects	INFORMATION MANAGEMENT AND RESEARCH
8 weeks – 240 hours ECTS credits – 12	2 weeks – 60 hours ECTS credits – 3
Module Five	**Module Six**
DECISION-MAKING	LEADERSHIP AND MANAGING RESOURCES
2 weeks – 60 hours ECTS credits – 3	2 weeks – 60 hours ECTS points – 3
Module Seven	**Module Eight**
GERONTOLOGICAL NURSING III Physical and Spiritual Aspects	GERONTOLOTICAL NURSING IV Practice module – Physical and Spiritual Aspects
8 weeks – 240 hours ECTS credits – 12	8 weeks – 240 hours ECTS credits – 12

**WHO Regional Office for Europe
Gerontological Nursing Curriculum**

MODULE ONE

Title: Introductory Module
Concepts, Practice and Theory

Duration: 2 weeks – 60 hours

ECTS Credit points: 3

Module Content Summary

This module introduces the student to the key concepts which have shaped the gerontological nursing curriculum. The approach will encourage the student to build upon, integrate and expand their existing knowledge, skills and experience using the new knowledge and experiences which will be gained as a result of studying the curriculum. The close relationship between the practice of nursing and the theoretical and research knowledge related to nursing will be explored using examples from gerontological nursing. The teaching and learning strategies will encourage the nurse to get to know her fellow students and to share professional knowledge and experiences. The value of debate about the relevance of the theoretical content to gerontological nursing practice will be explored.

This module will take place in the university or equivalent institute setting.

Syllabus

The Gerontological Nurse
Typical clinic and care scenarios
The competency-based and research-based curriculum
Concept of competence
Androgogy – appropriate teaching and learning strategies for students and for elderly patients
Facilitation of learning
Problem-solving
Teamwork
Debating as a form of constructive challenge
Analytical and critical thinking and its relationship to the practice of gerontological nursing
Continuing professional development/lifelong learning

Competencies or Learning Outcomes

On completion of this module, the student will be able to demonstrate:

- understanding of how previous learning and experience can inform and enrich the new knowledge and skills necessary for the practice of gerontological nursing;

- knowledge of a variety of teaching and learning strategies which may be appropriate to the education of nurses and of patients and their carers;

- an understanding of competence and its relevance in nursing practice and in the team approach to care;

- an analytic and critical approach to discussion and constructive debate about nursing issues;

- a commitment to lifelong learning and continuing professional development.

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – on-line and distance learning materials

Teaching/learning Strategies

Lecture (key concepts)   Case studies
Reflective exercises   Seminars
Group work   Debate and discussion

Assessment Methods

Dates on which assignments are due: ……………………………………
Format of assignment:
Examination – multiple choice and short answer questions – 50% of whole
Short essay – approximately 600 words – 50% of whole
The student will choose a concept from those listed in the syllabus and discuss the relevance of the chosen concept to her personal understanding, at this early stage of the course, of what will be expected of her as a qualified Gerontological Nurse.

Examination: Mark awarded …………….%
Essay: Mark awarded ……………………%

Aggregate mark for module (out of 100%) …………………………%

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MODULE TWO

Title: Gerontological Nursing I
                          Psychological and Social Aspects

Duration: 8 weeks – 240 hours

ECTS Credit Points: 12

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Module Content Summary

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This module introduces the students to their country's demographic statistics and to the basic concepts of the art and science of gerontological nursing. Psychological and social aspects of ageing are viewed across the lifespan, with an emphasis on the uniqueness of the individual. Societal changes in perceptions of ageing are explored with a view to emphasizing the positive aspects of ageing. Social and psychological needs of the older person and their carers are discussed in relation to the role of the gerontological nurse and other health care professionals. The importance of individualized and holistic care of the older person is foremost.

This module will take place in the university or equivalent institute setting.

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Syllabus

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Psychological stages of development:
    Past experience and personality
    Past and present coping mechanisms
    The individual's own resources
Developmental crises and mental health problems:
    Cognitive-behavioural approaches to understanding the impact of stress
Internal conflict and its effect on the biological, psychological and social experience of growing older
The concept of successful ageing:
    Changing attitudes towards older people in society
    Diversity of ageing
    The concepts of loss, loneliness and approaching death
    Wisdom, creative achievement and ageing.
Intelligence:
      Intellectual change, crystallized and fluid intelligence, problem-solving strategies,
      learning and memory in later life

Cognitive impairment:
 Assessment techniques
Optimization of memory and cognitive function
Depression, delirium, confusion and dementia
Psychological models of dementia:
 Maximizing the strengths of people with dementia
 Therapeutic interventions and interactions
 Managing challenging behaviours
The social construction of old age and social ageing:
 Ageism
 Myths about ageing
 Social roles and role changes in later life
Effects of class, gender, culture, ethnicity, religion and sexuality on the older person
The concept of generational interchange
Successful ageing:
 Changing attitudes in older people
 The rise of pressure groups
 Empowerment of the older person
Effects of hospitalization on the older person
Psychological needs of the older person in institutional care
Social needs of the older person in long-term care
Social supports and networks
National provision of allowances and benefits
Communication with different age groups
The role of the gerontological nurse in discharge planning
The roles of the primary health care team, the multidisciplinary team, the voluntary services and the private services.
Caring for the carers

Competencies or Learning Outcomes

On completion of the module, the student will be able to:

- describe the population demographics of her/his country, in particular the proportion of older people in the upper age groups and the implications for health care provision;

- demonstrate the application of that knowledge and understanding in her role as a gerontological nurse;

- demonstrate understanding of psychosocial theories of ageing;

- critically analyse prevailing psychosocial theories of ageing, giving examples of social and historical factors within the country which have shaped understanding of the ageing process;

- analyse and synthesize issues related to the psychological and social aspects of ageing;

- demonstrate understanding of and a positive approach to the complex and challenging aspects of providing care for and with older people, both in hospitals and other institutional settings and in their own homes;

- utilize care strategies which optimize the abilities of cognitively impaired older people;

- demonstrate commitment to empowerment of older people and their carers;

- practise a range of interpersonal and communication skills, such as negotiation, consultation, interviewing, verbal and nonverbal interactions in the assessment, planning, implementing and evaluating of care of the older person.

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – on-line and distance learning materials

Teaching/Learning Strategies

Lectures	Case studies
Seminars	Group work
Debate and discussion	Tutorials
Use of reflective diaries	

Assessment Methods

Date on which assignments are due: ………………………………………………….

Format of assignments:
Compile a report of approximately 1000 words – of the demography of the country, highlighting the proportion of older people and the national benefits and support provided for this age group – 50% of whole
Essay – approximately 2000 words – 50% of whole
The student will choose a subject from the syllabus, demonstrating application of theory to the student's early understanding of gerontological nursing.

Report - Mark awarded …………………..%
Essay   - Mark awarded …………………..%

Aggregate Mark for module (out of 100%) ……………………%

WHO Regional Office for Europe
Gerontological Nursing Curriculum

MODULE THREE

Title: Gerontological Nursing II
                         Practice Module, linked to Gerontological Nursing I
                         Psychological and Social Aspects

Duration: 8 weeks – 240 hours

ECTS Credit Points: 12

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Module Content Summary

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This module provides the student with the opportunity to apply knowledge gained in the previous module to her practice of gerontological nursing in a variety of settings where older people are cared for. The student will be supervised and guided to develop the ability to link theory to practice in a creative and innovative way, to work constructively within the multidisciplinary team and to encourage empowerment of her patients and their families or carers.

This module will take place in practice settings.

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Syllabus

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There will be no formal syllabus in this module, but the student will be expected to review all aspects of the syllabus for Gerontological Nursing I as s/he practises the art and science of gerontological nursing, with a particular focus on the psychological and social aspects. S/he will be provided with periods of protected time to attend tutorials, seminars and to prepare the assignments. Practice supervision will be provided at intervals during the module.

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Competencies or Learning Outcomes

_____

On completion of this module, the student will be competent in the following areas of practice:

Management, Administration and Teaching

- to demonstrate, by application within the clinical area, knowledge of the roles of various health care professionals involved in providing care for older people, and the roles of support staff;

- to propose, implement and evaluate a strategy of quality assurance to address issues of service provision;

- to identify any area of need for information and initiate, using research-based evidence, an information service for patients and their family or carers;

- to collaborate with a more experienced gerontological nurse in contributing to providing and evaluating research-based clinical teaching sessions.

Collaborative Working

- to liaise with relevant disciplines in order to maintain and/or improve organizational, managerial and professional practice in order to ensure a safe environment for both staff and patients;

- to demonstrate a collaborative approach to care in the assessment and rehabilitation of patients, in order to promote maximum possible functional independence, competence in self care activities, psychological wellbeing and confidence.

Assessment, Treatment and Management of Care

- to demonstrate a problem-solving approach to the care and promotion of maximum rehabilitation and independence of patients, utilizing where relevant an evidence-based individualized nursing model;

- to demonstrate sensitivity to the impact of hospitalization or other institutional care on the older person;

- to assess the psychological and cognitive status of patients and provide sensitive and effective care, as a member of the multidisciplinary team;

- to administer drugs prescribed for patients in a timely manner, ensure they are taken, and record this accurately;

- observe patients for any appearance of side effects of drugs, and report any such occurrence;

- implement where appropriate, and in collaboration with other members of the team, health promotion or health education;

- apply knowledge of team working dynamics in making a positive contribution to the care team.

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – on-line and distance learning materials
Ward or unit procedure manuals and protocols

Teaching/learning Strategies

Supervised practice with mentor   Tutorials in practice setting
Case study analysis and discussion   Seminars
Critical incident analysis   Use of reflective diaries

Assessment Methods

Date on which assignments are due:

Format of Assignments:
Preparation of a clinical learning portfolio demonstrating achievement of each of the competencies/learning outcomes for the module – 50% of whole
Clinical Assessment demonstrating achievement of competencies/learning outcomes for the module – 50% of whole

Clinical portfolio: ……………….%
Clinical assessment: ……………….%

Aggregate mark for module (out of 100%)……………….%

**WHO Regional Office for Europe
Gerontological Nursing Curriculum**

MODULE FOUR

Title:	Information Management and Research
Duration:	2 weeks – 60 hours
ECTS Credit Points:	3

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Module Content Summary

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This module will enable students to extend their knowledge in relation to applied aspects of information management and research. It will develop their understanding of approaches to information management and the research process, ethical issues in relation to obtaining informed consent from participants in research, confidentiality and security of data and the communication of results of relevance to practice. The research component will have a particular focus on studies which contribute to knowledge within the field of gerontological nursing with the aim of promoting evidence-based practice within gerontological nursing.

80% of this module will be based in the university or equivalent institute setting.
20% of this module will be practice-based.

_____

Syllabus

_____

Sources/types of information, knowledge and evidence
Information management and information technology
Analytical and critical thinking, critical appraisal and constructive questioning of practice
Evidence-based practice
The research process, research design and methods
Basic statistics – interpreting demographic and statistical data, summarizing data and drawing conclusions
Identifying and measuring outcomes
Documentation – structure and standardization
National and local information systems
Literature searching
Report writing
Core/minimum data sets
Ethical issues, confidentiality and security of data/records

Competencies or Learning Outcomes
–_____

On completion of this module, the student will be able to demonstrate the ability effectively to:

- analyse different sources of information and apply as appropriate to practice;

- seek out and interpret relevant statistical data and research of relevance to gerontological nursing;

- set measurable outcomes for nursing practice;

- appraise and appropriately utilize developments in information technology;

- maintain accurate, clear and timely records;

- maintain confidentiality of data;

- define possible research questions arising from day to day practice;

- conduct a literature search and report findings;

- utilize knowledge and information gained through the practice of nursing in an ethical manner;

- promote evidence-based practice.

Reading List
_____

WHO publications
National and international literature covering the syllabus
Where accessible – On-line and distance learning materials

Teaching/learning Strategies
_____

Lectures	Discussions
Group work	Case study presentations
Student-led seminars	Mentor Support

Assessment methods
_____

Date on which assignment is due: …………………………………
Format of assignment:
Essay – either a critical review of a research study relevant to gerontological nursing or an analysis and critique of epidemiological data related to the incidence of common causes of ill health in older people, e.g. falls in the elderly, Alzheimer's Disease or other causes of confusion and mental health problems in the elderly – 100% of whole.

Mark awarded………………%

WHO Regional Office for Europe
Gerontological Nursing Curriculum

MODULE FIVE

Title: Decision-making

Duration: 2 weeks – 60 hours

ECTS Credit Points: 3

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Module Content Summary

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This module will enable students to extend their knowledge of decision-making processes, typology and skills in preparation for their future role as gerontological nurses.

66% of this module will be based in the university or equivalent institute setting.
34% of this module will be practice-based.

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Syllabus

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Decision-making – theories, processes, skills
Diagnostic reasoning, therapeutic, clinical
Concepts of accountability, responsibility and autonomy in decision-making
Critical thinking in practice
Ethical issues and involvement of the patient and carer in decision-making
Strategic decision-making
Prioritizing care
Rationing care
Legal aspects in relation to practice
Decision-making in gerontological nursing settings

_____

Competencies or Learning Outcomes

_____

On completion of this module, the student will be able to:

- demonstrate an understanding of the complexities of clinical decision-making;

- analyse and describe examples of decision-making in relation to her/his care of older patients;

- describe the exercise of accountability and responsibility in relation to her/his care of older patients;

- differentiate between strategic and clinical/ethical decision-making in nursing;

- discuss the rationale for involving patients and carers in decision-making about their care, ways of doing so and the implications of such involvement;

- state the key principles which guide the rationing and the prioritization of care in the student's country;

- outline the law in relation to nursing in her/his country and the implications for gerontological nursing.

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Lectures	Discussions
Group work	Case study presentations
Student-led seminars	Mentor support

Assessment methods

Date on which assignment is due: ……………………………………

Format of assignment:
Examination – multiple choice and short answer questions – 100% of whole

Mark awarded……………………%

**WHO Regional Office for Europe
Gerontological Nursing Curriculum**

MODULE SIX

Title: Leadership and Managing Resources

Duration: 2 weeks – 60 hours

ECTS Credit Points: 3

Module Content Summary

This module will enable students to explore aspects of leadership and of management which have relevance in gerontological nursing practice. Key principles of effective multidisciplinary team working will be analysed and applied to gerontological nursing practice, and students will gain an understanding of the complex nature of organizational change.

50% of this module will be based in the university or equivalent institute setting.
50% of this module will be practice-based.

Syllabus

The concept of leadership – theories, processes and skills
Management – theories and processes
Managing human resources
The patient and her/his family as a resource
Organization and management of the gerontological nursing service
Care management
Budgetary control
Time management
Management of change
Working as a multidisciplinary team member
Working with statutory, voluntary and private agencies involved in gerontological service provision
Standard setting and quality assurance systems

Competencies or Learning Outcomes

On completion of this module, the student will be able to:

- demonstrate an understanding of management principles and processes and their application in the organization and management of the gerontological nursing service;

- analyse the relative merits of different methods of work load measurement, in relation to the gerontological nursing setting;

- utilize the gerontology ward, unit or nursing home's staffing protocols in scheduling adequate staffing cover, reporting when safe levels cannot be achieved;

- demonstrate knowledge of different methods of care management;

- appropriately manage her/his time both when on duty in the gerontological nursing setting and when studying;

- show awareness of how the gerontological nursing service budget is managed;

- play a full part in maintaining standards and in contributing to quality assurance monitoring;

- demonstrate in practice the team member role of the gerontological nurse.

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Lectures   Discussions
Practice in scheduling work rotas   Mentor support

Assessment methods

Date on which assignment is due: ……………………………………

Format of assignment:
Essay of 1000–1500 words focusing on analysis of one concept from the syllabus and its application to practice in a gerontological nursing environment – 100% of whole

Mark awarded……………………%

**WHO Regional Office for Europe
Gerontological Nursing Curriculum**

MODULE SEVEN

Title: Gerontological Nursing III
                   Physical and Spiritual Aspects

Duration: 8 weeks – 240 hours

ECTS Credit Points: 12

Module Content Summary

This module provides the student with the opportunity to further develop and deepen their knowledge and understanding of the physical and spiritual aspects of ageing. Nutrition requirements, together with strategies and interventions to promote adequate nutrition and avoid malnutrition or dehydration in older people are debated. Pathophysiological changes which occur with advancing age and in common diseases of older people are studied, as are the effects of ageing connective tissue on the individual. Theories of ageing are analysed and critiqued in light of the student's growing knowledge of gerontology. Spiritual aspects of care for older people are sensitively explored as are nursing measures to help maintain optimum quality of life in its final stages.

This module will take place in a university or equivalent institute setting.

Syllabus

Physiological Changes:
    Overview of theories of ageing
    Structure and degradation of connective tissue
    Clinical manifestations of connective tissue ageing
Functional changes within the older person:
    Nutrition and the gastrointestinal tract
    Immune system
    Endocrine system
    Respiratory and cardiovascular systems
    Nervous system
    The special senses
    Intagumentary system and supporting tissues
    Genito-urinary system
    Reproductive system.
Metabolism and ageing:

    Links to nutritional status and drug efficacy
    Working with the older person to promote adequate nutrition and hydration
    The problems of malnutrition and dehydration
Pharmacokinetics and pharmacodynamics in the older person
Compliance with medication advice
Maintenance of homeostasis
Common accidents and injuries in the older person;
    Falls in the elderly
Flexibility and adaptability in the older person
Organization of health care:
Role of the multidisciplinary team, medical and nursing specialists and the voluntary and independent sectors in the provision of services for older people
Health promotion and health education:
    Maximizing existing physical strengths and minimizing weaknesses
The meaning of old age
    Perceptions of role and status
    Quality of life issues
    Adjustment and adaptation to change
    Effects of institutional care and hospitalization
    The informed consumer
    Maintaining independence and self respect in a care setting
    Maintaining activities and interests
    Responding to the needs of the older person and of their family or carers
    Palliative care
    Care of the dying person
    Care of the bereaved

Competencies or Learning Outcomes

On completion of the module, the student will be able to:

- reflect constructively on her/his personal experience and existing knowledge from previous modules to enable analysis and synthesis relating to issues surrounding the physical and spiritual aspects of the ageing process;

- demonstrate an understanding and critical appraisal of theories of ageing;

- critically appraise the application of such theories in gerontological nursing practice;

- demonstrate ability to help older patients to maximize their potential for healthy living and their positive adaptation to ill health;

- demonstrate knowledge and understanding of nutritional requirements and related issues for older people;

- anticipate the need for prophylactic interventions;

- seek out and evaluate knowledge from a variety of theoretical perspectives in order to provide appropriate, effective and efficient support, care and education for the older patient;

- critically assess the significance of the metabolism of drugs in older people and apply this knowledge accurately in a range of situations;

- demonstrate knowledge and understanding of policies regarding health and safety, infection control and moving and handling procedures;

- apply knowledge of patients' rights in professional clinical practice;

- endeavour to empower older patients and their families.

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – on-line and distance learning materials

Teaching/learning Strategies

Lectures	Peer group discussions
Multidisciplinary seminars	Group work
Debate and discussion	Tutorials
Use of reflective diaries	

Assessment Methods

Dates on which assignments are due: ……………………………………………………

Examination – multiple choice and questions requiring short answers – 50% of whole
Essay – 2000 to 2500 words – demonstrating in-depth understanding of the incidence, causation, pathophysiology, prevention and treatment of one of the common disorders or injuries suffered by elderly patients, and describe in detail the related nursing care – 50% of whole

Examination: Mark awarded ……….%
Essay: Mark awarded   ……….%

Aggregate mark for the module (out of 100%) …………….%

**WHO Regional Office for Europe
Gerontological Nursing Curriculum**

MODULE EIGHT

Title: Gerontological Nursing IV
                             Practice module – linked to Gerontological Nursing III
                             Physical and Spiritual Aspects

Duration: 8 weeks – 240 hours

ECTS Credit Points: 12

Module Content Summary

This module will provide the student with opportunities to apply the knowledge gained in the previous module to her practice of gerontological nursing, to further develop her ability to link theory and practice in innovative ways and to work constructively within the multidisciplinary team. The student will be enabled to assume increased responsibility and accountability for the nursing care and management of elderly patients suffering from common disorders and/or injuries of all stages of severity, to further develop an analytical approach to evidence-based patient care and to assist with supervision and clinical teaching of gerontology nurses who are commencing on the course.

This module will take place in practice settings.

Syllabus

There will be no formal syllabus in this module, but the student will be expected to review all aspects of the syllabus for Gerontological Nursing III as s/he practises the art and science of gerontological nursing, with a particular focus on the physical and spiritual aspects. S/he will be provided with periods of protected time to attend tutorials, seminars and to prepare the assignments. Practice supervision will be provided at intervals during the module.

Competencies or Learning Outcomes

On completion of this module, the student will be able to demonstrate the competencies expected of a nurse who has successfully completed the gerontology nursing course, and will therefore be able to:

- provide competent nursing care for elderly patients, working independently and/or within the multidisciplinary team;

- accept accountability and responsibility for her/his own professional judgment and actions;

- assess, plan, implement and evaluate research-based methods of nutritional assessment for older people;

- demonstrate a collaborative approach to assisting older people maintain adequate nutrition and implement effective strategies to help them avoid malnutrition and dehydration;

- demonstrate a problem solving approach to the care and promotion of maximal rehabilitation and independence of patients, utilizing where relevant an evidence-based individualist nursing model;

- assess and manage a clinical emergency/critical event, ensuring prompt, effective care and referral where appropriate;

- demonstrate knowledge and skill in administration of drugs by all routes, including intravenous;

- assess the older patient's understanding of her/his condition and treatment, including compliance with medication;

- ensure effective pain control, using reliable and valid assessment tools, and acting on the results of the assessment;

- complete nursing documentation accurately and in a timely fashion;

- demonstrate management and leadership skills in practice, including the ability effectively to contribute to the management of change;

- engage in activities to bring about improvements in organizational, managerial and professional practice with older people;

- demonstrate expertise in empowering patients and their families or carers;

- apply knowledge of ethical theories and principles in the consideration of ethical dilemmas and their implications in clinical practice;

- undertake supervision and mentoring of a junior colleague, applying principles of adult learning theories;

- give evidence of a commitment to own learning and continuing professional development.

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – On-line and distance learning materials
Ward or unit procedure manuals and protocols

Teaching/Learning Strategies

Supervised practice with mentor	Tutorials in practice setting
Case study analysis and discussion	Seminars
Use of reflective diaries	Mentoring and supervision of junior colleagues

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Assessment Methods

Date on which assignments are due:

Format of Assignments:
Preparation of a clinical learning portfolio which will include in-depth analysis of a specific area of evidence-based gerontological nursing practice – 50% of whole
Assessment in practice of demonstration of achievement of the competencies of a gerontological nurse – 50% of whole

Clinical portfolio: ……………….%
Clinical assessment: ……………….%

Aggregate mark for module (out of 100%) ……………….%

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Glossary

For more detail on all these terms, please refer to the Guidelines to the WHO European Strategy for initial education for Nurses and Midwives (WHO 2001b)

Academic level

The level of difficulty of a subject. For example level one is commonly used to describe the first year studies in a baccalaureate degree, with levels two, three and four describing second, third and Honours year respectively. Masters level describes postgraduate studies at Masters degree. Doctoral level describes study at Doctor of Philosophy/Doctor of Science level. In general, the higher the level of difficulty, the more requirement there is for demonstration of analytical, critical, evaluative and innovative thinking.

Accreditation *(of an institution, programme or curriculum)*

A process, based on a system of external peer review, and using written standards, by which the quality of a university's activities and its educational programmes are assessed and, if satisfactory, approved.

Authority

The rightful power to take action. This subsumes the right to make decisions on what action is appropriate.

Clinical Supervision

A clinically focused professional relationship between a practitioner and appropriately prepared clinical supervisor.

Competencies

Broad composite statements, derived from nursing and midwifery practice, which describe a framework of skills reflecting knowledge, attitudes and psychomotor elements. The term "Learning Outcomes" is often used synonymously with "Competencies".

Competent

A level of performance demonstrating the effective application of knowledge, skill and judgment.

Continuing education

Education that builds on initial professional or vocational education.

Credit points

See Accreditation of prior learning.

E-learning

E-learning means electronic learning, (just as e-mail means electronic mail). E-learning is a form of distance learning. Course materials are on-line, students communicate with their lecturers via e-mail, lecturers give feedback via e-mail, assignments are sent in via e-mail and comments

returned to students via e-mail. Systems may be set up to enable several students and their lecturers to communicate via "chat rooms", i.e. where questions and discussions can take place through e-mailing.

Fitness for purpose

Employers are primarily concerned about whether nurses and midwives are able to function competently in clinical practice. The speed of change in the context and content of health care makes it difficult to define fitness for purpose. Its meaning cannot be fixed. Fitness for purpose depends on the commitment of employers and of practising nursing and midwives to constant professional updating (Adapted from UKCC 1999).

Health care reform

Any intended change towards improvement of health care of the acutely and chronically ill, rehabilitation, case-finding, health promotion and maintenance, prevention of disease and disability and health education.

Learning Outcomes

See Competencies

Licence

See Registration

Mentor

An appropriately qualified and experienced person who, through example and facilitation, guides, assists and supports individuals in learning and in acquiring new attitudes. The term is particularly used in relation to supporting learning in practice settings.

Multiprofessional team/Multidisciplinary team

A team of health care professionals from different disciplines, e.g. nurses, midwives, physicians, physiotherapists, who work together towards a common goal which enables them to make the best use of their knowledge, skills and experience in providing patient care.

Network

A grouping of individuals, organizations and/or agencies organized generally on a non-hierarchical basis around some common theme or concern.

On-line learning

See E-learning

Patient

The real person who is the end-user in all our health systems. S/he is the human being who is meant to benefit from our efforts, but who, if reduced to a mere statistic, demonstrates that the heart has gone out of the profession. User(s) of health care services, whether healthy or sick.

Peer review

Scrutiny of the work, activities or output of individuals or a group by other individuals or groups who have qualifications and experience that are directly comparable to those of the people being scrutinized.

Practice placement

The clinical area to which nurses and/or midwives are allocated in order to undertake the practice components of their education. These clinical areas may be in hospital or community settings.

Programme

This term is synonymous with course, i.e. a course of study, and denotes the entire course, in all its elements. It may be a full-time or part-time programme or course, e.g. a degree, or a short course.

Promote health

The process of enabling individuals, families and communities to increase control over the determinants of health and thereby improve their health. An evolving concept that encompasses fostering lifestyles and other social, economic, environmental and personal factors conducive to health.

Prospective Analysis Questionnaire

A questionnaire, based on the Prospective Analysis Methodology (PAM), which is a process that facilitates decision-making, interchange of ideas and opinions, and recognition and development of a need to change.

Resources

Human resources, money, materials, skills, knowledge, techniques and time needed or available for the performance or support of action directed towards specified objectives.

Registration

A method of ensuring a record is maintained of those who are *bona fide* nurses and/or midwives, i.e. they have successfully completed the initial nursing and/or midwifery education programme which is required in their country. In several Member States it is necessary to regularly renew this registration. In order to do so, nurses and midwives must provide evidence of successful completion of continuing education relevant to their area of practice.

Specialist Nurse

A nurse who has successfully completed a post-qualification course of study in a specific clinical field and who applies higher levels of judgement, discretion and decision-making in clinical care in order to improve the quality of patient care, meeting the needs of patients within the specialty and in the specific area of practice.

Standard

Statement of a defined level of quality or competence which is expected in a given set of circumstances. In nursing and midwifery, the statements identify and define the criteria which influence the quality or competence of the nursing/midwifery service, and clarify what is

expected in relation to the structures, processes and outcomes. A means of measuring the degree of excellence of an educational programme and of comparing the degree of excellence of one programme with that of others.

Strategies

Broad lines of action to be taken to achieve goals and objectives incorporating the identification of suitable points of intervention, the ways of ensuring the involvement of other sectors and the range of political, social, economic, managerial and technical factors, as well as constraints and ways of dealing with them.

Video-conference

The use of video to bring groups together for discussions and a sharing of views. Groups in geographically separate areas can be connected via video link and can see and hear each other.

Acknowledgements