

Building blocks of  
*lifelong*  
*learning*

A framework for  
nurses *and* midwives  
in Queensland

September 2010



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#### 2010 Revision

This review was undertaken by a subgroup of the  
Queensland Health Transition Advisory Group.

#### Acknowledgement

Acknowledgement is given to the original authors,  
reviewers and editors of the Queensland Health  
Nursing and Midwifery Staff Development Framework  
(QHNMSDF) from which this document has been derived.

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#### Version control

This is Version 4 of the Building Blocks of Lifelong Learning:  
A Framework for Nurses and Midwives in Queensland  
(previously named the QHNMSDF) and will be revised  
in January 2012.

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# Foreword

## Dear Nursing and Midwifery Colleagues,

Queensland Health, through the Office of the Chief Nursing Officer (OCNO) and Nursing and Midwifery Clinical Education and Training for Queensland (ClinEdQ) in collaboration with all nurses and midwives, recognises education and training as a core component of developing the capability of the multi-disciplinary healthcare team. This enables our workforce to be adaptable and respond to the changing demands of delivering dependable healthcare and better health for all Queenslanders now and into the future.

The Best Practice Model of Clinical Education and Training for Nursing and Midwifery includes clinical placement, education pathways, post registration clinical education programs and courses as nurses and midwives progress through their ongoing professional development to reach their full potential. It is supported by a culture of learning.

We are pleased to provide this underpinning framework for the Building Blocks of Lifelong Learning available on [www.health.qld.gov.au/nmsdf](http://www.health.qld.gov.au/nmsdf).

This framework provides an approach to learning and development, acknowledging the priority areas of clinical, organisational and professional learning. In its capacity, it is building a safe, compassionate and capable nursing and midwifery workforce embracing continuous knowledge and skill development, competence and lifelong learning.

Within the roles and responsibilities of nurses and midwives, there is an expectation that learning and development is an essential component of professional practice. Educational opportunities are strengthened through a link to the staff member's Performance, Appraisal and Development (PAD) plans in partnership with the nursing or midwifery line manager and nurse or midwifery educator.

The framework therefore enables the following to be adopted within Health Services Districts:

- Guidance for all classifications of nurses and midwives to progress the development of their practice in the workplace;
- Provision of learning and development opportunities in a coherent and structured format;
- Provision of direction for the planning and implementation of staff development practices; and
- Continuous post-graduate qualifications.

Included in this version is a toolkit to assist nursing and midwifery unit managers and educators in contextualising educational programs to individual specialty units.

I would like to take this opportunity to acknowledge the nursing and midwifery educators and consultants who have contributed to the ongoing development and improvement of this document since its inception in 2001.

### **Cheryl Burns**

*(on behalf of the Queensland Health Nursing and Midwifery  
Staff Development Framework Review Committee)*  
Nursing Director Education and Training ClinEdQ/OCNO

30 August 2010



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# Introduction

The purpose of this document is to acknowledge that the priority areas for nursing and midwifery education are organisational, professional and clinical, and to align their significance with the development of the nursing and midwifery workforce.

“The health of a society is shaped by the degree to which it can develop and sustain a knowledgeable nursing workforce.”<sup>1</sup> In the pursuit of this, the responsibility of nurse and midwifery educators is to facilitate learning that will advance the growth of individual nurses/midwives as well as the future growth of the profession as a whole, in collaboration with the nursing and midwifery unit managers and health care team.<sup>1,2</sup>

Thorne (2006) identifies nurse educators as professional nurses with substantial knowledge and expertise related to the complexities inherent in creating learning contexts, guiding intellectual journeys and igniting a passion for what this profession embodies in its essence. They do not simply oversee the learning of novice practitioners. The nurse educator has an integral role in applying the tenets of the Framework for Lifelong Learning for Nurses and Midwives in Queensland along the continuum of lifelong learning.

The Ministerial Taskforce on Clinical Education and Training Steering Committee (2007)<sup>3</sup> recognised that clinical education, training and research are core functions of Queensland Health. The National Review of Nursing Education (2002)<sup>4</sup> highlighted that clinical education is an essential component of professional development and encompasses continuous up-skilling and lifelong learning. The Framework for Lifelong Learning offers a strategic approach to support the achievement of these core functions in an effort to provide a safe and capable nursing and midwifery workforce.

In September 2001, Aitkin, Faulkner, Bucknall and Parker<sup>5</sup> reviewed the literature related to various aspects of nursing and midwifery education to inform the National Review of Nursing Education 2002<sup>4</sup>.

The following summarises their findings:

*The literature reveals that nurses require broad based clinical skills that can be extended and expanded with appropriate training. Nurses need to acquire and process knowledge rapidly, they need the ability to be sophisticated research consumers, and to be able to integrate new knowledge with existing knowledge to create new understanding. They need to be self-directed in their acquisition of knowledge and know how to use resources to access information and to assist others in gaining skills and knowledge. Underpinning all of these requirements is the need to be involved in ongoing learning to develop the capacity to cope with the challenge of practising in an ever changing, technologically diverse healthcare milieu.*

The broad intent of the Framework for Lifelong Learning “is to provide learning and development opportunities in a coherent and structured format by guiding all classifications of nurses in the progress of their practice in the workplace.”<sup>2</sup> Further, the Framework for Lifelong Learning continues in line with the Queensland Health strategic direction which is reinforced in the Queensland Health Strategic Plan 2007–2012<sup>6</sup> that “education, training and research are core functions of the organisation that enable staff to provide safe quality service”. Within this document, education and staff development are identified as key initiatives to ensure that Queensland Health is able to meet the growing demand for health services and address the shortage of skilled health workers. This further supports the recommendations of the Ministerial Taskforce on Clinical Education and Training<sup>3</sup> for the creation of supportive and rewarding environments, which embrace work integrated learning, enhance recruitment and retention of health staff.

The Queensland Health Nursing Staff Development Framework (QHNSDF)<sup>7</sup> was first endorsed in 2001 following a recommendation from the Queensland Health Ministerial Taskforce on Nursing Recruitment and Retention<sup>8</sup>. The first review occurred in 2004<sup>9</sup> with a subsequent review in 2007, undertaken by the Project Officer, Nursing and Midwifery Education and Development, as a result of the Nurses Interest Based Bargaining (NIBB). This was one of the five negotiated priority areas for nursing identified by Queensland Health and Queensland Nurses Union during the Enterprise Bargaining (EB<sup>6</sup>) Agreement<sup>10</sup>. The current review sits within the recommendations from the Phillips KPA Review of Nursing and Midwifery Clinical Education and Training and is under the direction of Clinical Education and Training Queensland (ClinEdQ).

There are a number of documents that inform and support the contemporary context of nursing and midwifery workforce development. Notable sources for inclusion in discussions of the contemporary context of nursing and midwifery workforce development are:

- A Healthier Future for all Australians: Final Report June 2009<sup>11</sup>
- Ministerial Taskforce on Clinical Education and Training. Final Report. March 2007<sup>3</sup>
- Queensland Health Learning and Development Strategic Framework 2007–2012<sup>12</sup>
- Queensland Health Strategic Plan 2007–2012<sup>6</sup>
- National Nursing and Nursing Education Taskforce (N3ET) Final Report 2006<sup>13</sup>
- N3ETA Specialisation for Nursing and Midwifery May 2006<sup>14</sup>
- Queensland Health Systems Review 2005<sup>15</sup>
- National Review of Nursing Education 2002: Our Duty of Care<sup>4</sup>
- Queensland Health Ministerial Taskforce on Nursing Recruitment and Retention 1999<sup>8</sup>

The recurring themes emerging from these documents support and embrace the need for educational infrastructure and training in the workforce and include:

- Creating a supportive environment to promote and sustain a strong learning culture
- Establishing the overall strategic direction for training and skills development
- Establishing an ongoing education and training program linked to service delivery needs that addresses skills gaps and supports advanced practice roles
- Identifying strategies to recruit and retain nurses/midwives in the workforce and to attract nurses/midwives back into the profession
- The provision of nursing and midwifery education, training and skills to meet the current and future workforce and organisational needs.

These themes have been aligned to the principles of organisational, clinical and professional learning and are incorporated and encompassed throughout the Framework for Lifelong Learning.

The Framework for Lifelong Learning provides the nurse/midwife with a developmental pathway along a continuum of lifelong learning. The nurse or midwifery educator will primarily use this document to support the organisational, clinical and professional spheres of learning (demonstrated by the Operational Map provided as Figure 3). The Operational Map is a guide to contextualise the Framework for Lifelong Learning to encourage and support learning and up-skilling in the individual work unit. Nurse and midwifery educators, in consultation with the key stakeholders within their specialty, should adapt the Operational Map to their own work unit requirements, as per the Clinical Services Capability Framework<sup>16</sup>. This ensures that nurses and midwives working in particular specialties have the knowledge and skills to do so.

To strengthen the purpose of this document, the 2009–10 review has included key performance indicators (KPIs) for each sphere of learning – organisational, clinical and professional. KPIs have also been developed to support the PAD process. Evidence supporting the achievement of these KPIs should be readily available within the individual facility or work unit.

# Model for Nursing and Midwifery Education

Nursing and midwifery education thrives in organisations which embrace a culture of learning. The Framework for Lifelong Learning provides structure, philosophy and an organisational approach that enables educators and practitioners to scaffold healthcare education within a community of learning<sup>17</sup>. A strong culture of learning is critical in developing opportunities for and supporting learning in the workplace. Queensland Health is committed to creating an environment where people can grow professionally and encourage participation in training, education and research<sup>18</sup>. The Framework for Lifelong Learning has been developed to assist nurses/midwives to structure learning in their practice environment to attain their professional goals<sup>2</sup>.

Learning and working are interdependent. Skilled workers routinely upgrade their skills and knowledge to meet changes in the healthcare industry. Clinical education and training is the central responsibility of all health clinicians. Individuals must actively and continually learn and develop. To facilitate this, learning experiences must be rich and complex rather than incidental or adhoc<sup>19</sup>.

Nursing and midwifery education facilitates the integration and culmination of learning that occurs within and/or across practice. It includes the three (3) spheres of clinical, organisational and professional learning to enable lifelong learning using principles of adult education. The recommended model (Figure 1) depicts the spheres of learning and the affect on the client. Thus education of the nurse/midwife, centred within the spheres, influences the provision of effective and safe client outcomes.

Figure 1: Nursing and Midwifery Education



## Principles of clinical, organisational and professional learning

- Clinical education and training are core functions of Queensland Health – explicitly resourced, planned, managed and evaluated at all levels of the organisation<sup>3</sup>.
- Nurses/midwives are provided with relevant continual development, up-skilling and capacity building opportunities to enable demonstration of competence for their current role and career progression.
- Nurses/midwives work within legislation, their scope of practice and the endorsed standards and competencies for the relevant professional bodies and the policies of the organisation<sup>14</sup>.
- Organisational learning encompasses the knowledge and skills required by nurses/midwives to function effectively in their individual role to achieve organisational aims and objectives and build capacity to meet current and future nursing workforce demands.
- The development of practice is supported within the organisation as a continuous process of improvement and contributes to a culture of learning and inquiry.
- There is an expectation that nurses/midwives will take a proactive approach to the application of professional standards.
- Nurses/midwives take a proactive role in the enhancement of nursing knowledge and engage in current and emerging professional practice.

## Clinical learning

Clinical learning refers to the knowledge and skills specified by the organisation as being essential prerequisites of the workforce to demonstrate acceptable standards of practice in the delivery of patient care. The service profile and models of service delivery will identify the areas of clinical practice required.

For health clinicians, maximising learning through experience in the clinical setting is considered not only desirable but essential. The current complex and rapidly changing service delivery environment demands that clinical education and training occur within a framework of continuous lifelong learning across a broad continuum from professional pre-entry level to experienced skilled clinician<sup>2</sup>.

Clinical practice requirements are specified at different levels for each classification of nurse or midwife. The Australian Nursing and Midwifery Council (ANMC) Competency Standards specify the required level of competence for all nurses and midwives. In the clinical environment, nurses and midwives attain the clinical skills and requisite knowledge that enable the application of theoretical concepts of their clinical practice. Along a path of lifelong learning nurses and midwives must maintain a minimum level of competence reflected by the standards (specialty specific or advanced practice) as defined by professional nursing organisations, such as the Australian Nursing Federation (ANF), Australian College of Critical Care Nurses (ACCCN), Australian College of Operating Room Nurses (ACORN) and Australian College of Midwives (ACM).

Each registered nurse, enrolled nurse and midwife is required to practise as described by the nursing and midwifery regulatory authority, the Nursing and Midwifery Board of Australia (NMBA).

The nursing and midwifery profession has standards of expected practice for beginning, advanced and specialty practice. These standards include:

- ANMC National Competency Standards for the Registered Nurses<sup>20</sup>
- ANMC National Competency Standards for the Nurse Practitioner<sup>21</sup>
- ANMC National Competency Standards for the Midwives<sup>22</sup>
- ANMC National Competency Standards for the Enrolled Nurse<sup>23</sup>
- ANF Competency Standards for the Advanced Enrolled Nurse<sup>24</sup>
- ANF Competency Standards for the Advanced Registered Nurse<sup>25</sup>
- ANMC Principles for the Assessment of National Competency Standards for Registered and Enrolled Nurses<sup>26</sup>
- Specialty practice standards (e.g. ACCCN, ACORN, ACM, ACMHN).

## Organisational learning

A learning organisation continually expands its capacity to create its own future by being committed to encouraging its staff to develop themselves<sup>27</sup>. Organisational learning refers to the knowledge and skills required by nurses/midwives to function effectively in their roles to achieve specific organisational aims. At its fundamental level, this can include education on the *Queensland Health Code of Conduct*<sup>23</sup> or the performance management system of the organisation. Organisational learning includes, but is not limited to, any learning associated with the organisation's direction or needs. It also includes those cognitive and psychomotor skills that are required to meet organisational requirements concerning specific position functions, for example, managers will require skills in cost centre and human resources management processes.

Not to be confused with the broader focus of staff development is the concept of organisational development. While specific aspects of organisational development might be included in a staff development plan, the focus differs. The intent of organisational development focuses on the work team rather than individuals, and is driven by the context of the workplace<sup>28</sup>.

## Professional learning

A nurse/midwife's ongoing self-development is based on individual and personal goals which enhance the professional sphere of learning. More specifically, this includes the learning the nurse/midwife engages in relative to broader nursing and midwifery professional issues and trends. Examples include: resolving ethical issues relating to practice; participation in professional groups; and consideration of how nurses/midwives and the profession participate in shaping state and national policy development.

In addition, there are other standards that support the expected level of professional practice including:

- ANMC Code of Ethics for Nurses in Australia<sup>29</sup>
- ANMC Code of Professional Conduct for Nurses in Australia<sup>30</sup>
- ANMC Code of Professional Conduct for Midwives<sup>31</sup>
- ANMC Code of Ethics for Midwives<sup>32</sup>
- ANMC A Nurse's Guide to Professional Boundaries<sup>33</sup>
- ANMC A Midwife's Guide to Professional Boundaries<sup>34</sup>.

Within the domains of the ANMC National Competency Standards for all levels of nurses and midwives, there are standards relating to continuing professional development. The domains of Critical Thinking and Analysis (RN and EN), Reflective and Ethical Practice (midwifery) relate to self-appraisal, professional development and the values of evidence and research for practice. The Nursing and Midwifery Continuing Professional Development Registration Standard ([www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx](http://www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx))<sup>35</sup> outlines the responsibility of the nurse/midwife to participate in ongoing professional development of self and others. This is demonstrated by an increasing responsibility to share knowledge with colleagues, participating actively in ongoing professional development and contributing to the development of nurses/midwives through teaching and role modelling in clinical work units. Nurses/midwives are required to provide evidence of continuing professional development hours of learning to maintain national registration from July 2010. All professional development requirements must be supported by the PAD process.

# The Framework for Lifelong Learning for Nurses and Midwives in Queensland

Queensland Health recognises that education in a clinical context is a component of core business. To promote lifelong learning in the workplace, Queensland Health has developed the Framework for Lifelong Learning.

The aim of the Framework for Lifelong Learning is to support, develop, attract and retain skilled and committed nursing and midwifery staff to build workforce capacity. By promoting a systematic approach to lifelong learning in the workplace, the Framework for Lifelong Learning provides a sustainable model that supports a culture of learning and ongoing professional development for nurses and midwives in Queensland Health.

The Framework for Lifelong Learning sets the direction and initiates strategies that need to occur in order to provide learning and development opportunities in a coherent and structured format. The Framework for Lifelong Learning guides all classifications of nurses/midwives to progress the development of their practice in the workplace, irrespective of the individual aspirations for career development and succession. Additionally, the Framework for Lifelong Learning provides direction for planning, design, implementation and evaluation of staff development practices that facilitate the development of all nursing and midwifery staff employed within Queensland Health facilities. These practices are based on individual, organisational and professional learning imperatives. It is recognised that in a rapidly changing environment, the Queensland Health workforce must be adaptable and skilled to build capacity and sustain quality health care for all Queenslanders now and in the future<sup>36</sup>.

The Framework for Lifelong Learning incorporates a model of collaboration in meeting individual and organisational needs as suggested by Dhondea<sup>37</sup>. Management and staff viewpoints are integrated to define program goals and priorities.

While acknowledging the variety of possible definitions for staff development in the literature, Dhondea<sup>37</sup> suggests the following definition for the context of a health care setting:

*Staff development is a concerted, consistent and continuous process that increases the ability of each person to function both professionally and personally, with the overall aim of improving the quality of care in a health setting.*

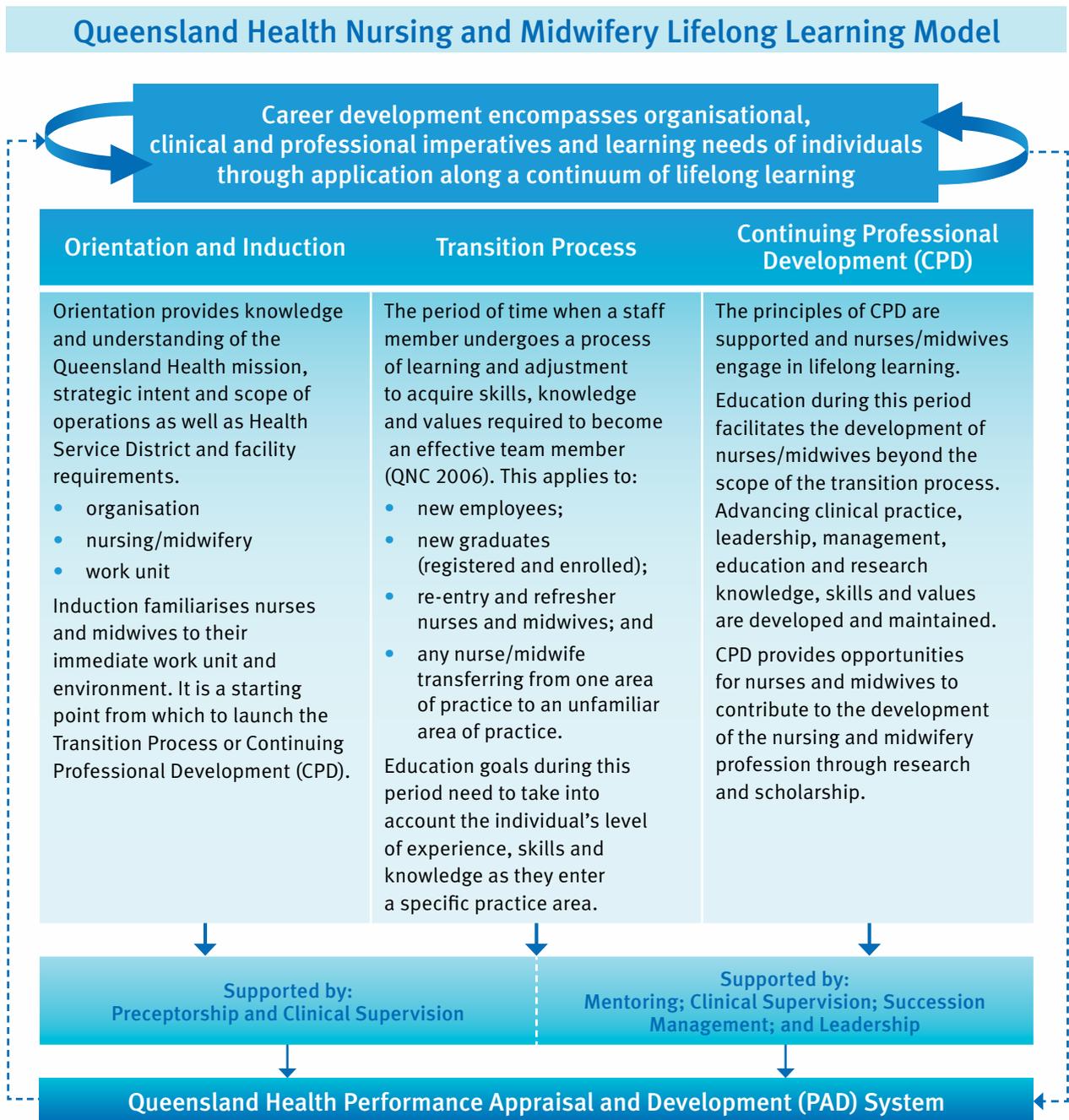
The intent of organisational development is focussed on the work team rather than individuals and is driven by the context of the workplace<sup>38</sup>. This form of development needs to be considered when the focus relates to organisational development.

The ongoing continuing professional development process is managed through the Queensland Health PAD system. Queensland Health facilities/work units are required to have a PAD system that effectively manages and supports staff performance and development.

Educational leaders provide nursing and midwifery education which will result in a quality workforce. Further, nursing and midwifery educators “possess a particular obligation to facilitate learning that will advance professional growth”<sup>2</sup>. Using the Framework for Lifelong Learning, nurse and midwifery educators collaborate with clinical stakeholders to operationalise and plan appropriate education for the facility and nurses/midwives.

The Queensland Health Nursing and Midwifery Lifelong Learning Model (Figure 2) encapsulates the broad extent of education activities across a continuum undertaken in the clinical, organisational and professional contexts of an individual’s learning needs and scope of practice.

Figure 2: Framework for Lifelong Learning for Nurses and Midwives in Queensland



## The Operational Map

The Operational Map provides an exemplar of types of learning activities the nurse/midwife will engage in during their progression through orientation, transition and onwards to continuing professional development along the lifelong learning continuum. An operational map (Figure 4) is provided in (refer to Appendix 1) for Health Service District/Facility Modification. The chief function of the Operational Map is to provide a guide or template that can be used to plan the learning requirements for a particular practice area. Organisational, district and work unit learning priorities, expectations of skill sets and timelines can be negotiated and depicted within the operational map.

The nurse or midwifery educator uses the operational map to plan educational activities for specialty areas. These activities will provide the clinical learning experiences for nurses/midwives specific to the individuals' work unit requirements. The expectation is that the nurse or midwifery educator will collaborate with key stakeholders from the area of practice in contextualising the Operational Map to the work unit's needs.

## Orientation and induction

Nurses/midwives are provided with the opportunity to consolidate the knowledge and skills required to fulfil job responsibilities within their defined scope of practice.

- Orientation to Queensland Health, District and Facility
  - Mandatory legislative and organisational requisites
- Orientation to Nursing and Midwifery Service
  - Mandatory clinical and professional requisites
  - Completion of the Foundation Program as part of Queensland Health Education for Practice in Queensland (EPiQ) – Medication Management, Infection Prevention, Patient Assessment and Professional Practice courses.
- Induction to the work unit
  - Planning commences for addressing individual learning

## Transition

Individuals are provided with support and opportunity to attain and further develop personal and professional nursing and midwifery knowledge, skills and values. The transition process enables the nurse/midwife to effectively and smoothly transfer into the health care team.

Transition processes can be facilitated by:

- EPiQ, which utilises a blended learning model (online components of Foundation, Core Skill and Specialty Programs);
- planned skill acquisition/assessment;
- seminar/clinical workshops/study days;
- self directed learning activities; and
- other educational activities.

## Continuing Professional Development (CPD)

Continuing Professional Development (CPD) is “the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence and develop the personal and professional qualities required throughout their professional lives”<sup>35</sup>. Individuals are provided with support and opportunity to attain and further develop personal and professional nursing/midwifery knowledge, skills and values. All nurses/midwives who are engaged in any form of nursing/midwifery practice will be required to complete CPD that is relevant to the context of their practice.

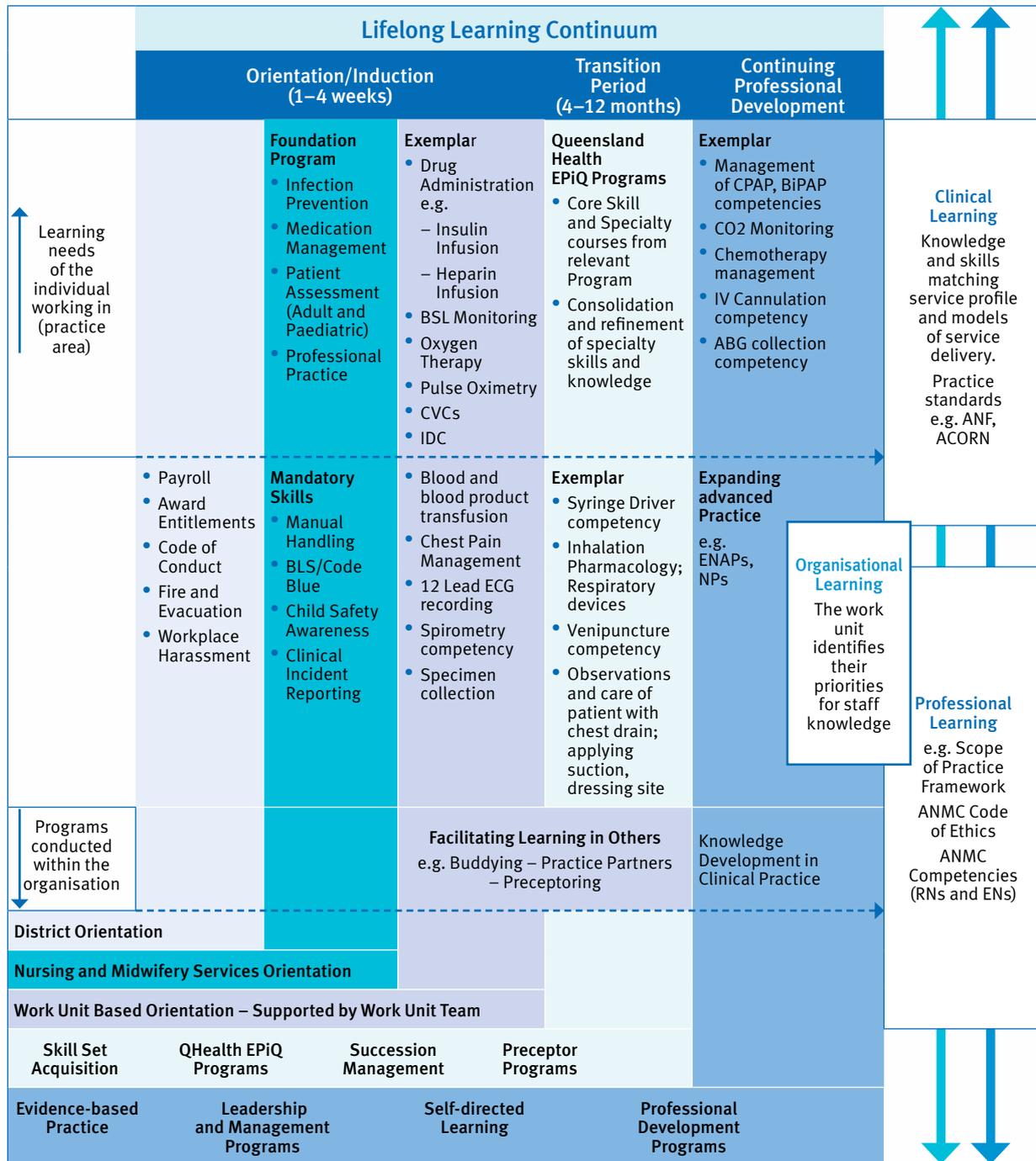
CPD should be considered a cyclical process whereby the nurse/midwife:

- reviews and reflects upon their professional practice;
- identifies their learning needs (clinical, professional and organisational);
- plans and participates in relevant learning activities (relevant to their context of practice); and
- reflects on the value of those activities to their practice.

CPD is facilitated and supported by, but not limited to, the following:

- Opportunities to expand clinical and professional scope.
- Supporting expanded advanced practice e.g. EN and RN Advanced Practice, Nurse Practitioner.
- Conferences/seminars/workshops.
- Case studies/scenarios.

Figure 3: Operational Map for Nursing and Midwifery Lifelong Learning within Queensland Health facilities



Created by: A Henderson and L Armit QH Feb07

## Career development

Registration is the beginning level of practice for nurses/midwives. It is the pathway for the continuous development of clinicians and ensures maintenance of standards and professional growth<sup>2</sup>. Continuing education for nurses/midwives needs to incorporate a balance of initiating, developing, maintaining and advancing competence in clinical, professional and personal skills and knowledge. Continuing education should facilitate career development, succession management, mentoring and peer support of nurses/midwives<sup>39</sup>.

The career development of a nurse/midwife is based on individual, organisational and professional imperatives and includes short and long-term goals.

As specific roles necessitate and as organisational strategic plans determine, the career development process works towards support for nurses/midwives to achieve individual and organisational goals and requirements identified through the PAD process. It is a development process reflective of a continuum of practice. Therefore, a nurse/midwife will at any given time, be at a point on a continuum of beginning to advanced practice in a particular work context. As the work practice context changes the nurse/midwife may move to a point of beginning practice in the different specialty or area of practice. The career development path needs to match the practice level of the individual nurse/midwife.

### *Standard for career development:*

**Nurses/midwives proactively participate in career development along a continuum of lifelong learning.**

### *Key performance indicators:*

- Career development strategies are included in all relevant service delivery and strategic planning documents
- Adequate education resources are sourced and aligned to support the achievement of strategic planning and service delivery requirements
- The Queensland Health PAD system is utilised to support the career development needs of nurses/midwives
- Nurses/midwives are provided with support and direction to identify opportunities for development, utilising appropriate supporting frameworks/systems
- Individual records and organisational data reflects the extent of career development and learning support opportunities
- Individual nurses/midwives provide evidence of ongoing continuing professional development in line with national registration standards.

## Orientation and induction

Orientation is the process by which new employees are provided with the opportunity to gain knowledge and understanding of Queensland Health as a statewide organisation, including its mission, strategic objectives and scope of the operation<sup>40</sup> and the requirements of the Health Service District (HSD). During orientation, nurses/midwives are informed of the policies and protocols of the facility, organisation and work unit, including how the Framework for Lifelong Learning is applied to practice. Nurses/midwives are provided with the opportunity to consolidate the knowledge and skills required to fulfil job responsibilities. This includes being informed of the workplace responsibilities and being acquainted with, clients/consumers and co-workers.

Orientation is an essential human resource management strategy that can influence the employee's subsequent attitudes towards the entire organisation. Orientation should make the staff member feel welcome, safe, valued and excited about their new workplace. Orientation programs facilitate an increase in both the new staff member's and organisation's effectiveness and efficiency<sup>41</sup>.

There are three (3) components of an orientation to the workplace program:

- Organisational (Queensland Health; HSD and/or facility);
- Nursing and Midwifery Services; and
- Work Unit.

Each Queensland Health facility is required to provide an orientation program with the above core components included. The design and content of the orientation program of each facility reflects the strategic direction of Queensland Health and the essential information required by a nurse/midwife to function safely within the facility. The design and delivery of the orientation program provides an entry basis from which additional transition process and professional development activities are identified and provided according to the specific learning of the individual. Opportunity to induct nurses/midwives into the professionalism of nursing and midwifery begins during this phase. New nurses/midwives must be supported as they begin to understand the professional requirements and activities of nursing/midwifery.

### ***Standard for orientation/induction:***

**Queensland Health HSDs/facilities deliver orientation programs that are congruent with Queensland Health Orientation Policy and reflect the strategic direction and facility operational requirements.**

### ***Key performance indicators:***

- Orientation and induction processes are included in all relevant service delivery and strategic planning documents
- Adequate nursing/midwifery service and work unit orientation resources are sourced and aligned to supporting the achievement of strategic plan and service delivery requirements. A policy exists that outlines the HSD/facility orientation and induction mandatory and requisite requirements
- All newly employed nurses/midwives attend orientation that includes legislative requirements and requisite skill set requirements for the position
- Data pertaining to throughput and classification is maintained and reported
- Evidence of reflection-in-action review of orientation and induction programs and resources.

## Transition process

*Transition is the period of learning and adjustment in which the new staff member acquires the skills, knowledge and values required to become an effective member of the health care team.<sup>42</sup>*

When a new nurse/midwife (irrespective of classification, length of service or experience) commences in a new environment and role, there is a period of time before they feel confident and competent. During this time nurses/midwives acquire knowledge, skills, values and attributes integral to their role. This process is referred to as transition. The provision of support for the new staff member during this period is crucial as it has been identified that transition support is an integral part of workforce planning and that there is a direct correlation between the implementation of programs and the retention of nursing and midwifery staff<sup>8</sup>.

Transition process support should be provided for any nurse/midwife who are:

- moving to a new practice setting (irrespective of classification);
- re-entering the workforce following successful completion of an endorsed program (for restoration of registration);
- returning to practice after an absence of five (5) or more years;
- demonstrating a beginning level competence after completion of a pre-registration, pre-enrolment or pre-endorsement course and is entering the nursing/midwifery workforce for the first time;
- undertaking EPIQ; and
- undertaking a speciality postgraduate higher education program.

The transition process component of the Framework for Lifelong Learning does not represent a fixed period of time. The length of time it takes an individual to complete the transition process is determined by both the nurse/midwife's entry behaviours as well as the achievement of competency standards set by individual facilities and/or work units. The progress of the individual through the transition process should be monitored by using the existing PAD system. Facilities/work unit are responsible for supporting nurses/midwives to achieve/maintain practice in line with relevant competency standards that must be achieved throughout the transition process. Competency standards are linked to the relevant professional group and specialty area of practice (e.g. ANMC, ACCCN, ANF or ACORN).

Throughout the transition process, learning and development milestones should be specified and utilised as markers to monitor the progress of the nurse/midwife. The teaching and learning support for the transition process uses both formal and informal support systems such as nurse and midwifery educators, clinical facilitators, preceptors, practice partners, and mentors. This support is primarily preceptorship based and utilises the Queensland Health Preceptor Program<sup>43</sup>.

## Principles of the Queensland Health Preceptor Program

- Preceptor support is provided in line with the Queensland Health Preceptor Program<sup>39</sup> during the transition process for new and transferred nursing/midwifery employees.
- All staff who participate in a support role, ie. preceptor or clinical facilitator, are adequately prepared and supported to fulfil their role.
- In line with state and national recommendations, new and transferred nurses/midwives should be provided with learning and development opportunities to build clinical workforce capacity and capability.

*Preceptorship is an organised and structured approach which provides transition support for new staff. It is performed by an experienced competent nurse who has been trained to facilitate new staff to attain agreed levels of competence and confidence<sup>43</sup>.*

Nurses/midwives undertaking a support role during the transition process should be adequately prepared by completing the Queensland Health Preceptor Program and/or an appropriate equivalent as a minimum standard. Fostering an effective relationship between the preceptor and preceptee is integral in supporting the teaching and learning process. This facilitates the assimilation and socialisation of the new nursing/midwifery employee into the work unit. During the transition process preceptor support and appropriate resources are to be provided. Support strategies to facilitate the transition process include, but are not limited to, supported and supervised clinical practice, skills assessments, evidence based practice initiatives and self reflection activities.

Self reflection activities should be fostered to promote learning from experiences, assisting the nurse/midwife to synthesise, analyse and transfer knowledge and skills from one context to another by stimulating critical thinking<sup>44</sup>. This will enable the new nurse/midwife (with diverse individual learning needs) to become confident and competent for practice within the new setting.

Determination of competence during the transition process is to be measured against established competency standards and linked to the nurse/midwife's PAD plan.

An effective application of the transition support process will encourage nurses/midwives to remain in the workforce. Education programs designed to support the development of nurses/midwives during the transition phase facilitate this phase of the Framework for Lifelong Learning. Queensland Health provides EPIQ, a flexible online blended learning program for nurses/midwives in the defined skill domains and specialities. EPIQ aligns with the N3ET National Specialisation Framework for Nurses and Midwives. These post registration programs comprise of contemporary and clinically focused learning programs that have been designed to provide the nurse/midwife with learning experiences to acquire the necessary knowledge and skills to begin to function effectively in an area of specialisation.

### *Standard for transition support process:*

Transition support processes are provided within facilities for all nurses/midwives entering into a new practice setting to undertake individualised, planned education processes to support a safe and effective transition into a new practice area.

### *Key performance indicators:*

- Transition processes are included in all relevant service delivery and strategic planning documents
- Adequate resources are allocated to support transition processes and programs
- The number of nurses/midwives undertaking and completing a Queensland Health formalised program of learning are measured and reported
- The number of eligible nurses/midwives completing EPIQ are measured and reported
- Evidence of the number of preceptor training workshops and updates and a minimum of 30% trained active preceptors within a facility
- Evidence of executive (Health Service District/Facility) support and the number of programs offered aligning to service needs/capacity
- There is evidence that educational programs align with facility/work unit service needs and contribute to building workforce capacity.

## Continuing Professional Development (CPD)

All nurses/midwives engaged in any form of nursing/midwifery practice will be required to complete CPD that is relevant to the context of their practice. Ongoing support to foster the development of advanced clinical, leadership, management, education and research knowledge and skills is provided to each nurse/midwife in line with requisite role responsibilities and individual development plans.

The HSD/facility supports nurses/midwives undertaking CPD activities. These activities may include the following examples:

- Post Graduate studies leading to a formal qualification award – vocational and tertiary levels
- Supporting expanded (RN/midwife) and advanced (RN/EN/midwife) practice e.g. EN/RN Advanced Practice, Nurse Practitioner
- Encouraging research activities e.g. links with Queensland Health Clinical Practice Improvement Centre (CPIC); research projects/grants
- Conferences, seminars, workshops, study tours, clinical experience/observation visits
- Opportunities to expand professional scope e.g. higher duties, project management, other nursing/midwifery roles/streams.

CPD activities will be determined by the individual's personal and professional goals. Mentoring, succession management and leadership are integral components of CPD and extend across the lifelong learning continuum and as such should be applied as either support or development strategies as relevant throughout the individual nurse/

midwife's career. The extent of the application of mentoring, succession management and leadership will be dependent on the classification and role the nurse/midwife fulfils.

The following resources are available to support this process:

- *Succession and Mentoring Framework for Nurses and Midwives in Queensland*<sup>45</sup>. This framework provides guidelines, strategies and resources to support the effective application of succession management, career development and mentoring for nurse and/or midwives within Queensland Health. The framework reflects Queensland Health's strategic priority to "Developing our staff and enhancing organisational performance"<sup>46</sup>.

The Queensland Health Workplace Culture and Leadership Centre offer a range of learning and development opportunities for Queensland Health managers and supervisors<sup>46</sup>.

The suite of resources available through the Queensland Health Learning and Development Unit can be referred to and applied as relevant.

All permanent registered and enrolled nurses/midwives working in Queensland Health are entitled to Professional Development Allowance (PDA) and Professional Development Leave (PDL). Associated PDL conditions are outlined in the Queensland Health Professional Development Package – Permanent Nurses and Midwives Grade 3 (Enrolled Nurses) and Above Guidelines (2010)<sup>47</sup>.

### **Standard for CPD:**

Nurses and midwives are supported to undertake CPD opportunities in line with individual clinical, professional and organisation learning needs as outlined in their PAD.

### **Key performance indicators:**

- CPD programs and processes are included in all relevant service delivery and strategic planning documents
- Adequate resources are allocated to support CPD programs and processes
- Data pertaining to throughput and classification is maintained and reported
- Evidence that facilities meet Queensland Health preceptor requirements (minimum of 30% trained active preceptors within a facility)
- Evidence that professional development leave is accessed
- Number of nursing/midwifery staff in facility with post graduate qualification.

# Evaluation and program review

Evaluation is an important aspect of education to ensure that the aims and outcomes have been achieved. Some reasons to evaluate programs include an assurance that they are effective; that the learners' needs have been met and that performance improvement outcomes and best practice initiatives have been achieved.

## Evaluation of programs developed in line with the Framework for Lifelong Learning

Evaluation is the process of judging the worth of aspects of a program of learning. There needs to be ongoing monitoring of and appropriate modification made to these programs. CPD programs are regularly evaluated and reviewed to ensure that the content reflects contemporary evidence based nursing and midwifery practice.

There are numerous evaluation models that can be applied to evaluate programs of learning. The purpose of using a prescribed model is to provide information to support decisions regarding continuation, termination or modification of these programs. Consideration needs to be given to the following:

- the intent of the evaluation purpose
- the required information
- provision of appropriate quality and quantity of data
- appropriateness to the educational context
- cost effectiveness<sup>48</sup>.

Kirkpatrick's model<sup>49</sup> describes four (4) levels of evaluation. This is a popular and widely used model for evaluation of teaching and learning. The data required will influence the level of evaluation applied. These levels measure:

- Level 1** Reaction of the learner (reaction to training/ learning experience, learner satisfaction).
- Level 2** Increase in learner's knowledge (evaluates how the learner experience meets program outcomes/ goals, what did they learn?).
- Level 3** Application of learning and behavioural change (learner's ability to apply learning to the clinical work unit).
- Level 4** Effect on the client's outcomes and achievement of Key Performance Indicators (KPIs) – did the learner's change in behaviour improve organisational effectiveness?

## Evaluation of the Framework for Lifelong Learning

Achievement of KPIs will determine the effectiveness of the Framework for Lifelong Learning in guiding nurse and midwifery education implementation and its impact on organisational and lifelong learning. The KPIs within the Framework for Lifelong Learning should be considered for inclusion in Nursing and Midwifery Education Strategic and Service Delivery Plans at local site facilities. Data collation to determine KPIs achievement is undertaken at district, facility and/or service level.

Further recommendations and the review cycle of the Framework for Lifelong Learning will be progressed through the Directors of Nursing and Midwifery Advisory Committee (DONMAC) and followed by endorsement by the Nursing and Midwifery Professional Development and Education Committee.

## Program review

Education programs available for nurses/midwives are critical in influencing future health outcomes and the provision of these programs will influence public and industry acceptance.<sup>36</sup> Consequently, there needs to be ongoing monitoring of and appropriate modifications made to these programs that are consistent with health care needs. Regularly evaluated and updated staff development programs ensure that the content reflects contemporary evidence based nursing/midwifery practice.

# Underpinning support for the Framework of Lifelong Learning – Queensland Health Performance Appraisal and Development (PAD) process

From 1 July 2010, the Nursing and Midwifery Board of Australia (*refer to Appendix 2*) requires nurses/midwives to participate in at least 20 hours of continuing professional development. CPD goals are identified in and supported through the PAD process. To support and encourage lifelong learning, best practice and career progression opportunities the line manager and nurse or midwifery educator needs to discuss short and long term goals with the nurse/midwife.

The Queensland Health PAD process is one of the key strategic management tools that enable staff on all levels of Queensland Health to assist in the achievement of sustainable improvements in organisational performance and to respond effectively to a constantly changing environment<sup>50</sup>.

When effectively applied, the PAD process provides for the ongoing development of nurses/midwives and should be based on the employee's role description for the relevant position. The elements of the relevant position should be clearly articulated with the employee upon commencement of employment. The employee needs to demonstrate that they are fulfilling their role requirements as identified in their role description and PAD agreement. The PAD system is not a punitive process but is utilised to manage and support ongoing development<sup>38</sup>.

The role of the nurse or midwifery educator in the PAD process is to provide support for line managers by assisting with motivating, coaching and planning professional development of individuals and teams. Clearly articulated performance goals negotiated between nursing/midwifery staff, line managers and other stakeholders help nursing/midwifery staff to feel confident about the work they perform and how it aligns with organisational and individual goals. In the clinical environment the nurse/midwife attains the clinical skills and requisite knowledge that enables the application of theoretical concepts to their clinical practice.

### Principles of the Queensland Health Performance Appraisal and Development (PAD) Process

- Role descriptions provide all employees with clearly defined descriptions of work responsibilities, knowledge, skills, professional competencies and the related standards of performance.
- The Queensland Health PAD process is utilised to meet role requirements related to the individual, unit and organisation.
- The Queensland Health PAD process is utilised to support continuing and ongoing professional development and career planning.
- Appropriate application of the PAD processes provides a mechanism that assists staff in receiving feedback, and can align with career planning.

#### *Standard for CPD:*

Nurses and midwives are supported to undertake CPD opportunities in line with individual clinical, professional and organisation learning needs as outlined in their PAD.

#### *Key performance indicators:*

- CPD programs and processes are included in all relevant service delivery and strategic planning documents
- Adequate resources are allocated to support CPD programs and processes
- Data pertaining to throughput and classification is maintained and reported
- Evidence that facilities meet Queensland Health preceptor requirements (minimum of 30% trained active preceptors within a facility)
- Evidence that professional development leave is accessed
- Number of nursing/midwifery staff in facility with post graduate qualification.

# Supports, links, resources and opportunities

## Queensland Health Preceptor Program

In line with the commitment to support nurses/midwives throughout the transition process, Queensland Health endorses the concept of 'preceptorship' as the model of support. The Queensland Health Preceptor Program<sup>43</sup> comprises an Implementation Guide, Training Modules and Resource Library (ie. Preceptor Resource Manual, Preceptor Train the Trainer Resource Manual and Training Resources). To assist HSD/facilities to appropriately prepare preceptors these resources are available from the Queensland Health Electronic Publishing Service (QHEPS).

## Recognition of prior learning and recognition of current competency

The principles of Recognition of Prior Learning (RPL)<sup>51</sup> and Recognition of Current Competency (RCC) are supported in programs under the Framework for Lifelong Learning. The possibilities for any form of advanced standing should be initially identified in the nurse's and/or midwife's PAD plan discussions.

A person enrolled in a CPD program may apply for RPL by: following the Queensland Health Recognition of Prior Learning Process Guidelines<sup>51</sup>; completing the RPL Workbook<sup>51</sup>; and providing sufficient evidence of existing skills and knowledge to meet the relevant program criteria.

## Queensland Health Nursing and Midwifery Governance Structure

The current Queensland Health Nursing and Midwifery Committee Structure identifies the groups that have specific responsibilities to guide, support and monitor the ongoing application of the Framework for Lifelong Learning and to provide strategic direction for nursing/midwifery staff development.

It is recommended that each HSD/facility have in place management systems and related procedures that will support the ongoing provision, maintenance and evaluation of staff development programs.

The committee structure is as follows:

- Health Service District nurse and midwifery Educators
- Nursing and Midwifery Directors of Education Advisory Group
- Queensland Health Nursing and Midwifery Professional Development and Education Committee aligned to Directors of Nursing and Midwifery Advisory Committee
- Queensland Nursing and Midwifery Education and Training Alliance, as applicable.

## Progression towards Advanced Standing

Nurses/midwives who have successfully completed EPIQ may choose to gain credit in respect to advanced standing for post graduate qualifications. Although post graduate articulation is not the primary intention of undertaking clinical, professional and/or organisational learning, there are flow-on benefits to those facilities/hospitals that choose to conduct relevant nursing/midwifery staff development programs at a standard that enables progression towards advanced standing.

These benefits may take the form of, but are not limited to:

- Improved patient/client outcomes
- The recruitment and retention of nurses/midwives
- Provision of a safe competent nursing/midwifery workforce
- An increase in the levels of nursing/midwifery staff satisfaction in relation to access to work-based clinical education
- Increased numbers of nurses/midwives with post graduate qualifications
- Increasing professional recognition
- Possible career advancement.

The Queensland Health post registration nursing and midwifery clinical education and training program curricula are progressed for endorsement through the relevant Queensland Health nursing and midwifery governance structure.

## Clinical Education and Training Queensland – ClinEdQ

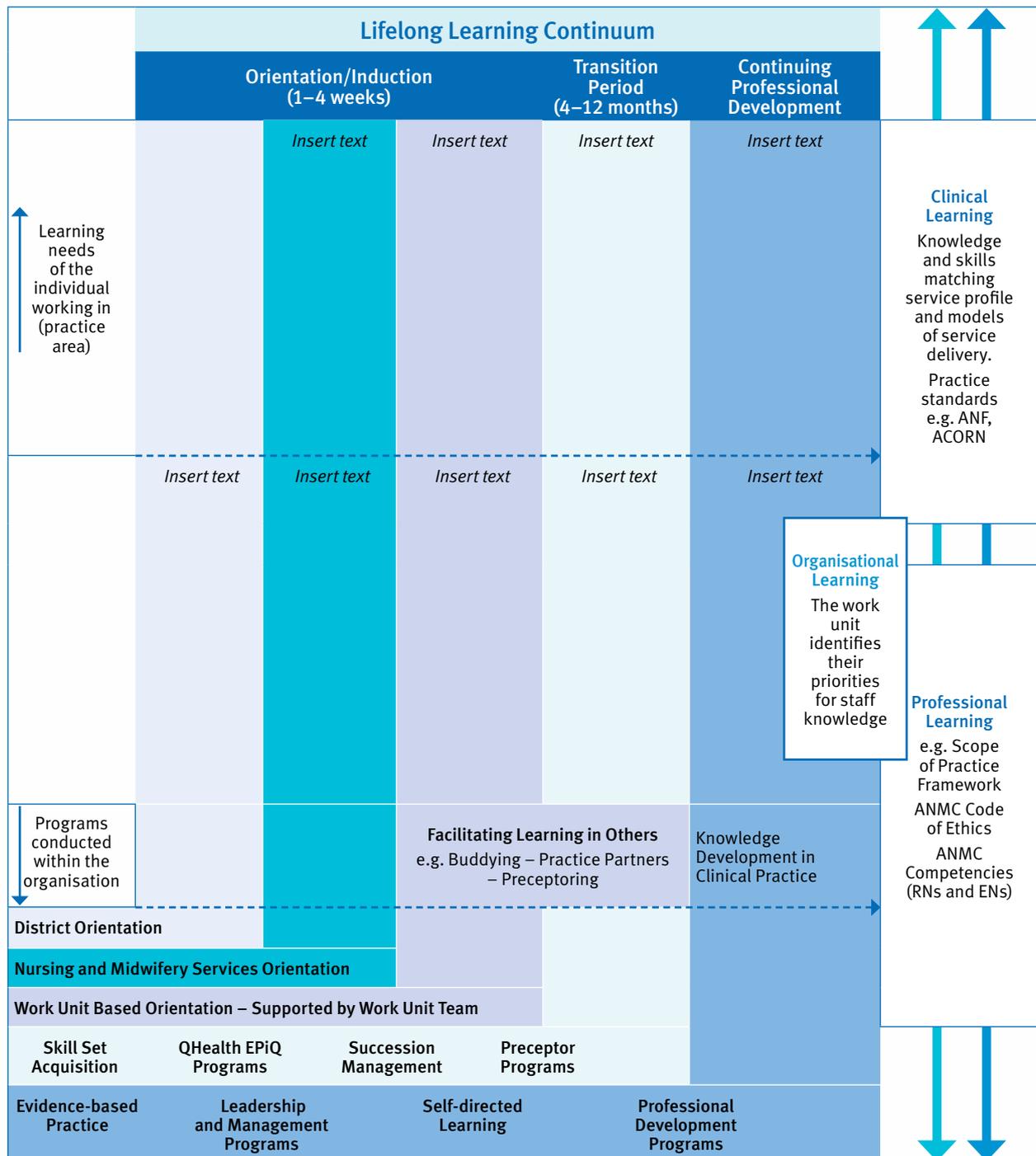
Queensland Health has established Clinical Education and Training Queensland (ClinEdQ) to ensure that demand for clinical education and training in Queensland is met without compromising the existing high standard of clinical training that health professionals receive.

**ClinEdQ's Vision is:** To lead and facilitate the sustainable, efficient and effective education, training and development of a clinical workforce that will meet the healthcare needs of the people of Queensland.

**ClinEdQ's Mission is:** To facilitate innovation and collaboration to build capacity and improve quality in clinical education and training across Queensland. ClinEdQ will take a statewide, multi-professional approach to clinical education and training.

# Appendix 1

Figure 4: Template – Operational Map for Nursing and Midwifery Lifelong Learning Within Queensland Health Facilities



Created by: A Henderson and L Armit QH Feb07

# Appendix 2:

## Nursing and Midwifery Board of Australia – Continuing professional development registration standard



### References

ANMC (Australian Nursing and Midwifery Council) (2009): *Continuing Competence Framework for Nursing and Midwives*

Nursing and Midwifery Board of Australia: *Guidelines for Continuing Professional Development*

### Review

This standard will commence on 1 July 2010. The Board will review this standard at least every three years of operation.



### Authority

This standard has been approved by the Australian Health Workforce Ministerial Council on 31 March 2010 pursuant to the *Health Practitioner Regulation National Law (2009)* (the National Law) with approval taking effect from 1 July 2010.

### Summary

All nurses and midwives must meet the continuing professional development (CPD) standards. This standard sets out the minimum requirements for CPD. CPD must be directly relevant to the nurse or midwife's context of practice.

The Board reserves the right to give exemptions in individual cases.

### Scope of application

This standard applies to registered and enrolled nurses, registered nurses endorsed as nurse practitioners, registered midwives, and registered midwives endorsed as midwife practitioners. It does not apply to students or nurses and midwives who have non-practising registration.

### Requirements

1. Nurses on the nurses' register will participate in at least 20 hours of continuing nursing professional development per year.
2. Midwives on the midwives' register will participate in at least 20 hours of continuing midwifery professional development per year.
3. Registered nurses and midwives who hold scheduled medicines endorsements or endorsements as nurse or midwife practitioners under the National Law must complete at least 10 hours per year in education related to their endorsement.
4. One hour of active learning will equal one hour of CPD. It is the nurse or midwife's responsibility to calculate how many hours of active learning have taken place. If CPD activities are relevant to both nursing and midwifery professions, those activities may be counted in each portfolio of professional development.
5. The CPD must be relevant to the nurse or midwife's context of practice.
6. Nurses and midwives must keep written documentation of CPD that demonstrates evidence of completion of a minimum of 20 hours of CPD per year.

7. Documentation of self-directed CPD must include dates, a brief description of the outcomes, and the number of hours spent in each activity. All evidence should be verified. It must demonstrate that the nurse or midwife has:
  - a) identified and prioritised their learning needs, based on an evaluation of their practice against the relevant competency or professional practice standards
  - b) developed a learning plan based on identified learning needs
  - c) participated in effective learning activities relevant to their learning needs
  - d) reflected on the value of the learning activities or the effect that participation will have on their practice.
8. Participation in mandatory skills acquisition may be counted as CPD.
9. The Board's role includes monitoring the competence of nurses and midwives; the Board will therefore conduct an annual audit of a number of nurses and midwives registered in Australia.

### Definitions

**Context of practice** refers to the conditions that define an individual's nursing or midwifery practice. These include the type of practice setting (e.g. healthcare agency, educational organisation, private practice); the location of the practice setting (e.g. urban, rural, remote); the characteristics of patients or clients (e.g. health status, age, learning needs); the focus of nursing and midwifery activities (e.g. health promotion, research, management); the complexity of practice; the degree to which practice is autonomous; and the resources that are available, including access to other healthcare professionals (ANMC 2009).

**Continuing professional development** is the means by which members of the profession maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives. The CPD cycle involves reviewing practice, identifying learning needs, planning and participating in relevant learning activities, and reflecting on the value of those activities (ANMC 2009).

# References

- 1 Thorne, Sally E. 2006. Nursing Education: Key Issues for the 21st Century. *Nurse Education Today*, 26, 614-621.
- 2 Henderson, A., Fox, R. and Armit, L. 2008. *Education in the clinical context: Establishing a strategic QHNMSDF to ensure relevance*. *Collegian*, 15, 63-68.
- 3 Ministerial Taskforce on Clinical Education and Training Steering Committee. 2007. *Ministerial Taskforce on Clinical Education and Training Final Report*. Queensland Government: Brisbane; March 2007:9 <http://www.health.qld.gov.au/clinedq/Documents/10CE0003.pdf>
- 4 Commonwealth of Australia. 2002. *National Review of Nursing and Midwifery Education 2002: Our Duty of Care*. Australian Government: Canberra.
- 5 Aitkin, R.L., Faulkner, R., Bucknall, T. & Parker, J. 2001. *Aspects of Nursing and Midwifery Education: The Types Of Skills And Knowledge Required To Meet The Changing Needs Of The Labour Force Involved in Nursing*. *Commissioned Research Project*, National Review of Nursing and Midwifery Education: Canberra.
- 6 Queensland Health. 2007. *Queensland Health Strategic Plan 2007–2012*. Queensland Health: Brisbane.
- 7 Queensland Health. 2001. *Queensland Health Nursing Staff Development Framework*. Queensland Health: Brisbane.
- 8 Queensland Health. 1999. *Ministerial Taskforce on Nursing Recruitment and Retention*. Queensland Health: Brisbane.
- 9 Queensland Health. 2004. *Queensland Health Nursing and Midwifery Staff Development*. Queensland Health: Brisbane.
- 10 Queensland Government. 2006. *Nurses (Queensland Health) Certified Agreement (EB6) 2006*. Queensland Government: Brisbane.
- 11 Australian Government. 2009. National Health and Hospitals Reform Commission. *A Healthier Future for all Australians*. Australian Government: Canberra.
- 12 Queensland Government. 2007. *Queensland Health Learning and Development Strategic Framework 2007–2012*. Queensland Government: Brisbane.
- 13 National Nursing and Nursing Education Taskforce. 2006. *National Nursing and Nursing Education Taskforce, Final Report*. December 2006.
- 14 National Nursing and Nursing Education Taskforce. 2006. *A National Specialisation Framework for Nursing and Midwifery: Defining and Identifying Areas of Practice in Australia*.
- 15 Queensland Government. 2005. *Queensland Health Systems Review*. Queensland Government: Brisbane.
- 16 Queensland Government. 2005. *Clinical Services Capability Framework Version 2.0*. Queensland Government: Brisbane.
- 17 Crook, L., Curtis, P. and Thomas, G. 2003. *Learning Communities: Innovation in Nurse Education in Supporting Learning in Nursing Practice*, Glen, S. & Parker, P (eds). Palgrave MacMillan. Basingstoke.
- 18 Queensland Health. 2009. *People and Culture Plan 2009–2012*. Queensland Health: Brisbane.
- 19 Billett, S. 2001. *Learning in the Workplace: Strategies for effective practice*. Crows Nest : Allen & Unwin.
- 20 Australian Nursing and Midwifery Council. 2005. *Australian Nursing and Midwifery Council. National Competency Standards for the Registered Nurse*. Australian Nursing and Midwifery Council: Canberra.
- 21 Australian Nursing and Midwifery Council. 2005. *ANMC National Competency Standards for the Nurse Practitioner*. Australian Nursing and Midwifery Council: Canberra.
- 22 Australian Nursing and Midwifery Council. 2006. *National Competency Standards for the Midwife*. Australian Nursing and Midwifery Council: Canberra.
- 23 Australian Nursing and Midwifery Council. 2005. *Australian Nursing Midwifery Council. National Competency Standards for the Enrolled Nurse*. Australian Nursing and Midwifery Council: Canberra.
- 24 Australian Nursing Federation. 2005. *Competency Standards for the Advanced Enrolled Nurse*. Australian Nursing Federation: Canberra.
- 25 Australian Nursing Federation. 2005. *ANF Competency Standards for the Advanced Registered Nurse*. Australian Nursing Federation: Canberra.

- 26 Australian Nursing and Midwifery Council. 2002. *Principles for the Assessment of National Competency Standards*. Australian Nursing and Midwifery Council: Canberra.
- 27 O'Shea, K. 2002. *Staff Development Nursing Secrets – Questions and Answers Reveal the Secrets to Successful Staff Development*. Hanley & Belfus Inc: Philadelphia.
- 28 Gillies, D.A. 1994. *Nursing Management A Systems Approach* (3rd ed). Saunders: Philadelphia.
- 29 Australian Nursing and Midwifery Council. 2008. *Code of Ethics for Nurses in Australia*. Australian Nursing and Midwifery Council: Canberra.
- 30 Australian Nursing and Midwifery Council. 2006. *Code of Professional Conduct for Nurses in Australia*. Australian Nursing and Midwifery Council: Canberra.
- 31 Australian Nursing and Midwifery Council. 2008. *Code of Professional Conduct for Midwives in Australia*. Australian Nursing and Midwifery Council: Canberra.
- 32 Australian Nursing and Midwifery Council. 2008. *Code of Ethics for Midwives in Australia*. Australian Nursing and Midwifery Council: Canberra.
- 33 Australian Nursing and Midwifery Council. 2010. *A Nurse's Guide to Professional Boundaries*. Australian Nursing and Midwifery Council: Canberra.
- 34 Australian Nursing and Midwifery Council. 2010. *A Midwife's Guide to Professional Boundaries*. Australian Nursing and Midwifery Council: Canberra.
- 35 Nursing and Midwifery Board of Australia. 2010. *Continuing Professional Development Registration Standard*. Nursing and Midwifery Board of Australia: Melbourne.
- 36 Queensland Health. 2002. *Smart State: Health 2020 a vision for the future – Summary Discussion Paper*. Queensland Health: Brisbane.
- 37 Dhondea, R. 2004. Positive Staff Education, *Hospitals & Healthcare*. Feb 2004, p.p. 30-31.
- 38 Royal Brisbane and Women's Hospital Health Service District. 2005. *Performance Appraisal and Development Information Manual*. Royal Brisbane and Women's Hospital: Brisbane.
- 39 Department of Health, Government of South Australia. 2004. *Continuing Education Report – Nursing Office*. South Australian Department of Health: Adelaide.
- 40 Queensland Health. 2008. *HR Policy – G6. Induction and Orientation*. Queensland Health: Brisbane.
- 41 Genrich, S.J. & Pappas, A. 1997. *Retooling Faculty Orientation*. *Journal of Professional Nursing*. 13(2), 84-89.
- 42 Fox, R; Henderson, A., and Malko-Nyhan, K. 2005. *They survive despite the organisational culture not because of it – A longitudinal study of new staff perceptions of what constitute support during transition to an acute tertiary facility*. *International Journal of Nursing Practice*. 11, 193-199.
- 43 Queensland Health. 2010 *Queensland Health Preceptor Program*. Queensland Health: Brisbane.
- 44 Billings, D. & Halstead J. 2005. *Teaching in Nursing – A Guide for Faculty* (2nd Ed). Elsevier Inc. Missouri.
- 45 Queensland Health. 2010. *Succession and Mentoring Framework for Nurses and Midwives in Queensland*. Queensland Health: Brisbane.
- 46 Queensland Health. 2006. *Queensland Health "Better Workplaces" Leadership Program*. <http://qheps.health.qld.gov.au/betterworkplaces/leadership/home.htm> Queensland Health: Brisbane.
- 47 Queensland Health. 2010. *Professional Development Package – Permanent Nurses and Midwives Grade 3 (Enrolled Nurses) and Above Guidelines*. Queensland Health: Brisbane.
- 48 The University of Southern Queensland. 2004. *Evaluation in Instructional Settings Study Book*, Distance Education Centre. The University of Queensland: Toowoomba.
- 49 Kirkpatrick, D. L. 1998. *Evaluating Training Programs: The Four Levels*, (2nd ed.). Berrrett\_Koehler Publishers: San Francisco.
- 50 Queensland Health. 2004. *Queensland Health Performance Appraisal & Development 'How to' Guide for Managers and Supervisors*. Queensland Health: Brisbane.
- 51 Queensland Health. 2009. *Recognition of Prior Learning (RPL) Guidelines*. Queensland Health: Brisbane.





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