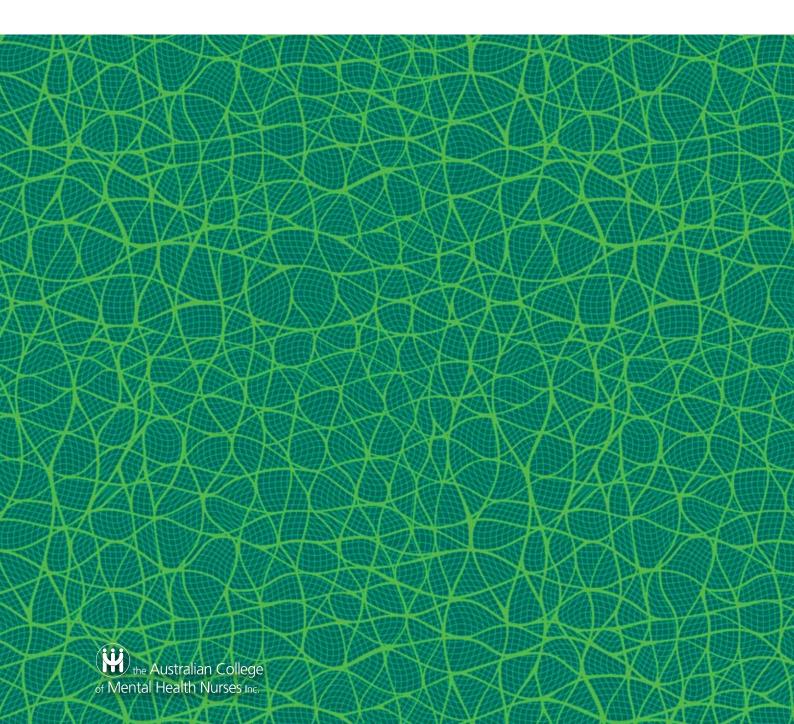


# Program Accreditation Information For Universities Seeking Accreditation

of Postgraduate Mental Health Nursing Program



#### **Professional Standards & Guidelines**

#### Program Accreditation Information For Universities Seeking Accreditation of Postgraduate Mental Health Nursing Program

#### Acknowledgements

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These Standards and Guidelines have been produced under the auspices of the Australian College of Mental Health Nurses (ACMHN) and guided by the Expert Reference Group (ERG) for this purpose. The Queensland Nursing Council (QNC) provided sponsorship for the project.

The contribution of a great number of individuals and organisations is acknowledged in the preparation of these Standards and Guidelines including: The generosity, advice and assistance provided by a range of health education program accreditation bodies and associations are acknowledged, in particular:

The Council of Ambulance Authorities (CAA) which has generously permitted use of their document templates for accreditation processes.

A pilot of the implementation of the Standards and Guidelines was undertaken and the processes evaluated and refined during 2015 as an ongoing process of continuing quality development. Further refinements will be undertaken.

the Australian College of Mental Health Nurses Inc.

# Program Accreditation Information For Universities Seeking Accreditation

Post-graduate Mental Health Nursing Education Accreditation

of Postgraduate Mental Health Nursing Program

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(This document is to be read in conjunction with the 'Guidelines for the Assessment and Accreditation of Postgraduate Mental Nursing Health Programs'. It is the intent of this document to not duplicate information contained in the Guidelines; each paragraph has the applicable page and/or standard annotated for ease of reference and further information.)

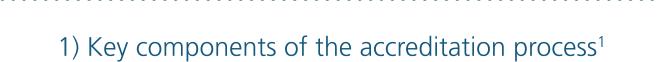
## Glossary of terms

The following are terms and definitions used within the accreditation process:

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Board	ACMHN Board
AC	Accreditation Committee
AS	Accreditation Secretariat
SET	Site Evaluation Team
AT	Assessor Training

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Post-graduate Mental Health Nursing Education Accreditation

The process for assessment and accreditation of Postgraduate Mental Health Nursing programs is based on a collaborative approach. It is a combination of educational institutional self-assessment and external review.

The process of accreditation includes the following steps:

- Self-assessment by the university seeking accreditation. The self-assessment is an important planning instrument to enable identification of strengths and weaknesses and areas for improvement. The self-assessment should provide the basis for the university to develop its accreditation application.
- Submission of an application for accreditation.
- An assessment by an appointed team (composition of the team is described in 4.2. in the Professional Standards and Guidelines for the Assessment and Accreditation of Postgraduate Mental Health Nursing Programs). The assessment of accreditation applications will include a site visit by the team.
- A draft report by the team will go to the University for comment
- A final review of the report by the Chair of the team will occur following the University's review and feedback.
- A final report, including recommendations regarding the accreditation status (to be awarded or not awarded) will go to the ACMHN Board of Directors.
- Advice to the University on the decision.

<sup>1</sup> See Standard 4, Guidelines for the Assessment and Accreditation of Postgraduate Mental Health Nursing Programs, for more information.

**Information For Universities Seeking Accreditation** 

#### 2) Purpose of the Accreditation submissions<sup>2</sup>

Initial judgments about the appropriateness and effectiveness of the university's processes and programs are based on the accreditation application submission.

The Evaluation Team will read the submission on two levels:

- For information on the University's policies, processes and programs and to form initial views on these; and
- To form an opinion on the quality of the University's self-assessment and the evidence for claims made.

#### 3) Accreditation application – support documents

The following list provides some indication of what documents could be included with an application to support responses to accreditation requirements:

- Mission statement
- Strategic plan
- Learning, research and practice objectives
- University, Faculty, School and/or Departmental organisation charts
- Policies and procedures academic matters
- Policies and procedures recruitment, selection and appointment of academic staff
- Policies and procedures student admissions and assessment
- Committee membership lists indicating consumer (student and clients) representation on relevant committees
- Staff/student ratio numbers
- Material resources
- Risk management plans IT resources, personnel
- Profiles and designations of academic staff and other university academics teaching in programs
- Subject/course outlines
- Unit of study hours per credit points
- Mapping of curriculum to learning outcomes (Graduate abilities)
- Professional placements information
- Quality Assurance Plan
- Details of student support services
- Learning outcomes statements

<sup>2</sup> See Standard 4



#### 4) Submission of accreditation applications

Applications for accreditation must address Guideline 3 as set out in the Standards and Guidelines. Universities must submit the relevant application on the application form (located on the ACMHN website). The application will be submitted electronically to the Accreditation Secretariat at the email address stated on the website, OR, where files are too large for transmission in this way, they should be submitted in an electronic printable format.

### 5) Site Evaluation Team (SET) visits and meetings<sup>3</sup>

Following the submission of an application for Accreditation, the Accreditation Committee will organize an on-site visit of one or two days depending on the size and complexity of the programs at the particular university.

The objectives of the site visit are to:

- Confirm the main findings of the self-assessment submission.
- Take the self-assessment as a starting point to engage in a constructive dialogue with faculty members.
- Seek additional information as necessary in order to establish a comprehensive understanding of the university's processes.
- Make an overall assessment of the university's Postgraduate mental health nursing program.
- Provide recommendations for future development and quality improvement.
- Complete a report formally setting out the findings, assessment and recommendations of the team for use by the university. The report will also state the accreditation status achieved, as recommended by the team and approved at a meeting of the Accreditation Committee.

The team will gather information during the visit through a variety of methods such as collection of documents and statistics (e.g. study guide, reading lists, statistics on pass/failure at exams); individual interviews (with Dean, Department Heads, etc.); group interviews (academic staff, administration staff, students); and/or direct observation (through appraisal of relevant resources).

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<sup>3</sup> Guideline 4.2.1

#### 6) Site visit scheduling<sup>4</sup>

- The schedule for a site visit will be put together in cooperation between the Chair of the SET, the Accreditation Secretariat and coordinating staff member of the University, with the university staff member taking the lead.
- The duration of the site visit will depend on the size and complexity of the program and will vary from between 1 to 2 days. The duration will be decided well prior to the organisation of the actual visit.
- University personnel required for interview may include:
  - Head of School/Department
  - Head of the discipline of mental health
  - Professoriate and other teaching staff
  - Academic staff from other disciplines who teach in the program
  - Research staff where applicable
  - Student support personnel
  - Personnel involved in arranging/coordinating professional placements
  - Student representatives
  - Consumer representatives

#### 7) Site evaluation team visit initial feedback

- Prior to the end of the site visit, the team will discuss separately and record:
  - Their overall findings and conclusions concerning the strengths and weaknesses of the program; and
  - Identify any standard/s which it considers the submission/application has not met
- The team will meet with the Head of School/Discipline prior to the close of the visit (this time will be scheduled on the visit timetable) to provide feedback on the above points. This feedback will be a verbal report; more detail will follow in the Draft Accreditation report. The purpose of the initial feedback is to offer the University some understanding as to how well it has done following the site visit. The subsequent report will contain more information, but it should not offer any unexpected information of a negative nature.
- The initial feedback also offers the opportunity to commend the positive aspects of the visit and the program offered at the University.

<sup>4</sup> Guideline 4.2.1 Site Evaluation Teams



#### 8) SET Findings & Reports

Within 4 weeks of the site visit, the team will complete a draft report of its findings and conclusions. The draft report is sent to the Accreditation Secretariat and is then referred to the Head of School (or appropriate nominated University member of staff) to review and make corrections or comments. The Head of School, or nominee, has 4 weeks to respond to the Accreditation Secretariat.

The Accreditation Secretariat will pass comments through to the SET coordinator who will finalise the report, taking into consideration the University's comments, and who will then send through to the Accreditation Committee the final report. Comments from the University not incorporated in the final report by the team coordinator will also be sent to the Accreditation Committee for consideration alongside the final report.

### 9) Notification of accreditation decision

The Accreditation Secretariat will provide the School with the final report and of the decision recommended by the Accreditation Committee (and ratified by the Board) in writing. The Accreditation Secretariat will then update the website on the accreditation status of the program and the university may promote the program(s) as accredited by the ACMHN.

#### 10) Graduate outcomes<sup>5</sup>

In order to clearly define graduate abilities, the ACMHN has developed the National Framework for Postgraduate Studies in Mental Health Nursing.

The Universities are required to provide evidence through the collection and evaluation of assessment data that graduates of their program demonstrate the graduate abilities as defined in the National Framework.

- 1. Evidence required to meet this expectation includes:
- 2. Internal assessment and external evaluations of graduate abilities, and

responses to the results of external evaluations in order to continually improve and have confidence in the standards of its graduates

Examples of evidence may include:

- Student self-reported attainment of graduate abilities
- Annual surveys of graduates and employers
- Course experience questionnaires and other surveys
- Other review methods and associated reports
- Data on response rates to surveys in relation to course student numbers
- Comparison data over time and analysis
- Feedback mechanisms
- Plans and action taken to address issues highlighted through the analysis of the data collected
- On-going quality improvement activities

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<sup>5</sup> National Framework for Postgraduate Studies in Mental Health Nursing : Table 3

#### **Information For Universities Seeking Accreditation**

#### 11) Professional placements

It is essential that students have opportunities to participate in a broad range of practical professional learning experiences. Universities must provide evidence that the program includes experiences that provide opportunities to demonstrate abilities as described in the National Framework.

The Site Evaluation Team (SET) will need to be assured:

- That access to professional experience for students is available.
- That there is agreement in place indicating employers will provide opportunities for relevant professional practice.

Examples of evidence of meeting this requirement may include:

- Descriptions of learning contracts and mentorship as appropriate.
- A description of simulated practice opportunities.
- Written agreements and/or letters of intent from all sites.



Notes

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