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EORNA

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INTRODUCTION TO EORNA

Presentation of European Operating Room Nurses Association (EORNA)

EORNA was founded in 1980 by a group of highly motivated European perioperative nurses and formally launched in Copenhagen Denmark in 1992. There are currently 27 member associations on EORNA board, representing 60,000 members and the association is growing in membership. The membership is based on the WHO regional health map. The board is made up of two representatives from each national association.

Mission statement of EORNA:

European Operating Room Nurses Association, EORNA, exists to enhance and develop perioperative patient care across Europe. It will do this through:

- Promoting and maintaining a high standard of perioperative patient care
- Being the influential voice of perioperative nurses in Europe
- Linking and collaborating with relevant European and international organisations
- Developing educational and learning opportunities for members

Aims and objectives of EORNA:

- To collaborate as a group of European perioperative nurses who exchange information and ideas to enhance and develop perioperative care from an evidence-based perspective
- To represent and be the voice of specialist perioperative nurses and practitioners
- To promote the professional standing of the European perioperative nurse
- To promote and maintain optimum standards of nursing care and practice in the perioperative environment
- To define and implement ethical practice in the perioperative environment
- To apply scientific research to perioperative care
- To standardise the level of education across member countries
- To collaborate with other organisations with related interests
- To promote safe and healthy perioperative environments for patients and staff
Introduction by Caroline Higgins - President Eorna – 2012

It gives great pleasure to launch the 2nd edition of the EORNA Core Curriculum in 2012. The first edition was published in 1997.
We recognize the work and commitment that went into the initial and now the revised edition of this document.
Together with the EORNA Competency framework, this document can assist in the building of perioperative educational and developmental programmes as a guidance tool.

One of the key aims of EORNA is to promote education and a minimum standard across all member countries. The core curriculum is a valuable tool in advancing this objective.
All member associations should promote the use of the core curriculum as a minimum framework for Perioperative programme development.

We hope you find this document helpful and a positive guide for those commencing programme development.

Caroline Higgins
EORNA President
April 2012
COUNTRIES PARTICIPATING IN THE CURRICULUM DEVELOPMENT

- BELGIUM - VVOV
- BELGIUM – AFISO
- CROATIA – CORNA
- CYPRUS - CORNA
- CZECH REPUBLIC - CZORNA
- DENMARK – FS SASMO
- ESTONIA - ESTORNA
- FINLAND - FORNA
- FRANCE – UNAIBODE
- GERMANY - DFBK
- GREECE – GORNA
- HUNGARY - MMT
- ICELAND - ISORNA
- IRELAND – INMO
- ISRAël - IPNA
- ITALY - AICO
- NETHERLANDS - LVO
- NORWAY - NAORN
- PORTUGAL – AESOP
- SLOVENIA - SORNA
- SPAIN – AEEQ
- SWEDEN - SEORNA
- SWITZERLAND – SIGOP-SIDOPS
- GREAT-BRITAIN - AIPP
- RUSSIA – Russian Nurses Association
- TURKEY - TCAHD
FOREWORD

The Education committee undertook the review of this curriculum document to meet current requirements in perioperative education taking into account the EORNA competency framework.

This educational curriculum is designed as a tool to guide all members in the development of perioperative education as a minimum requirement for each country.

**Old curriculum design consisted of four modules:**

1. Principles of perioperative nursing care  (minimum 300 hrs)
2. Surgical competencies in perioperative nursing care  (minimum 475hrs)
3. Nursing care in anaesthesia  (minimum 300hrs) *(for some countries)*
4. Development of the person to become professional  (minimum 185hrs)

The educational committee developed an **EORNA FRAMEWORK FOR PERIOPERATIVE NURSING COMPETENCIES (2009).**

The motivation for building a European framework of competencies is:

- To comply with requirements set by the Bologna’s reform in terms of training and job standardization
- To certify, in Europe, professionals able to adapt to the important challenge of delivering appropriate nursing care in an operating theatre environment

The educational committee must **REVIEW THE CURRICULUM** in relationship to the competencies and to adapt it as necessary to respond to current situations. *(2012).*

The curriculum is designed to be flexible with each country able to interpret it into their own health care system, yet with sufficient inbuilt control mechanisms to maintain an acceptable standard.

It is important here to stress that the agreed minimum time for the programme will only achieve awareness of the principles of working within an operating department. Concern has been expressed by some countries that these numbers could be considered as recommended for all programmes. EORNA wishes to stress that a more substantive course would be required to achieve total competence within the field of operating and anaesthetic room care. Examples of more complex individual courses are available in the appendix.

Individual member representatives remained responsible for marketing the curriculum to their own national nursing body, whilst EORNA has sought recognition through the European Commission.
USING THE CURRICULUM TO PLAN A PROGRAMME

It is envisaged that individual countries or areas wishing to provide a programme based on this curriculum will set up their own planning group and will design a programme specific to their own health care setting, but using the learning outcomes and assessment guidelines to ensure that they fulfil the criteria for completing the programme.

This may vary according to health care structures and controls in individual countries or areas, and it is not therefore appropriate to provide a readily designed rigid framed programme. The minimum times allocated for each module have been agreed to enable introduction of new programmes in countries which currently do not recognise post basic training needs. We would hope to see a more substantive programme offered in most instances.

The programme should be able to be adopted by any nursing school and/or any hospital provided there is the correct educational support together with adequate clinical supervision by qualified staff within the operating environment.

Theory and practice MUST be directly related with emphasis on the clinical application of theoretical concepts to the development of competencies in the operating environment.

In accordance with the Bologna recommendations, the education must qualify for 60 ECTS (30 ECTS for theory and 30 ECTS for practice). The minimum level to begin the education in perioperative nursing is a nursing bachelor level diploma. It is not necessary to have experience in operating room nursing (or in another field) to enter the educational program.
PHILOSOPHY FOR THE EUROPEAN COMMON CORE CURRICULUM

In presenting the philosophy for this programme, we are mindful of the Virginia Henderson definition of nursing:

"The unique function of the nurse is to assist the individual sick and well in the performance of those activities contributing to health or its recovery (or a peaceful death) that they would perform unaided if they had the necessary strength, will and knowledge. It is likewise the unique contribution of nursing to help people be independent of such assistance as soon as possible".

(Henderson, 1966)

This forms the basis of our intentions in giving nursing care, and we are further guided by the International Committee on Nursing's Statement on Ethics.

Both of these underpin the following philosophy agreed by all members of the European Operating Room Nursing Association:

*Individuals undergoing invasive surgical and/or anaesthetic procedures have a right to be cared for by appropriately qualified staff in a safe supportive environment whilst in the peri-operative experience.*

*Those qualified and experienced staff working within the multidisciplinary team should be expected to perform in a competent manner; displaying an awareness of current developments in research and knowledge relating to the operating department and peri-operative care.*

*A systematic approach to holistic care should maintain the identity and dignity of each individual patient without prejudice to health status, their nationality, creed, religion or other beliefs.*

*The patient, the relatives and any significant others, are entitled to receive the necessary information and physical and emotional support needed to help them through the stages of peri-operative care.*
THE EORNA MODEL OF PERIOPERATIVE CARE

Just as Maslow's theory of Human needs builds upon essential physiological needs so this perioperative model of practice recognises the essential part of the basic principles in underpinning both higher more specific practical skills and personal development within the individual concerned.

The model illustrates aspects of experiential taxonomy (Nicklin & Kenworthy, 1995) which incorporates a series of stages through which the student progresses, commencing with initial exposure to the experience of the general perspective of peri-operative care through to the incorporation of that experience in the student's observable behaviour as a competent practitioner within the department.

The competence referred to here equates to competence as indicated by Benner which falls halfway between the beginner and the "unthinking, smooth and adaptable performance of the expert" (Benner, 1984). It is recognised that additional developmental time will be needed once the programme is completed to enable the competent practitioner to become a peri-operative expert - just as it is recognised that some may never achieve that level.

Walsh (1991) gives credence to models which start out predominantly with an essential of care orientation and lead to a developmental and interactionist perspective which is clearly included here.

The model further incorporates elements of both product theories - foundation and specialist skills outcomes - and process theories, where the development of the individual becomes the final focus. Pendlelon & Miles (1991) are amongst those to recognise that both these elements can sit comfortably together.

The curriculum encompasses development of theory and practice simultaneously and carries a process of continuous assessment of practice both by the individual learner and his/her teachers and mentors. This ongoing assessment allows for the early identification of potential problems thus permitting the necessary response to enable the learner to overcome those difficulties and progress through the programme developing him/herself as both an individual person and a competent practitioner.
EORNA

THE EORNA MODEL OF PERIOPERATIVE NURSING

The Professional Perioperative Nurse

Knowledge and competencies

Anaesthesia  Surgery

Principles of Perioperative Nursing care
COMMON CORE CURRICULUM

1. The intention of the Common Core Programme

The programme should provide the essential education which would be required by all countries when allowing a person from another country to come and work in an operating department. When a person claims to have completed the common core, the department will be aware of the level of knowledge which can be expected of that person.

For some countries the common core may be the only peri-operative education received, whereas others may feel prepared to accept people with this minimum provided they agree to undertake the further education as required by those persons for that particular country.

It is recognised that within some countries, anaesthetics is excluded from the role of the operating department nurse, whereas in others it is part of the overall education programme and role or may constitute a separate speciality with its own education.

It is further recognised that where countries already have an excellent education for their operating department nurses, this common core curriculum is not meant to replace that education, but to be recognised as part of that preparation.

It must be stressed that the hours allocated to each module are the very minimum acceptable and where possible additional time should be given to enhance development of a skilled practitioner. The agreement upon this aspect of the course promoted considerable discussion and concern from some member countries.

2. Definition of perioperative Nurse /Nursing Care

The professional perioperative nurse is one who has become an expert in one (or more) of the fields of perioperative nursing care.
Perioperative Nursing care is defined as nursing care delivered in the areas of preoperative, intraoperative and postoperative patient care.
The professional perioperative nurse is an advocate for the patient, an actor within the health care system, a partner with the patient and expert in the field, and works with a health care team in an independent, and / or dependent role.
*(ICN: SCOPE OF PRACTICE, STANDARDS AND COMPETENCIES OF THE APN.)*

3. Aim and objectives

The specialisation year in OR aims at the acquisition of a theoretical and clinical knowledge necessary to the development of the competencies defined by EORNA.

At the end of the training and with a view to reaching those competencies, the perioperative nurse will be able to:

- take charge of a particular individual patient during the peri-operative period
- ensure the patient safety on a moral and physical level in the respect of the person and his/her rights
- master hospital hygiene, asepsis, and the different methods of disinfection and sterilization
- act as an assistant anaesthetic nurse during the whole peri-operative period (in some countries)
- act calmly and competently as a circulating nurse and a scrub nurse in the basic techniques of the main specialities of surgery
- manipulate skilfully and maintain the main instruments and devices used in the Operating Room
- take part in the administration and organization of an OR and in the management of a multidisciplinary team
- take part in nursing care research programmes.

Attaining the required competency level will enable the perioperative nurse to:

1. Provide quality care, in a safe manner, whilst performing the following roles:
   - Circulating nurse;
   - Assistant to the anaesthetist or anaesthetic nurse (in some countries)
   - Scrub nurse;
   - Post anaesthetic care unit nurse
   - Surgical Assistant (in some countries);
   - Hygiene management;
   - Pain management.
2. Operate in a multi-professional team.
3. Participate in quality assurance programmes
4. Organize and manage an Operating Room/Department.
5. Partake in risk management strategies
6. Maintain own professional competence through ongoing current education and awareness.

The working areas of perioperative nursing include:

- The ambulatory day surgery care
- The operating room
- Anaesthetic Nursing (in some countries)
- The post anaesthetic care unit;
- The sterilisation department;
- In other fields of invasive techniques (endoscopy, interventional - radiology, etc).

4. Competencies:

Foreword for the EORNA framework competencies:

This tool is designed as a framework for the guidance and development of EORNA member perioperative nurses. It is accepted that some countries/organisations will need to add or subtract to aspects of the framework to meet specific and customary needs. It is recognised that many perioperative nurses work in single speciality situations, for example: Anaesthetic Nursing, so therefore may not attain competency objectives of other domains identified in the framework. It is envisaged that the tool will be utilised by the organisations/individual EORNA members based on a chosen perioperative career pathway and/or organisational need. It is also anticipated that the content of this document will be incorporated into relevant perioperative nurse training programmes.
Rationale for Framework:
Those qualified and experienced nursing staff working within the multidisciplinary team should be expected to perform in a competent manner, displaying an awareness of current developments in research and knowledge relating to the operating department and perioperative nursing care.

A systematic approach to holistic care should maintain the identity and dignity of each individual patient without prejudice to health status, their nationality, creed, religion or other beliefs.

The patient, the relatives and any significant others, are entitled to receive the necessary information and physical and emotional support needed to help them through the stages of perioperative care.

Content of education and training

In presenting the curriculum as an outline of content it is implied that theory and practice will be continuous throughout the programme with an emphasis on the application of the principles and knowledge gained from the theory to the performance of the operating department nurse's role as a competent practitioner. It is expected that fifty per cent of the course across the entire programme will be devoted to practice.

The course will be presented in five modules regarding the core domains of competencies, with accompanying guidelines for implementation.

EORNA identifies five core domains of competencies for the perioperative nurse:

- Professional/legal and ethical practice
- Nursing care and perioperative practice;
- Interpersonal relationships and communication;
- Organisational, management and leadership skills;
- Education and professional development and research;

For each core domain of the competency, the general aim, minimal knowledge requirement, performance criteria and key indicators have been identified.
## COMPETENCY 1 : CORE DOMAIN 1 :
### PROFESSIONAL, LEGAL, ETHICAL PRACTICE

**General aim**
The perioperative nurse will analyse situations and events, understand and make professional clinical judgment, uphold ethical practice, and maintain respect for the patient.

**This competency requires knowledge of:**
- Legislation
- Perioperative nursing.
- Professional ethics
- Professional regulations
- Policies and guidelines
- Perioperative Philosophy
- Concept of Perioperative Nursing

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Key Indicators</th>
</tr>
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</table>
| **1.1** Practices in accordance with legislation and professional guidance relevant to perioperative nurses/nursing | • Practices within the legislation (National and European) professional regulation and policies/guidelines relevant to one’s scope of practice in the perioperative setting  
• Demonstrates and applies an accurate and comprehensive understanding of ethical principles within one’s scope of practice, in the delivery of perioperative nursing care, reflecting the ethos of the care institution and other relevant global bodies  
• Ensures the duty of care owed to the patient is complete  
• Upholds the right of preservation of dignity for both patients and colleagues  
• Serves as a patient support and/ or advocate  
• Administers medications with the requirements of the relevant legislation, regulation and professional guidance |
| **1.2** Accepts professional accountability | • Works within the realms of one’s own scope of practice and knowledge base:  
• Updates knowledge in relation to current trends and advances in practice in order to maintain competency level  
• Takes personal accountability for one’s decisions and actions /or omission taken in the course of perioperative nursing care delivery  
• Reacts appropriately to concerns in relation to unethical or unsafe practice  
• Promotes the role and integrity of the perioperative nursing profession in actions and words |
COMPETENCY 2 : CORE DOMAIN 2 :
NURSING CARE AND PERIOPERATIVE PRACTICE

General aim
The perioperative nurse will provide quality nursing care by the adoption of a holistic and individual approach to the patient in accordance with relevant legislation, policies and guidelines.

This competency requires knowledge of:

- Philosophical and perioperative nursing concepts;
  • Nursing process and situational management in operating theatre;

- Anatomy and physiology, pharmacology

- Surgical and anaesthetic techniques
  • Principles of Perioperative Nursing Practice
  • Perioperative Process of Anesthetic Nursing (in some countries)
  • The Preoperative Process
  • Intraoperative Phase
  • Postoperative Phase

- Principles of hospital hygiene, asepsis and sterilization
  • Infection Control and Asepsis
  • Environment conditions of the Operating Room;

- Pain management

- Technology

-Waste management strategies

-Risk management strategies
  • Specific Aspects of Safety

Performance Criteria: | Key Indicators:
---|---
2.1 Delivers patient care integrating knowledge and evidence based practice | • Promotes patient-centred care
  • Demonstrates a holistic approach to patient care assessing the individual needs when planning patient care and evaluating outcomes
  • Demonstrates an acute awareness of the psychological needs of the perioperative patient and utilises acquired caring skills to allay anxiety
  • Liases with multidisciplinary teams to plan and implement care based on best practice standards
• Ensure accurate and timely communication in relation to individual patient care
• Implements planned care and ensures accurate and complete documentation of interventions
• Manages any unforeseen deviations from planned care and records same
• Preserves patient dignity, privacy and confidentiality as appropriate
• Practices in a manner that respects the beliefs and cultures of others
• Maintains the highest standards of care implementing change where evidence based practice dictates
• Recognises the needs of the unconscious patient, applies the appropriate duty of care and delivers comprehensive nursing care
• Recognises the importance of patient identification and applies accurate attention to detail
• Shows clear understanding of the principles of informed consent and takes appropriate action where required
• Recognises the importance of accurate, timely and continuous monitoring of patients, analysing results and taking appropriate action where intervention is required based on specialist knowledge and experience
• Demonstrates a clear understanding of the concepts of pain management and utilizes, records and monitors appropriate pain management strategies in accordance with regulation and policy
• Utilises appropriate discharge criteria prior to transfer of patient from the perioperative environment

2.2 Provides a safe effective environment for the management of efficient patient care

• Prepares environment to maximise safety and efficiency, utilising appropriate checking mechanism
• Provides a harmonious environment conducive to best patient care for anaesthesia, surgical intervention and post operative recovery
• Ensures all equipment, instrumentation and accessories are available, integrity complete and in working order and are utilised in accordance with the manufacturers instructions.
• Ensures safe passage of the patient through the perioperative environment by assessing patients health status, deploying staff appropriately, employing equipment and transfer mechanisms as required
• Employs integrated knowledge to ensure correct and safe patient positioning, encompassing the principles of safe moving and handling, utilising appropriate positioning devices and demonstrating an in-depth understanding of pressure area care management
• Ensures all items used in the delivery of surgical intervention are retrieved on closure intact and completes documentation as appropriate
| 2.3 | Promotes health and safety in the workplace. Employs and initiates appropriate risk management strategies to prevent incidents | • Practices in compliance utilising risk management strategies to prevent incidents  
• Reports all adverse incidents and near misses  
• Analyses incident trends and responds appropriately |
| 2.4 | Incorporates the principles of Infection Control in the provision of perioperative care | • Demonstrates a sound knowledge of environmental standards required in the perioperative settings and ensures adherence to same  
• Ensures the individual patient presenting with known infection status is managed in an ethical fashion, employing appropriate containment, transmission based precautions and decontamination strategies as each case dictates  
• Ensures that Hygiene principles are upheld  
• Practices strict adherence to standard precautions in the management of all direct and indirect patient care  
• Manages the environment in accordance with appropriate ‘theatre etiquette’  
• Ensures Instrumentation/Equipment used has been effectively processed/decontaminated  
• Ensures accurate documentation of instrumentation used, in order to secure appropriate tracking mechanisms  
• Adheres to best practice in the usage of disposable products  
• Manages the use of implants as per legislation, policy, manufacturers instruction and local guidelines, ensuring accurate record keeping in relation to all implants |
| 2.5 | Manages bodily tissue and fluid for investigation, disposal, burial or retention/transplant, | • Ensure correct identification and recording of all bodily tissue/fluid specimens  
• Ensures clarity of instruction in relation to the management of a specific specimen  
• Ensures accurate and timely reporting and documentation of results  
• Ensures correct and timely transportation of relevant specimens  
• Ensures correct disposal of bodily tissue/fluid where appropriate. |
| 2.6 | Recognises the importance of waste management strategies and implements best practice | • Practices appropriately in the segregation, disposal and safe management of waste  
• Practices appropriately in relation to sharps management, promoting awareness of safety  
• Demonstrates awareness of appropriate environmental concerns in relation to management of waste and is proactive in promoting best practice |
→ **COMPETENCY 3 : CORE DOMAIN 3 :**

**INTERPERSONAL RELATIONSHIPS AND COMMUNICATION**

**General aim**
The perioperative nurse will establish an efficient communication system with the patient/family/significant others, the multidisciplinary team and other relevant departments.

**This competency requires knowledge of:**
- Communication techniques;
- Nurturing respectful relationships (culture; religion, ...)
- Psychological and communication skills
- Health Education;
- Problem solving techniques;
- Communications and Interpersonal Skills
- Nursing Pedagogic
- Professional Behaviour and Discipline

**Performance Criteria:**

<table>
<thead>
<tr>
<th>Performance Criterion</th>
<th>Key Indicators:</th>
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| 3.1 Establishes and maintains effective interpersonal relationships with patients where appropriate | - Ensures patients receive and comprehend information given to them in the course of their perioperative journey
- Recognises the patient’s emotional status when discussing elements of a care plan
- Ensures appropriate support mechanisms are available in the management of minors or incapacitated patients in accordance with legislation and institutional policy |
| 3.2 Recognises the essential requirements of effective teamwork to achieve desired patient care outcomes in the perioperative environment | - Promotes the concepts of team work and inclusivity
- Establishes effective relationships with all multidisciplinary teams based on understanding and mutual respect
- Appropriately and promptly shares relevant information with team members
- Provides feedback to other team members in a constructive and prompt manner
- Engages in reflective practice as an individual and as a team to identify positive outcomes and quality improvements
- Manages conflict situations in a timely and effective manner |
| 3.3 Utilises good communication strategies both verbal and written to ensure accurate recording and transfer of information in the best interest of patient care | - Uses all relevant avenues of communication to ensure information is shared
- Clarifies communication strategies are effective
- Documents appropriate information in a timely, legible, accurate fashion |
## COMPETENCY 4 : CORE DOMAIN 4 :

**ORGANISATIONAL, MANAGEMENT AND
LEADERSHIP SKILLS**

### GENERAL AIM

The perioperative nurse will lead and manage a group of equals and other professionals, bearing in mind the subsystem, the organization’s purposes, and the results of the activity.

**This competency requires knowledge of:**

- Principles of organization,
- Problem solving strategies;
- Financial/budgetary implications;
- Quality assurance auditing
- Materials management
- Personal and Resource Management
- Principles of Organisation and Management
- Nursing Pedagogy
- Professional Behaviour and Discipline
- Stress and conflict management

### Performance Criteria: Key Indicators:

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Key Indicators</th>
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| 4.1 Uses effective organisational and management skills in the provision of patient care | • Identifies priorities of care based on clinical judgement of patients’ health and information received  
• Discusses priorities with relevant multidisciplinary team members  
• Communicates plan of care to all relevant team members  
• Delegates roles according to ability and skill mix available  
• Provides a safe environment for planned patient care  
• Ensures duty of care fulfilled to the patient |
| 4.2 Audits practices to ensure quality assurance of care | • Initiates/partakes in auditing of practice to ensure compliance to best practice and standards of care  
• Analyses results and implements appropriate action as required  
• Communicates findings appropriately  
• Facilitates change where indicated |
| 4.3 Manages resources appropriately to ensure readiness in the delivery of care | • Demonstrates a clear understanding of the elements of rostering human resources  
• Allocates staff appropriate to their skill mix, learning needs and scope of practice |
| 4.4 Effectively co-ordinates the supply | • Ensures learners are supervised as required |
| material resources, ensuring best | • Ensures appropriate supplies are available |
| practice guidelines are adhered to | • Ensures sterile supplies/instrumentation are stored in appropriate |
| in the management of same, while | conditions |
| recognising the scope of economic | • Ensures supplies are rotated appropriately |
| constraints | • Shows awareness of cost element of care and is prudent in usage of |
| | material supplies. |

| 4.5 Demonstrates effective leadership | • Acts as a role model to other team members in the provision of care |
| skills acting as a role model, is | • Employs proven motivational strategies to motivate self and others |
| consistent in delivery of high | • Recognises, acknowledges and respects the value of all team members |
| standards of care, is self motivated | • Affords developmental opportunities for others in a safe manner |
| and displays effective interpersonal | • Contributes to committees and forums as appropriate |
| skills based on understanding and | • Facilitates change management as the need arises |
| mutual respect | • Supports managerial initiatives as appropriate |
**COMPETENCY 5 : CORE DOMAIN 5 : EDUCATION, PROFESSIONAL DEVELOPMENT AND RESEARCH**

**GENERAL AIM**

The perioperative nurse will develop an enquiry mind regarding his/her work and profession and adopt a research attitude, to assist him/her in building his/her professional portfolio, in order to personally develop and meet the knowledge and skill needs of a constantly evolving specialisation.

**This competency requires knowledge of:**

- Team work;
- Self-learning;
- Development and personal growth;
- Theories on self motivation and methods of self-respect;
- Foundations/ principles of the perioperative nursing practice
- Nursing care approach within the operating theatre
- Applied research on nursing care in the operating theatre
- The sources and places where information and documentation can be found
- Methodological principles of data exploitation

**Performance Criteria:**

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<tbody>
<tr>
<td><strong>6.1</strong></td>
<td>Demonstrates a commitment to personal and professional development of self and others</td>
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<tr>
<td><strong>6.2</strong></td>
<td>Proactively seeks/ provides educational opportunities for self and others</td>
</tr>
<tr>
<td><strong>6.3</strong></td>
<td>Reflects and analyses professional practice</td>
</tr>
</tbody>
</table>

**Key Indicators:**

- Demonstrates a commitment to lifelong learning and research
- Is proactive in updating knowledge and skills in the maintenance of professional competence
- Participates in the education and development of other nursing colleagues within the structures provided
- Participates in the education and development of other allied health professionals in the perioperative setting
- Participates in assessment of other colleagues as appropriate
- Contributes to formal/informal education sessions
- Attends internal and external education forums obligatory and voluntary
- Creates an environment in the workplace conducive to learning
- Is able to analyse the situation and ask a question in case of problems or doubts
- Justifies the reason of the actions
- Shows logic and reasoning in one's actions and interventions
- Is able to evaluate the action according to the evidence based nursing.
ASSESSMENT

Assessment of learning should be continuous throughout the programme with specific assessments for each module together with a final theoretical assessment which demonstrates consolidation and application of all learning throughout the programme.

Practical assessments will include continuous self assessments plus evaluations by course teacher and clinical supervisor, and through this ongoing process the student will be expected to achieve all the learning outcomes for the module they are undertaking before moving to the next module.

A continuous developmental / progress report should be maintained by the tutor for each individual student throughout the programme. This will cover aspects of both personal and professional development and include consideration of attitude, knowledge and skills.

The programme is designed to prepare students to meet the clinical and theoretical demands of working within operating room departments at levels of increased responsibility as operating room nurses and to enable them to appreciate leadership and management roles.

The major aims of assessment will focus upon:

- the stimulation of an enquiring, analytical and creative approach, encouraging independent judgement and critical self awareness
- the encouragement of skills of clear communication and logical argument.
- encouraging the student to develop the ability to discern relationships within what she / he has learned to actual patient care situations
- encouraging the student to appreciate the nature of attitudes, modes of thought, practices and disciplines, other than those of his / her main study option
- the perception of his / her main study option in a broader perspective and the development of an informed awareness of factors influencing that social and physical environment in which nursing care is given
- developing the student’s skills as a reflective practitioner to ensure that nursing practice is constantly reviewed and evaluated
- encouraging the student's appreciation of the value of nursing research and the application of nursing theory and valid nursing research findings within the clinical setting.

Training areas for evaluation:

The perioperative nurse will provide perioperative care as:

- Scrub nurse
- Circulating nurse
- Surgical assistant

In adult and paediatric fields.

The perioperative nurse must integrate all the EORNA competencies, applying nursing knowledge, clinical skills and professional attitude in providing a patient-centred care.

Providing effective perioperative nursing care is the central competence in the EORNA framework.
The pattern of assessment throughout the programme should include a variety of methods such as essays, case studies, seminar presentations, clinical competencies, tests and examinations, project work and reflective practice. It is recommended to use theoretical assessments for theoretical aspects of the course and continuous clinical assessment for practice.

An overall research based project should run throughout the programme and be submitted at the end of the education.

**MENTORSHIP**

All perioperative nurses should have a named mentor in each clinical area who will facilitate their clinical experience and co-ordinate their assessment of practice. Fifty per cent of the course (30 ECTS) across all modules should be allocated to clinical practice.

The mentor should be a qualified person with at least three years experience in the speciality and should ideally possess a formal qualification for the area plus a teaching qualification or relevant teaching experience.
GUIDELINES FOR USING EORNA CORE CURRICULUM

The following pages are intended to offer further guidelines for those people who will be responsible for leading courses designed on the common core programme or who wish to acknowledge the programme within their own longer courses.

As stated in the main document, it is not the intention to replace existing education programmes where these are seen to be of appropriate level for the individual country's needs. This programme will provide a basic course for those who wish to start a new course for theatre nurses, and because of the general nature of the content of the programme, will appear anyway in existing operating department nursing courses.

The entire programme may be achieved over a period of one academic year if undertaken as it is with nothing added to the modules, or it may take much longer where countries will be fitting these outcomes into their existing programmes which might run over two years or more. In this case it must be carefully monitored to ensure all aspects of the programme are completed.

Regarding assessment it is perfectly acceptable to acknowledge similarity between assessment already undertaken in the master course and that required within this programme, providing the essential criteria are met.

Statements of achievement bearing the EORNA authorisation can be purchased from the National Association for Operating Department Nurses in your own country where they are a member of EORNA, or direct from the Co-ordinators of EORNA.

Further queries regarding the curriculum should be addressed either through your own Association if they are a member of EORNA, or direct to EORNA by email to the EORNA President or by application form on the EORNA website: www.eorna.eu
GENERAL PRINCIPLES

Education emphasises the acquisition, development and retention of knowledge through different pedagogical means. An ever-expanding scientific research in nursing makes it more important to be up to date.

The education requires students who are active, and are prepared to take responsibility for their own learning. The objective is that the students shall become independent perioperative nurses with the abilities of personal reflection, flexibility and with high professional standards.

The interaction between theory and practice in the education is essential. Learning happens through internalising the nurses' basic knowledge and experience, combined with theory and guided practice.

The main professional perspective of nursing is obtained through written work done by the students throughout the education, culminating in a final paper in nursing. These tasks give the students the opportunity to absorb themselves in, and work with, approaches to problems within their special field, on the basis of nursing theory and scientific methodology. This learning should also be exhibited at the end of the course by the student in the competent performance of effective perioperative care.

The responsibility of the educational institution

1. The educational plan is organised in a way that emphasises a nursing profile in accordance with the needs and developments in the health service.
2. The educational plan represents both breadth and specialisation within the area of perioperative nursing.
3. The educational plan has to integrate the curriculum (learning material) in such a way that it (the plan) is comprehensive, with focus on the objective of the education.

Compulsory literature

A list of literature/books for the education should be compiled directly related to perioperative nursing.

Preparation for examinations/assessment – absence

According to the guidelines which apply to each single country's educational system.

It is accepted a maximum absence of 5% of the totally hours of the clinical placement.
Content of the EORNA core curriculum:

**Theoretical courses (30 ECTS)**

**Medical sciences:**
- Hospital hygiene, sterilisation and aseptics
- Anaesthesia
- Surgical techniques
- Radioprotection

**Nursing sciences:**
- Nursing care in perioperative environment
- Nursing care in anaesthesia
- Perioperative nursing care
- Recovery room nursing care
- Nursing in Sterilisation unit

**Human sciences:**
- Psychology
- Law
- Ethics
- Deontology
- Organisational issues
- Interpersonal Skills

**Practical (30 ECTS)**
Clinical placements in operating theatre, recovery room, like scrub nurse, surgical assistant and circulating nurse.

**General comments on practice**

*Practical studies*

Practical studies provide a common designation for the teaching and learning situations where the students work with nursing problems and challenges in the clinical field on a daily basis. The main part of the practical study is included in the nursing field of knowledge, but will also relate to relevant subsidiary subjects.

The practice should illuminate the parts of theory that are introduced in the programme. At the very start of the practical study the student is mainly present as an observer, for the purpose of getting acquainted with the personnel, the routines, procedures etc. The student is in time expected to make substantial professional progress, take legal and ethical responsibility, and show progressive ability to make individual judgements and make decisions in the day-to-day work.
Objectives of practical studies

1. **The students shall have training in application of theoretical knowledge.**
   This happens by searching for connections between the theoretical knowledge and reality, and by practising the strategies of action and methods that are gone through in theory.

2. **The student is expected to “collect” clinical knowledge.**
   A lot of important learning material for nurses is not written down, but is present in tradition and experience among professional, working, perioperative nurses. This material must be available for the students, and they must learn to collect and internalise it. Likewise, they have to make their own experiences: performing perioperative nursing in real situations.

3. **The student is expected to gain skill.**
   The perioperative nurses' clinical skills for execution of their work consist of knowledge in human relationships, practical knowledge and theoretical knowledge. The students need to learn and practice these skills under guidance. The ability to assess and individualise the principal working methods is important, as is reflection over problems such as showing respect for the patient, treating him on equal terms and giving him the right to take part in decisions concerning himself.

4. **The student should experience the character and the challenges of nursing.**
   It is important that the students experience what the special nursing function entails. They are educated to enter and refine a new working role, and to accomplish this they need firsthand experience for a prolonged period of time in the practice field. Execution of their work, in co-operation with the patients, their relatives and the entire medical team, is an essential learning experience. It is also important to relate to reality when dealing with professional requirements and a medical service that's always developing.

5. **The student should be trained in taking responsibility.**
   The perioperative nurse's area of responsibility is large, and he/she is faced with great challenges. It is important to have high ethical standards and awareness. This applies to both professional demands to the execution of the work, and to human relationships. Functional ability within this area requires training in taking responsibility for the student’s own learning and for special nursing for individuals and groups.

Different forms of practical studies

The practical education can be adapted/arranged in different ways, where the educational benefit will vary, according to objectives, focus, and available time in the clinical field. The Challenges should be progressive throughout the programme, and the curriculum's description of the perioperative nurses' aims and function must be achieved.

Statement of personal objectives

Personal objectives are to be described in writing at the beginning of each period of practice, and they shall be approved of by the teacher and mentor.
This written statement will be the student's most important tool, and is necessary in order for the teacher/mentor to be able to help the student to achieve the stated objectives. Guidance will be given in constructing this statement.
The responsibilities of the student are

- To follow the programme's schedule.
- To deliver a statement of personal objectives to teacher and mentor.
- To seek guidance and to search for and enter into relevant and diverse learning situations.
- To evaluate him/herself continuously in relation to the objectives of the education.
- To take responsibility for his/her own training and development.
- To identify with the perioperative nurse’s function.

The responsibilities of the teacher are

- To contribute to the collaboration between student, teacher, mentor and nurses in clinical work, and to make this collaboration a source of mutual growth and development.
- To ensure that practical education is arranged in relation to the professional level of the programme and the student.
- To make certain that the student is given guidance in clinical practice and guidance related to the experiences and reactions of this practice.
- To ensure that the student is assessed in his/her functional ability as a perioperative nurse.

The responsibilities of the clinical field

The nursing management has the superior responsibility to arrange the practice field in such a way that the students are able to:

- contribute to the collaboration between student, teacher, mentor and nurses in clinical work, and to make this collaboration a source of mutual growth and development.
- arrange practical education in relation to the professional level of the programme and the student.
- receive guidance in clinical practice.
- be assessed in his/her functional ability as a perioperative nurse.
- contact the teacher/mentor for any problems in the practice or other things that affect the student's educational situation.

Guidance in practice (clinical field)

Guidance in practice involves the performance of nursing functions, ensures that the education is planned and has a clear objective, and that the students receive systematic direction and assessment.

In the practice period (clinical field) the students apply their knowledge, train their skills and work on their attitude, all in all making a basis for their own practice theory. Guidance and assessment are instruments well suited for achieving a good learning situation.

1. Assessment and guidance are to be of help to the student both in the day-to-day work, and in the general development towards becoming a professional perioperative nurse.
2. Assessment and guidance are to be the means of achieving both professional and personal growth.
3. Assessment and guidance are to contribute to the awareness of the student's strong and weak points.
The student also has the responsibility to take initiatives to seek guidance, and to pursue a broad range of relevant practice situations. The individual students can make diaries where they make comments on their practical experiences as they go along. In this way, the student shares the responsibility of giving the guidance a focus on his/her own needs. A critical incident directly related to real life situations will often be more constructive than a more general guidance.

**Planning of practice**

Each practice period starts with a talk between student, mentor and teacher, preferably in the course of the practice period's first two weeks. The student's practice is planned during this meeting which identifies exactly what the student is supposed to learn during the period (three way conversation). The student shall also deliver a draft of his/her statement of personal objectives.

**Forms of assessment**

The education's forms of assessment must have the following aims:

1. To give the students information about the education's progression and the student's progress.
2. To reassure society and the patients that the students have the qualifications for performing perioperative nursing.
3. To facilitate constructive evaluation which will, in addition to other factors, be a basis for adjusting the programme's form and content.

Testing and assessment of the students is achieved through written and oral tests / exams / assessments for theoretical knowledge, and oral and written evaluation of the student's progress and skill in practice.

Evaluation of the programme's form and content (both theory and practice) should be undertaken at the end of every module and at the conclusion of the education.

**Assessment/ Evaluation of practical skill - individually orientated assessment**

Assessment is a part of the daily guidance of the student in practice. Teacher, mentor and if necessary, the perioperative nurse in practice perform the continuous assessment. In each practice period the teacher is responsible for the student receiving assessment. The student also has a responsibility for performing of individual assessments. Assessment is performed corresponding to the written objectives within the functional area, and in correspondence to the student's stated aim (objective).

When assessing, it must be taken into consideration that professional nursing happens in practical situations. It is therefore required that the persons who evaluate have an understanding of different aspects, such as:

- requirements of the educational programme to the student
- hallmarks of professionally justifiable perioperative nursing
- the student's actual qualifications
- personal aptitude
- functional level
- progression of the education.
The education also stresses self-assessment, so that the student increases the skill of assessing him/herself and others constructively. There is also an evaluation of the clinical field.

Teacher/mentor is responsible for the student receiving assessment at the scheduled times of the programme, but the student is also expected to take initiative for assessment. Special assessment forms should be provided.

Practice is assessed as passed or failed. The marks are written on a separate form, and signed by all parties.

In addition to the formal assessment for each practice period, the student is assessed continuously, so that he/she is always aware as to how he/she is working in relation to the objectives of the practice period.

*Common basis for the assessment can be ensured through different measures, e.g.:*

The programme arranges “practice seminars”, where subjects include practice guidance of students. The perioperative nurses in the clinical field are given the opportunity to discuss the educational programme with leaders of the programme, the students, and their own colleagues.
GLOSSARY

COMPETENCE

Competence being herewith defined as the a combination of knowledge, skills and exposure in given situations in the perioperative nursing field.

“Competence in the Operating Room represents the union of knowledge, skills and practices that are required for the performance of the functional contents of the perioperative nurse”. (Gruendemann, 1995)

PERIOPERATIVE NURSE:

Perioperative nurses – often referred to as Operating Room (OR) nurses - work in hospital surgical departments, day-surgery units and clinics. Their main role includes all critical patient care nursing activities performed in the preoperative (before), intraoperative (during) and postoperative (after) phases of surgery. There are key psychological and advocate roles undertaken for each individual. (C. Higgins – « European Operating Room Nurses demand unified training; greater recognition at EU level » - 2011)

SCRUB NURSE:

A scrub nurse is a specially trained nurse who works with surgeons and the medical team in the operating room. Scrub nurses are extremely valuable members of the surgical team, providing support in the operating room and patient care outside of it as well. This career can be very demanding, but also quite rewarding, and careers in nursing are constantly expanding due to the rising need for these crucial health care professionals. Some scrub nurses even become highly sought after members of surgical teams, especially experienced scrub nurses who are familiar with a wide range of procedures. (http://www.wisegeek.com)

CIRCULATING NURSE:

A circulating nurse is a type of surgical nurse who circulates in the operating room to monitor the procedure. He or she acts as a patient advocate, ensuring that the conditions in the operating room remain safe and sterile. Circulating nurses also perform a wide variety of other tasks, which range from helping to set up the operating room for surgery to filling out paperwork which pertains to the surgery. This nursing career requires a very fine attention to detail, and a lot of stamina, as circulating nurses must be present and active throughout a surgery. In an operating room, there are two areas: the sterile operating field, and the nonsterile area. During the surgery, the goal is to keep the operating field totally sterile for patient safety. Circulating nurses monitor the sterile field, informing operating room staff when something might compromise the sterility. They also connect the people in the sterile field with the nonsterile area. For example, a circulating nurse can open an autoclaved package so that someone in the operating field can access the sterile tool inside. (http://www.wisegeek.com)
SURGICAL ASSISTANT:

As defined by the American College of Surgeons, the surgical assistant provides aid in exposure, hemostasis, closure, and other intraoperative technical functions that help the surgeon carry out a safe operation with optimal results for the patient. In addition to intraoperative duties, the surgical assistant also performs preoperative and postoperative duties to better facilitate proper patient care. The surgical assistant to the surgeon during the operation does so under the direction and supervision of that surgeon and in accordance with hospital policy and appropriate laws and regulations.
BIBLIOGRAPHY

BOOKS:


An Bord Altranais: “Requirements and Standards for Education Programmes for Nurses and Midwives with Prescriptive Authority”, An Bord Altranais, Dublin; April 2007


Publications:

Antoniadou, I. “Health of Record: Theatre-Of-Care”, International Academy for Design and Health, 2008


ROGEZ, R., « Reconnaissance et valorisation de l'élève infirmière », projet d’étude, in Soins, T.27, n°7, avril 1982,


UNAIBODE : « Référentiel métier », Revue Inter bloc. Tome XXII, n° 4, décembre 2003, France

WILLEMS C. : "Compte rendu d'une enquête réalisée auprès d'infirmières de salle d'opération sur la nécessité d'une formation reconnue", revue AFISO (Association Francophone des Infirmières de Salle d'Opération), 1989


Acts of conferences :


Unpublished articles:

DIAS-PINHEIRO: “Competências dos Enfermeiros Perioperatórios” nas 1ª Jornadas de Actualização em Cirurgia Obstétrica/ginecológica, no dia 1 de Março de 2007, no Hospital de S. João no Porto.


EQUIPE PEDAGOGIQUE DE LA 4ème S.O., « Dossier pédagogique de la 4ème année de salle d’opération », travail inédit, Institut supérieur d’enseignement infirmier, Bruxelles, année 2002-2003

Sites « internet »:


http://www.educagri.fr/actions/qualité/sommaire.htm

http://www.ipm.ucl.ac.be

http://www.eorna.eu
APPENDIX
Application Form

Accreditation of a Perioperative Nursing Course

Instructions to applicants

When preparing your application:
1. One application form will be submitted to EORNA-ACE
2. Follow the instructions contained in this application form.
3. Use the headings and sub-headings contained in the template. (Note: the boxes will expand to accommodate responses).
4. If an additional attachment is included in the application, or if an attachment is relevant to more than one requirement, please include reference to it in the body of the application and in the attachment checklist at the end of the application.
   Please note: it is not necessary to duplicate attachments that are relevant to more than one requirement.
5. Prepare the relevant attachments, ensuring that each attachment has a title, is paginated and is sequentially and clearly labelled (using an exposed tab) so that it may be readily located and referenced by members of the assessment panel.
6. The application can be done in English or in French languages.

Before submitting your application:
Check that the application is complete and has all required attachments. Incomplete applications will be returned, thus delaying the assessment of your application.

Note: It is the responsibility of each applicant to ensure that the documentation provided in its application demonstrates that it can operate at a standard that meets the requirements.

A complete application should consist of the following:
1. Three bound original copies of the completed application and the required attachments, including the declaration signed by the institution’s authorised officer (e.g. CEO) (A template can be downloaded from the EORNA website).
2. a receipt of EORNA ACE will be sent.

Submitting your application
The application should be submitted to EORNA - ACE.
Information on the website: www.eorna.eu

Timelines for Submission
As a general rule, initial applicants should allow at least six months between the time of making a complete and satisfactory application to EORNA-ACE and a decision being made by the responsible decision maker. Timelines may be extended by a number of factors, including the complexity of the application, incomplete applications, panel requests for additional information and the time taken by the applicant to provide additional or revised information.
Application for Accreditation

Name of Institution (Legal Entity)

Date of Submission

Application for accreditation of courses leading to the following awards - title - diploma:

- Award
## INSTITUTION DETAILS

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**Delivery Sites**

If the institution plans to offer courses in more than one location, details of all locations, including offshore locations, are to be provided. If the institution plans to deliver courses through a separate legal or business entity (an agent), details of the agent should be provided and the Principal/Agent box should be checked.

Add additional tables as required.

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REQUIREMENT 1: COURSE NOMENCLATURE AND REQUIREMENTS

1.1 The title of the course
   a) Provide details below and, if relevant, include details of any awards nested within the course.

<table>
<thead>
<tr>
<th>Full Title of the Course</th>
<th>Abbreviated Title</th>
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1.2 The course duration and workload.
   a) Attach, to the back of this section, as attachment 1.2a, the periods of candidature and the academic study pattern for each course.

1.3 The characteristics of the learning outcomes of the course
   a) Provide below, a statement of course objectives in terms of the key educational and vocational (employment-related) outcomes for students.

   Note: Add additional rows for each course, or delete rows, as applicable

<table>
<thead>
<tr>
<th>Abbreviated Course Title</th>
<th>Educational Outcomes (List key knowledge and skills)</th>
<th>Vocational Outcomes (eg On completion of the course, graduates will be able to be employed as XXX or in the XXX industry)</th>
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1.4 Student admission requirements ensure that students have adequate prior knowledge and language competency to undertake the course successfully.
   a) Provide below, a statement of the educational qualification required for admission to each course, any special additional qualifications (such as an English language test) and any other academic, occupational or skills pre-requisites.
Note: add additional rows for each course, or delete rows, as applicable

<table>
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<th>Abbreviated Course Title</th>
<th>Educational and Other Qualifications Required</th>
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**REQUIREMENT 2: COURSE DESIGN AND OUTCOMES**

2.1. The course documentation clearly presents the rationale, objectives, structure, delivery methods, assessment approaches and student workload requirements for the course.

   a) **Attach** to the back of this section, as attachment 2.1.a, a description of the rationale, content and structure showing the overall course design including general and specialised components and weightings (credit points). (A template can be downloaded from the website of the VRQA.)

   b) **Attach** to the back of this section, as Attachment 2.1b, a chart/map of the course sequence by semester with core and elective subjects and exit points where relevant.

   c) **European credit transfer system** (ECTS) arrangements for the proposed course/s

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   a) Describe below, the supervisory systems used to ensure the quality of the student learning experience across and within sites, where delivery includes a clinical placement.

   Note: add additional rows for each course, or delete rows, as applicable.

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<thead>
<tr>
<th>Abbreviated Course Title</th>
<th>Supervisory arrangements of clinical placement</th>
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2.2 Assessment tasks for the course are appropriately designed to measure intended student learning outcomes for the course.

   a) **Attach** to the back of this section, a table which gives an overview of the assessment tasks and weightings for each subject/unit and the overall assessment methodology for each course.