

Paediatric Nurse Education in Europe

A Position Statement by the Paediatric Nursing Associations of Europe (PNAE)

Introduction

The PNAE network carried out a survey of European countries¹ in 2003 to investigate the education of nurses to prepare them to care for children and young people. The findings demonstrate wide variations in:

1. the academic level of nurse education, for example, certificate, diploma, degree or masters level
2. the nature and outcome competencies of nurse education programmes preparing paediatric nurses for practice.

European countries are currently discussing mechanisms to achieve a common transferable credit system to enable mutual recognition of qualifications between countries and to facilitate geographical mobility of workers. Credits measure the amount of learning and help to ensure that the volume of theoretical and clinical/ practical learning and assessments are equitable, and therefore, transferable and recognised across Europe. This is the underlying principle of the Bologna Agreement (1999). The level of transferability for a nursing qualification is likely to be a degree level award [Level 6 EQF], with the award based on the principles of credit accumulation.

This document represents a consensus position of the organisations representing paediatric nurses across many European countries with regard to the education and outcome competencies for nurses providing care to children and young people. This will contribute to achieving mutual recognition and transferability for paediatric nurses as well as informing the review of and future development of paediatric nurse education programmes. However, the primary objectives for those making this statement are to protect the rights of children and young people and to safeguard nurses who could be at risk of working outside their area of competence because of variations in nurse education preparation.

Paediatric Nursing Education in Europe

The PNAE *position statement on the Regulation of Paediatric Nurses in Europe* (2005)² states:

Children and adolescents (young people) have the right to be cared for by appropriately qualified and educated nursing staff. Children and their families/guardians have a right to know that the nurse who cares for their child is specifically educated and competent to do so i.e. one *who has successfully completed a recognised course of study and practice experience in the nursing care of infants, children and adolescents / young people*³.

The PNAE survey found that in some countries paediatric nursing is a first nursing qualification (direct entry programme) while in others nurses first qualify as a 'general' nurse and then undertake a further course to obtain the necessary knowledge, skills and values for paediatric nursing practice (post registration programme). A few countries support both these options. In

¹ Those countries who responded included Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, France, Germany, Hungary, Ireland, Italy, Netherlands, Norway, Poland, Romania, Sweden, Yugoslavia, Turkey and the United Kingdom. Additional countries such as Greece, Slovenia and Croatia responded subsequently.

² PNAE (2005) Position statement on the Regulation of Paediatric Nurses in Europe [See http://www2.rcn.org.uk/cyp/forums/other_forums_and_groups/paediatric_nursing_associations_of_europe]

³ PNAE (2005) Definition of a Paediatric Nurse [See http://www2.rcn.org.uk/cyp/forums/other_forums_and_groups/paediatric_nursing_associations_of_europe]

some countries nurses caring for children and young people are qualified solely as general nurses; PNAE members believe that general/adult orientated nurse education programmes in many countries are insufficient preparation for nurses to practice as paediatric nurses i.e. to independently assess, plan, manage and evaluate the nursing care of infants, children and young people.

Paediatric nursing education programmes are required that enable nurses to:

- provide safe, high quality care to children and young people
- be registered as paediatric nurses⁴.
- meet academic requirements and competency standards agreed at European level
- achieve credits (in accordance with the European Credit Transfer Scheme) for both the theoretical and clinical/practical components of the programme

Paediatric nursing competencies

Specific knowledge, skills and values (usually expressed as competencies) are required by nurses caring for children and young people. These are different to the competencies required to care for adults. The common framework for competency development for paediatric nursing in Europe encompasses:

- Children and Young People's Rights (from the UN Convention on the Rights of the Child 1989) and European and national children's legislative frameworks
- Child health and well-being (physical, mental and emotional) incorporating child protection and safety
- Developmental needs of children and young people: physical, emotional, intellectual, social (cultural), moral and spiritual
- Child and family centred care
- Family support, child health information, education and promotion in the context of population/public health.
- Provision of care for children with acute/chronic/life-threatening/limiting physical and mental conditions and disability/impairment (physical/intellectual/sensory) in any community or healthcare setting
- Interdisciplinary and interagency collaboration i.e. working across children's service agencies⁵ such as health, education, social care services and voluntary/charity organisations including parent/consumer bodies.

The competency framework attached at Appendix A outlines competency specification.

To develop the required clinical competencies the student must work within environments where children and young people's care is provided with support and supervision from registered paediatric nurses. Assessment of clinical competency must be undertaken by a registered paediatric nurse.

The duration of the paediatric nurse education programme will be determined by each European member state and will depend on whether direct entry or post registration programmes are supported. Based on experience from countries that have post registration courses, PNAE recommends that these should be no less than 52 weeks duration with an equal split between theory and clinical practice. Direct entry programmes are generally of at least three years duration as they must also provide for development of 'general' nursing competencies, complying with EU directives i.e.

- professional values and the role of the nurse
- nursing practice and clinical decision-making
- knowledge and cognitive competencies
- communication and interpersonal competencies⁶

⁴ PNAE (2005) Position statement on the Regulation of Paediatric Nurses in Europe [See http://www2.rcn.org.uk/cyp/forums/other_forums_and_groups/paediatric_nursing_associations_of_europe]

⁵ Definition: Organisation, bureau, business, department or establishment providing a service

- leadership management and team competencies

Once registered, paediatric nurses can be expected to provide regular evidence that they are maintaining essential competencies and updating their knowledge and skills, particularly in critical practice areas such as paediatric life support and child protection. Opportunities for ongoing continuing professional development that are specific to paediatric nursing are necessary to support this requirement.

Conclusion

Variations across Europe in the educational preparation of nurses who care for children and young people are a barrier to mutual recognition and geographical mobility of nurses. They also indicate variability in the quality of care that is provided to child citizens. To address these inequities, paediatric nurse education programmes need to be in place that:

- enable the student to achieve the required competencies and academic credits
- have the approval of that professional regulatory body, national paediatric nursing association, an education institution and or a combination of these
- enable the student completing the programme to register as a paediatric nurse with the professional regulatory organisation of the country;
- can be recognised by individual member states to facilitate the registered paediatric nurse to work across Europe.

Key stakeholders:

- Professional nursing regulatory body/agency/ association/organisation in each member state
- Educational institutions providing nurse education/paediatric nurse education (registration) programmes
- EU and individual governments of member states

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⁶ There must be flexibility in the application of the EU ‘general’ directives within member states to meet country specific requirements, public expectations and patient safety standards for particular client groups such as children and young people [see appendix A]. It is prohibitive therefore for conditions to exist within directives which necessitate nurses across the EU to gain knowledge and skills with **only** adult patients in order to be recognised as a ‘general nurse’.

Appendix A: Competency framework for paediatric nursing education programmes

Professional values and the role of the nurse

- Practice within professional, ethical, regulatory and legal codes recognising and responding to moral/ethical dilemmas and issues concerning infants, children and young people including relevant legislation related to information sharing and safeguarding children and young people
- Practices in a holistic manner promoting individualised care within a child and as appropriate family centred care approach, ensuring that the protection, rights, wishes and individual beliefs of children and young people are upheld
- Promotes the health and well-being of infants, children and young people
- Understands and promotes the role, responsibilities and functions of a paediatric nurse within teams within healthcare, interagency and interdisciplinary environments
- Accepts responsibility for his/her own continuing professional development and learning to improve personal performance and enhance services for infants, children and young people

Nursing practice and clinical decision-making

- Undertake comprehensive and systematic assessments using a child and family centred approach, acknowledging differences in stages of development and relevant physical, social, cultural, psychological, spiritual and environment factors
- Recognise, interpret and diagnose signs of normal and changing health, ill-health, distress, development or disability in infants, children and young people
- Respond to infants, children and young people's needs by planning, delivering and evaluating appropriate individualised programmes of care working in partnership with parents/carers and family members, as well as other agencies across health, social, education and voluntary sectors
- Critically question, evaluate, interpret and synthesis a range of information and data sources to facilitate children and young people's choices and include parents/carers perspectives, and to make sound clinical judgements to ensure nursing and clinical quality standards are achieved and practice is evidence based
- Use a range of nursing skills, medical devices, interventions and activities to provide optimum care appropriately which:
 - maintains infants', children's and young people's dignity, privacy and confidentiality;
 - monitoring and observation of sick babies, children and young people to detect and intervene if condition deteriorates
 - attains highest health and safety principles related to moving and handling, infection control, the administration of first aid and emergency resuscitation procedures;
 - administers medicines and other therapies safely;
 - considers emotional, physical and personal care, including meeting the need for sleep and comfort, nutrition, personal hygiene and enabling the person to maintain the activities necessary for daily life;
 - responds to infants, children and young people within the context of their family and health/illness experience
 - informs, educates and facilitates learning for children, young people and their families
 - recognises equality and diversity, thereby demonstrating cultural competence
 - facilitates and supports transition from child centred services to adult orientated or from health to social care

Knowledge and cognitive

- Apply relevant knowledge to nursing practice and the care of infants, children and young people, while promoting children's rights and advocacy including:
 - theories of nursing and nursing practice
 - theories of childhood and child development
 - natural and life sciences including physiology and anatomy of infants, children and young people
 - social, health and behavioural sciences, including childhood studies
 - ethics, law and humanities including issues related to consent, confidentiality and autonomy
 - technology and health care informatics
 - international and national policies related to for example child protection and children's rights
 - problem solving and decision-making
- Utilise and apply knowledge of the research process to clinical practice, service improvement and other nursing activities to provide evidence based nursing care to children and young people

Communication, interpersonal and technology

- Communicate effectively and engage [with use of technology as appropriate] with infants, children, young people and their families, including those with communication and learning difficulties: listening and building empathy; and summarising and explaining
- Enable children, young people and their parents/carers to express their views and concerns whether emotional, social, psychological, spiritual or physical and respond appropriately: consulting and negotiating
- Represent the child or young persons perspective appropriately and to act to protect and prevent abuse: demonstrating adherence to confidentiality and ethical codes related to children and young people
- Use a range of communication techniques to promote children and young people's well-being, including counselling skills, identification and management of challenging behaviour; recognition and intervention for stress, anxiety and depression; deploying and referring to sources of information and support
- Report, record, document and refer care accurately using appropriate technologies, including taking action to safeguard and protect children and young people at risk of harm
- Identify and respond proactively to situations, environments and individuals, including within the health care setting, who may be harmful to children and young people

Leadership, Management and team working

- Appreciate that team working is crucial to facilitating children and young people's health and well-being, leading and co-ordinating team activity, delegating appropriately and forging relationships across agencies
- Work, operate assertively when necessary and communicate collaboratively with all team workers including other professionals and agencies, managing time and other resources effectively to ensure quality standards are achieved.
- Undertake risk assessments to actively promote the well-being, security and safety of children, young people and all those working within the environment of care, including themselves, knowing when and how to raise concerns, as well as what action to take if a partner organisations fails to take appropriate responses

- Present facts and judgements objectively, and challenge situations, using tools to critically evaluate and audit the care of children and young people according to relevant quality standards
- Educate, facilitate, supervise learning and support other practitioners, students and care workers
- Demonstrate awareness of the principles of health/social care and other funding streams and uses resources effectively