



Procedure for Developing New Policies, Procedures, Protocols or Guidelines (PPPGs)						
Policy 🗆	Procedur	e 🗵	Protocol  Guideline	]		
Office of the Nursing and Midwifery Services Director (ONMSD): Consortium of Centres of Nursing and Midwifery Education (CCNME)						
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## 1.0 Purpose

This procedure sets out the steps for development of new PPPGs as part of the CCNMEs quality assurance system.

## 2.0 Procedure for Developing a New PPPG

- 2.1 A new PPPG is identified as a need within the CCNME for the following reasons:
  - 2.1.1 A legal or regulatory requirement;
  - 2.1.2 Issues raised relating to any PPPG, by any stakeholder, through the CCNME;
  - 2.1.3 As a result of an internal or external QA process;
  - 2.1.4 As a result of a monitoring and review process.
- 2.2 The Quality Enhancement Committee in consultation with its members, considers whether the PPPG is to be developed. If agreed, a plan is created for the development of a PPPG including consideration of:
  - 2.2.1 Impact of development;
  - 2.2.2 Stakeholder consultation;
  - 2.2.3 Timeline for production;
  - 2.2.4 A Governance decision.
- 2.3 The Chairperson of Quality Enhancement Committee sends a request to the Chairperson of all Committees and Board to:
  - 2.3.1 Nominate and agree one member of CCNME to lead and;
  - 2.3.2 Nominate staff to be members of a PPPG development group to draft the required PPPG.
- 2.4 The Chairperson of Programme Committees sends out an expression of interest within the Programme Teams. Nominations are submitted to the Quality Enhancement Committees via Programme Board.
- 2.5 Membership of the PPPG Development team is agreed and convened by the Quality Enhancement Committee.
- 2.6 The development of the PPPG is undertaken using the agreed framework.
- 2.7 The Quality Enhancement Committee review the final draft utilising the HSEs checklist on Standards for developing Non-Clinical PPPGs and may approve, not approve or propose changes to the draft PPPG.
- 2.8 If proposed changes are required, the PPPG is returned to the PPPG Development group for review and resubmission to the Quality Enhancement Committee.
- 2.9 The Quality Enhancement Committee review resubmission and may approve, not approve or propose further changes to the draft PPPG.
- 2.10 Once approved the Chairperson of Quality Enhancement Committee submits the PPPG to the Academic Council for review and approval /non-approval.
- 2.11 Once approved the academic council returns the approved PPPG to the Quality Enhancement Committee for dissemination and implementation to the CCNME Committees, Board and teams.

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## 3.0 Procedure for Implementation and Communication Plan

- 3.1 An implementation and communication plan is developed for the PPPG once approved by the Academic Council. It is envisaged that the CCNME will have a policy portal where all PPPGs will be uploaded and an email will generated to notify all members of the CCNME of the change.
- 3.2 The Chairperson of Quality Enhancement Committee has responsibility for dissemination of new PPPGs including an implementation plan identifying changes made to existing processes in the CCNME to all CCNME Committees, Board and Teams
- 3.3 The Chairperson of Programme Committees have specific responsibility for the implementation of the quality assurance system in relation to their respective programmes
- 3.4 Each Programme Coordinator is responsible for the quality assurance of their respective programme in consultation with the Programme Team
- 3.5 All staff members of the CCNME have responsibility for implementing the quality assurance system in their respective programmes.

## 4.0 Document Control

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Author	Consortium of Centres of Nursing and Midwifery Education (CCNME)			
	Version	Date of Approval		
Version Control	V.1.0	04/11/2022		
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Supporting Documentation	<ul> <li>European Association for Quality Assurance in Higher Education (ENQA). (2015). Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) [online]. Available from: https://www.enqa.eu/wp-content/uploads/2015/11/ESG 2015.pdf [accessed 22 April 2022].</li> <li>Health Service Executive. (2016). HSE National Framework for developing Policies, Procedures, Protocols and Guidelines (PPPGS) [online]. Available from: https://www.lenus.ie/bitstream/handle/10147/620990/HSEPPPG.p df?sequence=1&amp;isAllowed=y [accessed 1 February 2022].</li> <li>National Clinical Effectiveness Committee (NCEC) in the DoH. (2015). Standards for Clinical Practice Guidance [online]. Available from: https://www.nmbi.ie/NMBI/media/NMBI/Forms/standards-for-clinical-practice-guidance-ncec.pdf [accessed 2 January 2022].</li> <li>Qualifications and Quality Assurance (Education and Training) Act 2012. No. 28/2012, s.28 [online]. Available from: https://www.irishstatutebook.ie/eli/2012/act/28/enacted/en/html [accessed 31 January 2022].</li> <li>Quality and Qualifications Ireland (QQI). (2017). Policies and criteria for the validation of programmes of education and training [online].</li> </ul>			

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	Available from: <a href="https://www.qqi.ie/sites/default/files/2021-11/qg">https://www.qqi.ie/sites/default/files/2021-11/qg</a> 17-policies-and-criteria-for-the-validation-of-programmes-of-	
	education-and-training.pdf [accessed 2 January 2022].	
Related Policies &	<ul> <li>Policy on Development, Approval and Monitoring of Policies [PDF, 5</li> </ul>	
Procedures	Pages]	
	• Procedure for Monitoring and Review of Policies, Procedures,	
	Protocols or Guidelines (PPPGs) [PDF, 3 Pages]	
Related	PPPGs Review Template	
Resources	Policy Development Template	
	Procedure Development Template	

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