



# EORNA Common Core Curriculum for Perioperative Nursing

Edition 2019

### **First publication - April 1997, Edinburgh, Scotland**

Edited by Margaret S. Brett, Senior Lecturer  
South Bank University, London  
S.R.N.; FETC  
Dip. N.(Lon);  
RCN, Dip. N. Edn. (Lon)  
RNT, MA Nursing

© 1997: European Operating Room Nurses Association (EORNA)  
B 2400 Mol, Belgium

### **Update 2012**

Edited by EORNA Educational Committee  
Chair: Christine Willems (Belgium)

Caroline Higgins, Anne OBrien, Margaret Brett, Sandra Morton

© 2012: European Operating Room Nurses Association (EORNA)  
B 8370 Blankenberge, Belgium

### **Update 2019**

Edited by EORNA Educational Committee  
Chair: Christine Willems (Belgium)

May Karam

© 2019: European Operating Room Nurses Association (EORNA)  
Chaussée de Charleroi, 49 bte 6  
1060 Bruxelles

Let it be known that no part of this document may be reproduced in any form,  
or through any means without prior written permission of EORNA.

## CONTENTS

<b>4</b>	INTRODUCTION TO EORNA
<b>7</b>	FOREWORD
<b>8</b>	USING THE CURRICULUM TO PLAN A PROGRAMME
<b>9</b>	THE EORNA MODEL OF PERIOPERATIVE NURSING CARE
<b>11</b>	COMMON CORE CURRICULUM
<b>17</b>	CORE COMPETENCY DOMAIN 1: Professional, ethical, legal practice
<b>19</b>	CORE COMPETENCY DOMAIN 2: Nursing care and perioperative nursing practice
<b>25</b>	CORE COMPETENCY DOMAIN 3: Interpersonal relationships and communication
<b>28</b>	CORE COMPETENCY DOMAIN 4: Organisational, managerial, and leadership skills
<b>30</b>	CORE COMPETENCY DOMAIN 5: Education, research and professional development
<b>32</b>	ASSESSMENT
<b>34</b>	MENTORSHIP
<b>34</b>	GUIDELINES
<b>35</b>	GENERAL PRINCIPLES
<b>36</b>	CONTENT OF THE EORNA CORE CURRICULUM
<b>37</b>	GENERAL COMMENTS ON PRACTICE
<b>39</b>	RESPONSIBILITIES
<b>42</b>	BIBLIOGRAPHY
<b>46</b>	APPENDIX

## INTRODUCTION TO EORNA

### **Presentation of the 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 25 member associations on the EORNA board, representing 60,000 members. 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:**

The European Operating Room Nurses Association, EORNA, exists to enhance and develop perioperative patient care across Europe. It does 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 May Karam – EORNA President – 2019**

Founded in 1992, EORNA, is a pan-European umbrella organisation of national perioperative nurse societies representing 24 countries. We meet regularly to share experiences, to promote best practice, to develop standards of care and to improve patient outcomes.

As perioperative nurses, we have acquired competencies to provide safe perioperative care based on a holistic human approach to the surgical patient taking into consideration their physical, psychological, spiritual and social needs.

EORNA's objectives are to promote and maintain a high standard of nursing care for the patients in the perioperative environment. Our mission is to be the voice of specialist operating room nurses and to promote professional recognition throughout Europe.

Today the nursing workforce is facing significant change. Nurses, perioperative nurses and other health professionals need to move to, from and within Europe in the search for greater opportunities to develop our careers and our competencies. We know that perioperative care education varies from country to country and that our roles and responsibilities currently vary considerably within countries.

To facilitate the free movement of nurse specialists within the European community and to ensure an excellent and safe perioperative care; a European core curriculum is necessary to set standards which are recognisable across European countries.

EORNA has therefore developed a core curriculum as a guiding framework to be used to facilitate the improvement of existing national perioperative nursing programs or to initiate an adequate education program based on identified essential topics and core competences when one does not exist.

EORNA produced and published the first edition of the “European Common Core Curriculum for Operating Department Nursing” in 1997 and updated it in 2012.

It is now a great pleasure to launch the third edition, revised and updated. We hope that you find this document helpful and that it will be a positive guide for all perioperative nurses across Europe.

May Karam  
EORNA President  
May 2019

## COUNTRIES PARTICIPATING IN THE CURRICULUM DEVELOPMENT

- BELGIUM – VVOV
- BELGIUM – AFISO
- CROATIA – CORNA
- CYPRUS – CORNA
- CZECH REPUBLIC – CZORNA
- DENMARK – FSOP
- ESTONIA – ESTORNA
- FINLAND – FORNA
- FRANCE – UNAIBODE
- GREECE – GORNA
- HUNGARY – MMT
- ICELAND – ISORNA
- ISRAEL – IPNA
- ITALY – AICO
- THE NETHERLANDS – LVO
- NORWAY – NAORN
- POLAND – POLISH INSTRUMENT NURSES ASSOCIATION
- PORTUGAL – AESOP
- RUSSIA – RUSSIAN NURSES ASSOCIATION
- SERBIA – UIMSTSS
- SLOVENIA – SORNA
- SPAIN – AEEQ
- SWEDEN – SEORNA
- SWITZERLAND – SIGOP-SIDOPS
- TURKEY – TCAHD

## EORNA Corporate Sponsors:



EORNA's Corporate Sponsors have had no influence on the contents or scope of this Core Curriculum.

## **FOREWORD**

The Education Committee undertook the review of this Core Curriculum 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.

The Education Committee originally developed an EORNA framework for perioperative nursing competencies in 1997.

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.

Member Associations are encouraged to promote the Core Curriculum to their own national nursing body, whilst EORNA is seeking recognition through the European Commission.

## **USING THE CORE 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 the 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 an 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 minimum (30 ECTS for theory and 30 ECTS for practice).

The minimum level to begin 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 programme.



## 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 Perioperative care through the incorporation of that experience in the student's observable behaviour as a competent practitioner within the department.

The competence referred 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 Perioperative 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 the development of theory and practice simultaneously and carries a process of continuous assessment of practice both by the individual learner and their 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



## COMMON CORE CURRICULUM

### 1. Foreword:

This tool is designed as a framework for the guidance and development of EORNA Member Associations' perioperative nurses.

- It is accepted that some countries/organisations will need to add or subtract some 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 or 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.

### 2. Rationale for Core Competencies 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.

### 3. The Intention of the Common Core Curriculum:

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 Curriculum, the department will be aware of the level of knowledge which can be expected of that person. For some countries, the Common Core Curriculum may be the only perioperative education received, whereas others may feel prepared to accept people with this minimum provided they agree to undertake further education as required by those persons for that particular country.

It is recognised that within some countries, anaesthetics and nurse surgical assistant are 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 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 emphasised that the hours allocated are the very minimum acceptable and where is possible additional time should be given to enhance the development of a skilled practitioner. The agreement upon this aspect of the course promoted considerable discussion and concern from some member countries.

#### **4. Definitions:**

##### **Perioperative Nurse:**

The professional Perioperative Nurse is someone 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.

Perioperative Nursing is a diverse and complex specialist field with many sub-specialities within it. Perioperative nursing predominantly covers the nursing care in the areas of surgical intervention, anaesthesiology and post anaesthetic care. In some instances, it also covers specialities such as ambulatory daycare, endoscopy, sterilization, interventional radiology and pain management. These varied roles are a challenge to the development of a perioperative nurse's core competencies.

Qualified and experienced nursing staff working within the multidisciplinary team are 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.

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.)*

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, intraoperative and postoperative phases of surgery.

## **Roles in the OR for a Perioperative Nurse:**

### *A/ 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>)*

### **B/ 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 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>)*

### **C/ Nurse Surgical assistant: (in some countries)**

**Nurse Surgical assistants** are established members of the surgery team within healthcare organisations. Their main responsibilities are to support surgeons and other professionals before, during and after surgical procedures.

Nurse Surgical assistants provide care in an operating theatre, on wards and in clinics.

They are trained to undertake some surgical procedures under appropriate supervision and within their allowed scope of practice. They are directly responsible to the consultant surgeon and in accordance with hospital policy and appropriate laws and regulations.

#### D/ Anaesthesia Nurse: (in some countries)

The anaesthesia nurse helps during the different phases of the anaesthesia and during the immediate postoperative period. Her/his responsibility ends when the patient recovers from the effects of anaesthesia.

The anaesthesia nurse is responsible for the preparation and maintenance of anaesthesia equipment in collaboration with the anaesthetist.

The anaesthesia nurse welcomes the patient, assists the anaesthetist during technical procedures and during the monitoring of biological constants. Both together ensure the patient's physical integrity.

*(Référentiel de compétences interréseaux - AFISO - Groupe "écoles")*

### 5. Aims and Objectives

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

**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
  - Nurse surgical assistant (in some countries)
  - Hygiene management
  - Pain management
2. Operate in a multi-professional team.
3. Participate in quality assurance programmes
4. Organise and manage an Operating Room/Department.
5. Partake in risk management strategies
6. Maintain own professional competence through ongoing current education and awareness.
7. Participate in and/or conduct research and contribute towards the development of knowledge for the perioperative nurse.
8. Practice in accordance with legislation and professional guidance relevant to perioperative nurses/nursing.

→ **The working areas of perioperative nursing may include (for example):**

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

## **6. Content of Education and Training**

In presenting the Core 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 programme should follow the "Constructive Alignment" (Biggs J. 1996). There should be a coherence between educational objectives, methods and assessment. (biblio Biggs, J. (1996). Enhancing teaching through constructive alignment. Higher Education, 32(2), p.347-364.)

The course will be presented in five modules regarding the Core Competency Domains, with accompanying guidelines for implementation.

EORNA identifies five **Core Competency Domains** for the perioperative nurse:

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

For each core domain of the competency, the general aim, minimal knowledge requirement, performance criteria and key indicators have been identified.

## **7. Competencies**

### **Definition of competence (EU definition-2017):**

Competence means the proven ability to use knowledge, skills and personal, social and/or methodological abilities, in work or study situations and in professional and personal development (COUNCIL RECOMMENDATION of 22 May 2017)

### **Our competencies are based on these aspects:**

1. Professional, ethical, legal practice
2. Nursing care and perioperative nursing practice
3. Interpersonal relationships and communication
4. Organisational, managerial, and leadership skills
5. Education, research, professional development



## CORE COMPETENCY DOMAIN 1:

### PROFESSIONAL, ETHICAL, LEGAL PRACTICE

#### General aim

The perioperative nurse analyses, understands and makes professional clinical judgment, upholds ethical practice, and maintains 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

#### Performance Criteria:

#### Key Indicators:

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

Performance Criteria:	Key Indicators:
<p>1.2 Accepts professional accountability</p>	<ul style="list-style-type: none"> <li>• Works within the realms of one's own scope of practice and knowledge base</li> <li>• Updates knowledge in relation to current trends and advances in practice in order to maintain competency level</li> <li>• Takes personal accountability for one's decisions and actions /or omissions taken in the course of perioperative nursing care delivery</li> <li>• Reacts appropriately to concerns in relation to unethical or unsafe practices</li> <li>• Promotes the role and integrity of the perioperative nursing profession in actions and words</li> </ul>
<p>1.3 Acts as intermediary, liaison and patient advocate</p>	<ul style="list-style-type: none"> <li>• Establishes trust between the nurse and patient</li> <li>• Requires the care of patients who are highly vulnerable and unable to speak up for themselves, in a busy and often highly pressurized environment involving multiple professional groups providing care simultaneously</li> </ul>
<p>1.4 Respects other cultures, their beliefs, customs, religion and values</p>	<ul style="list-style-type: none"> <li>• Respects customs and rituals religious, cultural or personally defined</li> <li>• Respects the beliefs of the team and of the patients and their families</li> </ul>

## **CORE COMPETENCY DOMAIN 2:**

### **NURSING CARE AND PERIOPERATIVE NURSING PRACTICE**

#### **General aim**

The perioperative nurse provides quality nursing care by adopting a holistic and individual approach to the patient in accordance with relevant legislation, policies and guidelines.

#### **This competency requires knowledge of:**

- 1 Philosophical and perioperative nursing concepts
  - Nursing process and situational management in the operating theatre
- 2 Anatomy, physiology and pharmacology
- 3 Surgical and anaesthetic techniques
- 4 Principles of Perioperative Nursing Practice:
  - Perioperative Process of Anesthetic Nursing (in some countries)
  - The Preoperative Process
  - Intraoperative Phase
  - Postoperative Phase
- 5 Principles of hospital hygiene, asepsis and sterilization
  - Infection Control and Asepsis
  - Environment conditions of the Operating Room
- 6 Pain management
  - Pharmacological: analgesia or local anaesthesia
  - Nonpharmacological: therapeutic communication (distraction...), hypnosis, relaxation techniques, cutaneous stimulation, use of cold. (Bibliografy: Nursing approaches to nonpharmacological pain control. McCafferz M. Int J Nurs Stud 1990)
- 7 Technology
  - Basic computer skills, PDAs (Personal Digital Assistants)
  - Electronic IV monitors
  - OR and portable defibrillator
  - The sonogram/ultrasound
  - Local wireless telephone networks and hands-free communication devices
  - Patient remote monitoring
  - Compact, portable medical devices
  - Drug management technologies
  - Electrosurgical units
  - Trolley Anesthesia machine

- 8 Waste management strategies
  - Guidelines for sharp safety
- 9 Risk management strategies
  - Specific aspects of safety

Performance Criteria:	Key Indicators:
2.1 Delivers patient care integrating knowledge and evidence-based practice	<ul style="list-style-type: none"> <li>• Promotes patient-centred care</li> <li>• Demonstrates a holistic approach to patient care assessing the individual needs when planning patient care and evaluating outcomes</li> <li>• Demonstrates an acute awareness of the psychological needs of the perioperative patient and utilises acquired caring skills to allay anxiety</li> <li>• Liaises with multidisciplinary teams to plan and implement care based on best practice standards</li> <li>• Ensure accurate and timely communication in relation to individual patient care</li> <li>• Implements planned care and ensures accurate and complete documentation of interventions</li> <li>• Manages any unforeseen deviations from planned care and records same</li> <li>• Preserves patient dignity, privacy and confidentiality as appropriate</li> <li>• Practices in a manner that respects the beliefs and cultures of others</li> <li>• Maintains the highest standards of care implementing change where evidence-based practice dictates</li> <li>• Recognises the needs of the unconscious patient, applies the appropriate duty of care and delivers comprehensive nursing care</li> <li>• Recognises the importance of patient identification and applies accurate attention to detail</li> </ul>

**Performance Criteria:**

**Key Indicators:**

- Shows a 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 utilises, records and monitors appropriate pain management strategies in accordance with regulation and policy
- Utilises appropriate discharge criteria prior to transfer of the patient from the perioperative environment

2.2 Provides a safe, effective environment for the management of efficient patient care using the latest technology.

- 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 manufacturer's 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

**Performance Criteria:**

**Key Indicators:**

	<ul style="list-style-type: none"> <li>• 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</li> <li>• Ensures all items used in the delivery of surgical intervention are retrieved on closure intact and completes documentation as appropriate</li> </ul>
<p>2.3 Promotes health and safety in the workplace. Applies and initiates appropriate risk management strategies to prevent injuries</p>	<ul style="list-style-type: none"> <li>• Practices in compliance utilising risk management strategies to prevent incidents</li> <li>• Reports all adverse incidents and near misses</li> <li>• Analyses incident trends and responds appropriately</li> </ul>

2.4 Incorporates and complies with the principles of Infection Control and prevention in accordance with international guidelines

- Demonstrates sound knowledge of environmental standards required in the perioperative settings and ensures adherence to the 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

**Performance Criteria:**

**Key Indicators:**

- 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 specimens  
(for investigation)

- 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 promotes 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 the management of waste and is proactive in promoting best practice
-



**CORE COMPETENCY DOMAIN 3:**

**INTERPERSONAL RELATIONSHIPS AND COMMUNICATION**

**General aim**

The perioperative nurse establishes an efficient communication system with the patient/family/significant others, the multidisciplinary team and other relevant collaborating 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:	Key Indicators:
3.1 Establishes and maintains effective interpersonal relationships with patients/families/significant where appropriate	<ul style="list-style-type: none"> <li>• Ensures patients receive and comprehend information given to them in the course of their perioperative journey</li> <li>• Recognises the patient’s emotional status when discussing elements of a care plan</li> <li>• Ensures appropriate support mechanisms are available in the management of minors or incapacitated patients in accordance with legislation and institutional policy</li> </ul>
3.2 Recognises the essential requirements of effective teamwork to achieve desired patient care outcomes of high quality in the perioperative environment	<ul style="list-style-type: none"> <li>• Promotes the concepts of teamwork and inclusivity</li> <li>• Establishes effective relationships with all multidisciplinary teams based on understanding and mutual respect</li> <li>• Appropriately and promptly shares relevant information with team members</li> </ul>

Performance Criteria:	Key Indicators:
	<ul style="list-style-type: none"> <li>• Provides feedback to other team members in a constructive and prompt manner</li> <li>• Engages in reflective practice as an individual and as a team to identify positive outcomes and quality improvements</li> <li>• Manages conflict situations in a timely and effective manner</li> </ul>
<p>3.3 Employs appropriate communication strategies (verbal and written) to ensure accurate recording and transfer of information in the best interest of patient care</p>	<ul style="list-style-type: none"> <li>• Uses all relevant avenues of communication to ensure information is shared</li> <li>• Clarifies communication strategies are effective</li> <li>• Documents appropriate information in a timely, legible, accurate fashion</li> </ul>
<p>3.4 Is able to resolve conflicts</p>	<ul style="list-style-type: none"> <li>• Is able to keep calm in case of conflict</li> <li>• Can apply a nonviolent communication</li> <li>• Knows the hospital mediator able to solve this type of situation</li> </ul>
<p>3.5 Is able to communicate effectively health promotion</p>	<ul style="list-style-type: none"> <li>• Cooperates with other professionals and community and specialty interest groups in activities to reduce illness and promote healthy life styles</li> </ul>

**Performance Criteria:**

**Key Indicators:**

4.1 Demonstrates effective leadership skills acting as a role model, is consistent in delivery of high standards of care, is self motivated and displays effective interpersonal skills based on understanding and mutual respect

- 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

**Performance Criteria:**

**Key Indicators:**

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

## CORE COMPETENCY DOMAIN 4:

### ORGANISATIONAL, MANAGERIAL AND LEADERSHIP SKILLS

#### General aim

The perioperative nurse leads and manages a group of peers and other professionals, respecting the subsystem, the organisation's purposes, and the results of the activity.

#### This competency requires knowledge of:

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

- 
- |                                                                              |                                                                                                                                                                                                                                                                                            |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>4.3 Manages appropriately to ensure readiness in the delivery of care</p> | <ul style="list-style-type: none"> <li>• Demonstrates a clear understanding of the elements of rostering human resources</li> <li>• Allocates staff appropriate to their skill mix, learning needs and scope of practice</li> <li>• Ensures learners are supervised as required</li> </ul> |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
- 

- |                                                               |                                                                                                                         |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| <p>4.4 Carries out the stewardship of financial resources</p> | <ul style="list-style-type: none"> <li>• Ensures billing of equipment and services</li> <li>• Avoids wastage</li> </ul> |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
-

---

4.5 Manages medical devices for safety use

- Ensures appropriate supplies are available
- Ensures sterile supplies/instrumentation are stored in appropriate conditions
- Ensures supplies are rotated appropriately
- Shows awareness of cost element of care and is prudent in the usage of material supplies.

---

4.6 Employs effective organisational and management skills in the provision of quality patient care

- Acts as a role model for other team members in the provision of care
- Employs proven motivational strategies to motivate self and others
- Recognises, acknowledges and respects the value of all team members
- Affords developmental opportunities for others in a safe manner
- Contributes to committees and forums as appropriate
- Facilitates change management as the need arises
- Supports managerial initiatives as appropriate

## CORE COMPETENCY DOMAIN 5:

### EDUCATION, RESEARCH AND PROFESSIONAL DEVELOPMENT

#### General aim

The perioperative nurse pursues education and personal development in order to build their professional portfolio, to develop personally and to maintain the knowledge and skill required of a constantly evolving specialization. The perioperative nurse conducts or helps to do research on perioperative nursing.

#### 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:

#### Key Indicators:

- |                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>5.1 Demonstrates a commitment to their own and others personal and professional development</p> | <ul style="list-style-type: none"> <li>• Demonstrates a commitment to lifelong learning and research</li> <li>• Is proactive in updating knowledge and skills in the maintenance of professional competence</li> <li>• Participates in the education and development of other nursing colleagues within the structures provided</li> <li>• Participates in the education and development of other allied health professionals in the perioperative setting</li> </ul> |
|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Performance Criteria:	Key Indicators:
<p>5.2 Proactively seeks and provides educational opportunities for themselves and others</p>	<ul style="list-style-type: none"> <li>• Participates in assessment of other colleagues as appropriate</li> <li>• Contributes to formal/informal education sessions</li> <li>• Attends internal and external education forums obligatory and voluntary</li> <li>• Creates an environment in the workplace conducive to learning</li> </ul>
<p>5.3 Reflects and analyses professional practice</p>	<ul style="list-style-type: none"> <li>• Is able to analyse the situation and ask a question in case of problems or doubts</li> <li>• Justifies the reason of the actions</li> <li>• Shows logic and reasons for the actions and interventions</li> <li>• Is able to evaluate the action according to the evidence-based nursing.</li> </ul>
<p>5.4. Contributes/designs/participates in and or conducts research.</p>	<ul style="list-style-type: none"> <li>• Uses and contributes to research into the evidence base for safe, effective, efficient practice in perioperative area.</li> <li>• Uses systematic review to improve patient experience and outcomes in perioperative nursing.</li> </ul>

## **ASSESSMENT:**

Assessment of learning should be continuous throughout the programme with specific evaluations for each module together with a final theoretical examination which demonstrates consolidation and application of all core domains of competencies.

Practical assessments will include continuous self-evaluations plus assessments by a course teacher and/or a clinical supervisor. Through this ongoing process, the student will be expected to achieve all the learning outcomes at the end of the education programme.

A continuous developmental progress report should be maintained by the tutor for each individual student throughout the course. This will cover aspects of both personal and professional improvement 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. This programme increases the responsibility of the OR nurses and prepares them for the commitment to appreciate leadership and management roles.

The major objectives of the assessment will be focused upon:

The acquisition of the core domains of competencies and their performance criteria's:

- The stimulation of questioning, generate an analytical and creative approach in the field and encouraging independent judgement and critical self-awareness
- The reinforcement of skills of clear scientific communication and logical argument
- Inspiring the student to develop the ability to discern how to treat the relationships in accordance with what she/he has learned to actual patient's care situations
- Cheering the student to appreciate the nature of attitudes, the different ways of thinking, the numerous practices and disciplines
- Developing the student's skills as an insightful 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 a:

- Scrub nurse
- Circulating nurse: Surgery / Anaesthesia (in some countries)
- Nurse surgical assistant

(In both existing areas: Adult and Paediatric fields.)

The perioperative nurse must integrate all the EORNA competencies, applying nursing knowledge, clinical skills and professional attitude in providing 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 evaluations 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 Curriculum or who wish to acknowledge the programme within their own longer courses.

As stated in the document, it is not the intention to replace existing education programmes where these are seen to be of an appropriate level for the individual country's needs.

This programme will provide basic and general knowledge for those who wish to start a new course for OR nurses.

This 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 longer where countries will be fitting these outcomes into their existing programmes.

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

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](http://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 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 and culminating in a final certificate in perioperative nursing care. These tasks will 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 Care service around Europe.
2. The Educational plan represents specialisation within the area of Perioperative Nursing and development of human sciences.
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 Care.

### *Preparation for examinations/assessment – absence:*

- According to the guidelines which apply to ever single country's educational system.
- It is accepted a maximum absence of 5% of the total hours of the clinical placements.

## **Content of the EORNA Core Curriculum:**

### **Theoretical courses (30 ECTS)**

#### Medical sciences:

- Hospital hygiene, sterilisation and aseptic technique
- Anaesthesia
- Surgical techniques
- Radioprotection
- Anatomy and Physiology (applied to surgery)

#### Nursing sciences:

- Nursing care in the Perioperative environment
- Nursing care in anaesthesia
- Perioperative nursing care: generalities and specificities in each surgical speciality
- Recovery room nursing care
- Sterilisation technics

#### Human sciences:

- Psychology
- Law
- Ethics
- Deontology
- Organisational issues
- Interpersonal Skills (Leadership, emotional intelligence)
- Professional identity

#### Technical sciences:

- Architecture of the operating theatre
- Surgical equipment

### **Practical (30 ECTS)**

Clinical placements in Operating theatre and Recovery room, like Scrub nurse, 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 be also relate to relevant subsidiary subjects.

The practice should highlight 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 familiarised 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 daily work.

### Objectives of practical studies:

**1. The student shall have training in the 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 skills.**

The perioperative nurses’ clinical skills for the 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 a 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 carry out this.

They will need first-hand experience for a prolonged period of time in the practice field and the 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 that the student relates to reality when dealing with professional requirements and a medical service are in continuous developing.

**5. The student should be trained in taking responsibility.**

The perioperative nurse's area of responsibility is large, and the student 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 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' aim 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.

## **RESPONSIBILITIES:**

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 their 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 their 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:

- 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 arrange practical education in relation to the professional level of the programme and the student
- To receive guidance in clinical practice
- To be assessed in their functional ability as a perioperative nurse.
- To 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 their own needs. A critical incident directly related to real-life situations will often be more constructive than 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 their 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 are achieved through written and oral tests 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.



### 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 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 evaluating, 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 the self-evaluation, so that the student increases the skill of assessing him/herself and others is meaningful.

There also must be 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 the initiative for self-assessment. Special assessment forms should be provided.

Practice is evaluated 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 judged 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

## BIBLIOGRAPHY

### BOOKS:

- AESOP: Associação dos Enfermeiros de Sala de Operações Portugueses – Enfermagem Perioperatória: “*Da filosofia à prática de cuidados*”, Lisboa, Lusodidacta, 2006, ISBN: 972-8930-16-X
- An Bord Altranais: “*Requirements and Standards for Education Programmes for Nurses and Midwives with Prescriptive Authority*”, An Bord Altranais, Dublin; April 2007
- AORN: American Association of Operating Room Nurses: “*Working document on perioperative nursing roles*”, AORN Journal 67 (Jan. 1998) 51-61
- AORN: American Association of Operating Room Nurses: “*Standards, Recommended Practices, Guidelines*”, Denver USA, 2000, 303p.
- AORN: American Association of Operating Room Nurses: “*Standards, Recommended Practices, and Guidelines*”, AORN Inc, USA 2004, pp. 341 – 345
- BENNER, P: “*From Novice to Expert ~ Excellence and Power in Clinical Nursing practice*”, Addison Wesley: California, 1984
- BOTERF, Guy Le: “*De la compétence – Essai sur un attracteur étrange*”, Les Editions d'organisation, Paris, 1994, 175 p.
- BOTERF, Guy Le: “*De la compétence à la navigation professionnelle*”, Les Editions d'organisation, Paris, 1997, 293 p.
- EUROPEAN COMMISSION: General Directive XV Brussels, 24 Jun 1998 XV/E/8481/4/97 – “rapport et recommandations sur les compétences nécessaires pour l'exercice de l'infirmière”
- FAIRCHIL, Susan S: “*Perioperative Nursing; Principles and Practice*”, 2<sup>nd</sup> Ed. USA: Little Brown and Company (Inc.), 1996, 686p.
- GRISOP: Groupe Roman des Infirmières de salle d'opération: “*Les principes de base des soins infirmiers au bloc opératoire*”, Suisse, février 1991, 60p.
- GROAH, Linda: “*Perioperative Nursing*”, 3<sup>rd</sup> Ed., USA: Appleton & Langue, 1996, 512p.
- GRUENDEMANN, Barbara J, FERRNSEBNER Billie: “*Comprehensive perioperative nursing*”, Jones and Bartlet Publishers, USA (Boston), 1995, pp 388-408.
- HIND Martin, WICKER Paul: “*Principles of perioperative practice*”, Churchill Livingstone, Londres, 2000, 237p.
- IRISH NURSES ORGANISATION: OPERATING DEPARTMENT NURSES SECTION: “*Recommended Practices in the Operating Department*”; Ireland, 2007
- INTERNATIONAL COUNCIL OF NURSES, Alexander M., Runciman P.: “*ICN*”

*Framework of competencies for the generalist nurses – report of the development process and consultation, standards and competencies series”, Geneva, 2003.*

- KNEEDLER, J.A., DODGE, G.H.: “*Perioperative patient care – the nursing perspective*” , 3rd edition, Jones and Bartlett publishers, 1994, 419p.
- MASLOW, A.H.: “*A Theory of Human Motivation*” Psychological Review 50, 1943, 370p.
- MEEKER, Margaret Huth, ROTHROCK, Jane C.: “*Alexander’s care of patient in surgery.*” 9<sup>th</sup> Ed USA (Missouri), Mosby, 1995, 1057p.
- NICKLIN, P. & KENWORTHY, N.: “*Teaching and assessing in Nursing Practice*”. Scutari Press: London, 1995
- PÉCHOU, Georgette et MARINO-DIDIER, Catherine : “*Pratiques et références de l’infirmier(e) de bloc opératoire. Développer une culture qualité.*”, Editions Masson, Paris, 1999. ISBN, pp. 81-82.
- PENDLETON, S. & MYLES, A.: “*Curriculum Planning in Nurse Education*”, Edward Arnold: London, 1991
- UNAIBODE Union Nationale des Associations d’infirmier(e)s de bloc opératoire diplômés d’état: “*L’infirmière de bloc opératoire.*”, Editions Masson, Paris, 1996, 154p.
- UNAIBODE Union Nationale des Associations d’infirmier(e)s de bloc opératoire diplômés d’état: “*Pratiques et références de l’infirmier(e) de bloc opératoire, développer une culture de qualité*”, Editions Masson, Collection Savoir et pratique infirmière, Paris, 1999, 331p.
- WALSH, M.: “*Models in Clinical Nursing - The Way Forward.*”, Bailliere Tindall, London, 1991

## **PUBLICATIONS:**

- ANTONIADOU, I.: “*Health of Record: Theatre-Of-Care*”, International Academy for Design and Health, 2008
- BRESSON I.: “*Infirmières de bloc opératoire, qui sommes-nous ?*”, revue interbloc n° 2, France, 1996.
- COUNCIL RECOMMENDATION of 22 May 2017 on the European Qualifications Framework for lifelong learning and repealing the recommendation of the European Parliament and of the Council of 23 April 2008 on the establishment of the European Qualifications Framework for lifelong learning (2017/C 189/03)
- DIAS-PINHEIRO: “*Competências dos enfermeiros perioperatórios*” Revue AESOP, Lisboa, n.22, Abril 2007.
- FOUREZ, G.: “*Compétences, contenus, capacités et autres casse-têtes*”, Forum des

pédagogies, Mars 1999.

- LEJEUNE C., LEMENU D., PAIRON B.: “*Un système d'évaluation de la formation plus cohérent*”, Soins cadres, n°33, 1er trimestre 2000, p. 48-50.
- ROGEZ, R.: “*Reconnaissance et valorisation de l'élève infirmière*”, projet d'étude, in Soins, T.27, n°7, avril 1982,
- ROMAINVILLE, M.: “*L'irrésistible ascension du terme (compétence) en éducation*”, Enjeux, 37/38, Mars/juin 1996.
- 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
- WILLEMS C.: “*Le référentiel pédagogique de la 4ème année d'infirmière graduée en salle d'opération*”, revue AFISO 2002, n° 45, Belgique.

#### **Conference Papers/Presentations:**

- BRETT, Margaret: “*Quality and nursing care*”, paper presented at Greek Operating Room Nurses Annual Conference in Cyprus, 1994
- BRETT, Margaret: “*Justification for the role of specialist peri-operative nurse*”, paper presented to AESOP in September 2000, 25 p.
- DELORY, C.: (UCL/Fore – SeGEC/SeRDeP) “*L'évaluation des compétences dans l'enseignement fondamental. De quoi parle-t-on?*” in “*L'évaluation des compétences chez l'apprenant, pratiques, méthodes et fondements.*”, Actes du colloque du 20 novembre 2000, UCL, presses universitaires de Louvain, collection Recherche en formation des enseignants et en didactique, p.21-35
- PAQUAY L., ROEGIER X.: “*Caractériser des pratiques d'évaluation des compétences*”, UCL, Département des Sciences de l'éducation, formation des 27-31 août 1999.
- Paquay L., Carlier G., Collès L., Huynen A.M.: “*L'évaluation des compétences chez l'apprenant, pratiques, méthodes et fondements.*”, actes du colloque du GRIFED du 22 novembre 2000, UCL, presses universitaires de Louvain, collection Recherche en formation des enseignants et en didactique, 160p.

#### **Unpublished articles:**

- AFISO: “*Référentiel de compétences de la spécialisation en soins périopératoires en vue d'obtenir le titre d'infirmier spécialisé en soins périopératoires*”, Référentiel réalisé en inter réseaux et dans le cadre du groupe de travail (enseignement) lié

à l'AFISO, Sophie BAIJOT - Haute Ecole Namur Liège Luxembourg, Christine WILLEMS - Haute Ecole Léonard de Vinci, Brigitte SCHOFFENIELS - Haute Ecole de la Province de Liège, Marie-Joëlle SEE CHIM - Haute Ecole Francisco Ferrer, Evelyne d'HOOP - Haute Ecole Léonard de Vinci - 2015. 14p.

- DIAS-PINHEIRO: "*Competências dos Enfermeiros Perioperatórios*" nas 1ª Jornadas de Atualização em Cirurgia Obstétrica/ginecológica, no dia 1 de Março de 2007, no Hospital de S. João no Porto.
- EORNA: "*European common core curriculum for operating department nursing*", 1997, 49p.
- 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
- Munday J, Kynoch K, Hines S.; "*Nurses' experiences of advocacy in the perioperative department: a systematic review*", JBI Database System Rev Implement Rep. 2015 Sep 16;13(8):146-89. doi: 10.11124/jbisrir-2015-2141

#### External links:

- <http://www.worldhealthdesign.com/Theatre-Of-Care.aspx>: ANTONIADOU, Irini: "*Health Record: Theatre Of Care*"
- <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 completed in either English or French.

#### Before submitting your application:

Check that the application is complete and has all required attachments. Incomplete applications will be returned, consequently 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 original, bound 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. An acknowledgement of 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](http://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

**Institution Details**

Name of Institution	Legal Name of Entity		
Trading Name/s	Trading Name/s		
Postal Address	Post Office Box Suburb State Postcode		
Business Address	Street Address Suburb State Postcode		
Contact Numbers	Tel (incl. country code)	Fax (incl. country code)	Toll Free
Web Address	Web address		
Email Address	General email address		

**Details of the Authorised Officer**

Name	Title Firstname Lastname		
Position	Position title		
Postal Address	Post Office Box Suburb State Postcode		
Contact Numbers	Tel (incl. country code)	Fax (include area code)	Mobile
Email Address	Email		

### Contact Officer for this Application

Name	Title Firstname Lastname		
Position	Position title		
Postal Address	Post Office Box Suburb State Postcode		
Contact Numbers	Tel	Fax	Mobile
Email Address	Email		

### 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.

#### Delivery Site 1

Campus Name			
Street Address Suburb State Postcode			
Telephone Number (incl. country code)			
Principal/Agent Relationship	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Name of Agent			
Courses to be offered at this site			

#### Delivery Site 2

Campus Name			
Street Address Suburb State Postcode			
Telephone Number (incl. country code)			
Principal/Agent Relationship	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Name of Agent			
Courses to be offered at this site			



**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.

Full Title of the Course	Abbreviated Title

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

Abbreviated Course Title	Educational Outcomes (List key knowledge and skills)	Vocational Outcomes (eg On completion of the course, graduates will be able to be employed as XXX or in the XXX industry)

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

Abbreviated Course Title	Educational and Other Qualifications Required

**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

Abbreviated Course Title	ECTS

- 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.

Abbreviated Course Title	Supervisory arrangements of clinical placement

- 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.