Postgraduate Diploma in Nephrology Nursing

As per the evaluator: The planned research assessment with no module in the programme design needs further elucidation. In addition, the decision to have no work-based WIL should be reconsidered as work-based WIL is a required component of a nursing programme leading to registration at SANC.

UCT response:

Regarding the assessment of research, the qualification has been recurriculated over time. The fundamental components were originally in four separate modules. These have been combined into the module Professional Development Studies. Therefore, the four original components were integrated into one module. This module now includes interpersonal and communication skills, leadership in management in a primary healthcare approach, ethics, human rights and social determinants of heath, and research competencies. All aspects of this module are continuously evaluated and there is also an integrated final assessment. When the students are assessed on research, they are assessed on research knowledge and utilisation of research in practice, not competencies as incorrectly indicated. There is therefore no requirement that students must be able to conduct research as this is not HEQSF requirement. It must be noted though that advanced health professionals studying at a PGDip level will be required to utilise research in their professional practice.

The fundamental research knowledge/literacy that is taught in Professional Development is assessed in an MCQ (Multiple Choice Questionnaire as a formative assessment and the application of the skills is utilised and tested in the clinical courses. An example of this is where students are required to use the literature and their own assessments to demonstrate a holistic approach to the renal care including examination, renal screening, nursing care, and the effects of the illness on the family (as indicated in the original application for accreditation). All health care practitioners are expected to practice evidence-based practice, within which research literacy is embedded and is therefore developed at this level of study.

Regarding the WiL component, as per the DHET definition, we have drawn a distinction between practical learning that is integrally linked to the formal tuition process as opposed to workplace based learning that takes place after the formal instruction (WIL as per DHET definition). The HEQSF definition of WIL covers both forms. In this qualification, all practical/experiential learning takes place within the duration of the qualification. During the academic year, in the theoretical learning component, there are clinical practice days. In addition, the SANC has a set number of hours for practical learning - 962. We have therefore allocated 60% of the learning activities to practical learning. Students have supervised clinical learning experience and keep a logbook of clinical learning experiences, including hours, and particular skills that are assessed and signed for by an assessor. In line with the specialisation, students undergo clinical experience in cooperation with authorities at the clinical platform. UCT is responsible for placing the student and the convenor is responsible for monitoring. The experiential learning is done on a formal contractual basis and there is a formal process of feedback from the health facility and UCT input. Students may not enter the final exam without completing a minimum of 50% of the clinical learning time. Students are not allowed to graduate without having completed these hours.