



**The Liberian Board
For
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**The Accreditation Process for Nursing and Midwifery Institutions
In Liberia.**

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One of the purposes of an education regulatory body is to ensure that educational training institutions are of sufficient quality and capable of producing graduates equipped with the competencies required for the designated scope of practice.

It is in this light that the Liberian Board of Nursing and Midwifery has been working with the Rebuilding Health Services (RBHS) a USAID funded MOHSW project since 2009 to strengthen pre-service education in nursing and midwifery training institutions in Liberia with special emphasis on accreditation.

In 2009 The LBNM and other stakeholders in pre-service education developed pre-service Education quality improvement standards based on the Standard Based Management & Recognition (SBMR), the quality improvement process of Jhpiego, a partner in RBHS. These standards were subsequently adapted by the LBNM as National Pre-service Standards for Nursing and Midwifery Training Institutions in Liberia. Since then the board along with a team from RBHS and MOHSW has been conducting baseline and follow-up assessments using the standards for accreditation.

In 2011, when USAID informed RBHS of intended changes to the project and asked the project to provide technical assistance and support to the regulatory bodies to improved and institutionalized accreditation procedures for health training institutions; the Liberian Board of Nursing and Midwifery (LBNM) and to the Liberian Medical and Dental Council (LMDC) has been working in partnership with RBHS to further institutionalize the standards at health training institutions and health facilities throughout the country.

In continuation of RBHS assistance to the regulatory bodies, to improve her institutional performance; thus updating the standards to accredit health facilities, training institutions and professional staff, a workshop was conducted in February 2014, co facilitated by two STTAs from Jhpiego, Emmanuel Otolorin and Julia Bluestone assisted by Marion Subah. The goal of the workshop was to enable regulatory bodies to make appropriate decisions on accreditation and licensing/re-licensing processes including continue professional development (CPD). By the end of the workshop LMDC members including the LBNM had updated drafts of the pre-service education standards, making them more appropriate for all cadres, including medical doctors, physician assistants, environmental health technicians, pharmacist and medical lab technicians as well as draft processes accreditation, accreditation and licensing/re-licensing processes including continue professional development (CPD). The final draft was than developed with recommendations from the STTAs.

Following this, a total of 35 representatives from LMDC, LBNM, LAMLT, LAPHT, PA Association, Pharmacy Board, Training Institutions, and MOHSW participated in a two day validation workshop conducted in April 2014, to validate the accreditation, licensure and CPD process that were developed in February. The goal of the workshop was to enable regulatory bodies to validate and adapt accreditation and licensing/re-licensing processes including continue professional development (CPD). By the end of the workshop the participants had review the recommendations and decision and approve processes agreed upon related to health professional regulation, including accreditation, registration and licensure, endorsed the CPD processes and systems, sanctioned the process for endorsing available courses for use as CPD and reviewed and authenticated the Pre service Education Standards and tools for new schools and continue assessments

The following is the Accreditation Process for Nursing and Midwifery Institutions in Liberia.

New school

Application:

1. An applicant for a new school submits letter of application to open a new program.
2. The Board sends the applicant the standards for new schools and the information about establishing a Nursing or Midwifery Program.
3. The applicant is instructed to prepare for an assessment visit
4. The applicant informs the Board when they are ready
5. A visit is arranged (Board sends a written letter with date that they will come for the first assessment visit).
6. LBNM writes a communication informing the applicant of the assessment result

Established school

1. At beginning of each year, the Board notifies the school of the time frame for the annual quality improvement visit as well as reminder of their action plan and areas of focus.
2. Every three year, the board also sends a separate letter to remind the school of the expected dates of the triennial accreditation visit. Close to the anniversary of accreditation, a date for a visit is arranged and the school is encouraged to perform a self-assessment to prepare for accreditation.
3. The school should compile the needed evidence (accreditation fee, internal-assessment report etc.) to make sure they are ready for an accreditation visit.
4. Accreditation visits occur every three years, quality improvement and quality assurance visits occur annually (except during the year of accreditation visit) and target gaps identified in previous visits.

Accreditation visit:

1. The accreditation team consists of trained evaluators (three to five people are recommended) of the same cadre of school being assessed for accreditation.
2. The team will review the management section together and split up to observe different standards in the tool.
3. They observe using the tool and assess if standards have been achieved.
4. During a post-evaluation meeting at the end of each day, results are compared and discrepancies are resolved through discussion and comparison and by a majority vote
5. If needed, sections or standards can be re-evaluated if discrepancies are not resolved.
6. The educational institution staff is debriefed and informed of findings before the evaluators leave.
7. A full report is prepared by the evaluators and sent within one-two months.

Quality Improvement Visit

1. These are quarterly visits that focus on guiding the schools use action plan to address identified gaps.
2. These assessment visits include a visit to the school and the clinical site.

**Accreditation Decision
Established Schools**

1. **Accreditation:** meets required standards: 80% achievement of standards are required
2. **Partial accreditation:** 60-79%, of standards are met, subsequent visits by LBNM within three to six months to make corrections:
3. **Probationary Accreditation:** 50-59%, of standards are met, have one year to meet standards. Within 3-9 months two verification visits by LBNM focusing on identified gaps then repeat accreditation visit
4. **Denial of Accreditation:** Below 50% of the standards are met, fail to meet minimum requirements after repeated accreditation visit; school is closed with withdrawal of accreditation. students are advised to go to another accredited school if they meet the policy of that school
5. **Withdrawal of Accreditation:** Previously accredited programme fails to meet minimum requirements upon another round of accreditation; school is closed with withdrawal of accreditation. students are advised to go to another accredited school if they meet the policy of that school

**Accreditation Decision
New schools**

1. **Accreditation:** meets required standards: 80% achievement of standards is required
2. **Probationary accreditation:** 50-79%, have nine months to meet standards. LBNM will work with the new school to make corrections. Within 3-6 months two verification visits focusing on identified gaps then repeat accreditation visit. Upon two visits with the repeated above score will cause denial of accreditation.
3. **Denial of Accreditation:** Less than 50%, Fail, advice to reapply.
4. **Withdrawal of Accreditation:** Previously accredited programme fails to meet minimum requirements (50% of the standards) upon another round of accreditation; school is closed with withdrawal of accreditation. students are advised to go to another accredited school if they meet the policy of that school

Punitive measures

Failure to follow the above instructions the institution will be fined with the amount of five thousand United States dollars and will need to reapply as new institution.