REVIEW

THE NATIONAL QUALIFICATIONS FRAMEWORK (NQF) -HOW WILL NURSING EDUCATION FIT IN?



Nelouise Geyer, M.Cur Democratic Nursing Association of South Africa

ABSTRACT

Many changes are currently taking place in the country and education is no exception. The National Qualifications Framework is the core of a new education and training strategy for the country and has developed from a National Training Strategy initiative, developed by the National Training Board. The South African Qualification Authority Act, no.58 of 1995, initiated a body that will develop such a framework.

The National Qualifications Framework is not an instrument for problem solving - it is an instrument to manage education and training situations in the country. This framework will integrate training and education, provide recognition for previous education and training and create a route for lifelong learning. It has been proposed that the framework consist out of three bands and eight levels. Unit standards will be the smallest part of education and training and will form the building blocks of the National Qualification Framework, on which qualifications will be based.

The purpose of this article is to discuss some of the new concepts to stimulate debate in the nursing profession.

OPSOMMING

Baie veranderinge vind tans in die land plaas en onderwys is geen uitsondering nie. Die Nasionale Kwalifikasieraamwerk is die kern van 'n nuwe onderwys en opleiding strategie vir die land en het ontstaan uit 'n Nasionale Opleidingstrategie inisiatief wat deur die Nasionale Opleidingsraad ontwikkel is. Die Suid-Afrikaanse Kwaliteitowerheid Wet, No 58 van 1995, stel 'n liggaam daar omt so 'n raamwerk te ontwikkel.

Die Nasionale Kwalifikasieraamwerk is nie 'n instrument vir probleemoplossing nie - dit is 'n instrument om onderwys- en opleidinggebeure in die land te bestuur. Hierdie raamwerk sal opleiding en onderwys integreer, voorsiening maak vir erkenning van vorige onderwys en opleiding, en 'n roete vir lewenslange leer skep. Daar word voorgestel dat die raamwerk uit drie bande en agt vlakke bestaan. Eenheidstandaarde sal die kleinste deel van onderwys en opleiding wees en sal die boustene van die Nasionale Kwalifikasieraamwerk wees waaruit kwalifikasies opgebou sal word.

Die doel van hierdie artikel is om enkele van die nuwe konsepte te bespreek om sodoende debat in die verpleegberoep te stimuleer.

INTRODUCTION

Many changes are currently taking place in the country and the education sector is no exception. The NQF originated from the work done by the National Training Boards on the National Training Strategy Initiative. The NQF is only one of six essential elements which are necessary to successfully implement the strategy. It is, however, the starting point or nucleus of the strategy (Preliminary Report NTB, 1994; 10).

Much debate is still taking place as there are a number of difficult questions to answer. Setting up an assessment system for all of South African education and training will certainly require multiple answers and complex tradeoffs. The purpose of this article is to share some of the concepts under discussion at the moment.

THE SAQA ACT

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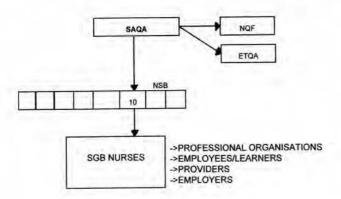
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SAQA will be responsible for setting and maintaining standards. SAQA will oversee the development and implementation of the NQF. It will set up NSBs (National Standards Bodies) which will be responsible for the development of learning/career pathways and the coherence of a particular field.

FIGURE 1



13 fields are currently being proposed (HSRC, 1995: 169):

- 01 Agriculture and Nature Conservation
- 02 Culture/Arts
- 03 Business, Commerce, and Management Studies
- 04 Communication Studies and Language
- 05 Education, Training and Development
- 06 Engineering and Technology
- 07 Human and Social Studies
- 08 Law, Military Science, and Security
- 09 Manufacturing
- 10 Medical Science, Health, and Social Services
- 11 Physical, Mathematical, Computer, and Life Sciences
- 12 Utility Services
- 13 Planning and Construction

Nursing education will probably be included in field 10. The name of field 10 (Medical Science, Health and Social Science) as it currently stands is unacceptable - it should be renamed Health and Social Science, as Medical Science is one of various Health Sciences. Every field will have subfields i.e. nursing science in field 10, which will have their own SGBs (Standard Generating Bodies). These bodies should involve 4 partners, i.e. providers, professional groups (eg. South African Nursing Council - SANC), employees and employers.

The NSB of a particular field will receive inputs from all relevant SGBs and ensure coherence in the system by synthesizing inputs and setting standards for the field. The NSB forms a channel to the SAQA where registration of unit standards and qualifications will take place. Regulation, therefore, takes place from the top and innovation from the bottom.

Education and Training Quality Assurers, set up by SAQA, will be responsible for accrediting providers to deliver courses and monitoring standards as well as delivery by providers.

WHAT IS THE NOF?

The NQF is a framework/system for quality. It is not a problemsolving tool - it is a tool to manage what is happening in education and training in the country. The NQF will not be able to open up all avenues for all people, i.e. it is not a tool which will enable all people to obtain a level 8 qualification. The system will, however, allow the individual to get recognition for what he/she has learned.

Integration

One of the major elements of the NQF is integration:

* learning and skills which people have acquired through experience and in-service training or selfeducation can be formally assessed and credited towards certificates. This will enable them to qualify for entry to additional education and/or training (National Department of Education, 1995: 26, clause [10]).

> A further implication is that courses presented at independent schools can also be accredited and therefore enable learners to make an informed choice before enrolment.

> The NQF will not, however, credit any skill for any course - only those which are relevant to the learning or career pathway which a learner wants to follow. The COTEP document (initiative for the education and training of teachers) indicate in the discussion on credits, that fractions of credits could be awarded, but no credits would be awarded for overlapping between or within certificates, diplomas or degrees (COTEP, 1995: 49-60). The White Paper makes it very clear that the framework, although facilitating access, will also be a mechanism for regulating education and training, especially with regard to the issuing of qualifications (National Department of Education, 1995: 16, clauses 14 and 15).

integration of education and training. Knowledge can no longer be equal to content only but must be recognised as having an interdependent relationship with skills and attitudes - all of which contribute towards competence. Learning can take place anywhere, at any time and through any means, provided that it meets national required standards. This indicates that Schools of Nursing will not be limited in the way that courses are presented.

The future model for education and training will retain some of the characteristics of both the education and training sectors while adapting others along the way. Any sector which, for example, wants its learners to obtain a Higher Education and Training Certificate will have to meet the same criteria with regard to registered unit standards, although not necessarily with regard to the means used to attain those standards (Report Ministerial Committee, 1996: 18,19). This model is not something new for nursing education - it is the model that has always been used.

Nursing education will have to change the way it looks at the education and training of nurses. Nurse educators talk about correlating theory and practice and therefore still regard it as two separate entities a more integrative approach should be developed. The teachers appear to be in the same position as the COTEP document describes outcomes in terms of aims (norms) and standards (general and specific competencies) for knowledge, skills and values. Although acknowledging that they are interactive and should be seen holistically they are separately described (COTEP,1995: 6-28).

an integrated approach to education and training will link one level of learning to another, i.e. individuals will be able to move from the general education band to the further or higher education band. It will enable successful learners to progress to higher levels from any starting point in the education and training system as learning and skills acquired through experience, on-site training or self-education could be formally assessed and credited towards certificates (National Department of Education, 1995:26, clause 10). The model used for the education and training of nurses has always been a work-integrated model. In nursing education some links between different levels of learning already exist, eg. the nursing auxiliary trained under R1571 of the South African Interim Nursing Council (SANC, 1989) can proceed with the second year of training of the enrolled nursing course (provided that a suitable training post is available); and the enrolled nurse with a matric certificate can do a bridging course to become a registered general nurse.

Outcomes-based Education and Training

The single most jarring mindshift for nursing education is the issue of splitting outcomes (results of learning) from input (for underpinning knowledge and skills).

Most of the nursing science curricula, although specifying goals, aims or objectives as points of departure are, in fact, content-based. They are organised in terms of prescribed and sometimes optional content which is offered at specific stages and for fixed periods in nursing schools. Learners' progress from one class to the next depends largely on the extent to which they have mastered (or memorised) the required content. Assessment takes place at various points during the year and in year end examinations (referred to

as formative and summative evaluation), but learners progress from one class to the next at the end of a year only (Report Ministerial Committee, 1996: 19).

The differences between this current system and the new system can be observed by considering table 1, which identifies some significant differences between learning described in terms of outcomes, and learning described in terms of objectives (Report Ministerial Committee, 1996: p27). It may be more useful to regard this table as learning described in terms of inputs (objectives) and outputs (outcomes).

Outcomes

Outcomes are the end products of a learning process and are that segment of a unit standard which is a statement of the required learner capabilities that must be demonstrated (HSRC, 1995: 2). The word "outcomes" is used broadly as an all-inclusive term, referring to everything learnt, including social and personal skills, learning how to learn, concepts, knowledge, understanding, methodologies, values, attitudes and so on, and including both intended and unintended outcomes. Outcomes are specified by stated performances and assessment and range criteria.

In outcomes-based education and training, curriculum developers work backwards from agreed desired outcomes within a particular context which in our case is nursing. These state clearly what it is that the learner should have an understanding of and be able to apply. These outcomes are then unpacked into capabilities and unit standards. Programmes of learning are then designed to help the learners to achieve these outcomes.

Two sets of outcomes are distinguished:

(i) Essential Outcomes

Essential outcomes (core skills/generic competencies) are cross-curricular, broad generic outcomes that inform all teaching and learning. Examples could include problem-solving or communicating effectively. They have an integrative function, facilitating both inter-disciplinaryintegration and the integration of education and training (Report Ministerial Committee, 1996: 26).

TABLE 1: DIFFERENTIATING BETWEEN INPUTS AND OUTPUTS

	OBJECTIVES		OUTCOMES
-	Focus on what the teacher will do	-	Focus on what the student will do
-	Describe the intent of teaching	-	Describe the results of learning
-	Focus on opportunities provided for learning	-	Emphasise how learning is used, especially how it can be applied in new areas
_	Involve estimating the amount that can be learned in a given period of time	_	Require flexible allocation of time

(ii) Specific outcomes

Specific outcomes are contextually demonstrated knowledge, skills and values, reflecting essential outcomes (Report Ministerial Committee, 1996: 26). An example of a specific outcome of the essential outcome of communicating effectively, is: "Complex issues are explained so that comprehension is maintained by lay clients throughout the health promotion talk".

Specific outcomes are the building blocks which enable learners to achieve overall competence in a field at a given level. Unit standards registered on the NQF are described in terms of specific outcomes plus assessment/performance criteria as well as various other administrative details. The achievement of a specific outcome leads to the award of a credit(s).

Competence

When a learner has met the criteria which show that he has achieved the outcomes for required unit standards, credits are accumulated towards a particular qualification (Report Ministerial Committee, 1996: 26).

When they have the required number and combination of credits, they have achieved the defined degree of competence in that area, and receive a qualification. Rules for the combination of credits which make up a qualification, need to be developed.

Qualification

A qualification is primarily a meaningful cluster of units of capability to achieve a specific competence or purpose which is nationally recognised. The NQF will also require that all qualifications lay the basis for further learning - thus also underpinning the principles of progression and lifelong learning (HSRC, 1995: 105).

The relationship between these kinds of outcomes The following representation is a useful summary of the relationship between the outcomes and the defined degree of competence (Report Ministerial Committee, 1996: p27):

- Providers must be supported in developing courses and materials accessible to this range of new learners, as well as be monitored and supported in meeting quality assurance criteria.
- Learning programmes must lead to nationally recognised, portable credits which are equivalent across all types of providers and across provinces.
- These credits must lead to nationally recognised, legitimate and credible qualifications.
- There must be coherent career/learning pathways which ensure relevance and progression.

Arising from this, are some guiding principles indicated in table 2. When applying these principles to nursing education, it is clear that many of these principles are already in place even though the paradigm shift in nursing education and training has not yet taken place (adapted from Report Ministerial Committee 1996: 21-22).

STRUCTURE OF A CURRICULUM

The NQF will only specify unit standards which define the desired outcomes and their associated performance/assessment criteria. A curriculum will however consist of more than this because the relevant unit standards must be bound together. Curricula developed to fit in with the NQF, will also be outcomes-based. If a learner can demonstrate his ability to attain the relevant required outcomes, it does not matter what content helped him to get there or how and when he acquired the ability. The implication being that someone can become a registered nurse without attending a recognised Nursing School.

Specific outcomes are determined by knowledge, skills, attitudes, values and essential outcomes and their attainment is demonstrated within a specific context. The providers always need to take the process further than the mere statement of desired specific outcomes and performance /assessment criteria.

(Table 1a)

A QUALIFICATION	is the recognition of	COMPETENCE		
is built up from		is built up from		
UNIT STANDARDS	are the recognition of achieved	SPECIFIC OUTCOMES		
all are underpinned by ESSENTIAL OUTCOMES				

Key principles

The envisaged lifelong learning can only become a reality if certain conditions are met (Ministerial Committee, 1996: 21):

- Suitable career/learning advice, placement testing, and assessment programmes for the recognition of prior learning must be available to guide learners.
- Alternative learning programmes must exist for a range of learners who are unable to attend education and training institutions either on a full-time or on a regular part-time basis.
- Learners must be equipped to take advantage of open learning and multi-media education and training opportunities.

PROPOSED STRUCTURE OF THE NOF

The structure of the NQF represents an open ended goalpost with various levels (suggested 1-8). The goalpost is open ended because a lot happens above level 8, eg post doctoral research. These levels are the scaffolding on which the new levels of quality will be built.

Two routes exist to obtain a General Education and Training Certificate (GETC) (Report Ministerial Committee, 1996: 48a):

 It is envisaged that there will be 10 years of compulsory schooling to obtain a GETC. Learners who TABLE 2: PRINCIPLES APPLIED TO NURSING EDUCATION

PRINCIPLES	THE FRAMEWORK MUST:	NURSING EDUCATION Done	
Integration	establish the basis for an integrated approach to education and training as part of a human resources development policy aimed at integrating the theory with the practice, and the academic with the vocational		
Relevance	be, and remain responsive to national economic, social and political development needs.	Done on an ongoing basis	
Credibility	have national and international value and acceptance.	Done	
Work within a consistent framework of principles and certification which allows learners to clearly link credits into a meaningful learning or career pathway.		Learning takes place in a framework with objectives and certification with a meaningful pathway	
Flexibility	allow for multiple pathways leading to the same learning ends.	Two pathways exists	
Quality	Done		
Legitimacy	provide for the participation of all national stakeholders in the planning and co-ordination of standards and qualifications.		
Access	provide ease of entry to appropriate levels of education and training for all prospective learners in a manner which facilitates progression.	Not always (posts, selection)	
Progression	Progression ensure that the framework of qualifications permits individuals to move through the levels by accumulating appropriate combinations of credits.		
Portability	Portability enable learners to transfer their credits from one context to another.		
Articulation	provide for learners, on successful completion of accredited prerequisites, to move between components of the delivery system.	Not always	
Recognition of Prior learning	of Prior acquired in non-formal ways, e.g. through life/work experience.		
Guidance of learners			
Democratic Participation	provide for the active participation of practitioners in the relevant field in the writing of unit standards and in their regular revision.	New concept	
Equality of opportunity	provide common learning outcomes which can be reached at different rates by learners with specialised educational needs, by adults, and by children, both inside and outside mainstream schooling.	Difficult to accommodate	

TABLE 3: THE NATIONAL QUALIFICATION FRAMEWORK

NQF level	Band	Types of Qualifications and Certificates	tions and Locations of Learning for units and qualifications		
8	Higher	Doctorates Further Research degrees	Tertiary/Research/ Professional Institutions		
7	Education	Higher Degrees Professional Qualifications	Tertiary/Research/ Professional Institutions		
6	and	First Degrees Higher Diplomas	Universities/Technikons/Colleges Private/Professional Institutions		
5	Training Band	Diplomas Occupational Certificates	Universities/Technikons/Institutions/ Workplace/etc.		

Further Education and Training Certificate

4	Further education	Mix of units from all		Technical/ Community/ Police/	RDP and Labour market schemes
3	and	School/College/Trade Certificates Mix of units from all	Private/ State schools	Nursing/ Private colleges	Training Boards, union, work-
2	Training Band	School/College/Trade Certificates Mix of units from all			place, etc

General education and Training Certificate

		1 year Reception				work-place, etc.
	Training Band	Std 1/Grd 3	ABET Level 1	(Urban/ Rural/Far m/Special)	training/ RDP/Labour Market schemes Upliftment Programmes/ Community programmes	ABET programmes/ Private providers/ Industry Training Boards/unions/
	and	Std 3/Grd 4 (6 years)	ABET Level 2			
	Education	Std 5/Grd 7 (8 years)	ABET Level 3			
1	General	Std 7/Grd 9 (10 years)	ABET Level 4	Formal schools	Occupation/ work-based	NGOs/ Churches Night schools/

leave school without a GETC and return later, will each have a record of learning as a part of their evidence for Recognition of Prior Learning (RPL) assessment.

(ii) Adult Basic Education and Training (ABET) consisting of a modular system enabling the learner to obtain a GETC. The two processes meet at the point of a GETC. Specific outcomes within the General Education and Training band need to be developed with strong links to ensure progression towards an equivalent qualification at the end of the band.

After obtaining a GETC, a one year gap exists which needs to be filled before a candidate can enrol for a nursing course. How will this be done? Will nursing education make some relevant unit standards available to serve as building blocks, or will we leave this for someone else? There are core skills and knowledge that can be used for this purpose. Can the various training courses for community health workers be incorporated as building blocks?

Although education and training of the enrolled categories will fall in the further education and training band, it is clear from discussions with the National Commission on Higher Education (NCHE), that the education and training of the 4-year programme are regarded as Higher Education and Training at level 5 (NCHE, 1996: 58-60).

Unit Standards

The unit standard is the smallest unit in education and training and will be the building blocks of the NQF. The unit standard is a statement of the outcomes (knowledge, skills and abilities) which an individual must demonstrate in order to obtain credit for the unit (HSRC, 1995:6). Unit standards are the smallest assessable pieces of learning.

In an outcomes-based system the unit standard is removed from any direct relationship with delivery or attendance of a particular course of learning, and it is not just the conventional shopping list of content items found in many existing syllabi.

Credit and credit value

A common credit currency throughout the country should be developed to enable:

- principles of portability and progression;
- transfer of credits;
- recognition of prior learning;
- formulation of rules of combination for qualifications.

The suggestion is that 10 hours of national learning time be granted 1 credit. (National learning time refers to a hypothetical equation representing the expected achievement of a full time learner in a course presented at a typical state institution). Credits are a measure of achievement of outcomes only.

Unit standards will carry a rating of 1 - 120 credits. (120 represents the contribution of the unit to the equivalent of a full-time, full-year learner devoting 1200 hours of learning time (as opposed to contact time) (Report Ministerial Committee, 1996: 40). There is no fixed unit standard size - it is made up of coherent sets of specific outcomes. Rules of combination regarding credits will be an element of broader rules of combination leading to qualifications.

All qualifications need regular updating, and the concept of the shelf-life of credits and qualifications is not new or specifically related to the NQF. Similarly, employers or other sponsors may restrict the number of re-tries for which they will pay or give study leave.

SOME UNANSWERED QUESTIONS

In addition to the questions already asked, the following also comes to mind:

How will SAQA collaborate with the Higher Education Council recommended in the NCHE discussion document? The SA Interim Nursing Council performs many of the functions indicated in this article and is currently excluded from the SAQA Act, but how will it influence the Council in future if the

functions of accreditation and quality assurance are taken over? Should the profession not make sure that the Nursing Council, with a few changes, becomes the SGB for nursing?

SAQA is a non-nursing body - does the profession want this body to accredit courses in nursing? Can nursing afford to keep on separating itself from other education and training sectors? It will be of no use if nurses are so elitist that we are actually excluded!

It is clear that quality is a great priority in this new system, with standards being generated by all relevant roleplayers and it may be safe to say that standards won't drop. Won't it however become too restrictive? Won't all these suggested new structures limit education and training practices? We have just come from an apartheid era with all its problems and limitations.

By implication someone can become a registered nurse without attending an approved school for nursing education - will this be good or bad for the nursing profession? Will this phenomenon influence the standards of patient care, and if so, how?

CONCLUSION

Apart from the contents of the SAQA Act, all the concepts mentioned in this article are still under discussion. I trust that the content of this article will generate some debate on these issues.

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