

SASKATCHEWAN



# **Nursing Education Program Approval Process**

**Administrative Document  
for the Registered Nurse with Additional  
Authorized Practice Courses**

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## INTRODUCTION

The nursing education program approval standards/criteria are approved by the association under the provisions of *The Registered Nurses Act, 1988* and the current Bylaws.

Bylaw VI – Categories of Practice, Section 1(2)(a) “Additional authorized practice will be recognized for an RN in good standing in the general practice category who has successfully completed additional nursing education courses approved or recognized by the association or successfully completed a prior learning assessment.”

Bylaw XV – The association adopts its May, 2013 publication entitled *Nursing Education Program Approval Standards and Criteria for the Registered Nurse with Additional Authorized Practice Courses*.

END 3 “The nursing profession contributes to a proactive health system that meets the present and emerging health needs of the public” is accomplished in part by ensuring that graduates from RN with additional authorized practice education courses are competent to practice according to the standards of the association. Approval of basic, re-entry, additional authorized practice and RN(NP) education programs and/or courses are required by the Bylaws of the association.

Other documents which identify the standards for competent practice, also provide the foundation for the approval of the RN with additional authorized practice education courses:

- Current *Standards and Foundation Competencies for the Practice of Registered Nurses*
- Current *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*
- Current *CNA Code of Ethics*

## ROLES IN THE NURSING EDUCATION PROGRAM APPROVAL PROCESS

### Nursing Education Program Approval Committee

The Nursing Education Program Approval Committee shall consist of up to seven members appointed by the Membership Advisory Committee. Members shall have diverse expertise and perspectives.

1. Membership shall consist of:
  - Four registered nurses, one of whom is a registered nurse (nurse practitioner), from a broad range of practice, preferably nurses who work with new graduates, are in leadership positions, and/or have expertise in evaluation
  - One public representative with expertise in general education
  - One representative from the government responsible for *The Registered Nurses Act, 1988*
  - One representative from another health profession
2. Members of this committee shall be appointed for a three year term, renewable for one additional term. Terms of office shall be staggered to provide for continuity.

### Role of the Nursing Education Program Approval Committee

The Nursing Education Program Approval Committee shall:

1. Review the process for approval of nursing education programs as delegated to the Nursing Education Program Approval Committee.
2. May consult, as necessary or appropriate, with individuals who have expertise related to a program or any other matter considered by the committee.
3. Following a nursing education program approval review, report to the Executive Director recommending an approval rating of a basic or registered nurse (nurse practitioner) program based on association approved standards and/or criteria governing the approval of nursing education programs.
4. Maintain processes to ensure due process, procedural fairness and an open, transparent process for resolution of issues and/or concerns.
5. Submit an annual report to the Executive Director regarding updates from the nursing education programs.

## Role of the Assessment Team

The Assessment Team is responsible for verifying and clarifying the RN with additional authorized practice education provider's self-evaluation report. The Assessment Team does not determine an approval rating for the education course(s), but rather provides information to the Nursing Education Program Approval Committee for the committee's consideration. The Team is composed of one or two members who are contracted by the association. The Assessment Team is external to the education provider being evaluated. Members of the Assessment Team are recruited by the Nursing Education Program Approval Committee.

Members of the Assessment Team should possess the following qualifications:

- Experience in appropriate areas of clinical practice
- Current registration in good standing with the SRNA
- Experience in education programming

## Role of the SRNA Staff Resource

The SRNA Staff Resource performs three roles in relation to the nursing education approval process:

1. The SRNA Staff Resource assists the education provider to understand the approval process and the requirements of the review. The SRNA Staff Resource is available to meet with the education provider prior to submission of the self-evaluation report. The SRNA Staff Resource will also provide follow-up with the education provider, following a review.
2. The SRNA Staff Resource serves as a staff support to the Nursing Education Program Approval Committee. This role includes providing a list of potential Assessment Team members. The SRNA Staff Resource supports the work done by the committee but does not participate in making decisions about approval status of the course(s) being reviewed.
3. The SRNA Staff Resource serves as an ex officio member of the Assessment Team.

## APPROVAL STANDARDS

### Nursing Education Standards

The following are standards set out for the Registered Nurse with additional authorized practice education course(s).

1. Curriculum – The curriculum provides learning experiences necessary for students to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.
2. Resources – There are sufficient human, financial, physical, technology, and clinical resources to enable students to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.
3. Students – Students demonstrate progress toward the achievement of the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.
4. Graduates – Graduates successfully achieve the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

### Standard 1: Curriculum

Curriculum – The curriculum provides learning experiences necessary for students to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

#### Criteria:

1. The philosophy of the nursing education course(s) and the conceptual framework guide the development and implementation of the curriculum.
  - a. Evidence that the philosophy and conceptual framework guide the development and implementation of a PLAR process (if applicable).
2. *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice* are addressed and measured throughout the course(s).
  - a. Evidence that the Standards, Competencies and Clinical Decision Tools are embedded throughout the curriculum to support the RN with additional authorized practice to provide safe, competent and ethical care.
  - b. Evidence that the Standards, Competencies and Clinical Decision Tools are embedded throughout the PLAR process (if applicable).

3. In addition to the Standards, Competencies and Clinical Decision Tools, the curriculum includes:
  - a. Measurable course objectives;
  - b. Logical course sequencing;
  - c. Responsiveness to current and emerging trends;
  - d. Performance expectations of students that reflect the complexities of behaviors required for the competent performance of additional authorized practice;
  - e. An evaluation framework consisting of a formative and summative evaluation process to ensure ongoing relevance and/or revision of the curriculum; and
  - f. A focus on understanding and implementing competencies related to interdisciplinary collaboration and collaborative practice.
4. The education course(s) has/have learning opportunities to enable the RN with additional authorized practice to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.
  - a. Theory course(s) are consolidated with a practicum (as applicable).
  - b. That involves inter-professional education and provision of collaborative care.
5. Qualified preceptors supervise clinical learning activities (as applicable).
6. There is systematic and continuous evaluation of the curriculum including opportunities for feedback from stakeholders, which is used to inform ongoing development, maintenance, and enhancement of the curriculum.

## Standard 2: Resources

Resources – There are sufficient human, physical, financial, and technology resources to enable students to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

### Criteria:

1. Faculty possesses the theoretical knowledge and clinical expertise appropriate to their teaching responsibilities.
  - a. Nursing faculty must be involved as educators in nursing content in the course(s).
  - b. Preference should be given to faculty who has nursing experience in the specialty.
2. Where there is a clinical component, preceptors possess the expertise appropriate to their clinical teaching and area of additional authorized practice.
3. There are sufficient faculty to ensure optimum student learning and safe client care.
4. There are sufficient physical and technology resources to support learning activities/modalities.



## Standard 3: Students

Students – Students demonstrate progress toward the achievement of the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

### Criteria:

1. Students are currently registered and practicing as a RN in good standing with the association.
2. There are policies and procedures in place for student selection and admission.
  - a. The minimum competencies expected of RNs prior to entering the education course(s) are identified.
  - b. The minimum competencies expected of RNs wishing to apply for the PLAR process are identified (if applicable).
3. There are policies and procedures related to academic progression. This includes:
  - a. withdrawal;
  - b. failure;
  - c. appeals;
  - d. student discipline;
  - e. readmission; and
  - f. successful course completion.
4. Where there is a clinical component, there are measures to ensure student and client safety. This includes:
  - a. Ensuring that the student's immunization status meets the requirements of the clinical facility;
  - b. Ensuring that the student has basic life support certification as well as certification(s) as appropriate to the clinical setting; and
  - c. Ensuring that students have an appropriate security clearance completed.
5. Students receive well-timed, formative and summative feedback about their learning using evaluation methods to facilitate their achievement of the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.
6. Student trends including enrolment, withdrawal, and successful course completion are tracked and inform admission criteria.
7. There are policies and procedures related to maintaining student records related to relevant legislation.

## Standard 4: Graduates

Graduates – Graduates successfully achieve the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

### Criteria:

1. Prior to graduation, evaluations provide evidence that students have met the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice* and are qualified and competent to practice as a RN with additional authorized practice.
  - a. Evaluation tools are varied and provide evidence that students have achieved the competencies.
  - b. Evaluation tools for PLAR (if applicable) include a process for evaluation of clinical competence.
  - c. The course(s) is/are explicit in identifying the minimum requirements of graduates for meeting the competencies for the RN with additional authorized practice.
  - d. The course(s) is/are explicit in identifying the minimum requirements of graduates for meeting the competencies for the RN with additional authorized practice within a PLAR process (if applicable).
  - e. The overall design of the evaluation strategy makes explicit how graduates will demonstrate interdisciplinary collaborative practice as well as independent decision-making in the additional authorized practice.
2. There is a post-graduate evaluation with stakeholder feedback which is used to inform curriculum development and revision.

## PROGRAM APPROVAL RATINGS

Each course(s) shall be rated in one of the following categories, with written rationale for the rating and the period of time for which the rating is granted.

**Preliminary Approval:** The rating given to a new courses(s) that shows evidence of the ability to meet the criteria for approval but that has not yet graduated students from the course(s) or an established course(s) seeking initial approval. Course(s) receiving preliminary approval must undergo an assessment for full approval in the academic year following the first class of graduates. Graduates from course(s) who have received this rating will be considered graduates of an approved nursing education course(s) for the purpose of being placed on the Register. The nursing education provider is responsible to ensure the graduates meet the current *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice* at the time of graduation.

**Approval Granted:** The rating given to course(s) that meets the criteria for approval. Initial approval can be granted for a period of one year. Following initial approval, approval may be granted up to three years, depending upon the nature and significance of strengths and deficits identified in the review. Graduates from a nursing education course(s) that has received this rating will be considered graduates of an approved nursing education course(s) for the purposes of being placed on the Register.

**Approval Denied:** the rating given to course(s) that does not meet the approval criteria. Graduates from a nursing education course(s) that has received this rating will not be eligible to be placed on the Register.

## APPROVAL PROCESS FOR NEW COURSES(S)

New nursing education course(s) are to receive preliminary approval before admitting students. The purpose of the preliminary approval process is to assess the ability of the education provider to deliver the proposed course(s) and that graduates are able to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

The steps in the approval process are as follows:

1. The education provider will provide written notification to the SRNA of its intent to offer new course(s) prior to the proposed commencement date. The required date for the written notification will be negotiated between the SRNA and the education provider.
2. The education provider will submit a self-evaluation report to the SRNA Staff Resource prior to the proposed commencement date of the new course(s). The required date for the self-evaluation report will be negotiated between the SRNA and the education provider. If the submission is paper-based, a minimum of 10 copies of the self-evaluation report will be required.
3. The Nursing Education Program Approval Committee and the Assessment Team will review the submitted self-evaluation report independently.
4. The Assessment Team will submit a confidential report of their findings to the Nursing Education Program Approval Committee.

5. The Nursing Education Program Approval Committee will review the Assessment Team's report and the education provider's feedback to make a reasoned recommendation regarding the approval rating. They shall submit a Report of Recommendations to the Executive Director.
6. The Executive Director will provide written notification to the education provider regarding the approval rating.
7. The education provider has the right to appeal, in writing, a decision of the Executive Director to Council within 30 days of the decision.

## APPROVAL PROCESS FOR ESTABLISHED COURSE(S)

Eight months in advance of the program approval deadline, a mutually agreed upon date for the approval process will be established between the Nursing Education Program Approval Committee and the education provider.

The steps in the approval process are as follows:

1. At least four months in advance of the program approval deadline, the education provider will submit a self-evaluation report to the SRNA Staff Resource. If the submission is paper-based, a minimum of 10 copies of the self-evaluation report will be required.
2. The Nursing Education Program Approval Committee and the Assessment Team will review the submitted self-evaluation report independently.
3. The Assessment Team will submit a confidential report of their findings to the Nursing Education Program Approval Committee.
4. The Nursing Education Program Approval Committee will review the Assessment Team's report and the education provider's feedback to make a reasoned recommendation regarding the approval rating. They shall submit a Report of Recommendations to the Executive Director.
5. The Executive Director will provide written notification to the education provider regarding the approval rating.
6. The education provider has the right to appeal, in writing, a decision of the Executive Director to Council within 30 days of the decision.

## APPROVAL PROCESS FOR A SUBSTANTIVE CHANGE TO ESTABLISHED COURSE(S)

Substantive changes may include but are not limited to:

- Significant changes made to the length of the course(s)
- Significant changes made to the target student population
- Significant changes made to the course resources
- Significant changes made to the implementation of the course(s)
- Significant changes made to the curriculum
- Any other changes deemed to make the course(s) significantly different from the course(s) that was originally granted approval

Determination of a substantial change can occur in two ways:

1. The education provider is responsible to notify the Nursing Education Program Approval Committee of any proposed substantive changes to the established course(s). This notification must be provided in writing. It is the decision of the Nursing Education Program Approval Committee to determine if the change is substantive and therefore, requires a change in the approval rating/status. The education provider may be required to submit additional information, at the discretion of the Nursing Education Program Approval Committee.
2. The Nursing Education Program Approval Committee's review of the annual update of the approved course(s) indicates substantial changes have been made.

Upon review of the information provided by the education provider and in consultation with the course(s) program head, the Nursing Education Program Approval Committee shall render a decision if the change is substantive and therefore requires a change in program approval status. If there is an unresolved dispute between the education provider and the Program Approval Committee as to whether the change is substantial, the matter shall be referred to the Executive Director for resolution.

A course(s) implementing a substantive change will be required to undergo the approval process of an established course(s) even if it has not yet reached its approval deadline.

If the education provider is dissatisfied with the decision of the Executive Director, they have the right to appeal, in writing, a decision of the Executive Director to the Council within 30 days of the decision.

## APPROVAL PROCESS FOR COURSE(S) BEING DISCONTINUED

The education provider shall provide notification to the Nursing Education Program Approval Committee as to the expected date of discontinuation of the approved course(s) as soon as this date has been determined. The education provider must provide rationale for its discontinuation and any transitional or new programming that is being planned.

The education provider must provide a clear plan that will address how the transition from the old course(s) to the new course(s) will be accomplished.

## ANNUAL UPDATES

The purpose of annual updates is to provide supplementary information and to address particular gaps that were identified in the approval process. Information to be included in the annual update is as follows:

- Description of the progress and ongoing development in meeting identified recommendations from the Approval Report.

## CONFLICT OF INTEREST & CONFIDENTIALITY

The current Canadian Nurses Association *Code of Ethics for Registered Nurses*, and the SRNA Council policies *Code of Conduct* and *Conflict of Interest* direct the conduct of the members of the Nursing Education Program Approval Committee, the Assessment Team, and Council throughout the Approval Process.

Each member of the Nursing Education Program Approval Committee will sign and abide by the code of conduct approved by Council.

The Nursing Education Approval Committee in consultation with the education provider shall examine any perceived potential or actual conflict of interests at the outset of each program review. This shall include selection of members of the Assessment Team.

Each member of the Assessment Team will sign and abide by the code of conduct approved by Council. Members of the Assessment Team shall not request materials from the education provider for their personal use at any time during the assessment process nor use the opportunity of the approval process to sell personal consulting services.

## ALTERNATE DISPUTE RESOLUTION PROCESS

The SRNA supports a collaborative program approval process. The education provider will be provided with opportunities throughout the program approval process to provide input:

- Selection of the Assessment Team
- Clarification of factual information documented in the Assessment Team's report
- Nursing Education Program Approval Committee's tentative recommendation re approval rating

At any point in the approval process if the education provider is not satisfied with a decision of the Nursing Education Program Approval Committee, the program head may request a meeting with the committee.

At the discretion of the Nursing Education Program Approval Committee, the Registrar and/or Executive Director may be asked to attend any such meeting in an attempt to accomplish low level resolution.

The education provider has the right to enter into a consensual resolution process with the Executive Director and/or designate. Terms and undertakings may be agreed upon by consensus. A breach of this agreement will result in the reinstatement of the previous approval rating or decision in dispute given by the Executive Director.

If the nursing education provider is dissatisfied with the decision of the Executive Director, it may appeal, in writing, to Council within 30 days of the decision.

## APPEAL PROCESS

The education provider has the right to appeal the decision of the Executive Director regarding the approval rating granted. The notice of appeal, including rationale, must be filed in writing to Council within 30 days of the program head being notified of the approval rating.

Council shall hear the appeal in accordance with policy whereby they shall:

- Review the notice of appeal.
- Determine if the approval process was conducted according to the SRNA Approval Process for Nursing Education Programs.
- Review any documents Council deems necessary that relate to the approval submitted to the Nursing Education Approval Committee.
- Hear representation from both the education provider and the Nursing Education Program Approval Committee.
- Solicit expert advice as required.
- Make a reasoned decision to uphold the original rating or to recommend an alternate decision stating the rationale for the decision.
- Notify the education provider and the Nursing Education Program Approval Committee of its decision, in writing.
- The appeal decision of Council is final.

## REFERENCES

- College of Registered Nurses of British Columbia. (2013). *Certified practices: Course review policies*. Vancouver, BC: Author.
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- L. Paltry, Manager: Certification Programs Canadian Nurses Association. (October 2011) Verbal communication.
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- Saskatchewan Registered Nurses' Association. (2009). *Nursing education program approval process administrative document for approval of nursing education program for registered nurses; Approval of nursing education re-entry programs for registered nurses*. Regina, SK: Author.
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## APPENDIX A

### Glossary

**Approval:** The term used to designate that an education program has met the prescribed standards set by the appropriate provincial body. It is a compulsory process and is based on standards and competencies required for nurse registration.

**Client:** A person with whom the registered nurse is engaged in a therapeutic relationship. In most circumstances, the client is an individual but may also include family members and/or substitute decision makers. The client can also be a group (e.g. therapy), a community (e.g. public health) or a population (e.g. children with diabetes).

**Clinical Decision Tools:** Specific documents developed by the SRNA Interprofessional advisory group, which support the assessment, diagnosis, and treatment of limited common medical disorders by the RN with additional authorized practice. They are evidence-informed resources based on published research, grey literature, clinical best practice guidelines, expert opinion, and other resources as required. Clinical decision tools are used by the RN with additional authorized practice in conjunction with his/her clinical judgment to ensure appropriate client care is provided.

**Collaborative Practice:** "...involves the continuous interaction of two or more professionals or disciplines, organized into a common effort to solve or explore common issues, with the best possible participation of the patient. Collaborative practice is designed to promote the active participation of each discipline in patient care. It enhances patient and family-centred goals and values, provides mechanisms for continuous communication among caregivers, optimizes staff participation in clinical decision-making within and across disciplines, and fosters respect for disciplinary contributions of all professionals." (University of Toronto, as cited in EICP Initiative, 2005).

**Competence:** The integrated knowledge, skills, judgment and attributes required of a registered nurse to practice safely and ethically in a designated role and setting.

**Competency:** The overall display by a registered nurse, in the professional care of a client(s), the knowledge, skill and judgment required in the practice situation. The nurse functions with care and regard for the welfare of the client and in the best interests of the public, nurses and nursing profession.

**Criterion:** Standard or test by which something can be judged.

**Curriculum:** The planned process by which a nursing program achieves its intended outcomes. It includes philosophical foundations, intents, content, sequencing of learning experiences and evaluation.

**Graduate:** One who has successfully completed the requirements of an approved nursing education program.

**Registration:** A process whereby graduate nurses are declared by the SRNA to be currently eligible to practice in Saskatchewan and which includes a listing of qualified individuals as maintained on an official roster.

**Standard:** A desired and achievable level of performance against which actual performance can be compared. It provides a benchmark below which performance is unacceptable.

## APPENDIX B

### Self-Evaluation Report

An essential part of the process for approval of course(s) for the RN with additional authorized practice is the self-evaluation report prepared by the education provider. The report is the result of a review carried out by the faculty/program head and is based on the criteria outlined in this document. Included with each standard are criteria that are used to provide evidence that the standard has been met. Additional indicators that reflect unique characteristics of the course(s) in meeting each criterion/standard may also be included.

The report should include the following sections:

1. Table of Contents
2. Purpose and goals of the program:
  - Contextual information that may influence the course(s)
  - Rationale for course(s) development/change
3. Course(s) intents
4. Course description including:
  - Length
  - Planned enrolment numbers
  - Collaborative partnerships, if applicable
  - A description of course delivery methods
  - The locations and/or campuses where the course(s) is/are offered
  - A summary of changes to the curriculum since the last report, if applicable
5. Overview of the proposed course(s) curriculum and ability to meet the standards and criteria for approval:
  - Curriculum
  - Students
  - Resources
  - Graduates
6. Overview of the plan to address recommendations, as applicable, from previous approval processes.

If aspects of the course(s) are not completely developed at the time of submission, the plans for development must be included.

Documents providing evidence that standards/criteria are met should be referenced throughout the self-evaluation report, and may be included as appendices.

## APPENDIX C

### Assessment Team Report

The Assessment Team report will address each approval standard using the tool provided below.

#### Standard 1: Curriculum

Curriculum – The curriculum provides learning experiences necessary for students to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

Criteria:	Met	Partially Met	Not Met
1. The philosophy of the nursing education course(s) and the conceptual framework guide the development and implementation of the curriculum. <ol style="list-style-type: none"> <li>Evidence that the philosophy and conceptual framework guide the development and implementation of a PLAR process (if applicable).</li> </ol>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
2. <i>Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice</i> are addressed and measured throughout the course(s). <ol style="list-style-type: none"> <li>Evidence that the Standards, Competencies and Clinical Decision Tools are embedded throughout the curriculum to support the RN with additional authorized practice to provide safe, competent and ethical care.</li> <li>Evidence that the Standards, Competencies and Clinical Decision Tools are embedded throughout the PLAR process (if applicable).</li> </ol>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
3. In addition to the Standards, Competencies and Clinical Decision Tools, the curriculum includes: <ol style="list-style-type: none"> <li>Measurable course objectives;</li> <li>Logical course sequencing;</li> <li>Responsiveness to current and emerging trends;</li> <li>Performance expectations of students that reflect the complexities of behaviors required for the competent performance of additional authorized practice;</li> <li>An evaluation framework consisting of a formative and summative evaluation process to ensure ongoing relevance and/or revision of the curriculum; and</li> <li>A focus on understanding and implementing competencies related to interdisciplinary collaboration and collaborative practice.</li> </ol>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
4. The education course(s) has/have learning opportunities to enable the RN with additional authorized practice to meet the <i>Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice</i> . <ol style="list-style-type: none"> <li>Theory course(s) are consolidated with a practicum (as applicable).</li> <li>That involves inter-professional education and provision of collaborative care.</li> </ol>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
5. Qualified preceptors supervise clinical learning activities (as applicable).			

**Discussion:  
 Recommendation:**

Criteria:	Met	Partially Met	Not Met
6. There is systematic and continuous evaluation of the curriculum including opportunities for feedback from stakeholders, which is used to inform ongoing development, maintenance, and enhancement of the curriculum.			

**Discussion:  
 Recommendation:**

## Standard 2: Resources

Resources – There are sufficient human, physical, financial, and technology resources to enable students to meet the *Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice*.

Criteria:	Met	Partially Met	Not Met
1. Faculty possesses the theoretical knowledge and clinical expertise appropriate to their teaching responsibilities. <ul style="list-style-type: none"> <li>a. Nursing faculty must be involved as educators in nursing content in the course(s).</li> <li>b. Preference should be given to faculty who has nursing experience in the specialty.</li> </ul>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
2. Where there is a clinical component, preceptors possess the expertise appropriate to their clinical teaching and area of additional authorized practice.			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
3. There are sufficient faculty to ensure optimum student learning and safe client care.			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
4. There are sufficient physical and technology resources to support learning activities/ modalities.			

**Discussion:**  
**Recommendation:**

### Standard 3: Students

Students – Students demonstrate progress toward the achievement of the Standards, Competencies and Clinical Decision Tools for the RN with *Additional Authorized Practice*.

Criteria:	Met	Partially Met	Not Met
1. Students are currently registered and practicing as a RN in good standing with the association.			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
2. There are policies and procedures in place for student selection and admission. <ul style="list-style-type: none"> <li>a. The minimum competencies expected of RNs prior to entering the education course(s) are identified.</li> <li>b. The minimum competencies expected of RNs wishing to apply for the PLAR process are identified (if applicable).</li> </ul>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
3. here are policies and procedures related to academic progression. This includes: <ul style="list-style-type: none"> <li>a. Withdrawal;</li> <li>b. Failure;</li> <li>c. Appeals;</li> <li>d. Student discipline;</li> <li>e. Readmission; and</li> <li>f. Successful course completion</li> </ul>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
4. Where there is a clinical component, there are measures to ensure student and client safety. This includes: <ol style="list-style-type: none"> <li>Ensuring that the student's immunization status meets the requirements of the clinical facility;</li> <li>Ensuring that the student has basic life support certification as well as certification(s) as appropriate to the clinical setting; and</li> <li>Ensuring that students have an appropriate security clearance completed.</li> </ol>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
5. Students receive well-timed, formative and summative feedback about their learning using evaluation methods to facilitate their achievement of the <i>Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice</i> .			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
6. Student trends including enrolment, withdrawal, and successful course completion are tracked and inform admission criteria.			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
7. There are policies and procedures related to maintaining student records related to relevant legislation.			

**Discussion:**  
**Recommendation:**



## Standard 4: Graduates

Graduates successfully achieve the Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice.

Criteria:	Met	Partially Met	Not Met
1. Prior to graduation, evaluations provide evidence that students have met the <i>Standards, Competencies and Clinical Decision Tools for the RN with Additional Authorized Practice</i> and are qualified and competent to practice as a RN with additional authorized practice. <ol style="list-style-type: none"> <li>Evaluation tools are varied and provide evidence that students have achieved the competencies.</li> <li>Evaluation tools for PLAR (if applicable) include a process for evaluation of clinical competence.</li> <li>The course(s) is/are explicit in identifying the minimum requirements of graduates for meeting the competencies for the RN with additional authorized practice.</li> <li>The course(s) is/are explicit in identifying the minimum requirements of graduates for meeting the competencies for the RN with additional authorized practice within a PLAR process (if applicable).</li> <li>The overall design of the evaluation strategy makes explicit how graduates will demonstrate interdisciplinary collaborative practice as well as independent decision-making in the additional authorized practice.</li> </ol>			

**Discussion:**  
**Recommendation:**

Criteria:	Met	Partially Met	Not Met
2. There is a post-graduate evaluation with stakeholder feedback which is used to inform curriculum development and revision.			

**Discussion:**  
**Recommendation:**

SASKATCHEWAN



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