

BCCNP

British Columbia
College of Nursing
Professionals

Guidelines for Certified Practice Course Reviews

TABLE OF CONTENTS

Introduction	3
Part I: The Self-Evaluation Report Contents and Format	4
Table of Contents	4
List of Appendices	4
List of Tables	4
Introduction (1-2 pages)	4
certified practice Education Standards	5
Part II: Report Submission and Acceptance of the Report	6
Report Submission	6
Printed Copies	6
Electronic Submission of Appendices	6
Due Date and Time	6
Acceptance of the Self-Evaluation Report	7
Part III: Contact Information	7
Appendix A	8
Certified Practice Education Standards and Indicators with Examples of Supporting Evidence	8

BCCNP
British Columbia
College of Nursing
Professionals

900 – 200 Granville St.
Vancouver, B.C.
V6C 1S4
www.bccnp.ca
Copyright BCCNP/March 2020
Pub. No. 788

Introduction

This document is designed to assist certified practice course providers present evidence that is sufficient for a course review by the British Columbia College of Nursing Professionals (BCCNP). It must be used in conjunction with the policies identified in the document [Certified Practice Course Review Policies](#).

BCCNP Education Program Review Committee (EPRC) review and evaluate courses against three certified practice education standards and the indicators of each standard. The certified practice education standards are:

- (a) **Curriculum**—The curriculum builds upon the BCCNP Standards of Practice to provide the learning experiences necessary for registered nurses and nursing students¹ to achieve the certified practice competencies and apply the Decision Support Tools (DSTs).²
- (b) **Students**—Students demonstrate progress toward the achievement of the competencies and application of the decision support tools.
- (c) **Course Evaluation**—Certified practice course evaluations demonstrate student preparedness for practice upon course completion.

See Policy 4 for the Certified Practice Education Standards and Policy 5 for the indicators of the Certified Practice Education Standards in the Certified Practice Course Review Policies. The indicators are also listed in Appendix A of this document.

Effective March 2, 2020, the competencies and DSTs for each category of certified practice are maintained by the Nurses and Nurse Practitioners of BC (NNPBC), and are available on their website at <https://portal.nnpbc.com/education/decision-support-tools>

Categories:

- *RN First Call Certified Practice*
- *Remote Nursing Practice*
- *Reproductive Health Certified Practice: Contraceptive Management*
- *Reproductive Health Certified Practice: Sexually Transmitted Infections Management*

¹ Nursing student means a student registered in an entry-level Registered Nurse education program.

² Hereafter, the word competencies and the phrase decision support tools means the competencies and decision support tools for the specific certified practice course being reviewed.

BCCNP EPRC review courses³ to determine whether the certified practice education standards are met. Certified practice course providers demonstrate that the standards are met by conducting a course self-evaluation and presenting their findings in a self-evaluation report.

Part I: The Self-Evaluation Report Contents and Format

The content and format expected in the self-evaluation report are outlined below. A self-evaluation report template is provided. Although a comprehensive report is required, clarity, brevity and conciseness enhance the quality of the self-evaluation report.

TABLE OF CONTENTS

The report requires a table of contents to help BCCNP EPRC locate particular topics addressed in the report.

LIST OF APPENDICES

Appendices may be useful in the report. Appendices consist of detailed information that is distracting in, or inappropriate to, the body of the report. If appendices are used, the narrative in the self-evaluation report should refer to them and briefly describe the evidence that each provides. A list of the appendices in the order in which they first occur in the report is required in the self-evaluation report.

LIST OF TABLES

Tables may be useful in the report. They are an efficient way of presenting a significant amount of exact data in a small amount of space. They are incorporated in the body of the report with narrative about the tabular display just before or after the table. The text addresses the table highlights, and the interpretation and significance of the table data. A numbered list of the tables is required in the self-evaluation report.

INTRODUCTION (1-2 PAGES)

The report begins with a statement about the course to be reviewed and the purpose of the review. This section also includes a description of some of the contextual elements that influence the course. Contextual information may include factors that support the provision of the course, and those that present challenges or impediments to providing it. BCCNP recognizes that some contextual factors may be outside the ability of the course provider to

³ “Courses” refers to certified practice courses.

control. It is helpful for BCCNP to be aware of these factors when assessing the evidence presented in the self-evaluation report.

In addition, the introduction includes:

- A description of the academic and operational leadership positions and committees including those that support faculty and/or instructors, students and preceptors.
- A description of the numbers and types of students admitted, e.g., registered nurses, students registered in an entry-level Registered Nurse education program, and the number of times per year that students are enrolled.
- A description of course delivery methods, e.g., face-to-face, distributed learning systems, blended format.
- The locations and/or campuses where the course is offered.
- A summary of changes to the curriculum since the last report (if applicable).

Relevant organizational charts, position descriptions and committee terms of reference are appended or incorporated as tables.

CERTIFIED PRACTICE EDUCATION STANDARDS

This section addresses the main purpose of the report, i.e., to provide evidence sufficient to demonstrate attainment of the certified practice education standards and each of the related indicators. All evidence and other information are organized under each indicator of the three certified practice education standards as illustrated in the report template.

Examples of the kinds and quantity of evidence that may demonstrate that the standards and indicators have been met are provided in the table, *Certified Practice Education Standards and Indicators with Examples of Supporting Evidence*. (See Appendix A, Page 8). Although summary evidence is required, providers are encouraged to include examples, anecdotes or other illustrations that help the day-to-day planning, implementation and evaluation of the course come alive in the minds of BCCNP EPRC.

Each section about each certified practice education standard should end with conclusions about areas of strength and areas for improvement and/or development, plans for addressing the areas for improvement and/or development, and a succinct concluding statement about whether each standard is considered to be met or not met.

Part II: Report Submission and Acceptance of the Report

REPORT SUBMISSION

BCCNP requires an electronic copy of the complete self-evaluation report including the appendices compiled as one password protected PDF document. Bookmarks within the document should link to all appendices. Contact BCCNP at educationprogramreview@bccnp.ca for guidelines on document submission. The electronic copy of the self-evaluation report and the appendices may be submitted to BCCNP as an email attachment to educationprogramreview@bccnp.ca and will be circulated to BCCNP EPRC as received. .

PRINTED COPIES

The printed report is:

- prepared in an easy-to-read font submitted on standard 8 ½ x 11” paper;
- double-spaced;
- formatted with one-inch margins at the top, bottom and sides;
- paginated;
- printed double-sided; and
- bound.

ELECTRONIC SUBMISSION OF APPENDICES

The filenames for the appendices must match the appendix titles for easy location by BCCNP EPRC. A list of appendices should precede the first appendix. The remainder of the appendices are bookmarked in the order in which they first occur in the self-evaluation report.

DUE DATE AND TIME

The report is submitted to the BCCNP Education Program Review department **by 1630 hours on the due date** specified by BCCNP. If the report is submitted late, the course review may need to be rescheduled to a later date. The most extreme consequence of a late submission is that approval of the course may expire before the review is completed. Students who complete a course not approved by BCCNP are not eligible to proceed in the BCCNP certified practice registration process.

ACCEPTANCE OF THE SELF-EVALUATION REPORT

Reports that do not provide sufficient evidence and/or do not meet the formatting guidelines to the satisfaction of BCCNP EPRC may be returned to the course provider. See Policy 11 for more information about acceptance of the report. Examples of reports not meeting the requirements are:

- Reports that lack information about how the competencies and decision support tools are addressed in the curriculum, learned by students and demonstrated by nurses in practice.
- Reports that provide only raw data with no description of the analysis that took place to support a conclusion.
- Reports that lack sufficient evidence to support a conclusion.
- Reports that fail to adhere to the formatting guidelines, making it difficult for BCCNP EPRC to read and assess the report. Examples of such formatting problems are poor organization or a lack of clarity.

Part III: Contact Information

BCCNP welcomes and encourages questions as course providers engage in the course review process.

The BCCNP Education Consultant is available to assist providers to prepare the self-evaluation report. When in doubt about any aspect of the course review process, providers should contact the BCCNP Education Consultant with questions or to affirm plans. If complex questions arise, the BCCNP Education Consultant may discuss the matter with the BCCNP EPRC before providing advice.

BCCNP Education Consultant

Tel: 604.740-6200; Toll-free: 1.866.880.7101

Email: educationprogramreview@bccnp.ca

Appendix A

CERTIFIED PRACTICE EDUCATION STANDARDS AND INDICATORS WITH EXAMPLES OF SUPPORTING EVIDENCE

Note: The examples below are not intended to be prescriptive or comprehensive. Rather, they are intended as guides to assist report writers to provide meaningful evidence.

Curriculum—The curriculum builds upon the CRNBC Standards of Practice to provide the learning experiences necessary for registered nurses and nursing students⁴ to achieve the certified practice competencies and apply the decision support tools⁵.

Indicators	Examples of Supporting Evidence
<p>(a) The course is clearly described and is congruent with the achievement of the competencies and application of the decision support tools within the context of the CRNBC Standards of Practice, including the Scope of Practice Standards (CRNBC, February, 2012).</p>	<p>Provide the course curriculum including:</p> <ul style="list-style-type: none"> – course description/s – length of course/s – hours and credits per course (if applicable) – detailed course outline/s – learning activities for classroom and practice experiences – learning resources (e.g. course textbooks and other course references) – course evaluation methods and the required passing grade for each <p>Describe how the Standards of Practice including the scope of practice standards are addressed in the curriculum.</p> <p>Append:</p> <ul style="list-style-type: none"> – charts and diagrams; and – other course documents.
<p>(b) The competencies and decision support tools are systematically introduced, built upon and applied in theory and practice learning.</p>	<p>Describe in detail how the curriculum is set up and organized to enable students to achieve the competencies and decision support tools.</p> <p>Describe where key concepts, competencies and the decision support tools are introduced and how they are built upon and applied throughout the curriculum including in practice experiences. (This may be usefully presented in grid form).</p>

⁴ Nursing student means a student registered in an entry-level Registered Nurse education program.

⁵ Hereafter, the word competencies and the phrase decision support tools means the competencies and decision support tools for the specific certified practice course being reviewed.

Indicators	Examples of Supporting Evidence
(c) When relevant, certified practice competencies are distinguished from the competencies of the larger program in which they are embedded.	Where certified practice competencies and decision support tools are embedded in larger programs or courses, describe how students learn to identify the competencies and decision support tools that are specific to certified practice.
(d) The admission requirements expected of applicants prior to entering the course are identified.	<p>State the admission requirements for entry into the certified practice course. Include the criteria used for admitting nursing students into the course and provide the rationale for the criteria used.</p> <p>Append information materials designed to inform prospective students about the requirements for entry to the course.</p>
(e) The achievement of the certified practice competencies and the application of the decision support tools are clearly included in the course learning outcomes.	<p>Provide a statement of the program outcomes.</p> <p>Describe how the course outcomes support student achievement of the competencies and application of the decision support tools.</p>
(f) The course requires students to achieve the competencies and apply the decision support tools while providing nursing care directly with clients and/or through simulated experiences.	<p>State the total number of practice hours required by all students and the rationale for this requirement.</p> <p>Define what experiences are included in the practice hours, e.g., orientation, simulations, post-conferences, seminars.</p> <p>Describe the practice learning experiences required by all students and those that may be selected as focused experiences.</p> <p>Identify the number of practice hours in each setting and with each client type (e.g., individual, family, group, community) and each client age group.</p> <p>Describe all inter-professional learning opportunities in the curriculum including those in classroom and/or practice settings.</p> <p>Describe how student practice placements are obtained and who is involved.</p> <p>Describe the criteria and methods used to assess the suitability of practice placements, including those for focused/ elective practice experiences.</p> <p>For example, describe site visits preceding practice placements; describe whether or not student evaluation of practice placements is</p>

Indicators	Examples of Supporting Evidence
	<p>considered.</p> <p>Describe the accountability structure for monitoring that all students have the required practice experiences.</p> <p>Describe what happens when gaps in student practice learning experiences are identified.</p> <p>Append relevant charts or working tools.</p>
<p>(g) Mechanisms are in place to ensure the ongoing currency and relevance of the course to certified nursing practice.</p>	<p>Describe the processes used in maintaining the relevance and currency of course materials and learning activities.</p> <p>Identify the stakeholders (e.g., employer representative, Certified Practice RN, student, First Nations and Inuit Health representative, others relevant to the Certified Practice course being offered) who inform the course. Include the credentials and qualifications of each stakeholder and describe their role in maintaining the currency and relevance of the course.</p> <p>Describe the processes used to ensure that changes in the competencies and decision support tools are monitored and incorporated into the curriculum.</p> <p>Append terms of reference for the advisory committee (if applicable).</p>

Students—Students demonstrate progress toward the achievement of the competencies and application of the decision support tools.

Indicators	Examples of Supporting Evidence
<p>(a) Students receive well-timed formative⁶ and summative⁷ feedback about their learning to facilitate their achievement of the competencies and application of the decision support tools.</p>	<p>Describe details about the evaluation method(s), e.g., online or in person, how the evaluation takes place, where it is held, and how often it occurs.</p> <p>Describe the methods used for evaluating applied nursing practice, e.g., simulation, clinical practice, case studies. Include a description of the frequency of each type of evaluation and where it is held.</p> <p>Describe how students receive feedback (e.g., verbal, written, electronic, etc.) and how frequently this occurs.</p> <p>Describe how learning plans or contracts may be developed as a result of feedback.</p> <p>Describe how feedback is linked to student achievement of the competencies and application of the decision support tools.</p> <p>Describe how students learn to evaluate their practice and develop their own learning plans.</p> <p>Describe the relative roles and responsibilities of faculty, instructors, preceptors and students in providing formative and summative feedback, and determining whether or not a student successfully completes a course.</p> <p>Describe the selection process for and the qualifications of preceptors.</p> <p>Describe faculty, instructor and/or preceptor availability and accessibility to provide feedback.</p> <p>Describe the systems used to document, analyze and learn from adverse events, errors or near misses involving students.</p>

⁶ Formative feedback means the feedback provided before course completion that focuses on identifying progress toward course outcomes. It is the basis of achieving improvement within the course.

⁷ Summative feedback means the feedback provided at course completion about the achievement of the course outcomes.

Indicators	Examples of Supporting Evidence
	<p>Append:</p> <ul style="list-style-type: none"> – student evaluation forms for practice learning at different stages in the course; – policies and procedures that relate to student feedback; and – examples of learning plans or contracts used in remediation.
<p>(b) Students demonstrate safe nursing care in accordance with the competencies and decision support tools.</p>	<p>Describe the timing, length and nature of nursing laboratory/simulation experiences including case studies.</p> <p>Describe how simulations are used to prepare students in advance of practice with clients.</p> <p>Describe the evaluation process for student learning in laboratory settings.</p> <p>Describe the minimum level of laboratory performance proficiency required by students before they practice directly with clients.</p> <p>Describe the student supports available in laboratory settings, e.g., faculty, laboratory instructors, peers, etc.</p> <p>Describe how accessible learning laboratories are for nursing students and faculty/instructors.</p> <p>Describe how student laboratory learning requirements are tracked and monitored to ensure they are successfully completed by the end of the course.</p> <p>Describe how faculty/instructors and/or preceptors ensure students are practicing competently, safely and ethically with clients in practice settings (if applicable).</p> <p>Append:</p> <ul style="list-style-type: none"> – policies and procedures, and relevant tracking tools that relate to mandatory laboratory learning experiences; and – examples of laboratory learning activities and specific evaluation tools.
<p>(c) Students have access to sufficient learning resources to support their achievement of the competencies and application of decision support tools.</p>	<p>Describe the availability and accessibility of library services and data bases, and simulation/equipment resources.</p>
<p>(d) Students and preceptors are supported by the optimum number of qualified faculty and/or instructors.</p>	<p>Describe the number and composition of faculty/instructors and evidence that it is sufficient to provide teaching and guidance to</p>

Indicators	Examples of Supporting Evidence
	<p>students to ensure their progress toward achievement of the competencies and application of the decision support tools.</p> <p>Describe the level of student supervision provided for on-line, classroom, simulation and direct client care learning experiences, e.g., instructor-led groups, preceptorships, shared learning units. Include student-faculty/instructor ratios for each.</p> <p>Describe the processes used to ensure that faculty/instructors and/or preceptors providing student supervision have practicing registration with CRNBC.</p> <p>Describe how the experience and expertise of faculty/instructors are matched to their assigned responsibilities.</p> <p>Describe the availability and accessibility of faculty/instructors to students and preceptors at various stages of the course.</p> <p>Append:</p> <ul style="list-style-type: none"> – policies/guidelines about faculty-student ratios; – a list of faculty qualifications; and – preceptor support documents.
<p>(e) Policies and resources are in place that support faculty and/or instructor decisions to remove students from practice settings or fail students.</p>	<p>Describe the process for dealing with situations where student performance is unsafe. Include a description of the practice faculty/instructor's role.</p> <p>Describe the process for managing professional conduct issues with students. Provide (if applicable) examples of issues that have occurred and how they were addressed.</p> <p>Identify the policies in place to support faculty/instructors and preceptors to immediately (or later if appropriate) remove a student from the practice setting.</p> <p>Append:</p> <ul style="list-style-type: none"> – relevant policies; – relevant role descriptions; – terms of reference for relevant committees/groups.
<p>(f) Student fitness to practice and public protection are considered in progression, failure and readmission decisions.</p>	<p>Describe how the typical student progresses through the course and how this may vary.</p> <p>Describe the processes in place to ensure public</p>

Indicators	Examples of Supporting Evidence
	<p>safety when students have challenges with courses, e.g., increased oversight of student practice.</p> <p>Describe the processes and resources in place to support students who may have challenges or have failed courses.</p> <p>Describe what happens when students fail a course. How many times are students allowed to fail and repeat a course? Describe how students who fail may be readmitted if this is allowable.</p> <p>Describe the appeals process when a student fails a course. Identify the position(s) of the person(s) accountable for following up on these issues.</p> <p>Append:</p> <ul style="list-style-type: none"> – related policies and procedures e.g., student appeal procedures and processes; the progression policy.
<p>(g) Students who are successful at course completion have achieved the competencies and are able to apply the decision support tools to provide safe, competent and ethical care.</p>	<p>Identify the final requirements for students to complete the course and be recommended to CRNBC as eligible to proceed in the certified practice registration process.</p> <p>Describe how students' independent certified practice decision making is evaluated.</p>
<p>(h) Mechanisms are in place to maintain the security and integrity of student evaluation materials and processes.</p>	<p>Describe the methods used to maintain the security and integrity of student evaluation materials and processes.</p> <p>Describe the document management system (paper and/or electronic) including aspects, such as confidentiality, storage of exams and records, access to and destruction of student evaluation materials.</p> <p>Describe the invigilator selection process and the roles and responsibility of invigilators.</p> <p>Describe the accountability structure used to ensure the security and integrity of student evaluation materials and processes.</p> <p>If on-line examinations are used, describe measures to ensure the security and integrity of on-line examinations.</p> <p>Append:</p> <ul style="list-style-type: none"> – policies or procedures that relate to document management;

Indicators	Examples of Supporting Evidence
	<ul style="list-style-type: none"> – policies and procedures related to compliance with privacy legislation, e.g., communication of exam marks, distribution of assignments, and requests for personal information about students; and – policies and procedures that relate to academic dishonesty and how these are communicated to students.

Course Evaluation—Certified practice course evaluations demonstrate student preparedness for practice upon course completion.

Indicators	Examples of Supporting Evidence
<p>(a) A process of formative and summative course evaluation is clearly described and implemented.</p>	<p>Describe how the course is evaluated including what data are collected and the data collection methods used. Include the timelines and accountability structure.</p> <p>Identify the position(s) of the person(s) accountable for these activities.</p> <p>Describe how preceptor feedback is obtained about student achievement of the competencies and application of the decision support tools, and about student ability to practice safely, independently, competently and ethically.</p> <p>Append:</p> <ul style="list-style-type: none"> – program evaluation guides describing the course evaluation process; and – all data collection tools, e.g., forms used in course evaluation.
<p>(b) The evaluation process provides the evidence that demonstrates the achievement of the competencies and application of the decision support tools in providing safe, competent and ethical care by students who have completed the course.</p>	<p>Describe how student achievement of the competencies and application of the decision support tools is addressed in the course evaluation process including in the data collection tools.</p> <p>Describe how students’ ability to provide safe, competent, and ethical care in certified practice is addressed in the course evaluation process including in the data collection tools.</p>

Indicators	Examples of Supporting Evidence
<p>(c) Mechanisms are in place to maintain the security and integrity of course evaluation materials and processes.</p>	<p>Describe the document management system (paper and/or electronic) used to ensure the security and integrity of course evaluation materials, such as confidentiality, access and destruction.</p> <p>Append:</p> <ul style="list-style-type: none"> – policies or procedures related to document management; and – policies and procedures related to privacy legislation and informed consent.
<p>(d) Student course completion rates are monitored, analyzed and used to inform course development decisions.</p>	<p>Provide course attrition data including attrition rates and the reasons for attrition.</p> <p>Provide course completion data including a sample of final course grades for one class.</p> <p>Describe how student course completion data is monitored, analyzed and used to inform course changes. Provide examples to illustrate how this has occurred.</p>
<p>(e) Students have opportunities to provide feedback at course completion about how well the course prepared them to practice safely, competently and ethically.</p>	<p>Describe the processes used to obtain student feedback at course completion.</p> <p>Provide a summary of course evaluation feedback received from students at course completion.</p>
<p>(f) Certified practice nurses who have completed the course have opportunities to provide feedback at planned intervals about how well the course prepared them to practise safely, competently and ethically.</p>	<p>Describe the processes used to obtain course evaluation feedback from certified practice nurses including the data collection intervals.</p> <p>Provide a summary of the course evaluation feedback received from certified practice nurses at each interval. Separate feedback about those who were registered nurses when they took the course and those who were nursing students when they took the course is preferred.</p>
<p>(g) Employers (or their designates) who are familiar with certified practice have opportunities to provide feedback about the achievement of the competencies and the application of decision support tools by certified practice nurses who have completed the certified practice course.</p>	<p>Describe the processes used to obtain course evaluation feedback from employers (or their designates).</p> <p>Provide a summary of the course evaluation feedback received from employers (or their designates) at each interval. Separate feedback about those who were registered nurses when they took the course and those who were nursing students when they took the course is preferred.</p>

Indicators	Examples of Supporting Evidence
<p>(h) The results of course evaluations, including the feedback from students at course completion, are used to inform course development decisions.</p>	<p>Describe how course evaluation feedback is analyzed and how the results are used to inform course development decisions.</p> <p>Provide examples to demonstrate how course evaluation feedback was used to inform course development decisions.</p>