

BCCNP

British Columbia
College of Nursing
Professionals

RN & NP

IMPORTANT

As of Sept. 4, 2018, the following nursing colleges amalgamated to become the British Columbia College of Nursing Professionals (BCCNP):

- College of Licensed Practical Nurses of British Columbia (CLPNBC)
- College of Registered Nurses of British Columbia (CRNBC)
- College of Registered Psychiatric Nurses of British Columbia (CRPNBC)

Although the information in the document you are about to access reflects our most current information about this topic, you'll notice the content refers to the previous nursing college that published this document prior to Sept. 4, 2018.

We appreciate your patience while we work towards updating all of our documents to reflect our new name and brand.



Nursing Education Program and Course Review Policies

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Preface

The College of Registered Nurses of British Columbia (CRNBC) reviews nursing education programs/courses under the authority of the duties and objects of a college set out in the Health Professions Act (HPA), Section 16 (2) (c) . . . to establish the conditions or requirements for registration of a person as a member of the college. Section 19 (m) allows for the conditions or requirements for registration established by the college to include standards of academic or technical achievement, competencies or other qualifications, and requirements for providing evidence of good character. Section 19 (m.1) provides for the board of the college to specify academic or technical programs that are recognized by the college as meeting a standard established under 19 (m) (i). Decisions about program recognition are made by the Board following a review and recommendation to the Board by the Education Program Review Committee (EPRC) established in Bylaw 1.21. The programs recognized by CRNBC are listed in Schedule C of the Bylaws. Graduates of recognized programs/courses are eligible to proceed in the registration process with CRNBC.

The Bylaws approved by government for the education program review committee and for all committees of CRNBC set the context for these policies. Bylaws 1.21 and 1.27 are excerpted below for this reason.

EDUCATION PROGRAM REVIEW COMMITTEE

- 1.21 (1) The education program review committee is established consisting of up to 12 persons appointed by the board, including:
- a) at least 7 registered nurse or nurse practitioner registrants, of whom
 - i. at least 2 are nurse educators from nursing education programs,
 - ii. at least 2 are nurse administrators, and
 - iii. at least 1 is appointed to represent practice, and
 - iv. at least 2 are appointed to represent health care employers, of whom at least 1 is nominated by the Ministry of Health,
 - b) at least 1 member of a non-nursing health care profession nominated by the governing body of that profession,
 - c) at least 1 administrator of a post-secondary educational institution, and
 - d) at least 1 educator nominated by the Ministry of Advanced Education
- (2) The education program review committee may consult, as necessary or appropriate, with registrants or other individuals who have expertise related to a program or course or any other matter considered by the committee.

- (3) The education program review committee must:
 - a) review nursing education programs and courses required by applicants for registration under Part 4, in accordance with any applicable criteria established by the board, with a view to reporting to the board and making recommendations about whether the board should recognize those programs and courses, and any terms or conditions of recognition,
 - b) review, to the extent the committee considers appropriate, new or changed nursing education programs and courses, in accordance with any applicable criteria established by the board, with a view to reporting to the board and making recommendations about whether the board should recognize those programs and courses, and any terms and conditions of recognition,
 - c) regularly review and recommend policies and procedures pertaining to the review of nursing education programs and courses, and
 - d) perform such other duties and exercise such other powers as may from time to time be assigned to the committee by the board

Committees

- 1.27 (1) Subject to an appointed board member's term of office as determined by the minister, a person appointed to a committee established under these bylaws:
 - a) will serve as a member of the committee for a term of office determined by the board not exceeding 3 years, and
 - b) is eligible for reappointment as a member of the committee, but may not serve more than 2 consecutive terms as a member of the same committee
- (2) Subject to section 1.21 and 1.27, only a public representative or a member of one of the following classes of registrants may serve as a member of a committee:
 - a) registered nurse registrants;
 - b) licensed graduate nurse registrants;
 - c) nurse practitioner registrants;
 - d) non-practicing registrants
- (3) A committee member may be removed by a majority vote of the board.
- (4) The board must designate a committee chair and a committee vice-chair from among the members of each committee.
- (5) Each committee must annually submit a report of its activities to the board.

1. POLICY DEFINITIONS

Committee means the education program review committee provided for in section 1.21 of the CRNBC Bylaws under the Health Professions Act.

Chair and vice-chair mean the members of the committee designated by the Board from among the committee members to act as chair and vice-chair as provided for in section 1.257 (4) of the Bylaws.

Course means a qualifying course that prepares graduates for registration when the entry-level nursing education program they completed outside B.C. is not equivalent to a recognized entry-level nursing education program for registered nurses or nurse practitioners in B.C.

Curriculum means the foundational values, beliefs and concepts; program/course outcomes/goals/objectives; and overall structure, including how learning is sequenced and built upon progressively to provide the learning experiences necessary for students to achieve the CRNBC entry-level competencies and Standards of Practice for registered nurses or nurse practitioners.

Education program/course review guidelines mean those statements developed by the committee for programs/courses preparing for review. The guidelines supplement Board policy by describing suggested courses of action for the purpose of facilitating the review process.

Nursing education program means: a baccalaureate nursing education program that prepares graduates for initial registration as registered nurses; a graduate or post-graduate nursing education program that prepares graduates as nurse practitioners; or a re-entry program that prepares graduates who do not have practicing registration in Canada (Internationally Educated Nurses or Canadian Educated Nurses) to become eligible to proceed in the registration process.

Preliminary recognition is the recognition status granted by the Board to a new or substantially changed nursing education program/course that shows evidence of ability to meet the CRNBC nursing education standards before students have been admitted to and/or graduated from the program/course.

Recognition means the status granted by the Board to a nursing education program/course that meets the standards of academic or technical achievement and the qualifications required for graduates to proceed in the CRNBC registration process for registered nurses or nurse practitioners.

2. SELECTION OF EDUCATION PROGRAM REVIEW COMMITTEE MEMBERS

Under Bylaw 1.21 (1) the committee consists of up to 12 persons appointed by the board.

- 2.1 The appointment of committee members by the CRNBC Board shall take into account the need for diverse content expertise and perspectives in the following areas:
- a) program evaluation; nursing education; nursing administration; and nursing practice;
 - b) geographic locations and work settings; and
 - c) different nursing education programs
- 2.2 One nurse educator shall be nominated by the Nursing Education Council of British Columbia;
- 2.3 One representative of health care employers who is a registrant shall be nominated by a B.C. Health Authority on the following rotational basis:
- Interior
 - Provincial
 - Vancouver Island
 - Fraser
 - Northern
 - Vancouver Coastal Health Authorities
- 2.4 The non-nursing health care professional representative shall be nominated by the governing body of his/her health care profession on the following rotational basis:
- College of Pharmacists of British Columbia;
 - College of Physicians and Surgeons of British Columbia; and
 - College of Physical Therapists of British Columbia
- 2.5 The administrator of a post-secondary educational institution shall be nominated on a rotational basis by the:
- B.C. College Presidents;
 - British Columbia Association of Institutes and Universities; and
 - Research Universities Council of British Columbia

3. CONFLICT OF INTEREST AND CONFIDENTIALITY

3A Conflict of Interest

- 3A.1 Each member of the committee and expert registrant consulted in the review process shall sign and abide by the code of conduct approved by the Board.
- 3A.2 The committee shall examine on a case-by-case basis any conflicts of interest at the outset of each program/course review. Each committee member shall disclose, for examination and decision, any perceived conflict of interest for a member to be involved in a program/course review.
- 3A.3 Representatives of programs/courses being reviewed have the opportunity to bring to the attention of the committee, before deliberations begin, any perceived conflicts of interest for site visitors, committee members or expert registrants to be involved in a program/course review.

3B Confidentiality

- 3B.1 All information, documents and correspondence about program/course reviews shall be kept confidential and shall not be disclosed to persons outside the College other than official representatives of the educational institution offering the program/course being reviewed.
- 3B.2 A list of the currently recognized programs/courses is made public by the College. All other details of the review and decision remain confidential, subject to the obligations of CRNBC under the *Freedom of Information and Protection of Privacy Act*.

4. FREQUENCY OF REVIEWS

- 4.1 Every recognized nursing education program/course shall, unless otherwise directed by the Board, be reviewed at least once every seven years.
- 4.2 An interim report may be required during the recognition period, as a term and condition of recognition, to provide evidence of progress in addressing deficiencies in specific indicators of the nursing education standards assessed at the time of the last review.
- 4.3 An interim report is not considered a review for the purpose of subsection 4.1.

5. NURSING EDUCATION STANDARDS

The following are the standards against which nursing education programs/courses shall be reviewed and evaluated:

- a) Curriculum - The curriculum provides the learning experiences necessary for students to achieve the RN or NP entry-level competencies* and Standards of Practice.

- b) Students - Students demonstrate progress toward the achievement of the competencies and Standards of Practice.
- c) Graduates - Graduates of the nursing education program achieve the competencies and Standards of Practice.

***Note:** hereafter, the word competencies means entry-level competencies for RNs or NPs applicable to the program/course being reviewed.

6. INDICATORS OF THE NURSING EDUCATION STANDARDS

The kinds of evidence required by the committee to assess whether the nursing education standards are met are listed as indicators below. Additional guidelines for addressing the indicators in a self-evaluation report are provided by the committee.

6.1 Indicators of the Standard on Curriculum

- a) The curriculum is clearly described and its foundations are congruent with the achievement of competencies and Standards of Practice.
- b) The achievement of the competencies and Standards of Practice are clearly included in the program outcomes/goals/objectives.
- c) The applicable competencies and three categories of CRNBC Standards of Practice:
 - 1. Scope of Practice: Standards, Limits and Conditions;
 - 2. Professional Standards; and
 - 3. Practice Standards;are systematically introduced in nursing courses so that theory and practice learning in one level are built upon in other levels/courses
- d) The curriculum requires students to apply RN or NP competencies and Standards of Practice while learning to provide nursing care directly with clients and engaging with interprofessional education and care.
- e) Processes are used to ensure the ongoing currency and relevance of the curriculum to nursing practice.

6.2 Indicators of the Standard on Students

- a) Students are informed about the requisite skills and abilities (RSAs) needed to achieve registered nurse entry-level competencies (e.g., English proficiency, mathematical, behavioural, and interpersonal skills) and the RSAs are used to support student achievement of the competencies and Standards of Practice.

- b) Students receive well-timed formative and summative feedback from faculty about their practice learning to facilitate their achievement of the competencies and Standards of Practice.
- c) Students demonstrate their ability to provide safe nursing care before they practise directly with clients, through the use of nursing laboratories and other learning modalities.
- d) Students have access to sufficient learning resources to support their achievement of competencies and Standards of Practice.
- e) Practice learning experiences are systematically tracked and monitored to ensure all students have sufficient experiences e.g., health status, age groups, and settings to achieve the competencies and Standards of Practice.
- f) Students and preceptors are supported by the optimum number of qualified faculty.
- g) Consistent expectations of student performance of competencies and Standards of Practice at different levels in the program/course are upheld through orientation and support strategies for faculty, contract faculty, and preceptors.
- h) Students are supported to enact evidence-informed practice through the use of research findings, best practices and scholarly activities.
- i) Faculty decisions to remove students from practice settings or fail students for reasons of safe practice and public protection are supported by policies and resources.
- j) Student fitness to practice and public protection are considered in progression, failure and readmission decisions.
- k) Students, at program completion, have achieved the competencies and Standards of Practice.

6.3 Indicators of the Standard on Graduates

- a) An action plan for implementation of formative and summative program evaluation is clearly presented.
- b) The results of program evaluation are used in continuing program development to ensure graduates achieve the competencies and Standards of Practice.
- c) Graduate success rates on the registration examination(s) are monitored, analyzed and used to inform program decisions.
- d) Graduates have opportunities to provide feedback about how well their education prepared them to practise safely, competently and ethically.
- e) Managers and nursing practice leaders, or their designates who are familiar with the practice of graduates, have opportunities to provide feedback about the educational preparation of the graduates to practise safely, competently and ethically.

7. NEW OR SUBSTANTIALLY CHANGED NURSING EDUCATION PROGRAM/COURSE

- 7.1 Substantial change means the revision of a recognized nursing education program/course which includes a major change, rather than a formative modification, in one or more of the following:
- how the curriculum addresses the competencies and Standards of Practice, including changes in the nature and extent of learning opportunities in the curriculum;
 - learning resources to support student achievement of the competencies and Standards of Practice, including laboratory and program learning experiences with clients;
 - expectations about overall student academic performance, including evaluation of student practice and policies about safe student performance; or
 - any other significant change that will impact on the ability of the students to achieve the requirements to proceed in the registration process with CRNBC following graduation from the program/course
- 7.2 An institution proposing to offer a new nursing education program/course, or to make substantial changes to an existing recognized one, is expected to submit a letter of intent to the committee and obtain Board recognition of the program/course prior to offering the new program/course or implementing the change.
- 7.3 If an educational institution offers a new or substantially changed nursing education program/course before it is reviewed by the committee and recognized by the Board, the educational institution cannot assume that the graduates of the new or substantially changed program/course will be eligible for registration with CRNBC.
- 7.4 Upon receipt of a letter of intent about a substantial change, the committee determines what evidence it requires to assess the change and whether any further review is required before the next scheduled review.
- 7.5 Upon receipt of a letter of intent about a new nursing education program/course, the committee determines the appropriate form of review and the extent to which the nursing education standards can be applied to the program/course and
- a) determines if the review should be conducted in phases over a period of years with reports and recommendations to the Board after each phase;
 - b) determines that any step in the review process is unnecessary or may be modified to suit the circumstances; and
 - c) conducts the review as so determined and sends to the Board its report and recommendations with respect to the recognition of the new program/course
- 7.6 Although a full review addresses all of the three nursing education standards comprehensively, a new program/course review is normally conducted in three phases:

- a) a phase one review is conducted before the new program/course begins. The review focuses on the nursing education standard and indicators about curriculum and preliminary plans for the nursing education standard and indicators about students
 - b) a phase two review focuses on evidence of student progress toward achievement of the competencies and Standards of Practice after students are enrolled and have completed part of the program. Detailed plans for addressing follow-up evaluation of graduate performance are also expected;
 - c) a phase three review focuses on evidence about the nursing practice of graduates. Evidence about all three nursing education standards is required.
 - d) The length of recognition recommended as a result of a phased-in review will be less than the maximum provided for in Policy 4. The maximum length of recognition may be recommended only after a subsequent full review.
- 7.7 Modified self-evaluation reports are submitted for programs/courses being discontinued. A review may be required to extend the length of recognition needed to enable students currently enrolled and/or the last intake of students to graduate from a recognized program.
- a) A *discontinuing program/course* is one in which the last class of students has been admitted or the date for the last student intake has been established.
 - b) The purpose of the discontinuing program review is to ascertain that plans are in place to maintain the integrity of the existing curriculum and to support students to meet CRNBC competencies and Standards of Practice until the program is phased out.

8. PROGRAM REVIEW PROCESS

- 8.1 The review of a nursing education program/course may be initiated at the request of the educational institution or by the committee.
- 8.2 Program reviews shall be timed to prevent expiration of current recognition.
- 8.3 Following initiation of the review process, the educational institution shall comprehensively assess its nursing education program against the CRNBC nursing education standards and submit its findings in a self-evaluation report to the committee on or before the due date established by the committee.
- 8.4 For program reviews requiring a site visit, the committee shall meet with and instruct the site visit team retained by CRNBC as part of the preliminary review of the self-evaluation report.
- 8.5 The committee shall discuss the site visit team report with one or more of the site visitors.
- 8.6 After the site visitor(s) depart, the committee shall make an assessment of whether the nursing education program meets the nursing education standards and formulate a tentative recommendation about recognition of the program.
- 8.7 The committee shall discuss its assessment and tentative recommendation with representatives of the educational institution offering the nursing education program.

- 8.8 Following discussion with representatives of the educational institution, and after they leave the meeting, the committee shall decide upon its final report and recommendation to the Board.

9. THE SITE VISIT COMPONENT OF THE REVIEW PROCESS

- 9.1 A site visit is an on-site visit made to the educational institution(s) offering the program as part of the review process. The committee shall decide when a site visit is required in cases where this is not stipulated in the last Board decision about recognition of the program and the next scheduled review.
- 9.2 The purpose of a site visit is to collect evidence to augment the self-evaluation report and/or verify evidence as requested by the committee. Site visitors do not assess whether the nursing education standards are met and they do not make recommendations to the committee about recognition status.
- 9.3 The qualifications for site visitors include: nursing education and experience in curriculum development and implementation, or program evaluation, in nursing education; and/or nursing practice experience with graduates from the kind of program being reviewed. Two site visitors normally constitute a site visit team that includes a nurse educator and a nurse from the practice setting who are registered nurses or registered nurse practitioners in their jurisdiction.
- 9.4 The site visitors are selected, contracted and oriented by CRNBC staff.
- 9.5 The committee's request for evidence is outlined in writing by CRNBC staff and provided to the site visitors and the program in advance of the visit.
- 9.6 The site visitors collect evidence for the review by visiting on-site and speaking directly with those involved in the program.
- 9.7 At the end of the site visit, the team shall meet with program representatives to review the evidence collected and seek any needed clarification.
- 9.8 The site visitors shall then submit a written report to the committee. The CRNBC staff shall send a copy of this confidential report to the program at the same time as it is sent to the committee.
- 9.9 CRNBC asks program representatives to contact the CRNBC Education Consultant as soon as possible about any substantial inaccuracies or omissions identified in the site visit report.

10. A MODIFIED REVIEW PROCESS FOR BACCALAUREATE REGISTERED NURSE PROGRAMS WITH CASN ACCREDITATION

- 10.1 Because the Board recognizes the Canadian Association of Schools of Nursing (CASN) as an external accreditation agency qualified to review and assess certain indicators of the CRNBC nursing education standards, the CRNBC may acknowledge programs with CASN Accreditation by modifying the program review process.

- 10.2 Nursing education programs assessed by EPRC as eligible to participate in the modified review process are not required to submit evidence of meeting indicators of the CRNBC nursing education standards that the EPRC has determined are fully assessed during CASN accreditation.
- 10.3 Notwithstanding Policy 10.2, all nursing education programs shall submit evidence of certain indicators of the CRNBC nursing education standards. These indicators are determined by EPRC and provided in program review guidelines that are reviewed regularly by EPRC.
- 10.4 Nursing education programs may request to participate in a modified review process if they have been awarded CASN Accreditation within the last two years, or are undergoing CASN Accreditation.
- 10.5 When requested by a nursing education program, the committee may recommend to the CRNBC Board an extension to recognition of a program for up to 2 years to harmonize the timing of the CRNBC review and CASN accreditation.
- 10.6 Nursing education programs previously awarded CASN Accreditation shall submit a request to participate in a modified review process that includes official written evidence of their accreditation status including the CASN Accreditation Bureau decision and recommendations¹.
- a) The committee shall decide whether an accredited program is eligible to participate in a modified review on a case by case basis upon assessment of the CASN accreditation decision including rationale and the relevance of any CASN recommendations to the CRNBC nursing education standards.
- 10.7 Nursing education programs intending to undergo CRNBC review and CASN Accreditation shall submit a request to participate in a modified review process that includes official written evidence of specific plans underway with CASN to undergo Accreditation.
- a) The committee shall decide whether the program is eligible to participate in a modified review on a case by case basis upon assessment of the evidence presented about specific plans underway with CASN to undergo accreditation.
- b) The committee shall decide upon its final recommendation to the Board after it has assessed official evidence of the outcome of CASN Accreditation submitted by the nursing education program.
- 10.8 The EPRC shall conduct the modified program review in accordance with the applicable sections of Policy 8: Program Review Process.
- a) The EPRC shall decide on a case by case basis whether a site visit is required for a program participating in a modified review process.
- b) If a site visit is required, the site visit shall be conducted as set out in Policy 9: The Site Visit Component of the Review Process.

¹ In this context the term, *recommendations*, is equivalent to the CRNBC use of the phrase, *terms and conditions*, i.e., they are a condition of accreditation.

11. MODIFIED REVIEW PROCESS FOR NURSING COURSES

The committee modifies the program review process for a course by conducting the review as follows.

- 11.1 The educational institution or person offering the course shall submit a course review package that addresses each nursing education standard and applicable indicators of each standard as set out in guidelines developed by the committee.
- 11.2 The CRNBC selects a registrant to provide consultation for the course review to a sub-group of two committee members who conduct the preliminary review. The registrant selected shall have nursing practice, and/or teaching expertise, and familiarity with entry-level practice relevant to the course being reviewed.
- 11.3 Following a preliminary assessment of the course review package, the sub-group of the committee and the registrant consulted shall meet with at least one registrant who teaches the course to discuss the evidence provided.
- 11.4 The sub-group of the committee shall present a brief written report of their assessment of whether the nursing education standards are met with a suggested recommendation about recognition to the committee for deliberation. The committee shall then formulate a tentative recommendation.
- 11.5 The committee shall discuss its assessment and tentative recommendation with representatives of the educational institution or person offering the course.
- 11.6 Following discussion with the representatives, and after they leave the meeting, the committee shall decide upon its final report and recommendation to the board.

12. COMMITTEE ASSESSMENT OF NURSING EDUCATION STANDARDS

- 12.1 The committee assesses each standard as being met, partially met or not met.
- 12.2 A standard may be assessed as partially met or not met when deficiencies are identified in evidence regarding indicators of the standards.
- 12.3 When the evidence shows that deficiencies exist in a program/course or when the evidence available is uncertain, the committee assesses the risk to the public in accordance with Policy 14.
- 12.4 Interim reports are requested to monitor progress in identified deficiencies when a standard is partially met or not met.
- 12.5 When the committee assesses that the deficiencies identified present an imminent or future risk to the public, a recommendation with a warning attached, as provided for in Policy 15, may be made.

13. INTERIM REPORTS

- 13.1 An interim report must address the specific indicators of the nursing education standards assessed as deficient at the time of the last committee review and recommendation approved by the Board.
- 13.2 Following a preliminary assessment of an interim report, the committee discusses its assessment and tentative recommendation with representatives of the nursing education program/course. After they leave the meeting, the committee decides on its final assessment and recommendation to the Board.
- 13.3 As a result of the assessment of an interim report the committee may recommend to the Board:
 - a) acceptance of the interim report as having met the terms and conditions of recognition; or
 - b) before rejecting an interim report the committee may:
 - i. give the program/course the opportunity to submit supplementary evidence of progress; or
 - ii. negotiate a remedy and timelines for compliance that the committee recommends to the Board as sufficient for acceptance of the interim report as having met the terms and conditions of recognition
 - c) rejection of the interim report because it does not meet the terms and conditions of recognition and warning the educational institution that recognition of its program/course may be withdrawn if the next review does not indicate satisfactory improvement.

14. ASSESSMENT OF RISK TO THE PUBLIC

- 14.1 The first factor the committee considers when assessing risk to the public is the nature and extent of the deficiencies assessed in the indicators of the nursing education standards.
- 14.2 In assessing whether the deficiencies present an imminent or future risk to the public, the committee will give due consideration to the following qualitative and contextual factors:
 - a) specific, realistic plans presented by the program to correct the deficiencies;
 - b) the strengths of the program that mitigate any risks to the public;
 - c) evidence that the educational institution is acting in an accountable manner regarding the deficiencies and planning for satisfactory improvements;
 - d) evidence of any pattern over time that deficiencies identified during previous reviews are not being addressed satisfactorily; and
 - e) the nature and likelihood of any harm that may result from these deficiencies

15. WARNING OF WITHDRAWAL OF PROGRAM/COURSE RECOGNITION

- 15.1 When the committee has assessed that there is a risk to the public, the committee considers attaching a warning of withdrawal of program/course recognition. In such cases, the length of the warning period recommended to the Board will be determined in accordance with the guidelines set out in the balance of Policy 15.
- 15.2 When attaching a warning, the committee considers fairness to students enrolled in the program/course in terms of the impact on their ability to complete the program/course and become eligible for registration. Whenever reasonable, the length of warning recommended will allow time for students enrolled in the program/course to complete a recognized program/course.
- 15.3 The committee gives consideration to the amount of time needed to allow a nursing education program/course a reasonable opportunity to demonstrate satisfactory resolution of the deficiencies identified by the committee.
- 15.4 In cases where a warning is given to a nursing education program/course, CRNBC advises the educational institution involved to give written information to its current and prospective students about the facts of recognition of the program/course, including the terms and conditions attached.
- 15.5 The strategies and methods for advising students about the information in 15.4 are decisions to be made by the educational institution.
- 15.6 The length of warning the committee recommends may vary because each recommendation is based on a thorough review by the committee of the facts and circumstances or context of the particular nursing education program/course.

16. ACCEPTANCE OF THE NURSING EDUCATION PROGRAM SELF-EVALUATION REPORT/COURSE REVIEW PACKAGE BY THE COMMITTEE

- 16.1 The nursing education program self-evaluation report/course review package submitted to the committee shall adhere to the guidelines developed by the committee.
 - a) If the self-evaluation report/course review package does not provide sufficient evidence regarding the nursing education standards for the committee to complete its assessment the committee may give the program/course the opportunity to submit:
 - i. a supplementary report to address particular gaps in the evidence presented; or
 - ii. a revised full report with additional evidence about the nursing education standards and indicators
 - b) In cases of (a) i) or (a) ii) above, arrangements are made with the nursing education program/course to reschedule the review, including the date of the submission of a revised report.

- 16.2 When educational institutions that offer programs/courses coming forward for review are part of a collaborative/partnership arrangement in which the partners share a curriculum, a shared self-evaluation report may be submitted.
- a) Institutional responsibilities and differences in the implementation of the curriculum are identified.
 - b) Nursing education standard 5.1 (b) - Students, and nursing education standard 5.1 (c) - Graduates, must be addressed by each institution involved.
- 16.3 An educational institution may submit for review a nursing education program self-evaluation report consisting in part of a report prepared for, or obtained from, an external accreditation agency recognized by the Board.
- a) The Board recognizes the Canadian Association of Schools of Nursing (CASN) as an external accreditation agency qualified to review and assess the CRNBC nursing education standards used for program recognition;
 - b) programs may include in their self-evaluation report, materials used for, or obtained from, CASN accreditation within the last two years

17. DECISION OF THE BOARD

The Board, after considering the report and recommendations of the committee, may:

- 17.1 In the case of a review of a new or substantially changed program/course:
- a) give preliminary recognition subject to any terms and conditions as the Board may determine;
 - b) where it determines that there is a deficiency, give preliminary recognition to the program/course on terms and conditions designed to correct the deficiency and may warn the educational institution that preliminary recognition of its nursing education program/course may be withdrawn if the next required review does not indicate satisfactory improvement; or
 - c) decline to recognize the program/course, or withdraw a preliminary recognition if the terms and conditions of that preliminary recognition have not been met
 - d) If a dispute arises as to whether a change to a program/course is substantial and, as a result, would constitute a new program/course that requires a full or phased-in review, the question shall be referred to the Board whose decision shall be final.
- 17.2 In the case of a review of a previously recognized program/course:
- a) recognize the nursing education program/course for a period of time no longer than seven years, subject to any terms and conditions as the Board may determine;
 - b) where it determines that there is a deficiency, give recognition to the program/course on terms and conditions designed to correct the deficiency and may warn the educational

institution that recognition of its nursing education program/course may be withdrawn if the next review does not indicate satisfactory improvement; or

- c) withdraw recognition of the program/course if the terms and conditions have not been met and a warning was given at the time of the last review or interim report

18. ACTION ON COMMITTEE RECOMMENDATIONS

- 18.1 The Registrar/Chief Executive Officer may act upon recommendations from the committee and communicate them to the president of the educational institution on behalf of the Board, when the recognition status of the program/course is not jeopardized by the recommendation and/or when a Bylaw amendment is not required. The Registrar/Chief Executive Officer shall report to the Board at the earliest opportunity on the actions taken on its behalf.
- 18.2 Any committee recommendation to give a warning of withdrawal of recognition of a nursing education program/course places the recognition status of the program/course in jeopardy and shall be sent to the Board for decision before any actions are taken on behalf of the Board.

19. VARYING OF DECISION

Where both the committee and educational institution consent, the Board may vary a decision previously made.

REFERENCES

The following references are available from the CRNBC website www.crnbc.ca

[Health Professions Act](#) (RSBC 1996) Chapter 183

[Nurses \(Registered\) and Nurse Practitioners Regulation](#)

[Bylaws of the College of Registered Nurses of British Columbia](#), Sections 1.21 and 1.27 and Schedule C – Recognized Nursing Education Programs

[Guidelines for Nursing Education Programs Preparing for a Review by the CRNBC Education Program Review Committee](#)



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Pub. No. 490