

Bachelor of Nursing (BNUR) Curriculum Review Public Report

Faculty of Nursing University of Calgary (June 2018)



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BNUR Curriculum Review Team

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Executive Summary

The Faculty of Nursing at the University of Calgary has a proud history going back almost 50 years. The faculty has grown from a school of nursing in the newly formed University of Calgary in the 1960s to a full faculty in 1975. It began with a Bachelor of Nursing program and has expanded to include a graduate programs, including master's, nurse practitioner and doctoral studies. Concurrent with the addition of graduate studies, the faculty embarked on an era of research capacity building. In 2018, the faculty proudly supports five chairs in nursing research and a solid track record of contribution to the advancement of nursing through research and learning, with nursing programs in Calgary, Medicine Hat and Qatar.

The Bachelor of Nursing (BNUR) program is an accredited integrative context-based curriculum with an emphasis on educating students to become generalist nurses. Our program is unique as students learn fundamental global and population-based health theory early in their program. Students apply social determinants of health principles in community, acute, and specialized clinical settings to offer exceptional care to community, family, and individual clients across the lifespan as they navigate a changing health-care system. The BNUR routes include a 4-year route for high school students (direct entry), a 2.5-year route for transfer students, and a 2-year route for previous degree holders. The program is offered at the University of Calgary (UC) main campus and through a partnership with Medicine Hat College (MHC) that allows Medicine Hat residents to receive a UC Bachelor of Nursing degree without the need to relocate.

To ensure that our BNUR program continues meets provincial approval and national accreditation requirements all program learner outcomes are mapped to entry to practice competencies. It is critical that we continue to review and confirm curriculum themes and program learner outcomes to meet these requirements and standards. We initiated our 2017-2018 BNUR curriculum review to confirm our program and course learner outcomes as well as answer specific guiding questions related to the areas of integration, collaboration, leadership, indigenous health, and best practices. The BNUR curriculum review included mapping of program and course learner outcomes, data collection including focus groups and surveying students, faculty, graduates, and stakeholders, and a faculty curriculum review retreat to identify an action plan.

Curriculum mapping determined that the BNUR program and course learner outcomes align with provincial entry to practice competencies and national nursing education standards. This was an important finding as the BNUR program will undertake part B of national accreditation review in February 2019.

Focus group consultations were organized to explore and answer the BNUR guiding questions. During consultations with faculty members confirmed an integrative curriculum, offered suggestions for improved collaborations, and confirmed that leadership, indigenous health, and best practice are foundational elements of the curriculum. Student, faculty, graduate, and stakeholder (including preceptors and employers) survey data revealed three themes: valuing community health nursing, connecting year one students to the faculty, and building and sustaining a culture of respect.

BNUR curriculum review findings highlighted opportunities for development of action plans related to:

- maintaining an integrative and collaborative curriculum
- enhancing leadership, indigenous health, and best practice

- revisioning community clinical practice
- enhancing year 1 student experiences
- strengthening a culture of respect to align with the faculty of Nursing strategic plan

The BNUR curriculum review was an informative process that demonstrated faculty commitment to continued enhancement of our program. The BNUR curriculum review report will be made available to students, faculty, and staff; and two town halls will be held to disseminate findings and action plans.

Context of the Bachelor of Nursing (BNUR) Program

In 2010, the BN-Regular Track and BN-Accelerated Track programs were consolidated into one BN program (BNUR), enabling teaching resources to be optimized across BN course offerings. At that time, curriculum re-design was initiated based on faculty, student, and practice partner feedback, with concerns addressed in relation to the difference in number of practice hours for the students in the regular track and accelerated track programs, consistent dissatisfaction with course foci and sequencing, the need for more efficient deployment of teaching resources, and the growing disconnect between classroom and clinical teaching and learning. Since then we have continued to review our curriculum to ensure that the students gain the clinical reasoning skills they require to meet the challenges of the ever-expanding knowledge base within nursing practice.

The BNUR program educates nurses to meet entry to practice competencies required provincially by the College and Associate of Registered Nurses of Alberta (CARNA, 2013) and nationally by the Canadian Association of Schools of Nursing (CASN, 2015). In September 2016, the Faculty of Nursing BNUR program received 5-year provincial approval from the Nursing Education Program Approval Board in Alberta and will commence Part B accreditation review by the Canadian Association of Schools of Nursing (CASN) in February 2019. Although, the Faculty's BNUR program was granted Part A accreditation for a full 7-year approval from 2014-2021, the BNUR program must be reviewed once a full cohort of students (direct entry) from Medicine Hat College graduates. CASN accreditation is a voluntary process and demonstrates a commitment to quality improvement and innovation in nursing education.

The Bachelor of Nursing program at Medicine Hat College is a four-year collaborative program offered entirely at the Medicine Hat College site, allowing students in the Medicine Hat area access to a baccalaureate nursing program without having to relocate. Students are awarded a University of Calgary Bachelor of Nursing (BN) degree upon graduation. Upon successful completion of the first two years of the program as Medicine Hat College students and upon meeting the University of Calgary Faculty of Nursing admission criteria, students apply to enter the University of Calgary as third year students. The remaining courses are completed as University of Calgary students at Medicine Hat College.

Medicine Hat College Nursing Program (Division of Science and Health) works in partnership and collaborates with the University of Calgary Faculty of Nursing. Medicine Hat College and the University of Calgary have an ongoing contract that is reviewed regularly whereby students apply to the UC for entry into third year of the nursing program and pay University of Calgary tuition and fees as outlined by University of Calgary. The Bachelor of Nursing curriculum at the University of Calgary is taught by research professors and RN-instructors. The curriculum combines classroom and clinical experience. Course-work comprises lectures and projects with hands-on learning in the faculty's Clinical Simulation Learning Centre and practicum placements in community care facilities.

Guiding Questions

The following questions were used to guide the BNUR curriculum review:

Primary Question: What strategies are in place to ensure the BN curriculum at both the University of Calgary and Medicine Hat sites continue to be integrative and collaborative?

Sub Questions:

- To what extent does each BN theory/clinical course address the concept of nursing leadership?
- To what extent does each BN theory/clinical course address the concept of indigenous health?
- To what extent are best practice guidelines including the Registered Nurses' Association of Ontario (RNAO) practice guidelines woven throughout each BNUR theory/clinical course?

Action Plan

The action plan for the BNUR curriculum review was developed during the annual BNUR curriculum review retreat on May 28, 2018. The review team met on May 29, 2018 to confirm the developed action plan and to discuss the action plan related to the guiding questions. During that meeting timelines for actionable items and evaluation plans were reviewed. The following is a list of the action items including lead responsibility and subsequent evaluation plan.

Timelines:

Short-term (ST): Prior to December 2018 Medium-term (MT): < 1 year Long-term: (LT); 2 – 4 years

Integration/Collaboration Action Plan:

Recommendation: Curriculum	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Make explicit the core context/concepts that are integrated across the curriculum	Update the current master curriculum context/concepts document to include all core concepts. I.e. Leadership, pathophysiology, social determinants of health, indigenous health Presentation to Undergraduate Curriculum Committee (UCC) Document made available on intranet for faculty.	LT – 2-3 years	Associate Dean Undergraduate Program	Assess effectiveness of this communication plan at UCC meeting

Ongoing curriculum review plan is required to ensure integration	Strike an ad-hoc group from UCC Annual report to Associate Dean Undergraduate Program	МТ - < 1 year	UCC	UCC standing agenda item
Review placement of conflict resolution in N495 and other Interprofessional Practice Principles throughout curriculum	Strike an ad-hoc group from UCC Presentation to UCC with recommendations to Dean	LT – 1-2 years	Associate Dean Undergraduate Program/UCC	Review interprofessional practice principle placement at next curriculum review.
Complete review of all N85/95 courses	Strike an ad-hoc group from UCC and/or conduct more in-depth review of CLOs based on course evaluations Presentation to UCC with recommendations to Dean Plan for continued or improved CLOs to Dean	MT- 1 year	Associate Dean Undergraduate Program/UCC	Survey faculty and students on new Nursing 85/95 courses after changes implemented Follow up with term leads on effectiveness of team meetings.

Conduct annual	Set annual	ST - < 1year	Associate Dean	Follow up with term leads
term meetings	meeting dates to		Undergraduate	on effectiveness of team
that include:	include the		Program/UCC	meetings.
	majority of			
Individual term	faculty teaching			
team meetings	in each term			
Leveled term				
meetings (i.e.				
term 3 and 4				
meeting, term				
4 and 5, etc.				

Recommendation: Other	Action Items	Timeline for Implementation	Lead Responsibility	Evaluation
Enhance the term lead, instructor of record collaborations between UC and MHC	Create opportunities for faculty from both sites to meet and collaborate on enhancements to the BNUR curriculum. i.e. set meeting times during each term Report to Associate Dean Undergraduate Program	ST – 1-2 years	UCC/Term Lead at UC and MHC	Review leadership curriculum principles during annual curriculum review

Leadership Action Plan:

Recommendation: Curriculum	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Annual review of week by week lecture objectives to include leadership principles	During annual course outline approval include a section related to leadership context	ST- 1 year	Associate Dean Undergraduate Program/UCC	During annual curriculum review confirm leadership principles.

relevant content		

Indigenous Health Action Plan:

Faculty Development Plan							
Goal	Intervention	Timeline	Complete				
Build capacity for culturally safe teaching and interactions with Indigenous nursing students • Raise awareness about unique needs of Indigenous students • Increase knowledge about Indigenous history in Canada and impact of	 Blanket Exercise Indigenous history in Canada (lecture) Signature Event Indigenous Ways of Knowing (IWOK): TRC Call #24 Seven Generations Exercise Trauma-Informed Teaching (Resources) Development of Cultural Safety Resource Card Trauma-informed care approach hosted telehealth session 	June 20 February 26 April 27 Fall 2018 Fall 2018 April 26, 2018 April 25, 2018	$\sqrt{\frac{1}{\sqrt{1}{\sqrt$				
colonization Build capacity to of faculty to mentor Indigenous students • Develop training for faculty	 Develop training Recruit mentors Implement training Ongoing support of mentors 	Spring 2018 Summer 2018 May 2018 August 2018					
Increase involvement of Elders and Knowledge Keepers to inform curricular changes and to help teach Indigenous health content Develop skills for appropriate interaction with Elders and Knowledge keepers Build list of Treaty 6,7,8 Elders and Knowledge Keepers Purchase appropriate gifts: tobacco, fabric, blankets, etc. Develop faculty procedures for	 Signature Event: Indigenous Ways of Knowing (IWOK):TRC and Knowledge Bundle Elder Protocol Training for Faculty and Staff Review University Cultural Protocol Invite Elder or Knowledge keeper to teach faculty about Indigenous health practices Develop faculty procedures for soliciting Elder and knowledge keeper involvement Financial compensation and gift recommendations in consultation with Advisory Task Force and Native Centre Requirement that faculty complete training program 	April 27, 2018 May 11, 2018 Spring 2018 October 2018					

soliciting elder and knowledge keeper involvement	nowledge keeper compensation will be				
Build Capacity to		rough Taylor Instit pact of colonizatio		April 2018	\checkmark
Integrate indigenous history and health into course		tcomes- Dr. Trace evelopment of info		April 20, 2018	
content	fo	r faculty		June 2018	
 Indigenous history 		ain facilitators to le	ead Blanket		
exercises Trauma-informed	Ex	ercise	raining for		
 Trauma-Informed care 		a. Arrange for t instructors	Fall Retreat		
 Strengths-based 		b. Recruit instru	April 25, 2018		
approaches to care			ources for own	August 22,	
 Integrate Elders and 		supplies		2018	
Knowledge Keepers	■ Tr	ain facilitators to le	ead Seven	October 31,	
into classroom	Ge	enerations Exercise	2	2018	
 Impact of 	■ Te	lehealth in-service	on Trauma-		
colonization on		formed care (facult	ty and students	May 11, 2018	
health outcomes		vited)		Fall 2018	
 Cultural safety 		der protocol			
simulation		ain to facilitate cul	turally safety		
Curriculum Development and		nulations	2010		
Term 3 Term	d Implementation Plan for 2018-2019 A Term 5 Term 6			Term 7	Term 8
	4 S Blanket	Indigenous	Indigenous	Kairos Blanket	Termo
First Nations client Exercise		health	health	Exercise	
	5389 Lab)	practices	focused case	(in lab)	
	emented	integrated,	study	Spring/Summer	
	er 2018)	possibly into	NURS497	2018	
strengths-based and		485 (plan for			
community					

approach; community capacity building to address health disparities (NURS288) • Partnering with FNMI Communities (NURS288) • (Plan for Winter 2018)	Indigenous History Indian Act Residential Schools Sixties Scoop Indian hospitals Socio- cultural, historical and contextual determinants of Indigenous health (NURS 385 lecture) (Implemented Winter 2018) Cultural competency and Cultural Safety (NURS 388 lecture)	Spring/Summer 2019)	(to be implemented Winter 2019)	Indigenous History Cultural competency and Cultural Safety (starting Spring/Summer 2018 until the initial Term 4 cohort reach Term 7)
Promoting social justice and equity; racism, implicit bias, and stereotyping in healthcare and the impact on health with a focus on redressing injustice and inequities (NURS288) (Implemented Winter 2018)	Introduction to the family of the First Nations client first introduced in Term 3 (Plan for 2019)	Indigenous health history, cultural safety, and resources for further learning NURS485 (Fall 2017)		Concepts of intergenerational trauma and trauma informed approach to care of Indigenous populations are integrated into Pediatrics (Spring/Summer 2018)
Responding to racism in healthcare and Conflict Resolution (NURS289 lab)	Adverse Childhood Experiences and the impact of trauma on health			Indigenous knowledge holder-led class focused on Indigenous

(Plan for Winter 2019)	outcomes (NURS387/388)		health practices and the experience of the Indigenous older adult for Older Adults	
Indigenous health				
focused clinical				
opportunities				
(NURS289)				
(community and				
urban placements)				
(Plan for Fall 2018)				
Clinical groups				
will be required				
to complete a				
Cultural Safety				
workshop and				
the Kairos				
Blanket Exercise				
prior to working with Indigenous				
Populations				
 Focus on 				
building				
respectful				
relationships				
with surrounding				
communities				

Best Practice Guideline Action Plan:

Recommendation: Curriculum	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Annual review of week by week lecture objectives to include Best Practice Guidelines	During annual course outline approval include a section related to Best Practice Guidelines	MT- 1 year	Associate Dean Undergraduate Program/UCC	Review best practice use in curriculum during annual curriculum review

Curriculum Review Retreat Action Plan

1. Valuing Community Health Nursing

Recommendation: Curriculum	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Population Health course in Term 1 & 2	Development course to be implemented in Term 1 & 2 Proposal to Dean	LT – 2-3 years	Associate Dean Undergraduate Program/UCC	A course for Population Health course mandatory for year one nursing students within 2-4 years
Off campus clinic 2-8- hour days	Remove Cavell & Praxis (4hrs) Add these 4 hours to off campus clinical	LT- 3-4 years	Associate Dean Undergraduate Program/UCC	Course calendar changed to reflect changes in off campus experiences

Re-introduce flu clinics	Clinical	LT – 2-3 years	Associate Dean	Student survey
and immunization	Placement		Undergraduate	
OSCAR (fall term)	Coordinator		Program/UCC	Flu-clinics re-
	negotiates			introduced and
School health	with school			school
experience	boards			experiences
(winter term)				introduced.

Recommendation: Faculty/ Professional Development	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Mentor Nursing 289 Instructors on integrated concepts of Nursing 287/288 Support instructors after they have been trained on above concepts	Develop key components of training program	LT – 2-3 years	Instructors of record Nursing 287/288 Experienced NI's	Instructor survey feedback Student survey feedback

Recommendation: Other	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Expand community Nursing 289 placements to include service providers within AHS and outside AHS	Collaborate with public Health and community health Liaise with CARNA re: potential community partners	Begin ST, to develop a relationship LT – 2-3 years	Associate Dean Undergraduate Program/UCC Clinical placement coordinator	Working group with additional members by Sept 2018 Nursing 289 placements summary to be sent to term lead, curriculum coordinator and Associate Dean Undergraduate Program

Flipped classroom	Consistent	MT - < 1 year	Nurse Practice	Online content
Nursing 289 clinical	online (D2L)		Course	implemented
	Learning		Coordinator	2020 Spring
	with varied		Term Lead	
	experiential		Term 3	Report to Associate
	learning in		Instructors	Dean
	placements		(clinical & theory)	Undergraduate
				Program

2. Connecting Year One Students to the Faculty

Recommendation: Curriculum	Action Items	Timeline for Implementatio n (ST, MT, LT)	Lead Responsibility	Evaluation Plan
 Year One Nursing Course (option for entire campus) Suggested Course(s) Intro to CDN Health System Multidisciplinary Communication/Collaborati on Between Disciplines Resiliency Education Professional Identity 	Develop course outline Calendar/timelin e implications	LT - 2-3 years	Associate Dean Undergraduat e Program/UCC	Course Evaluation s Instructor Evaluation s Course Implement ed
Anatomy and Physiology course review	Collaborate with Kinesiology regarding shared student feedback Set up meeting with Faculty from Kinesiology	ST – 6 months	Associate Dean Undergraduat e Program/UCC	Student surveys Faculty surveys
Assign a Fall and Winter Nursing 289 group to work with year one students as a community	Connect with NPCC for Nursing 289 and Term Lead and year one Liaison	ST – < 1 year	Associate Dean Undergraduat e Program	Survey or Focus Group for year one students

Recommendation: Other	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Peer Mentorship (senior Nursing Students to year one students)	Assign a faculty member who is interested to facilitate and support this student driven initiative Explore use of 'Cyber Mentor" (consult senior communications manager)	ST- < 1 year	Associate Dean Undergraduate Program	Track number of Students utilizing over one year Student survey
Speed Dating Event (UNS)	Ask UNS to set-up event again and include year one students Advertise through year one nursing committee (YONC) and the Faculty Liaison for year one	ST- < 1 year	UNS	Evaluate by numbers of students attending Student survey

3. Building and Sustaining a Culture of Respect

Recommendation: Curriculum	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Resilience Education and Training for Students	Purposeful conflict resolution, giving and receiving feedback, and resiliency content in Nursing	MT- 2-3 years	Associate Dean Undergraduate Program/UCC	Course evaluations Student survey

85/95 courses		
courses		

Recommendation : Faculty/ Professional Development	Action Items	Timeline for Implementati on (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Formalize faculty teaching orientation manual /mentorship initiatives	 Develop mentorship program Develop and distribute teaching manual Develop SIM for faculty re: giving feedback to student Offer professional development modules (posted online/podcast) about key topics: ✓ Vulnerability ✓ Resiliency ✓ Giving and receiving feedback Report to Dean 	MT- 2-3 years	Associate Dean Undergraduate Program Associate Dean Teaching, Learning and Technology	Faculty Survey Student Survey Associate Dean conducts discussion and performanc e managemen t as necessary

Recommendation: Other	Action Items	Timeline for Implementation (ST, MT, LT)	Lead Responsibility	Evaluation Plan
Re-envision the	Review PSI role	ST- < 1 year	Associate Dean	Feedback from clinical
Peer Support	profile		Undergraduate	instructor on
Instructor role to			Program	effectiveness of the
prioritize				role
mentorship of	Revise Peer Self-		Associate Dean	
clinical instructors	Assessment		Teaching,	
	Framework for		Learning, and	Feedback on value of
	teaching		Technology	moving through peer
	development			and self-assessment
			UCC	process and outcome

				on collegial relationships
Develop a philosophy and pedagogy of teaching and learning to support relational learning	Associate Dean Undergraduate program to discuss and strick an ad-hoc group from Undergraduate Program Committee	MT – 1-2 years	Associate Dean Undergraduate Program	Philosophy draft completed Faculty and Student survey conducted