

NEPAB

Nursing Education Program Approval Board

Standards for Alberta Nursing Education Programs Leading to Initial Entry to Practice as a Nurse Practitioner

January 2011

Ratified by the *College and Association of Registered Nurses of Alberta* (CARNA) Provincial Council in January 2011.

Permission to reproduce this document is granted; please recognize NEPAB.

For assistance or additional information, please contact a NEPAB Consultant.

Nursing Education Program Approval Board (NEPAB)
College and Association of Registered Nurses of Alberta
11620 - 168 Street
Edmonton, Alberta T5M 4A6

Telephone	(780) 451-0043 / 1-800-252-9392 (Canada-wide)
Fax	(780) 452-3276
E-mail	nepab@nurses.ab.ca
Website	www.nurses.ab.ca

Table of Contents

Introduction	4
Fundamental Beliefs	6
Glossary.....	7
Standard 1: Program.....	10
Standard 2: Curriculum	12
Standard 3: Students	14
Standard 4: Graduates.....	16
Acknowledgements.....	17
References.....	17

Standards for Alberta Nursing Education Programs Leading to Initial Entry to Practice as a Nurse Practitioner

Introduction

The *Standards for Alberta Nursing Education Programs Leading to Initial Entry to Practice as a Nurse Practitioner* (2011) contain the **nursing education standards** and **criteria** that represent the requirements for nursing education program approval. The standards and criteria are the basis by which the nursing education programs leading to initial entry to practice as a Nurse Practitioner are reviewed by the Nursing Education Program Approval Board (NEPAB) for approval.

The four nursing education standards must be met for a Nurse Practitioner education program to obtain the designation of an “approved Nurse Practitioner education program” in Alberta. The criteria represent the usual outcomes that must be achieved in order to meet a particular nursing education standard. A nursing education standard cannot be achieved if each criterion has not been met. Alternate criteria demonstrating the unique characteristics of a nursing education program may be proposed. If an alternate criterion is being proposed it must be clear which of the usual criteria it is intended to replace. All proposed alternate criteria must be supported by sound rationale that may include expert, empirical or documented evidence and will be considered on an individual basis.

It is the responsibility of the educational institution to provide evidence that demonstrates that the nursing education standards are being or will be met. The *Standards for Alberta Nursing Education Programs Leading to Initial Entry to Practice as a Nurse Practitioner: Approval Mechanism* (2011) provides detailed information regarding the NEPAB approval policies and processes.

The authority to approve nursing education programs is granted in Section 3(1)(f) of the *Health Professions Act* (2000), which states:

A college may approve programs of study and education courses for the purposes of registration requirements.

The *Registered Nurses Profession Regulation* (2005) in Section 4(1) outlines the registration requirements an applicant for registration on the nurse practitioner register must have, including:

- (c) *have successfully completed a nurse practitioner education program approved by the Council,*
- (d) *be registered on the registered nurse register, and*
- (e) *have passed any examination respecting nurse practitioner practice approved by the Council.*

The authority to approve Nurse Practitioner education programs was delegated to NEPAB by CARNA Provincial Council in September 2008. Further, the CARNA *Bylaws* outline the duties and powers of NEPAB including the following:

30.2 *NEPAB may:*

- (a) *Establish policies and processes respecting any matters that are required to secure effective nursing education programs:*
 - i leading to initial entry to practice as a Registered Nurse;*
 - ii. leading to initial entry to practice as a Nurse Practitioner;*
- (b) *Establish the minimum nursing education standards and criteria required to obtain and maintain the designation of “approved nursing education program”, which must be ratified by Provincial Council before they become effective;*
- (c) *Grant to and withdraw from a nursing education program the designation “approved nursing education program”, based on the nursing education standards and criteria ratified under subsection (b), with or without conditions, terms, limitations and restrictions...*

Fundamental Beliefs

The fundamental beliefs about initial entry-level Nurse Practitioner education underlying the development of the *Standards for Alberta Nursing Education Programs Leading to Initial Entry to Practice as a Nurse Practitioner* include:

- Accountability** Refers to the responsibility to ensure that graduates of a Nurse Practitioner education program have the competencies necessary to provide safe, competent and ethical care in a variety of settings, range of acuity and across the continuum of care as appropriate to the program category: Family / All Ages, Adult, Child, or Child (Neonatal) (CNA, 2009).
- Flexibility** Refers to the need to provide Nurse Practitioner education programs that use a wide range of instructional techniques, and enhance access to learning by using creative delivery models (CNA, 2004).
- Responsiveness** Refers to the adaptability of Nurse Practitioner education programs to meet the changing needs of society, the health care delivery system and diverse client populations in the best interests of the public, nursing education, and the nursing profession.
- Quality** Refers to congruence among each element of the Nurse Practitioner education program including the philosophy, conceptual framework and curriculum as well as relevance to Nurse Practitioner practice. In addition, the curriculum is implemented in a way that ensures that students have the expert guidance to obtain the broad-based preparation, including the knowledge, skills, and attitudes necessary to meet the complex needs of clients as appropriate to the program category: Family / All Ages, Adult, Child, or Child (Neonatal).

Glossary

In this document, the following terms have been defined as follows:

Classroom hours	The time students spend in theory acquisition using methods such as lectures, seminars, online learning, and tutorials.
Clinical hours	The time students spend in nursing practice with clients including pre and post conferences. Clients include individuals, families, groups, communities, and populations.
Clinical mentor	An experienced Nurse Practitioner who functions as a role model for a nursing student. In conjunction with a nursing faculty advisor, the clinical mentor is responsible for mentoring, supervising, and evaluating the nursing activities of a nursing student during clinical placements.
Competence	The integrated knowledge, skills, judgment, and attributes required of a Nurse Practitioner to practice safely and ethically in a designated role and setting.
Competencies	The specific knowledge, skills, and personal attributes required for a Nurse Practitioner to practice safely and ethically in a designated role and setting.
Conceptual framework	A set of logically related concepts that provide the structure for the nursing education program and the development of the curriculum.
Criteria	The usual outcomes that must be achieved in order to meet a particular nursing education standard. A nursing education standard cannot be achieved if each criterion has not been met.
Curriculum	A systematic and comprehensive plan of learning activities including the individual courses, their sequencing, and the integration of key concepts.
Designated program outcomes	The expected end results of a curriculum that describe the specific knowledge, skills, or attitudes that learners are required to achieve by the completion of the nursing education program.
Educational institution	The Alberta university responsible for the delivery of the nursing education program.
Entry-to-practice competencies	The competencies, as amended from time to time, required of the Nurse Practitioner graduate who is entering the workforce for the first time. The College and Association of Registered Nurses of Alberta defines these competencies.

Faculty	The teaching and administrative staff and those members of the administration having academic rank in an educational institution.
	Nursing faculty members are regulated members, in a Canadian jurisdiction, who teach the program category specific nursing content in the nursing education program.
Laboratory hours	The time students spend acquiring nursing skills and competencies in a simulated setting.
NEPAB	The Nursing Education Program Approval Board.
Nursing education program	A program of nursing education, offered by an educational institution, leading to initial entry to practice as a Nurse Practitioner.
Nursing education program approval process	The steps used to determine if a nursing education program has met and continues to meet the established standards set by NEPAB and approved by the College and Association of Registered Nurses of Alberta Provincial Council. Approval is a required process for all new nursing education programs. Ongoing approval is for a period not more than five years, therefore, re-approval is required for all approved nursing education programs at least every five years.
Nursing education standards	An explicit set of statements that represent the minimum requirements for approving a nursing education program. The standards are the basis by which the actual performance of a nursing education program is measured for approval.
Nursing faculty advisor	Nursing faculty members who function as a mentor and role model for a nursing student in the clinical practice setting. In conjunction with a clinical mentor, the nursing faculty advisor is responsible for mentoring, supervising, and evaluating the nursing activities of a nursing student during clinical placements.
Nursing practice	A synthesis of the interaction among the concepts of persons, health, environment, and nursing. It is a direct service provided to a variety of patient/client populations throughout the life cycle, as well as groups and communities. The nursing practice context is any setting where a nurse-patient/client relationship occurs with the intention of responding to the need or requests for nursing service. Caring is an integral part of this service. In the event that patients/clients are unable to respond to the nurse on their own behalf, the term patient/client shall refer to the family or significant others.
Nursing practice standards	The acceptable requirements for determining the quality of nursing care a patient/client receives as defined by the College and Association of Registered Nurses of Alberta.
Professional practice requirements	The professional practice requirements include the scope of practice for Nurse Practitioners and the code of ethics as amended from time to time. The College and Association of Registered Nurses of Alberta define the professional practice requirements.

Program

The system, including all of the resources and structures, that provides the necessary support to the curriculum to ensure the achievement of the educational goals.

Program category

Refers to the four types (categories) of Nurse Practitioner education programs: Family / All Ages, Adult, Child and Child (Neonatal) recognized in Alberta. Each program category corresponds to a specific College and Association of Registered Nurses of Alberta approved examination that graduates will be eligible to write. Approval of a Nurse Practitioner education program will be within a specific program category.

Standard 1: Program

The nursing education **program** has sufficient structures and human, clinical, physical, and fiscal resources so that students are capable of achieving the entry-to-practice competencies and the professional practice requirements as defined by the College and Association of Registered Nurses of Alberta.

Criteria:

- 1.1 There is support for, and interest in the nursing education program from the educational institution, government, potential employers and the community.
- 1.2 There is an organizational structure which:
 - (a) Demonstrates the lines of authority and decision-making which are pertinent to the nursing education program,
 - (b) Defines the committees whose decisions affect the nursing education program, and
 - (c) Includes a director who has the authority and responsibility for decisions related to the curriculum and the nursing education program.
- 1.3 There is tracking of student trends including:
 - (a) Enrolment,
 - (b) Transfers and withdrawals, and
 - (c) Graduation.
- 1.4 Student trends are analyzed and used to guide program policies regarding admission, selection and promotion.
- 1.5 There are approved institutional policies and procedures for all nursing faculty related to:
 - (a) Faculty selection including clinical expertise, teaching ability, and research and scholarly activities,
 - (b) Ongoing evaluation of teaching and scholarly activities, research and clinical competence in the settings where nursing faculty supervise students,
 - (c) Discipline, termination and grievance,
 - (d) Ethical treatment of faculty, and
 - (e) Professional development.
- 1.6 There are a sufficient number of faculty members with the theoretical knowledge and clinical expertise to meet the course objectives, designated program outcomes, and entry-to-practice competencies.
- 1.7 There are nursing faculty members with adequate preparation including minimum educational qualifications:
 - (a) A director of the nursing education program:
 - i. Doctoral degree required, and

- ii. Regulated member of the College and Association of Registered Nurses of Alberta on the Registered Nurse Register; Nurse Practitioner Register preferred.
- (b) Nursing faculty members:
 - i. Master's degree required, doctoral degree preferred,
 - ii. A graduate or undergraduate degree in nursing, and
 - iii. Regulated member, in a Canadian jurisdiction, on the Nurse Practitioner Register.
- 1.8 Only nursing faculty members teach the nursing content, specific to the program category, in the nursing education program.
- 1.9 The Nurse Practitioner practice permit held by nursing faculty members is appropriate to the program category.
- 1.10 There is a system to annually verify that all nursing faculty members are regulated members, in a Canadian jurisdiction, on the Nurse Practitioner Register.
- 1.11 Clinical resources are available to enable students to meet the entry-to-practice competencies and professional practice requirements. An assessment of the appropriateness and applicability of clinical resources to the nursing education program category should include, but not be limited to, the consideration of the following:
 - (a) Facility personnel are informed about the nursing education program's philosophy, purpose and the objectives for the clinical experiences,
 - (b) Facility personnel assume responsibility in providing an environment conducive to learning,
 - (c) The availability of clients from across the lifespan who present with a variety of health issues over a range of acuity, and
 - (d) Measures are in place to ensure the safety of students and clients at all times.
- 1.12 There are written contracts between the nursing education program and the facilities used for learning and clinical experiences that:
 - (a) Define the rights and responsibilities of the parties,
 - (b) Define the use of the resources, and
 - (c) Are regularly reviewed.
- 1.13 Resources are available, including library and technical resources, to enable students to achieve the course objectives and designated program outcomes.
- 1.14 There are financial and budgetary arrangements for the establishment of the nursing education program and for its continued operation.

Standard 2: Curriculum

The **curriculum** provides the educational experiences necessary for students to achieve the entry-to-practice competencies and the professional practice requirements as defined by the College and Association of Registered Nurses of Alberta.

Criteria:

- 2.1 The philosophy of nursing and education and the conceptual framework guide the development and implementation of the curriculum.
 - (a) There is congruence between the philosophy, conceptual framework and curriculum.
- 2.2 The entry-to-practice competencies are addressed throughout the curriculum.
- 2.3 The designated program outcomes are consistent with the entry-to-practice competencies.
- 2.4 The curriculum is responsive to and reflects current and emerging trends, including:
 - (a) Health and health promotion,
 - (b) Legal and ethical considerations,
 - (c) Diversity in client populations,
 - (d) Evidence-informed nursing practice,
 - (e) Education and research,
 - (f) Health service delivery,
 - (g) Society,
 - (h) Treatment of diseases, disorders, and conditions,
 - (i) Diagnostics,
 - (j) Pharmacotherapeutics, and
 - (k) Other.
- 2.5 The curriculum includes:
 - (a) An overall organizing framework, course sequencing, course descriptions, and course objectives logically structured to achieve the course objectives, designated program outcomes, entry-to-practice competencies and professional practice requirements,
 - (b) Courses and teaching and learning methods that are consistent with the philosophy, conceptual framework and designated program outcomes,
 - (c) Nursing courses comprising the majority of the curriculum as measured by course credits,
 - (d) Non-nursing courses that are relevant to the program category,
 - (e) Learning experiences that involve interprofessional education and care,
 - (f) Learning experiences that enable students to meet the course objectives, designated program outcomes, entry-to-practice competencies, and professional practice requirements, and

- (g) Allocated classroom, laboratory and clinical hours that enable students to meet the course objectives, designated program outcomes, entry-to-practice competencies and professional practice requirements.
- 2.6 The clinical learning activities and clinical placements provide sufficient opportunities for students to meet the designated program outcomes and the entry-to-practice competencies, including:
- (a) The allocation of a sufficient number of clinical hours in the nursing education program, and
 - (b) Clinical learning activities and placements in a variety of settings with varying levels of client acuity and complexity and with clients across the life span within the program category.
- 2.7 A clinical placement that focuses on consolidating and integrating theory with practice to facilitate the transition from the student to graduate role.
- 2.8 There is a method for tracking and monitoring clinical hours and placements for each student to ensure that all students have clinical practice in a variety of settings and with clients across the life span within the program category.
- 2.9 Nursing faculty advisors supervise all clinical placements.
- 2.10 Students are assigned to clinical mentors, who are Nurse Practitioners in an appropriate category of practice, in all clinical placements.
- 2.11 There is systematic and continuous evaluation of all curriculum components including content, learning activities, student evaluation methods, and designated program outcomes to ensure the ongoing development, maintenance and enhancement of the curriculum.
- (a) Students, faculty and key stakeholders participate in the evaluation of the curriculum.

Standard 3: Students

There are policies and procedures related to **students**, which meet the requirements of all relevant legislation.

Criteria:

- 3.1 Pertinent student policies and procedures are published in the educational institution's calendar or student handbook or both.
- 3.2 There are policies and procedures including, but not limited to:
 - (a) Admission requirements specific to the nursing education program;
 - (b) Selection of the most qualified applicants utilizing the educational institution's criteria for most qualified;
 - (c) Academic progression through the nursing education program, including promotion, graduation, withdrawal, probation, and failure;
 - (d) Appeals, grievances and student discipline;
 - (e) Ethical treatment of students;
 - (f) Access to services that increase the students' potential, including:
 - i. Learning support services (e.g., tutoring, remedial learning),
 - ii. Personal counselling,
 - iii. Academic counselling,
 - iv. Student health services,
 - v. Learning resources, and
 - vi. Financial aid.
- 3.3 Processes in place to ensure that students' progress toward the achievement of the professional practice requirements, entry-to-practice competencies, course objectives and designated program outcomes is evaluated, using a variety of student evaluation methods, and communicated in a timely fashion. This to include formative and summative feedback from nursing faculty members regarding the students' theoretical and practice learning and progress.
- 3.4 Policies and procedures are in place to ensure that prior to clinical experiences:
 - (a) The students' immunization status meets the requirements of the clinical facility,
 - (b) The students have had a security clearance completed, and
 - (c) The students have life support certification appropriate to the specific practice population.

- 3.5 The minimum requirements prior to admission to the nursing education program include:
- (a) Regulated member, in a Canadian jurisdiction, on the Registered Nurse Register,
 - (b) A minimum of 4500 hours of registered nursing practice,
 - (c) Registered nursing practice appropriate to the program category, and
 - (d) At least a baccalaureate degree in nursing.
- 3.6 The educational institution shall maintain records and reports, including:
- (a) Permanent records of course descriptions, including clinical and classroom hours, for all cohorts of graduates,
 - (b) Permanent records of course grades for each student,
 - (c) Permanent records that only contain information permitted under relevant legislation, and
 - (d) Policies regulating access to student records that ensure the confidentiality and privacy of these records.

Standard 4: Graduates

Graduates of the nursing education program achieve the entry-to-practice competencies and the professional practice requirements as defined by the College and Association of Registered Nurses of Alberta.

Criteria:

- 4.1 Prior to graduation, student evaluations provide evidence that the students have met:
 - (a) The entry-to-practice competencies, and
 - (b) The course objectives and designated program outcomes.

- 4.2 Trends in the graduates' performance on the program category specific registration examination approved by the College and Association of Registered Nurses of Alberta Provincial Council are identified, including a comparison to the national mean.
 - (a) The educational institution, as necessary, takes action when graduate performance falls below the national mean.

- 4.3 Graduates meet the professional practice requirements and entry-to-practice competencies as evidenced by evaluation of their performance by their employer within six months of completing the nursing education program.

- 4.4 Graduates meet the professional practice requirements and entry-to-practice competencies as evidenced by their performance on self-evaluations within six months of completing the nursing education program.

Acknowledgements

The Nursing Education Program Approval Board (NEPAB) gratefully acknowledges the following organizations whose work in developing the *Canadian Nurse Practitioner Program Approval Framework* (December 2010) which guided the development of the *Standards for Alberta Nursing Education Programs Leading to Initial Entry to Practice as a Nurse Practitioner*:

- Association of Registered Nurses of Newfoundland and Labrador;
- Association of Registered Nurses of Prince Edward Island;
- College and Association of Registered Nurses of Alberta;
- College of Nurses of Ontario;
- College of Registered Nurses of British Columbia;
- College of Registered Nurses of Manitoba;
- College of Registered Nurses of Nova Scotia;
- Nurses Association of New Brunswick;
- Ordre des Infirmières et Infirmiers du Québec;
- Registered Nurses Association of the Northwest Territories and Nunavut; and
- Saskatchewan Registered Nurses Association.

The *Standards for Alberta Nursing Education Programs Leading to Initial Entry to Practice as a Nurse Practitioner* were developed utilizing a consultative approach. NEPAB also gratefully acknowledges those individuals and groups who provided feedback. The input received from a broad range of perspectives was very valuable and significantly impacted the development of these standards.

References

- Canadian Nurses Association. (2009). *The Nurse Practitioner*. Ottawa, ON: Author.
- Canadian Nurses Association and Canadian Association of Schools of Nursing. (2004). *Joint position statement: Flexible delivery of nursing education programs*. Ottawa, ON: Author.
- College and Association of Registered Nurses of Alberta. (2010). *Bylaws*. Edmonton, AB: Author.
- Health Professions Act*, R.S.A. 2000, c. H-7.
- Registered Nurses Profession Regulation*, Alta. Reg. 232/2005.