Program Approval for New & Dissolving RN or RN Re-Entry Education Programs

Original: 1999 Revised: September 2015
# TABLE OF CONTENTS

I. INTRODUCTION .............................................................................................................. 1

II. ROLES IN THE NURSING EDUCATION PROGRAM APPROVAL PROCESS .... 1

   The Nursing Education Program Approval Committee ........................................ 1
   Role of the Nursing Education Program Approval Committee ....................... 2
   Role of the Review Team ..................................................................................... 2
   The Nursing Education Programs ................................................................. 3
   The SRNA Staff Resource .................................................................................. 4

III. APPROVAL STANDARDS .............................................................................................. 4

   Nursing Education Standards ............................................................................ 4
     Standard 1: Program....................................................................................... 5
     Standard 2: Curriculum.................................................................................. 6
     Standard 3: Students.................................................................................... 7
     Standard 4: Graduates................................................................................... 8
     Standard 5: Resources.................................................................................. 8

IV. PROGRAM APPROVAL RATINGS ............................................................................. 11

V. THE APPROVAL PROCESS FOR A NEW RN or RN RE-ENTRY PROGRAM..... 12

   Notification of Intent to Establish a New Program .......................................... 12
   Self-assessment Report .................................................................................... 12
   Review of Self-assessment Report .................................................................. 13
   Nursing Education Program Approval Committee Recommendation .......... 13
   Notification to Program .................................................................................... 13
   Council Review ............................................................................................... 14

VI. THE APPROVAL PROCESS FOR AN ESTABLISHED RN or RN RE-ENTRY PROGRAM .......................................................................................................................... 14

   Notification of Intent to Review Program....................................................... 14
   Self-assessment Report ................................................................................... 14
   Review of Self-assessment Report .................................................................. 14
   Site Visit ......................................................................................................... 14
VII. THE APPROVAL PROCESS FOR A SUBSTANTIVE CHANGE TO AN ESTABLISHED RN or RN RE-ENTRY PROGRAM

Definition of Substantive Change
Notification of Substantive Changes
Approval Process
Appeal Process

VIII. THE APPROVAL PROCESS FOR A RN or RN RE-ENTRY PROGRAM BEING DISCONTINUED

Notification of Intent to Discontinue a Program
Determination of Discontinuation Process
Implementation of the Discontinuation Process
Appeal Process

IX. ANNUAL UPDATES

X. CONFLICT OF INTEREST & CONFIDENTIALITY

XI. ALTERNATE DISPUTE RESOLUTION PROCESS

REFERENCES

APPENDICES

Appendix A - Glossary
Appendix B - Self-assessment Report
Appendix C - Nursing Education Program Annual Update
I. INTRODUCTION

The nursing education program approval standards/criteria are approved by the association under the provisions of *The Registered Nurses Act, 1988 (The RN Act)*. Clause 19(1)(a)(i)(A)(I) of *The RN Act, 1988* states:

> The council may register as a registered nurse and issue a licence to practise registered nursing to a person who produces evidence establishing to the satisfaction of the council that the person has successfully completed a basic registered nursing education program given in Saskatchewan and approved by the council....

The Ends are accomplished in part by ensuring that graduates from registered nursing education programs are competent to practice according to the standards of the association. Approval of basic, re-entry, and RN(NP) education programs is required by Section 19 of *The RN Act*. Clause 15(2)(l) of *The RN Act* provides for a bylaw governing the approval of RN education programs for purposes of registration pursuant to the Act.

The following documents, which identify the standards for competent practice, provide the foundation for the approval of RN nursing education programs:

- *The Registered Nurses Act, 1988*
- Current SRNA Bylaws
- Current *Standards and Foundation Competencies for the Practice of Registered Nurses*
- Current CNA Code of Ethics

This document provides the policies and process for the SRNA Nursing Education Program Approval Process.

II. ROLES IN THE NURSING EDUCATION PROGRAM APPROVAL PROCESS

The Nursing Education Program Approval Committee

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

1. Membership shall consist of:
a) Four registered nurses, one of whom is a registered nurse (nurse practitioner), from a broad range of practice, preferably nurses who work with new graduates, are in leadership positions, and/or have expertise in evaluation.
b) One public representative with expertise in general education.
c) One representative from the government responsible for *The Registered Nurses Act, 1988*.
d) One representative from another health profession.

2. Members of this Committee shall be appointed for a three year term, renewable for one additional term. Terms of office shall be staggered to provide for continuity.

**Role of the Nursing Education Program Approval Committee**

The Nursing Education Program Approval Committee shall:

1. Review the process for approval of nursing education programs as delegated to the Nursing Education Program Approval Committee.

2. May consult, as necessary or appropriate, with individuals who have expertise related to a program or any other matter considered by the Committee.

3. Following a nursing education program approval review, the Committee will make a decision regarding its recommendation to the SRNA Council on the subject of program approval. The Committee will forward its report to the Executive Director.

4. Maintain processes to ensure due process, procedural fairness and an open, transparent process for resolution of issues and/or concerns.

5. Submit an annual report to the SRNA Council regarding updates from the nursing education programs.

**Role of the Review Team**

The Review Team:
1. Is responsible for verifying and clarifying the nursing education program’s Self-assessment Report through a site visit to the program site(s).

2. Does not determine an approval rating for the nursing education program, but rather provides information to the Nursing Education Program Approval Committee for the Committee’s consideration.

3. Is composed of two or three members who are retained by the association on a contract basis and are external to the program being evaluated.

4. Is chosen by the Nursing Education Program Approval Committee.

In total, members of the Review Team should possess the following qualifications:

- Masters preparation (PhD preferred).
- Experience in curriculum development, implementation, and program evaluation in RN education.
- Experience in appropriate areas of clinical practice.
- Current registration with their provincial RN regulatory body.
- Experience as a program assessor/reviewer.

The Nursing Education Programs

The nursing education programs shall:

1. In collaboration with the SRNA Staff Resource, select a mutually agreeable date for the site visit;

2. In collaboration with the SRNA Staff Resource, develop a site visit schedule;

3. Review the proposed Review Team members and notify the SRNA of any conflict of interest;

4. Develop and submit to the SRNA, a Self-assessment Report (see Appendix B) of the nursing education program that includes all applicable SRNA Standards and Criteria for Nursing Education Program Approval two months prior to the scheduled site visit; and
5. Submit an annual report to the SRNA in between formal program approval visits, as per the SRNA policy and format (see Appendix C for annual report format).

The SRNA Staff Resource

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

1. Assists nursing education programs to understand the approval process and the requirements of the review. The SRNA Staff Resource is available to meet with nursing education programs prior to the submission of a Self-assessment Report and/or a site visit. The SRNA Staff Resource will also provide follow-up with the program, as required, following a review;

2. Serves as staff support to the Nursing Education Program Approval Committee. This role includes providing a list of potential Review Team members for consideration and acting as a liaison between the Committee and the nursing education programs. The SRNA Staff Resource supports the work done by the Nursing Education Program Approval Committee but does not participate in making decisions about approval status of a program being reviewed;

3. Provides orientation to the Review Team on the subject of SRNA policies, processes, and the standards for program approval; and

4. Serves as an ex officio member of the Review Team during the approval process/site visit.

III. APPROVAL STANDARDS

Nursing Education Standards

The following are standards set out for nursing education programs:

1. Program - The program has the appropriate internal structures and supports to ensure that students are capable of achieving the practice requirements as described in the current Standards and Foundation Competencies for the Practice of Registered Nurses and the current CNA Code of Ethics.
2. Curriculum - The curriculum provides learning experiences necessary to achieve professional practice requirements as described in the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.

3. Students - Students acquire and demonstrate professional practice requirements as described in the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.

4. Graduates - Graduates achieve professional practice requirements as described in the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.

5. Resources - Students have access to resources and opportunities to acquire and demonstrate professional competency requirements and professional accountability.

**Standard 1: Program**

Program - The program has the appropriate internal structures and supports to ensure that students are capable of achieving the practice requirements as described in the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.

**Criteria:**

1. The program is equivalent to a four year post-secondary nursing baccalaureate program.
   a) A nursing re-entry program ensures that students meet the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.

2. There is an organizational structure that clearly demonstrates the lines of authority and relationships that are pertinent to the nursing education program, including those between collaborative partners delivering the nursing education program, and the identification of any group(s) to whom the nursing education program is accountable to and whose decisions may impact the program.
3. The nursing education program has met all requirements of the educational institution and is approved by the educational institution’s governance body.

Standard 2: Curriculum

Curriculum - The curriculum provides learning experiences necessary to achieve professional practice requirements as described in the current Standards and Foundation Competencies for the Practice of Registered Nurses and the current CNA Code of Ethics.

Criteria:

1. The philosophy of the nursing program and the conceptual framework guide the development and implementation of the curriculum.

2. The standards and foundation competencies and the code of ethics for RNs are addressed throughout the curriculum.

3. The program curriculum and outcomes are responsive to and reflect current and emerging trends in:
   a) Health and health promotion
   b) Legal and ethical standards
   c) Diversity of client populations
   d) Evidence-informed nursing practice
   e) Education and research
   f) Interprofessional collaboration
   g) Client safety
   h) Technology

4. The curriculum includes:
   a) An overall organizing framework, course sequencing, course descriptions, and course objectives.
   b) Diverse learning experiences that enable students to meet the course objectives, designated program outcomes, and standards and foundation competencies.
   c) Allocated classroom, laboratory, and clinical hours which enable students to meet the course objectives, designated program outcomes, and standards and foundation competencies.
d) Courses and teaching and learning methods that are consistent with the educational program’s philosophy, conceptual framework, and designated program outcomes.

e) A method for tracking and monitoring clinical hours and placements for each student to ensure that all students have clinical practice with clients across the life span in a variety of clinical settings.

i. A method for tracking and monitoring clinical hours and placements for each student in a nursing re-entry program to ensure that all students have clinical practice such that they are able to meet the current Standards and Foundation Competencies for the Practice of Registered Nurses and the current CNA Code of Ethics.

f) Formative and summative evaluation processes are in place that includes students, faculty, and key stakeholders to ensure the ongoing development, maintenance, and enhancement of the curriculum.

**Standard 3: Students**

Students - Students acquire and demonstrate professional practice requirements as described in the current Standards and Foundation Competencies for the Practice of Registered Nurses and the current CNA Code of Ethics.

**Criteria:**

1. Students learn about self-regulation and are made aware of the SRNA’s requirements for licensure.

2. Policies and procedures for student selection, promotion, probation, failure, and appeal are clearly communicated to students, faculty, and stakeholders.

3. Methods are in place to examine the correlation between admission criteria, student attrition, and student success. Based on this analysis, policies are developed and/or revised as required.

4. Policies and procedures are in place for student placement into clinical settings:
   a) The student’s immunization status meets the requirements of the clinical facility.
   b) The student has a security clearance check that meets the requirements of the clinical facility.
c) The student has appropriate current BCLS certification.

5. Processes are in place to ensure that students receive timely formative and summative feedback from faculty regarding their theoretical and practical learning.

6. Processes are in place to ensure that students are involved in the planning, implementation, and evaluation of the program.

**Standard 4: Graduates**

Graduates - Graduates achieve professional practice requirements as described in the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.

**Criteria:**

1. Prior to graduation, evaluations provide evidence that students have met:
   a) The current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.
   b) The course and designated program outcomes.

2. Trends in the graduate’s performance on the association approved registration examination are at or above the national average.

3. Feedback from graduates and employers provide evidence that graduates are meeting the standards and competencies for safe, competent and ethical practice in diverse contexts of practice.

4. Data is collected and analyzed on the graduate’s ability to meet requirements for licensure and standards and competencies in diverse context of practice.

**Standard 5: Resources**

Resources - Students have access to resources and opportunities to acquire and demonstrate professional competency requirements and professional accountability.
Criteria:

1. Faculty
   1.1 The faculty size and composition is sufficient to provide teaching and guidance in order to ensure student progress towards meeting the current Standards and Foundation Competencies for the Practice of Registered Nurses:
      a) There are approved policies and procedures in place for all full time and part time faculty related to:
         i. Faculty selection including clinical expertise, teaching ability, research and scholarly activities.
         ii. Ongoing evaluation of teaching, scholarly activities, and clinical competence in the settings where nursing faculty supervise students.
         iii. Professional development.
      b) There are policies and procedures for faculty to provide input and feedback regarding the educational program’s ability to meet (a).

   1.2 The minimum faculty requirements shall include:
      a) A dean/director who has the authority and responsibility for decisions related to the curriculum and the nursing education program.
      b) Sufficient number of adequately prepared faculty to ensure:
         i. The development, implementation, and evaluation of the program.
         ii. That student learning is optimized.
         iii. That safe nursing care is provided to clients.

   1.3 Nursing faculty possess the theoretical nursing knowledge and clinical expertise appropriate to their teaching responsibilities:
      a) A dean/director of the education program who:
         i. Is a member of the SRNA;
         ii. Has a master’s degree, doctoral degree preferred; and
         iii. Has a graduate or undergraduate degree in nursing.
      b) Full time faculty who:
         i. Are members of the SRNA or RPNAS (as appropriate); and
         ii. Have a master’s degree (or evidence of working towards a master’s degree) with at least one degree, either graduate or undergraduate in nursing.
      c) Part time faculty who:
i. Are members of the SRNA or RPNAS (as appropriate); and  
ii. Have a baccalaureate degree in nursing, master’s preferred.

d) Nursing faculty must be involved as educators in the nursing content in the program.
e) Students in clinical settings are supervised and/or preceptored by Registered Nurses and/or Registered Psychiatric Nurses as appropriate.

2. Clinical resources

2.1 The nursing education program has current written agreements with clinical agencies that specify expectations for all parties and ensure protection of the students and faculty.

2.2 Clinical learning activities and clinical placements provide opportunities for students to meet the designated program outcomes and meet the current *Standards and Foundation Competencies for the Practice of Registered Nurses*:

a) Student clinical experiences reflect current best practices.

b) The allocation of a sufficient number of clinical hours across the life span to allow graduates to achieve curriculum/program objectives and the standards and competencies for Registered Nurses (e.g. medicine, surgery, pediatrics, obstetrics, mental health, geriatrics, and community health).

   i. Sufficient clinical hours and placements for each student in a nursing re-entry program to ensure that all students are able to meet the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA Code of Ethics.

   c) The allocation of clinical placements encompasses a variety of nursing practice settings (acute, chronic, and community).

   d) The allocation of a full time clinical preceptorship at the end of the program that consolidates theory and nursing practice.

   e) The nursing faculty to student ratio in clinical settings is sufficient to ensure optimum learning and that client care is safeguarded.

3. Financial resources

3.1 There are sufficient financial resources to ensure that the program is viable and able to meet the designated program outcomes.
4. Physical resources

4.1 There are sufficient resources, including physical space, library and technical, to enable students to achieve the designated program outcomes.

4.2 Learning resources and technology that are used by the nursing education program (including those who utilize alternate methods of delivery) are comprehensive, current, and accessible to faculty and students.

IV. PROGRAM APPROVAL RATINGS

Each program assessed shall be rated in one of the following categories, with written rationale for the rating and the period of time for which the rating is granted.

**Preliminary Approval:** The rating given to a new program that shows evidence of the ability to meet the criteria for approval but that has not yet graduated students from the program or an established program seeking initial approval. A program receiving preliminary approval must undergo an assessment for full approval in the academic year following the first class of graduates. Graduates from a program who have received this rating will be considered graduates of an approved nursing education program for the purposes of registration/licensure. The nursing education program is responsible to ensure the graduates meet the current *Standards and Foundation Competencies for the Practice of Registered Nurses* at the date of graduation.

**Provisional Approval:** The rating given to a new program or an established program that is seeking initial approval, or an existing program that was previously approved and that only partially meets the criteria as identified. Provisional approval is granted for a designated time period. The SRNA Council makes recommendations to the program regarding the criteria that are not met or are only partially met. Graduates from a program that has received this rating may be required to upgrade before they are considered graduates of an approved nursing education program and eligible for registration/licensure.

**Approval Granted:** The rating given to a program that meets the criteria for approval. Following preliminary approval, approval may be granted up to seven years depending on the nature and significance of strengths and deficits identified in the review. Graduates from a nursing education program that has received this rating will be considered graduates of an approved nursing education program for the purposes of registration/licensure.
Approval Denied: The rating given to a program that does not meet the approval criteria. Graduates from a nursing education program that has received this rating will not be eligible for registration in Saskatchewan.

V. THE APPROVAL PROCESS FOR A NEW RN or RN RE-ENTRY PROGRAM

Notification of Intent to Establish a New Program

At least one year in advance of the proposed commencement date of a new program, the nursing education program shall provide written notification to the SRNA. The notification shall include a demonstration of the ability of the institution to meet the standards and criteria for nursing education program approval.

Self-assessment Report

At least eight months in advance of the proposed commencement date of the new program, the program shall submit a copy of the Self-assessment Report to the SRNA. The Self-assessment Report shall include the following:

- Purpose and goals of the new program:
  - Historical development
  - Rationale for program change/development
  - Financial and budgetary arrangements for the establishment of the nursing education program and for its continued operation
- Program intents
- Program descriptions including:
  - Length, admission requirements
  - Entry and exit points
  - Planned enrolment numbers
  - Collaborative partnership agreements (if relevant)
  - Proposed date of commencement
- Overview/blueprint of the proposed program curriculum and the ability of the nursing education program to meet the SRNA Standards and Criteria for Nursing Education Program Approval
- A description of strategies used to obtain systematic and ongoing evaluation
- Expected student numbers and nursing education program faculty required to ensure program intents are met:
  - Including faculty/student ratio in clinical settings
  - Including faculty selection process criteria
- Nursing education program committee structure:
• Nursing education program advisory committee
• Nursing education program evaluation committee
• Other committees

- Discussion regarding each standard/criteria are stated as specifically as possible, including projected dates and plans for addressing identified problems or deficiencies
- Conclusions reached and recommendations made throughout the report are summarized at the end of the report
- If aspects of the nursing education program are not completely developed at the time of the submission, the plans for development must be included

Review of Self-assessment Report

The Nursing Education Program Approval Committee and the Review Team shall review the Self-assessment Report independently. The nursing education program may be required to provide additional information upon request of either the Nursing Education Program Approval Committee and/or the Review Team.

Nursing Education Program Approval Committee Recommendation

The Nursing Education Program Approval Committee will review the Review Team’s report; the Self-assessment Report; and any additional documentation provided by the nursing education program to make a reasoned recommendation regarding the approval rating. A copy of the Nursing Education Program Approval Committee’s draft report will be forwarded to the nursing education program to afford the program an opportunity to respond to the tentative approval rating recommendation. The nursing education program may provide a response verbally, via e-mail, or may request a face to face meeting with the Nursing Education Program Approval Committee. The Nursing Education Program Approval Committee will forward its report to the SRNA Executive Director. The Executive Director shall make a recommendation to Council regarding the report of the Nursing Education Program Approval Committee. Council shall make a reasoned decision regarding the program approval rating.

Notification to Program

The Executive Director shall notify the nursing education program of the Council’s reasoned decision in writing regarding the program approval rating.
Council Review

In the event the program is not satisfied with Council’s decision regarding the program approval rating it may seek in writing, within 30 days, a review by Council. The program will be allowed to file further material for Council’s consideration. Council’s decision following a review regarding the program approval rating shall be final.

VI. THE APPROVAL PROCESS FOR AN ESTABLISHED RN or RN RE-ENTRY PROGRAM

Notification of Intent to Review Program

The Nursing Education Program Approval Committee shall notify, in writing, the dean of the nursing education program of the intent to review one year prior to the site visit.

Self-assessment Report

The program shall submit a copy of the Self-assessment Report to the SRNA two months prior to the scheduled site visit. The Self-assessment Report must include all SRNA Standards and Criteria for Nursing Education Program Approval. The Self-assessment Report template can be found in Appendix B.

Review of Self-assessment Report

The Nursing Education Program Approval Committee and the Review Team shall review the Self-assessment Report independently. The nursing education program may be required to provide additional information upon request of either the Nursing Education Program Approval Committee and/or the Review Team.

Site Visit

The nursing education program and the SRNA will work collaboratively to establish the dates of the site visit. The Review Team shall visit the nursing education program on-site(s) to clarify and validate data reported in the Self-assessment Report. At the end of the site visit, the Review Team will first provide a verbal report to the Nursing Education Program Approval Committee and then to the nursing education program. The Review Team shall provide a confidential report of their findings to the Nursing Education Program Approval Committee. The nursing education program shall be provided with a copy of the site visit report. The nursing education program is encouraged to provide feedback related to the factual content of the document.
Nursing Education Program Approval Committee Recommendation

The Nursing Education Program Approval Committee will review the Review Team’s report; the Self-assessment Report; and any additional documentation provided by the nursing education program to make a reasoned recommendation regarding the approval rating. A copy of the Nursing Education Program Approval Committee’s draft report will be forwarded to the nursing education program to afford the program an opportunity to respond to the tentative approval rating recommendation. The nursing education program may provide a response verbally, via e-mail, or may request a face to face meeting with the Nursing Education Program Approval Committee. The Nursing Education Program Approval Committee will forward its report to the Executive Director. The Executive Director shall make a recommendation to Council regarding the report of the Nursing Education Program Approval Committee. Council shall make a reasoned decision regarding the program approval rating.

Notification to Program

The Executive Director shall notify the Nursing Education Program of the Council’s reasoned decision in writing regarding the program approval rating.

Council Review

In the event the program is not satisfied with Council’s decision regarding the program approval rating it may seek in writing, within 30 days, a review by Council. The program will be allowed to file further material for Council’s consideration. Council’s decision following a review regarding the program approval rating shall be final.

VII. THE APPROVAL PROCESS FOR A SUBSTANTIVE CHANGE TO AN ESTABLISHED RN or RN RE-ENTRY PROGRAM

Definition of Substantive Change

Substantive change(s) may include, but are not limited to:

- Significant changes made to the length of the program.
- Significant changes made to the target student population.
- Significant changes made to the program resources.
- Significant changes made to the implementation of the program.
- Significant changes made to the curriculum.
• Any other changes deemed to make the program significantly different from the program that was originally granted approval.

If the nursing education program is unclear as to whether program changes are substantive, they should contact the SRNA Staff Resource.

Notification of Substantive Changes

If a nursing education program is planning substantive program change(s), the SRNA is to be informed of such planned changes, in writing, at least six months in advance of implementation. The Nursing Education Program Approval Committee will review the program change(s) against criteria specified above to determine if the magnitude of the change(s) necessitates the requirement of a change in the program’s approval status. If there is an unresolved dispute between the nursing education program and the Nursing Education Program Approval Committee as to whether a change is substantial, the matter shall be referred to the Executive Director for resolution.

Approval Process

A nursing education program implementing a substantive change will be required to undergo the approval process of an established program even if it has not yet reached its program approval deadline.

Appeal Process

In the event the program is not satisfied with the Executive Director’s decision that the program change is substantive and requires a change in program approval status, then the program has the right to appeal, in writing, a decision of the Executive Director to the Council within 30 days of the decision. Council’s decision shall be final.

VIII. THE APPROVAL PROCESS FOR A RN or RN RE-ENTRY PROGRAM BEING DISCONTINUED

Notification of Intent to Discontinue a Program

The nursing education program shall provide notification to the Nursing Education Program Approval Committee as to the expected date of discontinuation of the approved program as soon as this date has been determined. The program must provide rationale for its discontinuation and any transitional or new programming being planned.
Determination of Discontinuation Process

The Nursing Education Program Approval Committee, in collaboration with the nursing education program shall determine the process to be followed to assess the discontinuing program. The process shall ensure that there is due process and procedural fairness. If there is an unresolved dispute between the nursing education program and the Nursing Education Program Approval Committee with respect to the process to be followed, the matter shall be referred to the Executive Director for resolution.

Implementation of the Discontinuation Process

The nursing education program shall submit a written submission that will address how the transition from the old program to the new program will be accomplished or how the discontinuation of the program will be accomplished. The submission must address all of the SRNA Standards and Criteria for Nursing Education Program Approval. The submission must also include a clear plan that outlines how the needs of those students who do not complete the discontinued program will be addressed. Annual updates will be required to the end of the program when the last cohort of students graduate.

Appeal Process

If the program is dissatisfied with the decision of the Executive Director, the program has the right to appeal, in writing, a decision of the Executive Director to the Council within 30 days of the decision. Council’s decision shall be final.

IX. ANNUAL UPDATES

The purpose of the annual update is to provide updated, new or changed information since the previous submission to the Nursing Education Program Approval Committee. The SRNA reserves the right to initiate a review of the nursing education program at any time when the Committee, upon reviewing the annual report or other relevant information, has reason to believe that the program may not be meeting the standards for nursing education programs or there is evidence that the program’s ability to meet the current standards for nursing education is compromised due to substantive changes in the program (e.g. courses, clinical practice).
Information to be included in the annual update is as follows (See Appendix C):

1. Any significant changes, revisions, or other updates, including strategic initiatives for the program (in the immediate future) since the previous submission. This may include program and faculty achievements.

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

3. Description of the analysis of the program evaluation data (course evaluations, student and faculty feedback) as well as an identified plan regarding how the program intends to integrate this data into the future program development.

4. Description of challenges and opportunities for improvement in the content and/or ongoing delivery of the nursing education program that reflect current trends.

5. Description of challenges in meeting program objectives.

6. Impact of change on ability of graduates to meet SRNA standards and foundation competencies.

7. Any other information deemed relevant by the school of nursing.

All annual updates are to be submitted to the Nursing Education Program Approval Committee and are due June 1 of each year.

X. CONFLICT OF INTEREST & CONFIDENTIALITY

The current CNA Code of Ethics for Registered Nurses and the SRNA Council policies Code of Conduct and Conflict of Interest direct the conduct of the members of the Nursing Education Program Approval Committee and Council throughout the approval process. Each member of the Nursing Education Program Approval Committee will sign and abide by the code of conduct approved by Council.

All members of the Review Team must review the SRNA Code of Conduct and Conflict of Interest and sign the appropriate SRNA forms. All documents, correspondence and communications between the SRNA and the educational institutions will be treated with strict confidentiality by the Review Team.
The Nursing Education Approval Committee in consultation with the nursing education program shall examine any perceived potential or actual conflict of interests at the outset of each program review. This shall include the selection of members of the Review Team.

Members of the Review Team shall not request materials from the nursing education programs for their personal use at any time during the approval process nor use the opportunity of the site visit to sell personal consulting services.

As noted above, all information, documents, and correspondence regarding a program review shall be considered confidential. The decision of the Council to grant or deny approval shall be a matter of public record.

XI. ALTERNATE DISPUTE RESOLUTION PROCESS

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

- Selection of the date of the site visit;
- Selection of the Review Team;
- Clarification of factual information documented in the Review Team’s site visit report; and
- Nursing Education Program Approval Committee’s tentative approval rating recommendation.

At any point in the approval process if the nursing education program is not satisfied with a decision of the Nursing Education Program Approval Committee, the program may request a meeting with the Committee. At the discretion of the Nursing Education Program Approval Committee, the Executive Director may be asked to attend any such meeting in an attempt to accomplish low level resolution.

The Nursing Education Program Approval Committee will forward its report to the Executive Director. The Executive Director shall make a recommendation to Council regarding the report of the Nursing Education Program Approval Committee. The Executive Director will notify the educational institution in writing of the SRNA Council’s approval rating.

If the nursing education program is dissatisfied with the decision of the SRNA Council, the program may seek a review, in writing, to Council within 30 days of the decision. The nursing education program will be allowed to file further material for Council’s
consideration. Council’s decision following a review regarding the program approval rating or process to be followed shall be final.
REFERENCES


Nursing Education Program Approval Board. (2013). *Standards for Alberta nursing education programs leading to initial entry to practice as a registered nurse: Approval mechanism*. Edmonton, AB: Author.


Appendices
Appendix A
Glossary

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

Association: The term used to identify the Saskatchewan Registered Nurses' Association.

Attrition: The loss of students from an education program prior to graduation.

Bachelor (Baccalaureate) Degree: A program which is 120 credits, (or the equivalent). A program with a professional focus designed to prepare graduates to meet admission requirements and to be competent practitioners in the profession. The capacity for independent professional work is demonstrated by academic and practical exercises, under supervision, followed by admission tests to the profession (Association of Universities and Colleges of Canada, 2008).

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

Collaboration: Client care involving joint communication and decision-making processes among the client, RNs and other members of a health-care team who work together to use their individual and shared knowledge and skills to provide optimum client-centered care. The health-care team works with clients toward the achievement of identified health outcomes, while respecting the unique qualities and abilities of each member of the group or team.

Community: An organized group of persons bound together by ties of social, ethnic, cultural or occupational origin or geographic locations.

Competence: The overall display by a nurse, in the professional care of clients(s), the knowledge, skill, and judgment required in the practice situation. The nurse functions with care and regard for the welfare of the client and in the best interests of the public, nurses and nursing profession.
**Competency:** The demonstration, by a nurse, of knowledge, skill and judgment derived from the nursing roles and functions, within a specific context.

**Council:** The governing Council of the Saskatchewan Registered Nurses' Association as described in *The Registered Nurses Act, 1988.*

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

**Curriculum:** Provides learning experience necessary to achieve professional practice requirements. The planned process by which a nursing program achieves its intended outcomes. It includes philosophical foundations, intents, content, sequencing of learning experiences, and evaluation.

**Environment:** A mosaic composed of cultural, social, technological, psychological, political, economic, occupational, and physical influences. These interlocking but distinct environments each have their own impact or potential for impact on health.

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

**Interprofessional Collaboration:** A partnership between a team of health providers and a client in a participatory, collaborative and coordinated approach to shared decision-making around health and social issues.

**New Program:** This refers to a program being offered by a new institution and/or the implementation of a new curriculum.

**Nursing Education, Basic:** The initial education program by which an individual becomes eligible to write the registration examination for nursing.

**Nursing Faculty:** Registered nurse or registered psychiatric nurse faculty that have been hired by the nursing education program and teach nursing content. Nursing faculty does not encompass cross-appointments from other faculties and/or sessional/guest lecturers.

**Outcome:** The end result of goal directed activities.

**Preceptor:** An experienced registered nurse or registered psychiatric nurse (as appropriate to the clinical setting) who functions as a role model for a nursing student and provides transitional role support via a collaborative, collegial relationship. In
conjunction with a nursing faculty advisor, the preceptor is responsible for mentoring, supervising, and evaluating the nursing activities of a nursing student during the final clinical preceptorship.

**Preceptorship**: A teaching and learning method involving a formal, usually one-to-one, relationship between the preceptor and a nursing student. The learning occurs as the nursing student practices full time (as defined in the clinical facility) alongside the expert nurse. The preceptor assists the student to consolidate theory with the roles, functions and competencies of the graduate about to enter practice.

**Program**: The program is a patterned combination and sequence of courses in a variety of subjects. Some courses extend over one term or semester, some over two. A program covers a period of one or more, usually three or more years.

**Rating**: A status given to a nursing education program as a result of the approval process.

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

**Standard**: A desired and achievable level of performance against which actual performance can be compared. Standards for nursing practice reflect the philosophical values of the profession, clarify what the registered nursing profession expects of its members and inform the public of the minimal level of acceptable practice of registered nurses. These standards apply to every setting and provide a benchmark for the basic level of safe registered nursing practice across Saskatchewan. The standards state minimum levels below which performance is unacceptable.

**Supervision**: The active process of directing, assigning, delegating, guiding, and influencing the outcome of an individual’s performance of an activity. Supervision (adapted from American Nurses Association, 1997) is generally categorized as direct (being physically present or immediately available while the activity is being performed) such as in an acute care setting; or indirect (provision of direction through various means of written and verbal communications) such as in a community setting.
Appendix B
Self-assessment Report

The Self-assessment Report will address the SRNA Program Approval Standards and Criteria using the tool provided below.

**Standard 1: Program**

Program - The program has the appropriate internal structures and supports to ensure that students are capable of achieving the practice requirements as described in the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The program is equivalent to a four year post-secondary nursing baccalaureate program.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) A nursing re-entry program ensures that students meet the current <em>Standards and Foundation Competencies for the Practice of Registered Nurses</em> and the current CNA <em>Code of Ethics</em>.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Discussion:**

**Recommendation:**

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. There is an organizational structure that clearly demonstrates the lines of authority and relationships that are pertinent to the nursing education program, including those between collaborative partners</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
delivering the nursing education program, and the identification of any group(s) to whom the nursing education program is accountable to and whose decisions may impact the program.

Discussion:

Recommendation:

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. The nursing education program has met all requirements of the educational institution and is approved by the educational institution’s governance body.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Discussion:

Recommendation:

**Standard 2: Curriculum**

Curriculum - The curriculum provides learning experiences necessary to achieve professional practice requirements as described in the current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*. 
<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The philosophy of the nursing program and the conceptual framework guide the development and implementation of the curriculum.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Discussion:

Recommendation:

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. The standards and foundation competencies and the code of ethics for RNs are addressed throughout the curriculum.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Discussion:

Recommendation:

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>
| 3. The program curriculum and outcomes are responsive to and reflect current and emerging trends in:  
  a) Health and health promotion  
  b) Legal and ethical standards  
  c) Diversity of client populations  
  d) Evidence-informed nursing practice  
  e) Education and research  
  f) Interprofessional collaboration |     |               |         |
Discussion:

Recommendation:

Criteria:
4. The curriculum includes:
   a) An overall organizing framework, course sequencing, course descriptions, and course objectives.
   b) Diverse learning experiences that enable students to meet the course objectives, designated program outcomes, and standards and foundation competencies.
   c) Allocated classroom, laboratory, and clinical hours that enable students to meet the course objectives, designated program outcomes, and standards and foundation competencies.
   d) Courses and teaching and learning methods that are consistent with the educational program’s philosophy, conceptual framework, and designated program outcomes.
   e) A method for tracking and monitoring clinical hours and placements for each student to ensure that all students have clinical practice with clients across the life span in a variety of clinical settings.
      i. A method for tracking and monitoring clinical hours and placements for each student in a nursing re-entry program to ensure that all students have clinical practice such that they are

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>g) Client safety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h) Technology</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
able to meet the current Standards and Foundation Competencies for the Practice of Registered Nurses and the current CNA Code of Ethics.

f) Formative and summative evaluation processes are in place that includes students, faculty, and key stakeholders to ensure the ongoing development, maintenance, and enhancement of the curriculum.

Discussion:

Recommendation:

Standard 3: Students

Students - Students acquire and demonstrate professional practice requirements as described in the current Standards and Foundation Competencies for the Practice of Registered Nurses and the current CNA Code of Ethics.

Criteria:

| 1. Students learn about self-regulation and are made aware of the SRNA’s requirements for licensure. |
|---|---|---|
| Met | Partially Met | Not Met |

Discussion:

Recommendation:
### Criteria:

2. Policies and procedures for student selection, promotion, probation, failure, and appeal are clearly communicated to students, faculty, and stakeholders.

<table>
<thead>
<tr>
<th></th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>

**Discussion:**

**Recommendation:**

### Criteria:

3. Methods are in place to examine the relationship between admission criteria, student attrition, and student success. Based on this analysis, policies are developed and/or revised as required.

<table>
<thead>
<tr>
<th></th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>

**Discussion:**

**Recommendation:**

### Criteria:

4. Policies and procedures are in place for student placement into clinical settings:
   a) The student’s immunization status meets the requirements of the clinical facility.
   b) The student has a security clearance check that meets the requirements of the clinical facility.
   c) The student has appropriate current BCLS certification.

<table>
<thead>
<tr>
<th></th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>
5. Processes are in place to ensure that students receive timely formative and summative feedback from faculty regarding their theoretical and practical learning.

Discussion:

Recommendation:

Criteria:

<table>
<thead>
<tr>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>

6. Processes are in place to ensure that students are involved in the planning, implementation and evaluation of the program.

Discussion:

Recommendation:

Criteria:

<table>
<thead>
<tr>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>

Standard 4: Graduates

Graduates - Graduates achieve professional practice requirements as described in the current Standards and Foundation Competencies for the Practice of Registered Nurses and the current CNA Code of Ethics.
### Criteria:
1. Prior to graduation, evaluations provide evidence that students have met:
   a) The current *Standards and Foundation Competencies for the Practice of Registered Nurses* and the current CNA *Code of Ethics*.
   b) The course and designated program outcomes.

<table>
<thead>
<tr>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>

### Discussion:

### Recommendation:

### Criteria:
2. Trends in the graduate’s performance on the association approved registration examination are at or above the national average.

<table>
<thead>
<tr>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>

### Discussion:

### Recommendation:

### Criteria:
3. Feedback from graduates and employers provide evidence that graduates are meeting the standards and competencies for safe, competent and ethical practice in diverse contexts of practice.

<table>
<thead>
<tr>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
</table>

### Discussion:
Recommendation:

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Data is collected and analyzed on the graduate’s ability to meet requirements for licensure and standards and competencies in diverse context of practice.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Discussion:

Recommendation:

Standard 5: Resources

Resources - Students have access to resources and opportunities to acquire and demonstrate professional competency requirements and professional accountability.

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Faculty</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1 The faculty size and composition is sufficient to provide teaching and guidance in order to ensure student progress towards meeting the current Standards and Foundation Competencies for the Practice of Registered Nurses:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) There are approved policies and procedures in place for all full time and part time faculty related to:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Faculty selection including clinical expertise, teaching ability, research and scholarly activities.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
ii. Ongoing evaluation of teaching, scholarly activities, and clinical competence in the settings where nursing faculty supervise students.

iii. Professional development.

b) There are policies and procedures for faculty to provide input and feedback regarding the educational program’s ability to meet (a).

**Discussion:**

**Recommendation:**

**Criteria:**

1.2 The minimum faculty requirements shall include:

   a) A dean/director who has the authority and responsibility for decisions related to the curriculum and the nursing education program.

   b) Sufficient number of adequately prepared faculty to ensure:

      i. The development, implementation, and evaluation of the program.

      ii. That student learning is optimized.

      iii. That safe nursing care is provided to clients.

**Discussion:**

**Recommendation:**
### Criteria:

1.3 Nursing faculty possess the theoretical nursing knowledge and clinical expertise appropriate to their teaching responsibilities:

<table>
<thead>
<tr>
<th></th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) A dean/director of the education program who:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>i. Is a member of the SRNA;</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ii. Has a master’s degree, doctoral degree preferred; and</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>iii. Has a graduate or undergraduate degree in nursing.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Full time faculty who:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>i. Are members of the SRNA or RPNAS (as appropriate); and</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ii. Have a master’s degree (or evidence of working towards a master’s degree) with at least one degree, either graduate or undergraduate in nursing.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Part time faculty who:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>i. Are members of the SRNA or RPNAS (as appropriate); and</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ii. Have a baccalaureate degree in nursing, master’s preferred.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Nursing faculty must be involved as educators in the nursing content in the program.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) Students in clinical settings are supervised and/or preceptored by Registered Nurses and/or Registered Psychiatric Nurses as appropriate.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Discussion:

### Recommendation:
<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Clinical resources</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1 The nursing education program has current written agreements with</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>clinical agencies that specify expectations for all parties and ensure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>protection of the students and faculty.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discussion:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recommendation:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Criteria:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.2 Clinical learning activities and clinical placements provide</td>
<td>Met</td>
<td>Partially Met</td>
<td>Not Met</td>
</tr>
<tr>
<td>opportunities for students to meet the designated program outcomes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and meet the current *Standards and Foundation Competencies for the</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practice of Registered Nurses*:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) Student clinical experiences reflect current best practices.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) The allocation of a sufficient number of clinical hours across the</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>life span to allow graduates to achieve curriculum/program objectives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and the standards and competencies for Registered Nurses (e.g.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>medicine, surgery, pediatrics, obstetrics, mental health, geriatrics,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and community health).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Sufficient clinical hours and placements for each student in a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>nursing re-entry program to ensure that all students are able to</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>meet the current *Standards and Foundation Competencies for the</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practice of Registered Nurses* and the current CNA Code of Ethics.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) The allocation of clinical placements encompasses a variety of</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>nursing practice settings (acute, chronic, and community).</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
d) The allocation of a full time clinical preceptorship at the end of the program that consolidates theory and nursing practice.
e) The nursing faculty to student ratio in clinical settings is sufficient to ensure optimum learning and that client care is safe guarded.

Discussion:

Recommendation:

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Financial resources</td>
<td>3.1 There are sufficient financial resources to ensure that the program is viable and able to meet the designated program outcomes.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Discussion:

Recommendation:

<table>
<thead>
<tr>
<th>Criteria:</th>
<th>Met</th>
<th>Partially Met</th>
<th>Not Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Physical resources</td>
<td>4.1 There are sufficient resources, including physical space, library and technical, to enable students to achieve the designated program outcomes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.2 Learning resources and technology that are used by the nursing education program (including those who utilize alternate methods of</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
delivery) are comprehensive, current, and accessible to faculty and students.

Discussion:

Recommendation:
Appendix C
Nursing Education Program Annual Update

Date: ________________________________

Program: ________________________________

Person completing the annual update: ________________________________

Information to be included in the annual update is as follows:

1. Any significant changes, revisions, or other updates, including strategic initiatives for the program (in the immediate future) since the previous submission. This may include program and faculty achievements.

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

3. Description of the analysis of program evaluation data (course evaluations, student and faculty feedback) as well as an identified plan regarding how the program intends to integrate this data into the future program development.

4. Description of challenges and opportunities for improvement in the content and/or ongoing delivery of the nursing education program that reflect current trends.

5. Description of challenges in meeting program objectives.

6. Impact of change on ability of graduates to meet SRNA standards and foundation competencies.

7. Any other information deemed relevant by the school of nursing.

All annual updates are to be submitted to the Nursing Education Program Approval Committee and are due June 1 of each year.