

NURSES ASSOCIATION OF NEW BRUNSWICK

Approval of Continuing Nursing Education in New Brunswick

2006

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CONTINUING EDUCATION

Every nurse is accountable for providing quality nursing care. The body of knowledge that forms the basis of the values, principles, theories and practices of nursing changes constantly. It is, therefore, imperative that nurses acquire, maintain and continuously enhance their competence by updating and expanding nursing knowledge, skills, and attitudes in keeping with societal, scientific and technological changes and the changing role of the nurse as a member of the health care team.

Continuing education in nursing consists of planned, organized learning experiences which can either be self-directed or other-directed and undertaken following a basic nursing education program. Continuing education is a mechanism for nurses to advance their professional development and promote optimal health outcomes in their clients.

In keeping with the position of the Canadian Nurses Association, the Nurses Association of New Brunswick supports the voluntary involvement of nurses in continuing education in which they are free to choose appropriate learning activities based on their own experience, learning styles and nursing practice requirements. In this way, continuing nursing education will increase nurses' knowledge, assist nurses to meet professional goals and maintain nursing standards.

The responsibility for continuing education is shared among individual nurses, employers, professional nursing organizations, educational institutions and governments as they all share the common goal of quality care and public safety. Individual nurses have the primary responsibility for ensuring that their competencies are relevant and current on an ongoing basis. Professional nursing organizations have the responsibility to identify the competencies required by new graduates as well as promoting continuing nursing education. Nursing educators/institutions have the responsibility to prepare new graduates and to deliver nursing education programs in a flexible and accessible format.

The responsibility of the employer is to put mechanisms in place that foster professional practice. Employers can help nurses identify their learning needs, facilitate access to continuing education, and provide support for nurses in their pursuit of continuing education. Finally, governments have the responsibility to provide the funding necessary to develop entry level and continuing nursing education programs that are effective, appropriate, efficient and accessible. Communication and cooperation between the ministries of health and education are required to ensure that nursing education is responsive to current and future needs (Canadian Nurses Association, 1998).

July 1985

Revised May 1996

Reviewed and revised April 2002

Reference

Canadian Nurses Association (1998). *Educational support for competent nursing practice*.
Author: Ottawa, ON.

PURPOSE

The purposes of the approval process for Continuing Nursing Education programs are to assist:

- (1) sponsors in developing nursing educational programs which meet NANB Standards of Nursing Education;
- (2) nurses and employers in selecting quality educational programs;
- (3) nurses in receiving acknowledgement in other parts of Canada for courses taken in New Brunswick by establishing that courses meet Association standards.

Continuing Education is voluntary in New Brunswick and the approval of Continuing Nursing Education programs is also voluntary. The approval process is not intended to establish a means of quantifying continuing education into continuing education units (CEU's) for use in other jurisdictions.

This approval process applies only to Continuing Nursing Education programs of 140 hours in length or greater.

APPROVAL PROCESS

I. Responsibility for the Approval Process

- (a) The NANB Nursing Education Advisory Committee has the responsibility to act in an advisory capacity to the NANB Board of Directors in relation to criteria for short-term continuing education courses and the approval of short-term courses. The Board of Directors has the ultimate responsibility for the decisions recommended by the committee.
- (b) The Nursing Education Advisory Committee will establish a subcommittee as the mechanism for approving continuing nursing education programs. The tasks of the subcommittee are to:
 1. review continuing education programs submitted for approval using established policies and criteria;
 2. recommend to the Nursing Education Advisory Committee an approval status for each program reviewed;
 3. suggest changes in the criteria and policies to the Nursing Education Advisory Committee as necessary.

II. Membership of the Subcommittee on Approval of Continuing Education Programs

- (a) There will be three members on the subcommittee (none of whom serve on the course advisory committee):
 1. the Nursing Education Advisory Committee's chair will also chair the subcommittee (unless a conflict of interest exists).
 2. an educator with experience in adult education chosen by the Nursing Education Advisory Committee (may be from the committee).
 3. a clinical nursing expert appropriate to the program being reviewed.
- (b) The clinical nursing expert will change for each program being reviewed.
- (c) The NANB Staff Resource Person will act as secretary to the committee; and be an ex-officio member.

III. Approval Process

- (a) A letter of intent to submit a program for approval will be sent to NANB up to one year in advance. This will enable the subcommittee to select a clinical expert and prepare to meet as soon as the submission is ready.

It is suggested that early consultation with the Staff Resource Person may facilitate the general preparation of submissions.

- (b) To allow sufficient time for review of the program and in consideration of scheduled Board of Directors meetings, programs must be submitted at least 6 months in advance.
- (c) Sponsors are to send four copies of the submission to the NANB Staff Resource Person, including the name of the contact person.
- (d) The NANB Staff Resource Person will acknowledge receipt of the application. Materials submitted will be reviewed by the NANB Staff Resource Person, who may request further information before the subcommittee is called to meet.
- (e) At the request of the subcommittee, course developers may be asked to provide additional information and/or program clarification.

- (f) The programs are reviewed and approval status is assigned on the basis of the written application and verbal information from the sponsor.
- (g) Each program reviewed is assigned an **Approval Status** as follows:
 - 1. approval recommended, or
 - 2. approval deferred contingent upon the sponsors' acceptance of and action on recommendations for minor changes within a time frame, or
 - 3. approval not recommended because major revision is required.
- (h) A report of the program review with assigned approval status is given to the Nursing Education Advisory Committee. Recommendations concerning the approval status are made to the NANB Board.
- (i) Following the Board decision, a written report is sent to the person identified in the application as administratively responsible for the program. This written report includes the approval status that has been determined, a point by point appraisal of the program according to the standards, and recommendations that must be implemented for approval or suggestions for program revisions.
- (j) Sponsors may request interpretation, clarification, or elaboration of the report from the NANB Staff Resource Person.
- (k) If approval is granted by the NANB Board of Directors, it is for a maximum period of 3 years. If in the interim there is a major change in the program (e.g. change in objectives, content, clinical experiences) it is considered to be a new program and approval is sought in the usual way.
- (l) NANB reserves the right to reassess the program at any time during the 3-year period and may withdraw approval if the Board finds that criteria is not being met.
- (m) If approval is not granted by NANB Board of Directors, the sponsors of the program may take the following action:
 - 1. re-apply by submitting new information as recommended by the committee.
 - 2. appeal the decision to the NANB Board.

IV. Appeal process

Upon receipt of appeal notice, the NANB Board names an appeal panel within two weeks.

The appeal panel will be composed of three individuals: Two nurse educators, one of these being from administration; the third member will be an educator with a specialty in evaluation. This individual may be a nurse or non-nurse. The members of the appeal panel may not be a member of the Nursing Education Advisory Committee, a member of the agency appealing, or a member of the Board of Directors. All members must be acceptable to the agency requesting the appeal.

Representatives for the agency shall present a written rationale for the appeal and may meet with the appeal panel to answer questions and provide additional information.

The appeal panel rules within three months, either to uphold the original decision or to request the Board of Directors to reconsider its decision.

V. Publicity and Confidentiality

- (a) The approval status of a program which has been reviewed is considered by NANB to be public information to its members after the Board decision.
- (b) Approved programs may use the words "NANB Approved".

VI. Use of the Tool for Approval of Continuing Nursing Education

The NANB Standards for Nursing Education in New Brunswick (2005) identify standards related to: Curriculum, Program, Students and Graduates. The tool for Approval of Continuing Nursing Education in New Brunswick is based on these standards. The indicators listed for each standard assist course developers in planning a continuing education program and also serve as a guide in the NANB's approval process.

When a program is submitted to NANB for approval review, the course developers must respond to every indicator and submit additional information as requested for each standard.

The sub committee will review the program and provide feedback based on the stated indicators for each standard as listed in the tool.

TOOL FOR APPROVAL OF CONTINUING
NURSING EDUCATION

STANDARD I: CURRICULUM

The curriculum provides learning experiences across the life span necessary for students to achieve the competencies required for the entry-level nurse as defined by NANB. In a continuing Nursing Education Program, the competencies reflect those required in the particular practice setting.

Indicators	3	2	1	Documents Received	Follow Up During Visit
<p>1.1 The philosophy of the program is consistent with the philosophy of the affiliated agency, the NANB Position Statement on Continuing Education, and the affiliated specialty, ex. critical care nursing, operating room nursing.</p> <p>1.2 The program's objectives:</p> <ul style="list-style-type: none"> a) are determined from the stated purposes; b) are measurable and based on stated learning outcomes; c) are supported by adult learning principles; d) have a nursing focus; and e) have a clinical application <u>or</u> show evidence of clinical application. 					

3 = met

2 = partially met

1 = not met

STANDARD I: CURRICULUM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
1.3 The program is based on nursing conceptual frameworks.					
1.4 The program's format, content and learning activities:					
a) describe what will be taught, teaching methods, learning aids that will be used, the role of the learner, availability of instructors;					
b) are appropriate for the attainment of the program outcomes;					
c) progress in logical sequence;					
d) are developed from current nursing texts/ journals/nursing research;					
e) provide for concurrent nursing theory and clinical practice;					
f) are 140 hours in length or greater;					

3 = met

2 = partially met

1 = not met

STANDARD I: CURRICULUM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
g) provide clinical experiences to support theory; h) are supported with appropriate methods for adult education (equipment, audio- visuals, printed materials); i) assist participants to transfer learning to their own practice setting; and j) promote independent learning.					

3 = met

2 = partially met

1 = not met

Additional Information:

- a) A description of how nursing conceptual frameworks are incorporated into the program.
- b) A copy of the philosophy of the course sponsors and/or affiliated agency.
- c) A copy of the program's list of outcomes.
- d) A copy of the program's plan or outline.
- e) Illustrations of the total number of hours for theoretical teaching and clinical teaching. May also include self-directed learning, if applicable.

STANDARD II: PROGRAM

The program has sufficient fiscal, human, physical, clinical resources, facilities, services and policies to support students to achieve competencies required for the entry-level nurse as defined by NANB. In a Continuing Nursing Education program, the competencies reflect those required in the particular practice setting.

Indicators	3	2	1	Documents Received	Follow Up During Visit
2.1 The program: <ul style="list-style-type: none"> a) is based on identified needs from a needs assessment survey/tool and/or is requested by participant/employer/consumer; b) outlines potential impact on health care in your setting; c) assesses the availability of similar programs; d) if appropriate, describes relationship with other existing programs; and e) discusses potential for university credit. 					

3 = met

2 = partially met

1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
<p>2.2 Program Planners:</p> <p>Persons participating in needs assessment and course planning (i.e. program advisory committee) provide a range of expertise and perspective and may include:</p> <ul style="list-style-type: none"> \$ clinical expertise in the relevant field; \$ educational expertise; \$ prospective participants; \$ employers; and \$ university representatives. <p>2.3 There is provision in the budget for financial</p>					

3 = met
2 = partially met
1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
2.4 The Instructional Personnel: <ul style="list-style-type: none"> a) are knowledgeable, experienced, and competent in the relevant content area; b) are knowledgeable in program design or use appropriate consultation; c) have clinical experience in the practice settings to be used during the course; d) are registered and hold a practicing membership with NANB; e) are familiar with the course outcomes; f) are sufficient in number for the program to be implemented as planned (in classroom and clinical setting). 					

3 = met

2 = partially met

1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
2.5 Promotion and Publicity include: <ul style="list-style-type: none"> a) purpose(s) of the program; b) expected outcomes; c) contact hours (this includes hours of pre-reading, formal instruction, laboratory and clinical experience); d) other information necessary for registration and attendance (includes prerequisites, fee, dates and times of program, criteria for admission, location, where to apply); e) names and titles of primary resource persons; f) types of learning activities; g) minimum and maximum number of participants; 					

3 = met

2 = partially met

1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
<ul style="list-style-type: none"> h) information and accommodation, transportation, food service, if necessary; i) anticipated cost of the program and anticipated expenses to participants; j) proposed method of evaluation of the participants in the program. k) whether participant will receive a certificate upon completion of the program; l) whether program is approved for university credit; and m) relationship of program to CNA certification process. <p>2.6 Resources which include:</p> <ul style="list-style-type: none"> a) physical facilities for theory (e.g. administrative, classroom, laboratory, library, locker, etc.); 					

3 = met

2 = partially met

1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
<ul style="list-style-type: none"> b) clinical facilities which are accredited and with which there are written contracts related to the terms and conditions of having students in the area; c) audio-visual materials and equipment as identified in the plan of instructions; d) support services (e.g. clerical, technical), required for program implementation. <p>2.7 Records kept by the sponsors, which include:</p> <ul style="list-style-type: none"> a) name of the program; b) learning outcomes; c) the contact hours (theory and clinical); d) appropriate information about the learner's performance or participation (may include attendance), results of test, clinical practice, certificate awarded, reason for not completing the program); e) details of the consent and authorization for release of records information about participants. 					

3 = met

2 = partially met

1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
<p>2.8 The plan for evaluation of the program format, content and learning activities provides for:</p> <ul style="list-style-type: none"> a) changes in the program plan (if needed) while the program is being taught; b) assessment of the extent to which the program achieved its stated outcomes; c) regular review and updating of the program; d) ongoing assessment of need for the program; e) assessment of the effectiveness and appropriateness of learning technologies used. <p>2.9 The plan for evaluation of instructional personnel reflects the principles of adult learning and is based on:</p> <ul style="list-style-type: none"> a) use of principles of adult learning; b) teaching strategies used; c) organizational skills; 					

3 = met

2 = partially met

1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
<ul style="list-style-type: none"> d) ability to meet needs of participants in accomplishing program outcomes both theoretical and clinical; e) effective use of technology; and f) evidence of continued clinical expertise. 					
2.10 The conditions of premature termination of the					
2.11 The appeal process reflects fairness and logical sequence of appeal for participants who wish to appeal their failure in the program, and:					
<ul style="list-style-type: none"> a) describes the steps and time frames the participants must follow when making an appeal; b) describes the process of how the appeal is dealt with internally. 					

3 = met

2 = partially met

1 = not met

STANDARD II: PROGRAM					
Indicators	3	2	1	Documents Received	Follow Up During Visit
2.12 If there is a challenge component to the program, the mechanism is clearly stated.					

3 = met

2 = partially met

1 = not met

Additional Information:

- a) A copy of the needs assessment tool or survey.
- b) A list of persons involved in needs assessment and program planning, including advisory committee(s), their qualifications and/or relevant experience.
- c) A list of instructional personnel and their qualifications including recent relevant nursing education and clinical experience with dates.
- d) A copy of the publicity used, ex. announcement, ads, brochure, etc.
- e) A description of physical facilities, audiovisual materials and equipment.
- f) A copy of agreements/contracts used for clinical placement, if required.
- g) A copy of the service agreement contract participants must sign (if required)
- h) A description of the availability of records to participants and to sponsors of participants.
- i) A copy of the program's evaluation form for the participants.
- j) A copy of the instructional personnel evaluation form by the participants.
- k) A copy of the participants appeal process.
- l) Information (i.e. guidelines, info sheet, etc.) provide to preceptors.

STANDARD III: STUDENTS

Students meet admission criteria and during their participation in the Nursing Education Program, demonstrate progress towards achieving the competencies required for the entry-level nurse as defined by NANB. In a Continuing Nursing Education Program, the competencies reflect those required in the particular practice setting.

Indicators	3	2	1	Documents Received	Follow Up During Visit
<p>3.1 Participants are described in terms of education and experience or general professional role.</p> <p>3.2 Criteria for selection of participants:</p> <ul style="list-style-type: none"> i. is based on the stated purpose. ii. includes prerequisites <p>3.3 The evaluation of participants:</p> <ul style="list-style-type: none"> a) is based on achievement of learning outcomes; b) specifies requirements for completion of the program which are communicated to the participant at the beginning of the course; 					

3 = met

2 = partially met

1 = not met

STANDARD III: STUDENTS					
Indicators	3	2	1	Documents Received	Follow Up During Visit
c) ensures that participants are given formal feedback about their performance throughout and on completion of the program (formative and summative evaluation); and d) specifies evaluators involved (e.g. clinical and classroom instructors).					

3 = met

2 = partially met

1 = not met

Additional Information

- a) General statistics on past and present participants including number for enrollments, attrition, and completion.
- b) Criteria for the selection of participants.
- c) A copy of the participant clinical evaluation tool.

STANDARD IV: GRADUATES					
Graduates of the program are prepared to practice according to professional practice and ethical standards and have achieved the competencies required for the particular practice setting.					
Indicators	3	2	1	Documents Received	Follow Up During Visit
4.1 Evidence of graduate's satisfaction with competencies developed through the program.					
4.2 Evidence of employer's satisfaction with competencies demonstrated by program graduates.					

3 = met

2 = partially met

1 = not met

Additional Information:

- a) Copies of the evaluation tool used by the graduate and by the employer.