NESA Program Annual Course Reports

NESA Program Annual Course Report

This Annual Course Report requires course leads to report on NESA courses once per year, usually in **April** but sometimes earlier in the school year.

This survey will enable you to quickly and efficiently discuss and convey information required for:
 - Course reporting, for course level and stream level improvement,
 - Curriculum Coordinating Committee,
 - Program evaluation, and
 - NEPAB.

**TEACHING FACULTY:**

A Word version of the Annual Course Report form has been emailed to you with the unique link to the survey. As course lead, you can use this Word version to help your course team gather the required information.

**You will not be able to return to the survey to change your answers, so please begin the survey only when you have all of the required information (as identified in the document previously circulated).**

After consulting with your course team, please complete this online Annual Course Report survey for one course at a time.

**If you are course lead for more than one course during the year, you will be sent a separate unique link** for the Annual Course Report **for each course**.

**ACADEMIC ADVISORS:**

The information required is (1) the **number of students** who were in the following programs, by year: BN Regular 4-Year Program - Year 1, Year 2, Year 3, or Year 4; BNAD Program - Year 1 or Year 2 and (2) the **number of students** who withdrew, transferred, were unsuccessful, and graduated, by BN (4 year) cohort and BNAD cohort.

**Q2 For which school year are you reporting?**

* MAY-AUG 2017, SEPT-DEC 2017, JAN-APR 2018
* MAY-AUG 2018, SEPT-DEC 2018, JAN-APR 2019
* MAY-AUG 2019, SEPT-DEC 2019, JAN-APR 2020
* MAY-AUG 2020, SEPT-DEC 2012, JAN-APR 2021
* MAY-AUG 2021, SEPT-DEC 2021, JAN-APR 2022
* MAY-AUG 2022, SEPT-DEC 2022, JAN-APR 2023
* MAY-AUG 2023, SEPT-DEC 2023, JAN-APR 2024
* MAY-AUG 2024, SEPT-DEC 2024, JAN-APR 2025
* MAY-AUG 2025, SEPT-DEC 2025, JAN-APR 2026

**Q3 Through which site do NESA students take this course or have this experience? (For which site are you reporting?)**

* LC
* U of L

**Q4 If we have any questions about your responses, we would like to contact you for clarification. Please provide the best office or cell number and email at which to reach you.**

**Q5 Are you an Academic Advisor? (Is your name Sherry Hogeweide?)**

* No
* Yes, my name is Sherry Hogeweide! (**SKIP TO ACADEMIC ADVISING SECTION**)

**Q6 Are you reporting exclusively on SPHERE or simulation labs?**

* No
* Yes (**SKIP TO SIM LAB SECTION**)

**Q7 For which NESA course are you reporting in this survey?**

**REGULAR 4-YEAR PROGRAM:**

* **NSG 1155 -Concepts of Health: Individuals and Families** (formerly Concepts of Health II)
* **NSG 1163 - Introduction to Nursing Practice** (formerly Nursing Practice I)
* **NSG 1168 - Introduction to Nursing and Concepts of Health** (formerly NSG 1150 - Concepts of Health I)
* **NSG 1173 - Health and Physical Assessment** (formerly Nursing Practice II)
* **NSG 2254 - Maternity and Pediatric Nursing** (formerly HIH II)
* **NSG 2263 - Medical-Surgical Nursing Practice** (formerly Nursing Practice III)
* **NSG 2268** / 2250 - **Disruptions in Health I** (formerly HIH I)
* **NSG 2279 - Nursing Issues and Health Care in Canada** (formerly Pro Sem I)
* **NSG 2290 - Pharmacology and Applied Therapeutics** (formerly Applied Therapeutics)
* **NSG 2293 - Maternity and Pediatric Nursing Practice** (formerly Nursing Practice IV)
* **NURS 3020 - Community Health** (formerly HIH III)
* **NURS 3125 - Mental Health Nursing** (formerly HIH IV)
* **NURS 3135 - Leadership in Nursing** (formerly Pro Sem II)
* **NURS 3230 - Disruptions in Health II** (formerly HIH V)
* **NURS 3360 - Research in Nursing** (formerly Research Methodologies)
* **NURS 4135 - Global Health Issues and Trends** (formerly Pro Sem III)
* **NURS 4510 - Mental Health Nursing Practice**
* **NURS 4520 - Community Health Nursing Practice**
* **NURS 4530 - Rural Acute Nursing Practice**
* **NURS 4750 - Senior Preceptorship**
* Other (51) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**BNAD SPECIFIC:**

* **NSG 1181 (BNAD) - Nursing Concepts: Individuals and Families** (formerly Introduction to Nursing)
* **NSG 1182 (BNAD) - Intro to Nursing: Assessment and Practice** (formerly Health Assessment)
* **NURS 2254 (BNAD) - Maternity and Pediatric Nursing** (formerly NURS 2125 HIH II)
* **NSG 2268 (BNAD) - Disruptions in Health** (formerly HIH I)
* **NURS 2269 (BNAD) - Rural Nursing Practice** (formerly NURS 2150 HIH III)
* **NSG 2290 - Pharmacology and Applied Therapeutics** (formerly Applied Therapeutics)
* **NURS 2293 (BNAD) - Maternity and Pediatric Nursing Practice** (formerly NURS 2255 - Nursing Practice IV)
* **NURS 4511 (BNAD) - Mental Health Nursing Practice** (formerly Nursing Practice V)
* **NURS 4531 (BNAD) - Medical-Surgical Practice**
* Other (51) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q8 Course Statistics**

**Q9 Please select the type of course this is:**

* Primarily or entirely **theory**
* Primarily or entirely **practice**
	+ A **mix** of theory **and** practice

**Q10 Please indicate from which NESA BN Program you have students in this course:**

* Students Enrolled in the **Regular BN Program**
* Students Enrolled in the **BNAD Program**
* Students Enrolled in **Both** Regular BN **and** BNAD Program

**Q11** Please indicate the total **enrollment in this course** and the **number of sections** for each semester this course was taught this past year. Please note that the textbox will only accept numbers.

|  |  |  |
| --- | --- | --- |
| **#** | **DETAIL** | **SEMESTER** |
|  | Total # Enrolled in Course | May – Aug. |
|  | # Course Sections |
|  | Total # Enrolled in Course | Sept. – Dec. |
|  | # Course Sections |
|  | Total # Enrolled in Course | Jan. – Apr. |
|  | # Course Sections |

**Q12 For Courses: Please list the names of the instructors who taught this course over the past year. In each box, please type one instructor's name (e.g. Jane Smith).**

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR THEORY AND CLINICAL COURSES:**

**Q13 How many students were on enhancement plans this year in this course?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q14 Across all sections of this course, how many students were unsuccessful in this course this year?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q15 Across all sections of this course, how many students withdrew from this course this year?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q16 As a course team, did you discuss and compare your grade distributions or pass/fail statistics over all sections to facilitate consistency between sections?**

* Yes
* No

**Q17 Which NESA Program text(s) are required in this course?** Please select all that apply.

* Ackley, Ladwig, Makic.  **Nursing Diagnosis Handbook: An Evidence-based Guide to Planning Care.** Elsevier.
* Alfaro-LeFevre. **Applying Nursing Process: The Foundation for Clinical Reasoning**. Lippincott Williams & Wilkins.
* American Psychological Association. **Publication Manual of the American Psychological Association.** American Psychological Association.
* Canadian Nurses Association. **Code of Ethics for Registered Nurses** .
* Chow et al. **Canadian Maternity and Pediatric Nursing.**  Lippincott Williams & Wilkins.
* + *PrepU for Chow, Ateah, Scott, Ricci, Kyle - Canadian Maternity and Pediatric Nursing*
* College and Association of Registered Nurses of Alberta. **Practice Standards for Regulated Members.**
* Craig. **Clinical Calculations Made Easy: Solving Problems using Dimensional Analysis**. Lippincott William & Wilkins.
* Gregory et al. **Fundamentals: Perspectives on the Art and Science of Canadian Nursing.**
* Grossman & Valiga. **The New Leadership Challenge.**
* Halter. **Varcarolis's Canadian Psychiatric Mental Health Nursing**. Canadian Ed. Elsevier.
* Karch. **Focus on Nursing Pharmacology**. Lippincott Williams & Wilkins.
* + *PrepU for Karch - Focus on Nursing Pharmacology*
* Loiselle & Profetto-McGrath. **Polit and Beck Canadian Essentials of Nursing Research**. Wolters Kluwer.
* Pagana & Pagana. **Mosby's Canadian Manual of Diagnostic and Laboratory Tests**. Elsevier. (25)
* Paul, Day, & Williams. **Brunner & Suddarth's Canadian Textbook of Medical-Surgical Nursing**. Wolters Kluwer.
* + *PrepU for Paul, Day & Williams - Brunner and Suddarth's Medical-Surgical Nursing*
* Perry, Potter, & Ostendorf. **Clinical Nursing Skills and Techniques**. Elsevier.
* Potter, Perry, Stockert, et al. **Canadian Fundamentals of Nursing**. Elsevier.
* Stanhope & Lancaster. **Community Health Nursing in Canada**.
* Stephen, Skillen, Day, & Jensen. **Canadian Jensen's Nursing Health Assessment: A Best Practice Approach.** Lippincott Williams & Wilkins.
* Stephen, Skillen, Day, & Jensen. ***Laboratory Manual* for Canadian Jensen's Nursing Health Assessment: A Best Practice Approach.**  Lippincott Williams & Wilkins.
* Vallerand, Sanoski, & Deglin. **Davis's Canadian Drug Guide for Nurses**. F. A. Davis Company.
* Willis. **Fluids & Electrolytes Made Incredibly Easy!**. Wolters Kluwer.

**Q18 What other documents (not textbooks) do you use in this course? Please select all that apply.**

* Best Practice Guidelines
* Competency Framework (CARNA, i.e. ETPCs)
* Competency Framework (Specialty Area)
* Scholarly Literature (Individual Journal Articles, CoursePack of Articles)
* Social Determinants of Health, by Mikkonen and Raphael
* Standards of Practice (CARNA)
* Standards of Practice (Specialty Area)
* CoursePack
* Medical Dictionary

**Q19 If necessary, please record any other required textbooks for this course that we missed in the previous lists. We do not need complete details: only the author and title/topic. e.g. "Potter and Perry Fundamentals" or "Jensen's Lab Manual**."

Text 1:

Text 2:

Text 3:

Text 4:

Text 5:

**Q20 What instructional strategies were used in this course? (Please select all that apply.)**

* Alternate Experience (e.g. Shift on another unit)
* Audience response system (e.g. i>clicker)
* Case studies or case discussions
* Concept mapping
* Discussions: Class
* Discussions: Online (e.g. in Moodle)
* Discussions: Small group
* Educational games (digital, online, or board)
* Guest speakers
* Learning plans
* Lecture or other didactic methods
* Nursing care plans
* Off-site activities (such as community tours, museum visits, etc.)
* Orientation to clinical course
* Orientation to clinical site and/or lab
* Patient assignment
* Patient follow-through
* Post-conference and/or debriefing
* Reflective journaling
* Role playing activities
* Shadowing: Interprofessional
* Shadowing: RN
* Simulation
* Skills lab
* Standardized patients (with drama students)
* Student presentations
* Videos
* Worksheets
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q21 What assessments were used in this course (items that contribute to student grade i.e. summative assessments)? (Please select all that apply.)**

* Academic papers (including all scholarly papers, annotated bibliographies, etc.)
* Audience response system (e.g. iClicker)
* Case studies
* Clinical resource development
* Concept map
* Creative assignment
* Discussions: Facilitated
* Discussion: Online (i.e. within Moodle)
* Learning plan
* Participation
* Peer assessment
* Portfolio
* Reflective journal
* Simulation
* Student presentations
* Tests: **Quizzes** which test material from no more than 1 class
* Tests: **Tests** which test material from more than 1 class
* Tests: **Exams** which are cumulative (e.g. midterm or final)
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q22 For scholarly papers in this course, how many pages (double spaced) are required?** (If more than one paper is assigned in this course, please input the number of required pages from the more demanding [longer] paper.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q23 What percentage of the overall course grade (in this course only) is derived from/depends on group work? (i.e. a group grade, as opposed to a grade an individual earns by themselves)**

* None
* 5%
* 10%
* 15%
* 20%
* 25%
* 30%
* 35%
* 40%
* 45%
* 50%
* 55%
* 60%
* 65%
* 70%
* 75%
* 80%
* 85%
* 90%
* 95%
* 100%

**Q24 What percentage of the overall course grade (in this course only) is derived from attendance and/or participation? (i.e. a mark that does not relate to performance but contributes to an attendance or participation grade)**

* None
* 5%
* 10%
* 15%
* 20%
* 25%
* 30%
* 35%
* 40%
* 45%
* 50%
* 55%
* 60%
* 65%
* 70%
* 75%
* 80%
* 85%
* 90%
* 95%
* 100%

**Q25 How many types of assignments and/or assessments does this course require of students (per semester)?**
For example:

* If a theory course has only **5 in-class quizzes**, this counts as **1 type** of assignment/assessment.
* If a theory course has **1 paper** (with **2** submitted **drafts**), **2 tests**, and **1 case study**, this counts as **3 types** of assignments.
* If a clinical course has **1 learning plan** and **6 journals**, this counts as **2 types** of assignments.
* If a clinical expectation is for the student to **complete the clinical evaluation tool**, this is **not** considered an assignment.
* None
* 1 type
* 2 types
* 3 types
* 4 types
* 5 types
* 6 types
* 7 types
* 8 types
* 9 types
* 10 types
* 11 types
* 12 types
* 13 types
* 14 types
* 15 types
* 16 types
* 17 types
* 18 types
* 19 types
* 20 types
* 21 types
* 22 types
* 23 types
* 24 types
* 25 types

**Q26 How many actual submissions of assignments and/or assessments does this course require of students (per semester)?**
For example

* If a theory course has **5 in-class quizzes**, this counts as **5 actual submissions** of an assignment/assessment.
* If a theory course has **1 paper** (with **2** submitted **drafts** and **1 final** version), **2 tests**, and **1 case study**, this counts as **6 actual submissions** of an assignment/assessment.
* If a theory course has **12 weekly quizzes** in class, **1 major assignment**, and **2 graded sim lab sessions**, this counts as **15 actual submissions** of an assignment/assessment. If a clinical course has **2 journals**, 1 learning plan (**1 draft** and **1 final version**), and 2 clinical evaluations (midterm and final), this counts as **4 actual submissions** of an assignment.
* None
* 1 submission
* 2 submissions
* 3 submissions
* 4 submissions
* 5 submissions
* 6 submissions
* 7 submissions
* 8 submissions
* 9 submissions
* 10 submissions
* 11 submissions
* 12 submissions
* 13 submissions
* 14 submissions
* 15 submissions
* 16 submissions
* 17 submissions
* 18 submissions
* 19 submissions
* 20 submissions
* 21 submissions
* 22 submissions
* 23 submissions
* 24 submissions
* 25 submissions

**27. Quizzes, Tests and Exams. Please indicate the number of quizzes, tests, and exams in this course. Please note the following definitions.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **QUIZ** | **TEST** | **EXAM** |
| **LENGTH** | Short | Medium | Long |
| **TIME REQUIRED** | Minutes | +/- 1 Hour | Hours (e.g. 3 hours) |
| **IMPACT ON COURSE GRADE** | Little (or none) | Considerable | Substantial (e.g. 30-40%) |
| **FREQUENCY** | Several through a content unit | At the end of a content unit | Summative (i.e. midterm, final) |
| **CONTENT** | Parts of a unit; no more than one class | All of a unit; series of chapters; >1 class | Cumulative |
| **LEVEL OF FORMALITY** | Low (informal) | Medium High (formal) | High (formal; high stakes) |
| **# OF QUESTIONS** | 8-10 | 40-50 | Can be >100; depends on the types of questions |

|  |  |
| --- | --- |
| **ASSESSMENT** | **#** |
| Quizzes (closed book) |  |
| Tests (closed book) |  |
| Exams (closed book) |  |
| Prep U |  |
| HESI |  |
| Other CAT  |  |

**FOR CLINICAL OR MIXED CLINICAL/THEORY COURSES**

**Q28 How many submissions does the clinical component of the course require of students (per semester)?**

 \_\_\_\_\_\_\_ Reflective Journals

 \_\_\_\_\_\_\_ Learning Plans

 \_\_\_\_\_\_\_ Nursing Care Plans

 \_\_\_\_\_\_\_ Practice Evaluation Tool Completion by Student

 \_\_\_\_\_\_\_ Other (Please specify briefly)

**FOR ALL THEORY, CLINICAL, MIXED COURSES AND SIMULATION**

**Q29 Course Evaluation by Students**

**Q30 How was student feedback gathered about this course or experience? (Please select all that apply.)**

* End-of-course evaluations of instructors by students
* Informal feedback from students during the semester
* Formal feedback opportunities during the semester (such as midterm feedback on the course)
* Frequent structured mini-evaluation opportunities (end-of-session/class evaluation, one-minute memos, ticket out the door, etc.)
* Feedback tools specific to a site, experience or orientation
* Feedback from other nursing instructors
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Student feedback was not gathered

**Q31 Please identify how students perceived the following aspects of this course. (This is a NEPAB requirement. It is expected that there will be some aspects of the course "requiring improvement" and with which students are dissatisfied.)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item**  | Not Applicable | Very Dissatisfied | Dissatisfied | Neutral | Satisfied | Very Satisfied |
| **Assignments**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Class Environment (THEORY ONLY)**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Clinical Experience (CLINICAL ONLY)**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Content**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Objectives**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Text(s)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Grading**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Group Work**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Instructional Activities**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Lab or Simulation**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Orientation (CLINICAL ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Quizzes (CLASS ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Tests or Exams (THEORY ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |

**Q32 Please expand on key identified areas:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**FOR ALL THEORY, CLINICAL, AND MIXED COURSES (NOT SIMULATION OR SKILLS)**

**Q33 Stakeholder Input and Feedback**

**Q34 How was stakeholder input and/or feedback collected for this course this past year? (Please select all that apply.)
(The term 'stakeholder' can refer to registered nurses, managers, members of the health care team or the community.)**

* We consulted with the clinical liaison committee
* We discussed the course with our colleagues in the NESA Program
* We consulted formally with stakeholder(s) in developing course content / patient assignment
* We discussed the program, course, or clinical experience informally with stakeholder(s)
* We discussed the students' progress and/or graduates' preparedness to practice with a unit manager or employer or other stakeholder
* We are engaged in external committee membership with agency colleagues
* We gathered information informally through anecdotal and hallway conversations
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not get stakeholder feedback

Q35 **Please identify how stakeholders perceived the following aspects of this course. (This is a NEPAB requirement. It is expected that there will be some aspects of the course "requiring improvement" and with which stakeholders are dissatisfied.)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item**  | Not Applicable | Very Dissatisfied  | Dissatisfied | Neutral | Satisfied | Very Satisfied |
| **Assignments**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Class Environment (THEORY ONLY)**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Clinical Experience (CLINICAL ONLY)**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Content**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Objectives**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Text(s)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Grading**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Group Work**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Instructional Activities**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Lab or Simulation**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Orientation (CLINICAL ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Quizzes (THEORY ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Tests or Exams (THEORY ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |

**Q36 Please expand on key identified areas:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**POSITVE FEEDBACK:**

**CONSTRUCTIVE/NEGATIVE FEEDBACK:**

**FOR CLINICAL OR MIXED CLINICAL/THEORY COURSES**

**Q37 As a clinical instructor, I met with the unit/agency manager as follows:**

* As part of the required unit orientation and meeting with the manager
* 1-3 meetings throughout the clinical experience
* 4-6 meetings throughout the clinical experience
* 7 or more meetings throughout the clinical experience
* On an "as needed" basis only

**Q38 Overall, stakeholders perceived that students and/or graduates are functioning at the appropriate level of practice preparedness and/or are making progress towards Entry-To-Practice Competencies (ETPCs).**

* N/A or unable to answer
* Far short of expectations
* Short of expectations
* Meets expectations
* Exceeds expectations
* Far exceeds expectations

**Q39 Briefly describe the nature of the feedback you received from stakeholders (such as managers, agency staff, patients, etc.) (Please be aware that any text you enter that goes beyond the textbox will not be saved, so be brief!)**

Positive feedback \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Negative or constructive feedback \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR ALL THEORY, CLINICAL, MIXED COURSES AND SIMULATION/SKILLS LAB**

**Q41 Faculty Feedback**

**Q42 How many times each semester did the teaching team for this course meet to discuss course operations and/or issues?**

* N/A
* As needed only
* Once only
* 2-3 times per semester (at key times in the semester, such as beginning, midterm and end of semester)
* 4-6 times per semester
* 7-10 times per semester
* Weekly

**Q43 Please identify how the teaching team perceived the following aspects of this course. (This is a NEPAB requirement. It is expected that there will be some aspects of the course "requiring improvement" and with which team is dissatisfied.)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item**  | Not Applicable | Very Dissatisfied  | Dissatisfied | Neutral | Satisfied | Very Satisfied |
| **Assignments**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Class Environment (THEORY ONLY)**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Clinical Experience (CLINICAL ONLY)**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Content**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Objectives**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Course Text(s)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Grading**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Group Work**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Instructional Activities**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Lab or Simulation**  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Orientation (CLINICAL ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Quizzes (THEORY ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| **Tests or Exams (THEORY ONLY)** | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |

**Q44 Please expand on key identified areas:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Q45 How is content and process determined for this course or experience? (Please select all that apply.)**

* + Through course team meetings and discussions with colleagues
	+ Information gathered from practice areas
	+ Information gathered from scholarly evidence
	+ Information gathered from other Schools of Nursing
	+ Community experts, nursing practice documents, standards of practice,or practice partners were consulted in the development of the course, its content and/or processes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ Nursing student input
	+ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q46 NESA Program Goals**

**To what degree are you satisfied that this course is effectively moving students towards meeting the Goals of the NESA Graduate (Designated Program Outcomes) and other educational goals? Please evaluate each of the following statements:
 Over the past year, this course:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **N/A** | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly Agree** |
| ...enhanced students’ ability to employ critical thinking and clinical reasoning in nursing practice.  |  |  |  |  |  |  |
| ...fostered students’ development as a reflective practitioner and lifelong learner.  |  |  |  |  |  |  |
| ...furthered students' ability to provide comprehensive and compassionate care.  |  |  |  |  |  |  |
| ...prepared students to communicate effectively and develop therapeutic relationships.  |  |  |  |  |  |  |
| ...enabled students to use a variety of technology and information systems and sources to gather evidence.  |  |  |  |  |  |  |
| ...enabled students to incorporate understanding of cultural, social, and health issues in the provision of care.  |  |  |  |  |  |  |
| ...increased students’ ability to demonstrate leadership and professionalism in nursing practice.  |  |  |  |  |  |  |
| ...fostered students' ability to practice safe, competent, and ethical nursing care.  |  |  |  |  |  |  |
| ...fostered students' ability to work in collaboration with multidisciplinary team members.  |  |  |  |  |  |  |
| ...fostered students' confidence about practicing in the clinical setting.  |  |  |  |  |  |  |
| ...increased students' preparedness for the nursing licensure exam.  |  |  |  |  |  |  |

**Q48 In response to STUDENT, FACULTY, and STAKEHOLDER feedback, what is going to be changed in this course/experience?**

|  |  |  |
| --- | --- | --- |
| **Item**  | **Keep the Same** | **Change** |
| **Assignments**  |  |  |
| **Class Environment (CLASS ONLY)**  |  |  |
| **Clinical Experience (CLINICAL ONLY)**  |  |  |
| **Course Content**  |  |  |
| **Course Objectives**  |  |  |
| **Course Text(s)** |  |  |
| **Grading**  |  |  |
| **Group Work**  |  |  |
| **Instructional Activities**  |  |  |
| **Lab or Simulation**  |  |  |
| **Orientation (CLINICAL ONLY)** |  |  |
| **Quizzes (CLASS ONLY)** |  |  |
| **Tests or Exams (CLASS ONLY)** |  |  |

**Q49 Please briefly describe the changes in the space below.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Q50 Please indicate the expected date of completion for the changes indicated above: *(Please enter date in the prescribed format of M/D/Y, e.g. 7/31/2013)***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51 Were the changes suggested in the previous course report for this course implemented successfully?**

* Yes
* No (please **briefly** indicate reason, if required)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IF YOU HAD BNAD STUDENTS**

**Q52 How would you describe the differences between regular stream BN students and BN-AD students?** (Items in this question are based on the Learning and Study Strategies Inventory [LASSI] and the Ascent to Competence Scale [Levett-Jones].) Please comment on **BN-AD students' overall performance** (on average) in relation to regular stream BN students regarding the following characteristics.

|  | ***Don't Know*** or ***N/A*** | **Much Weaker**  than 4-year BN Cohort | **Weaker**  than 4-year BN Cohort | **No Difference** | **Stronger**  than 4-year BN Cohort | **Much Stronger** than 4-year BN Cohort |
| --- | --- | --- | --- | --- | --- | --- |
| Information processing abilities and clinical reasoning  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| Abilities to select main ideas and salient information  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| (THEORY) Test and assignment performance  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| (THEORY) Ability to cope with classroom learning or workload  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| Motivation to learn  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| Self-directed behaviours  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| Time management  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| (THEORY) Ability to use scholarly literature  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| (CLINICAL) Ability to cope regarding clinical performance  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| (CLINICAL) Feelings of positive self-concept, confidence and professional self-worth  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| Identification as a member of the nursing profession  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| (CLINICAL) Ability to feel like an integral member of the nursing team in the practice setting  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |
| (CLINICAL) Progression towards entry-level competence in the practice setting  | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 | 🔾 |

**ALL COURSES THAT HAVE A SYLLABUS/COURSE OUTLINE**

**Q53 Please append the most recent course outline you used this past year for this course, for NESA records.**

**THEORY COURSES OR MIXED THEORY/CLINICAL COURSES[[1]](#footnote-1)**

**Q54 Mapping Courses to Entry-to-Practice Competencies**
Please select each entry-to-practice competency that is addressed **in the course for which you are reporting in this survey.**

**IMPORTANT**: You **do not** need to map this course to ETPCs **unless**:

* It has been more than 2 years since you mapped the ETPCs to this course; or
* This course has substantially changed over the last 2 years.

If mapping is **not required**, just indicate “NOPE” and skip any questions about mapping ETPCs.

**PLEASE NOTE: No single course will address ALL of these competencies; rather, it is all the courses combined that enable us to address all of the competencies through the NESA Program.**

**Q55 PLEASE SELECT ONLY THOSE COMPETENCIES THAT THIS COURSE ADDRESSES.**

| **COMPETENCY** | **✓** |
| --- | --- |
| 1. Represents self by first and last name and professional designation (protected title) to clients and the health care team.  |  |
| 2. Is accountable and accepts responsibility for own actions and decisions.  |  |
| 3. Recognizes individual competence within legislated scope of practice and seeks support and assistance as necessary.  |  |
| 4. Articulates the role and responsibilities of a registered nurse as a member of the nursing and health care team.  |  |
| 5. Demonstrates a professional presence and models professional behaviour.  |  |
| 6. Demonstrates leadership in client care by promoting healthy and culturally safe practice environments.  |  |
| 7. Displays initiative, a beginning confidence, self-awareness, and encourages collaborative interactions within the health care team.  |  |
| 8. Demonstrates critical inquiry in relation to new knowledge and technologies that change, enhance, or support nursing practice.  |  |
| 9. Exercises professional judgment when using agency policies and procedures, or when practising in the absence of agency policies and procedures.  |  |
| 10. Organizes own workload and develops time management skills for meeting responsibilities.  |  |
| 11. Demonstrates responsibility in completing assigned work and communicates about work completed and not completed.  |  |
| 12. Uses conflict resolution strategies to achieve healthier interpersonal interactions.  |  |
| 13. Questions unclear orders, decisions, or actions inconsistent with client outcomes, best practices, and health safety standards.  |  |
| 14. Protects clients through recognizing and reporting near misses and errors (the RN’s own and others) and takes action to stop and minimize harm arising from adverse events.  |  |
| 15. Takes action on recognized unsafe health care practices and workplace safety risks to clients and staff.  |  |
| 16. Seeks out and critiques nursing and health-related research reports.  |  |
| 17. Integrates quality improvement principles and activities into nursing practice.  |  |
| 18. Has a knowledge base about the contribution of registered nurse practice to the achievement of positive client health outcomes.  |  |
| 19. Has a knowledge base from nursing and other disciplines concerning current and emerging health care issues and trends (e.g., the health care needs of older adults, vulnerable and/or marginalized populations, health promotion, obesity, pain prevention and pain management, end-of-life care, problematic substance use, and mental health).  |  |
| 20. Has a knowledge base about human growth and development, and population health, including the determinants of health.  |  |
| 21. Has a knowledge base in the health sciences, including anatomy, physiology, pathophysiology, psychopathology, pharmacology, microbiology, epidemiology, genetics, immunology, and nutrition.  |  |
| 22. Has a knowledge base in nursing sciences, social sciences, humanities, and health-related research (e.g., culture, power relations, spirituality, philosophical, and ethical reasoning).  |  |
| 23. Has a knowledge base about workplace health and safety, including ergonomics, safe work practices, prevention and management of disruptive behaviour, including horizontal violence, aggressive, or violent behaviour.  |  |
| 24. Has theoretical and practical knowledge of relational practice and understands that relational practice is the foundation for all nursing practice.  |  |
| 25. Has knowledge about emerging community and global health issues, population health issues and research (e.g., pandemic, mass immunizations, emergency/disaster planning, and food and water safety).  |  |
| 26. Knows how to find evidence to support the provision of safe, competent, compassionate, and ethical nursing care, and to ensure the personal safety and safety of other health care workers.  |  |
| 27. Understands the role of primary health care and the determinants of health in health delivery systems and its significance for population health.  |  |
| 28. Understands nursing informatics and other information and communication technologies used in health care.  |  |
| 29. Uses appropriate assessment tools and techniques in consultation with clients and the health care team.  |  |
| 30. Engages clients in an assessment of the following: physical, emotional, spiritual, cultural, cognitive, developmental, environmental, and social needs.  |  |
| 31. Collects information on client status using assessment skills of observation, interview, history taking, interpretation of laboratory data, mental health assessment, and physical assessment, including inspection, palpation, auscultation, and percussion.  |  |
| 32. Uses information and communication technologies to support information synthesis.  |  |
| 33. Uses anticipatory planning to guide an ongoing assessment of client health status and health care needs (e.g., prenatal/postnatal, adolescents, older adults, and reaction to changes in health status and/or diagnosis).  |  |
| 34. Analyzes and interprets data obtained in client assessments to draw conclusions about client health status.  |  |
| 35. Incorporates knowledge of the origins of the health disparities and inequities of Aboriginal Peoples and the contributions of nursing practice to achieve positive health outcomes for Aboriginal Peoples.  |  |
| 36. Incorporates knowledge of the health disparities and inequities of vulnerable populations (e.g., sexual orientation, persons with disabilities, ethnic minorities, poor, homeless, racial minorities, language minorities) and the contributions of nursing practice to achieve positive health outcomes.  |  |
| 37. Collaborates with clients and the health care team to identify actual and potential client health care needs, strengths, capacities, and goals.  |  |
| 38. Completes assessments in a timely manner, and in accordance with evidence-informed practice, agency policies, and protocols.  |  |
| 39. Uses critical inquiry to support professional judgment and reasoned decision making to develop health care plans.  |  |
| 40. Uses principles of primary health care in developing health care plans.  |  |
| 41. Facilitates the appropriate involvement of clients in identifying their preferred health outcomes.  |  |
| 42. Negotiates priorities of care and desired outcomes with clients, demonstrating cultural safety, and considering the influence of positional power relationships.  |  |
| 43. Initiates appropriate planning for clients’ anticipated health problems or issues and their consequences (e.g., childbearing, childrearing, adolescent health, and senior well-being).  |  |
| 44. Explores and develops a range of possible alternatives and approaches for care with clients.  |  |
| 45. Facilitates client ownership of direction and outcomes of care developed in their health care plans.  |  |
| 46. Collaborates with the health care team to develop health care plans that promote continuity for clients as they receive conventional health care, and complementary and alternative therapy.  |  |
| 47. Determines, with the health care team or health-related sectors, when consultation is required to assist clients in accessing available resources.  |  |
| 48. Consults with the health care team as needed to analyze and organize complex health challenges into manageable components for health care planning.  |  |
| 49. Provides nursing care across the lifespan that is informed by a variety of theories relevant to health and healing (e.g., nursing; family; communication and learning; crisis intervention; loss, grief, and bereavement; systems; culture; community development; and population health theories).  |  |
| 50. Prioritize and provide timely nursing care and consult as necessary for any client with co-morbidities, and a complex and rapidly changing health status.  |  |
| 51. Provides nursing care to clients with chronic and persistent health challenges (e.g., mental health, problematic substance abuse, dementia, cardiovascular conditions, stroke, asthma, arthritis, and diabetes).  |  |
| 52. Incorporates evidence from research, clinical practice, client perspective, client and staff safety, and other available resources to make decisions about client care.  |  |
| 53. Supports clients through developmental stages and role transitions across the lifespan (e.g., pregnancy, infant nutrition, well-baby care, child development stages, family planning and relations).  |  |
| 54. Recognizes, seeks immediate assistance, and helps others in a rapidly changing client condition affecting health or patient safety (e.g., myocardial infarction, surgical complications, acute neurological event, acute respiratory event, cardiopulmonary arrest, perinatal crisis, diabetes crisis, mental health crisis, premature birth, shock, and trauma).  |  |
| 55. Applies principles of population health to implement strategies to promote health as well as prevent illness and injury (e.g., promoting hand washing, immunization, helmet safety, and safe sex).  |  |
| 56. Assists clients to understand how lifestyle factors impact health (e.g., physical activity and exercise, sleep, nutrition, stress management, personal and community hygiene practices, family planning, and high-risk behaviours).  |  |
| 57. Implements learning plans to meet identified client learning needs.  |  |
| 58. Assists clients to identify and access health and other resources in their communities (e.g., other health disciplines, community health services, rehabilitation services, support groups, home care, relaxation therapy, meditation, and information resources).  |  |
| 59. Applies knowledge when providing nursing care to prevent development of complications (e.g., optimal ventilation and respiration, circulation, fluid and electrolyte balance, nutrition, urinary elimination, bowel elimination, body alignment, tissue integrity, comfort, and sensory stimulation).  |  |
| 60. Applies bio-hazard and safety principles, evidence-informed practices, infection prevention and control practices, and appropriate protective devices when providing nursing care to prevent injury to clients, self, other health care workers, and the public.  |  |
| 61. Implements strategies related to the safe and appropriate administration and use of medication.  |  |
| 62. Recognizes and takes initiative to support environmentally responsible practice (e.g., observing safe waste disposal methods, using energy as efficiently as possible, and recycling plastic containers and other recyclable materials).  |  |
| 63. Performs therapeutic interventions safely (e.g., positioning, skin and wound care, management of intravenous therapy and drainage tubes, and psychosocial interaction).  |  |
| 64. Implements evidence-informed practices of pain prevention and pain management with clients using pharmacological and non-pharmacological measures.  |  |
| 65. Prepares the client for diagnostic procedures and treatments, provides post-diagnostic care, performs procedures, interprets findings, and provides follow-up care as appropriate.  |  |
| 66. Provides nursing care to meet palliative care or end-of-life care needs (e.g., pain and symptom management, psychosocial and spiritual support, and support for significant others).  |  |
| 67. Uses critical inquiry to monitor and evaluate client care in a timely manner.  |  |
| 68. Collaborates with others to support involvement in research and the use of research findings in practice.  |  |
| 69. Modifies and individualizes client care based on the emerging priorities of the health situation in collaboration with clients.  |  |
| 70. Verifies that clients have an understanding of essential information and skills to be active participants in their own care.  |  |
| 71. Reports and documents client care in a clear, concise, accurate, and timely manner.  |  |
| 72. Demonstrates honesty, integrity, and respect in all professional interactions.  |  |
| 73. Takes action to minimize the potential influence of personal values, beliefs, and positional power on client assessment and care.  |  |
| 74. Establishes and maintains appropriate professional boundaries with clients and the health care team, including the distinction between social interaction and therapeutic relationships.  |  |
| 75. Engages in relational practice through a variety of approaches that demonstrate caring behaviours appropriate for clients.  |  |
| 76. Promotes a safe environment for clients, self, health care workers, and the public that addresses the unique needs of clients within the context of care.  |  |
| 77. Demonstrates consideration of the spiritual and religious beliefs and practices of clients.  |  |
| 78. Demonstrates knowledge of the distinction between ethical responsibilities and legal obligations and their relevance when providing nursing care.  |  |
| 79. Respects and preserves clients’ rights based on the values in the CNA Code of Ethics for Registered Nurses and an ethical framework.  |  |
| 80. Demonstrates an understanding of informed consent as it applies in multiple contexts (e.g., consent for care, refusal of treatment, release of health information, and consent for participation in research).  |  |
| 81. Uses an ethical reasoning and decision-making process to address ethical dilemmas and situations of ethical distress.  |  |
| 82. Accepts and provides care for all clients, regardless of gender, age, health status, lifestyle, sexual orientation, beliefs, and health practices.  |  |
| 83. Demonstrates support for clients in making informed decisions about their health care, and respects those decisions.  |  |
| 84. Advocates for safe, competent, compassionate, and ethical care for clients or their representatives, especially when they are unable to advocate for themselves.  |  |
| 85. Demonstrates ethical responsibilities and legal obligations related to maintaining client privacy, confidentiality and security in all forms of communication, including social media.  |  |
| 86. Engages in relational practice and uses ethical principles with the health care team to maximize collaborative client care.  |  |
| 87. Enacts the principle that the primary purpose of the registered nurse is to practice in the best interest of the public and to protect the public from harm.  |  |
| 88a. Demonstrates knowledge about the structure of the health care system at the: national level.  |  |
| 88b. Demonstrates knowledge about the structure of the health care system at the: provincial/territorial level.  |  |
| 88c. Demonstrates knowledge about the structure of the health care system at the: regional/municipal level.  |  |
| 88d. Demonstrates knowledge about the structure of the health care system at the: agency level.  |  |
| 88e. Demonstrates knowledge about the structure of the health care system at the: practice setting or program level.  |  |
| 89. Recognizes the impact of organizational culture on the provision of health care and acts to enhance the quality of a professional and safe practice environment.  |  |
| 90a. Demonstrates leadership in the coordination of health care by: assigning client care.  |  |
| 90b. Demonstrates leadership in the coordination of health care by: consenting to and supervising and evaluating the performance of health-care aides and undergraduate nursing employees in performing restricted activities.  |  |
| 90c. Demonstrates leadership in the coordination of health care by: facilitating continuity of client care.  |  |
| 91a. Participates and contributes to nursing and health care team development by: recognizing that one’s values, assumptions, and positional power affects team interactions, and uses this self-awareness to facilitate team interactions.  |  |
| 91b. Participates and contributes to nursing and health care team development by: building partnerships based on respect for the unique and shared competencies of each team member.  |  |
| 91c. Participates and contributes to nursing and health care team development by: promoting interprofessional collaboration through application of principles of decision-making, problem solving, and conflict resolution.  |  |
| 91d. Participates and contributes to nursing and health care team development by: contributing nursing perspectives on issues being addressed by the health care team.  |  |
| 91e. Participates and contributes to nursing and health care team development by: knowing and supporting the full scope of practice of team members.  |  |
| 91f. Participates and contributes to nursing and health care team development by: providing and encouraging constructive feedback.  |  |
| 92a. Collaborates with the health care team to respond to changes in the health care system by: recognizing and analyzing changes that affect one’s practice and client care.  |  |
| 92b. Collaborates with the health care team to respond to changes in the health care system by: developing strategies to manage changes affecting one’s practice and client care.  |  |
| 92c. Collaborates with the health care team to respond to changes in the health care system by: implementing changes when appropriate.  |  |
| 92d. Collaborates with the health care team to respond to changes in the health care system by: evaluating effectiveness of strategies implemented to change nursing practice.  |  |
| 93. Uses established communication policies and protocols within and across health care agencies, and with other service sectors.  |  |
| 94. Uses resources in a fiscally responsible manner to provide safe, effective, and efficient care.  |  |
| 95. Supports healthy public policy and principles of social justice.  |  |
| 96. Distinguishes among the mandates of regulatory bodies, professional associations, and unions.  |  |
| 97. Demonstrates understanding of the registered nurse profession as a self-regulating and autonomous profession mandated by provincial legislation to protect the public.  |  |
| 98. Distinguishes between the legislated scope of practice and the registered nurse’s individual competence.  |  |
| 99. Understands the significance of professional activities related to the practice of registered nurses (e.g., attending annual general meetings, participating in surveys related to review of practice standards, and understanding significance of membership on regulatory committees, boards, or councils).  |  |
| 100. Adheres to the duty to report unsafe practice in the context of professional self-regulation.  |  |
| 101. Understands the significance of fitness to practice in the context of nursing practice, self-regulation, and public protection.  |  |
| 102. Identifies and implements activities that maintain one’s fitness to practice.  |  |
| 103. Understands the significance of continuing competence requirements within professional self-regulation.  |  |
| 104a. Demonstrates continuing competence and preparedness to meet regulatory requirements by: assessing one’s practice and individual competence to identify learning needs.  |  |
| 104b. Demonstrates continuing competence and preparedness to meet regulatory requirements by: developing a learning plan using a variety of sources (e.g., self-evaluation and peer feedback).  |  |
| 104c. Demonstrates continuing competence and preparedness to meet regulatory requirements by: seeking and using new knowledge that may enhance, support, or influence competence in practice.  |  |
| 104d. Demonstrates continuing competence and preparedness to meet regulatory requirements by: implementing and evaluating the effectiveness of one’s learning plan and developing future learning plans to maintain and enhance one’s competence as a registered nurse.  |  |

**Q56 Mapping Course Outcomes/Objectives to ETPCs (NEPAB Requirement)**

**If your course team has already done this, you do not need to do it again unless:**

* **It has been more than 2 years since you mapped the course objectives to ETPCs; or**
* **This course has substantially changed over the last 2 years.**

**For this question, please copy and paste from the course outline each objective/outcome for this course below. Please input one objective/outcome per text space. Don't worry if the length of the objective exceeds the available space in the text box.**
**PLEASE COPY AND PASTE YOUR COURSE OUTCOMES BELOW.**

Then, please indicate, by number, which ETPCs are addressed through each objective. Please separate the numerical values with a comma followed by a space.

|  |  |  |
| --- | --- | --- |
| ***#*** | ***Course Objective*** | ***ETPC #*** |
| ***1*** |  |  |
| ***2*** |  |  |
| ***3*** |  |  |
| ***4*** |  |  |
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| ***14*** |  |  |
| ***15*** |  |  |

**TO NCLEX TEST PLAN**

**IMPORTANT**: You **do not** need to map this course to the NCLEX-RN test plan unless:

* It has been more than 2 years since you mapped the NCLEX test plan to this course; or
* This course has substantially changed over the last 2 years.

For the NCLEX items on the following pages, please indicate whether the course for which you are reporting covers the content. Please be aware that any one course will NOT cover ALL the concepts.

**1. SAFE AND EFFECTIVE CARE ENVIRONMENT**
**A. Management of Care**

* 1. Integrate advance directives into client plan of care (1)
* 2. Assign and supervise care provided by others (e.g., LPN/VN, assistive personnel, other RNs) (2)
* 3. Organize workload to manage time effectively (3)
* 4. Participate in providing cost effective care (4)
* 5. Initiate, evaluate, and update plan of care (e.g., care map, clinical pathway) (5)
* 6. Provide education to clients and staff about client rights and responsibilities (6)
* 7. Advocate for client rights and needs (7)
* 8. Collaborate with health care members in other disciplines when providing client care (8)
* 9. Manage conflict among clients and health care staff (9)
* 10. Maintain client confidentiality and privacy (10)
* 11. Provide and receive report on assigned clients (e.g., standardized hand off communication) (11)
* 12. Use approved abbreviations and standard terminology when documenting care (12)
* 13. Perform procedures necessary to safely admit, transfer or discharge a client (13)
* 14. Prioritize the delivery of client care (14)
* 15. Recognize ethical dilemmas and take appropriate action (15)
* 16. Practice in a manner consistent with a code of ethics for registered nurses (16)
* 17. Verify that the client comprehends and consents to care and procedures (17)
* 18. Receive and/or transcribe health care provider orders (18)
* 19. Utilize information resources to enhance the care provided to a client (e.g., evidenced based research, information technology, policies and procedures) (19)
* 20. Recognize limitations of self/others and seek assistance (20)
* 21. Report client conditions as required by law (e.g., abuse/neglect, communicable disease, gunshot wound) (21)
* 22. Report unsafe practice of health care personnel and intervene as appropriate (e.g., substance abuse, improper care, staffing practices) (22)
* 23. Provide care within the legal scope of practice (23)
* 24. Participate in performance improvement/quality improvement process (24)
* 25. Recognize the need for referrals and obtain necessary orders (25)

**B.  Safety and Infection Control**

* 26. Assess client for allergies and intervene as needed (e.g., food, latex, environmental allergies) (26)
* 27. Protect client from injury (e.g., falls, electrical hazards) (27)
* 28. Ensure proper identification of client when providing care (28)
* 29. Verify appropriateness and/or accuracy of a treatment order (29)
* 30. Implement emergency response plans (e.g., internal/external disaster) (30)
* 31. Use ergonomic principles when providing care (e.g., assistive devices, proper lifting) (31)
* 32. Follow procedures for handling biohazardous materials (32)
* 33. Educate client on home safety issues (33)
* 34. Acknowledge and document practice error (e.g. incident report for medication error) (34)
* 35. Facilitate appropriate and safe use of equipment (35)
* 36. Participate in institution security plan (e.g., newborn nursery security, bomb threats) (36)
* 37. Apply principles of infection control (e.g., hand hygiene, surgical asepsis, isolation, sterile technique, universal/standard precautions) (37)
* 38. Educate client and staff regarding infection control measures (38)
* 39. Follow requirements for use of restraints and/or safety device (e.g., least restrictive restraints, timed client monitoring) (39)

**2. HEALTH PROMOTION AND MAINTENANCE**

**A. Health Promotion and Maintenance**

* 40. Provide care and education for the newborn less than 1 month old through the infant or toddler client through 2 years (40)
* 41. Provide care and education for the preschool, school age and adolescent client ages 3 through 17 years (41)
* 42. Provide care and education for the adult client ages 18 through 64 years (42)
* 43. Provide care and education for the adult client ages 65 through 85 years and over (43)
* 44. Provide prenatal care and education (44)
* 45. Provide care to client in labor (45)
* 46. Provide post-partum care and education (46)
* 47. Assess and teach clients about health risks based on family, population, and/or community characteristics (47)
* 48. Assess client’s readiness to learn, learning preferences and barriers to learning (48)
* 49. Plan and/or participate in community health education (49)
* 50. Provide information about health promotion and maintenance recommendations (e.g., physician visits, immunizations) (50)
* 51. Perform targeted screening assessments (e.g., vision, hearing, nutrition) (51)
* 52. Provide information for prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practices, drug education) (52)
* 53. Assess client ability to manage care in home environment and plan care accordingly (e.g. equipment, community resources) (53)
* 54. Perform comprehensive health assessment (54)

**3. PSYCHOLOGICAL INTEGRITY**

**A. Psychological Integrity**

* 55. Assess client for abuse or neglect and intervene as appropriate (55)
* 56. Incorporate behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits) (56)
* 57. Assess client for drug/alcohol dependencies, withdrawal, or toxicities and intervene as appropriate (57)
* 58. Assess client in coping with life changes and provide support (58)
* 59. Assess the potential for violence and use safety precautions (e.g., suicide, homicide, self-destructive behavior) (59)
* 60. Incorporate client cultural practice and beliefs when planning and providing care (60)
* 61. Provide end of life care and education to clients (61)
* 62. Assess family dynamics to determine plan of care (e.g., structure, bonding, communication, boundaries, coping mechanisms) (62)
* 63. Provide care and education for acute and chronic behavioral health issues (e.g., anxiety, depression, dementia, eating disorders) (63)
* 64. Assess psychosocial, spiritual and occupational factors affecting care, and plan interventions (64)
* 65. Provide care for a client experiencing visual, auditory or cognitive distortions (e.g., hallucinations) (65)
* 66. Recognize non-verbal cues to physical and/or psychological stressors (66)
* 67. Use therapeutic communication techniques to provide client support (67)
* 68. Provide a therapeutic environment for clients with emotional/behavioral issues (68)

**4. PHYSIOLOGICAL INTEGRITY**

**A.  Basic Care and Comfort**

* 69. Assist client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques) (69)
* 70. Assess and manage client with an alteration in elimination (e.g., bowel, urinary) (70)
* 71. Perform irrigations (e.g., of bladder, ear, eye) (71)
* 72. Perform skin assessment and implement measures to maintain skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces) (72)
* 73. Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces, casts) (73)
* 74. Apply and maintain devices used to promote venous return (e.g., anti-embolic stockings, sequential compression devices) (74)
* 75. Implement measures to promote circulation (e.g., active or passive range of motion, positioning and mobilization) (75)
* 76. Assess client need for pain management (76)
* 77. Provide non-pharmacological comfort measures (77)
* 78. Manage the client’s nutritional intake (e.g., adjust diet, monitor height and weight) (78)
* 79. Provide client nutrition through continuous or intermittent tube feedings (79)
* 80. Evaluate client intake and output and intervene as needed (80)
* 81. Assess and intervene in client performance of activities of daily living (81)
* 82. Perform post-mortem care (82)
* 83. Assess client need for sleep/rest and intervene as needed (83)

**B.  Pharmacological and Parenteral Therapies**

* 84. Administer blood products and evaluate client response (84)
* 85. Access venous access devices, including tunneled, implanted and central lines (85)
* 86. Perform calculations needed for medication administration (86)
* 87. Evaluate client response to medication (e.g., therapeutic effects, side effects, adverse reactions) (87)
* 88. Educate client about medications (88)
* 89. Prepare and administer medications, using rights of medication administration (89)
* 90. Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions) (90)
* 91. Participate in medication reconciliation process (91)
* 92. Titrate dosage of medication based on assessment and ordered parameters (e.g., giving insulin according to blood glucose levels, titrating medication to maintain a specific blood pressure) (92)
* 93. Evaluate appropriateness and accuracy of medication order for client (93)
* 94. Monitor intravenous infusion and maintain site (e.g., central, PICC, epidural and venous access devices) (94)
* 95. Administer pharmacological measures for pain management (95)
* 96. Administer controlled substances within regulatory guidelines (e.g., witness, waste) (96)
* 97. Administer parenteral nutrition and evaluate client response (e.g., TPN) (97)

**C.  Reduction of Risk Potential**

* 98. Assess and respond to changes in client vital signs (98)
* 99. Perform diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring) (99)
* 100. Monitor the results of diagnostic testing and intervene as needed (100)
* 101. Obtain blood specimens peripherally or through central line (101)
* 102. Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine) (102)
* 103. Insert, maintain and remove a gastric tube (103)
* 104. Insert, maintain and remove a urinary catheter (104)
* 105. Insert, maintain and remove a peripheral intravenous line (105)
* 106. Use precautions to prevent injury and/or complications associated with a procedure or diagnosis (106)
* 107. Evaluate responses to procedures and treatments (107)
* 108. Recognize trends and changes in client condition and intervene as needed (108)
* 109. Perform focused assessment (109)
* 110. Educate client about treatments and procedures (110)
* 111. Provide preoperative and postoperative education (111)
* 112. Provide preoperative care (112)
* 113. Provide intraoperative care (113)
* 114. Manage client during and following a procedure with moderate sedation (114)

**D. Physiological Adaption**

* 115. Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy) (115)
* 116. Implement and monitor phototherapy (116)
* 117. Maintain optimal temperature of client (e.g., cooling and/or warming blanket) (117)
* 118. Monitor and care for clients on a ventilator (118)
* 119. Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy) (119)
* 120. Perform and manage care of client receiving peritoneal dialysis (120)
* 121. Perform suctioning (e.g. oral, nasopharyngeal, endotracheal, tracheal) (121)
* 122. Provide wound care or dressing change (122)
* 123. Provide ostomy care and education (e.g. tracheal, enteral) (123)
* 124. Provide pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry) (124)
* 125. Provide postoperative care (125)
* 126. Manage the care of the client with a fluid and electrolyte imbalance (126)
* 127. Monitor and maintain arterial lines (127)
* 128. Manage the care of a client with a pacing device (e.g., pacemaker) (128)
* 129. Manage the care of a client on telemetry (129)
* 130. Manage the care of a client receiving hemodialysis (130)
* 131. Manage the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral) (131)
* 132. Educate client regarding an acute or chronic condition (132)
* 133. Manage the care of a client with impaired ventilation/oxygenation (133)
* 134. Evaluate the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis (134)
* 135. Perform emergency care procedures (e.g., cardio-pulmonary resuscitation, respiratory support, automated external defibrillator) (135)
* 136. Identify pathophysiology related to an acute or chronic condition (e.g., signs and symptoms) (136)
* 137. Recognize signs and symptoms of complications and intervene appropriately when providing client care (137)

**Q67 Please copy and paste your course outcomes below.** Then, please indicate, by number, which NCLEX-RN test plan (TP) items are addressed through each objective. Please separate the numerical values with a comma followed by a space.

| ***#*** | ***Course Objective***  | ***NCLEX TP #*** |
| --- | --- | --- |
| ***1*** |  |  |
| ***2*** |  |  |
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**COURSE ADVISOR: SHERRY HOGEWEIDE ONLY**

**Q110 How many students were in the following programs in the years indicated? (Please include students who eventually withdrew or were eventually unsuccessful)**

|  |  |  |
| --- | --- | --- |
| **Program** | **Year** | **# Students** |
| BN Regular 4-year Program | 1 |  |
| BN Regular 4-year Program | 2 |  |
| BN Regular 4-year Program | 3 |  |
| BN Regular 4-year Program  | 4 |  |
| BN-AD Program  | 1 |  |
| BN-AD Program  | 1 |  |
|  Total : |  |  |

**Q112 How many students are in the following categories for this reporting year?**

|  |  |  |
| --- | --- | --- |
|  | **Program** | **# Students** |
| Enrolment in… | BN Regular 4-year Program |  |
| Transfers in to… | BN Regular 4-year Program |  |
| Exits (academic disqualification, withdrawal, or transfer out) from… | BN Regular 4-year Program |  |
| Graduates of… | BN Regular 4-year Program |  |
| Enrolment in… | BNAD Program |  |
| Transfers in to… | BNAD Program |  |
| Exits (academic disqualification, withdrawal, or transfer out) from… | BNAD Program |  |
| Graduates of… | BNAD Program |  |

**Q115 Comments regarding enrolment, transfers, withdrawals, reasons for withdrawal and at what point in the program, or graduate data or trends: (i.e. reasons, if returning, academic disqualifications, etc.)**

**SKILLS AND SIMULATION ONLY**

**Q69 Please indicate the number of sim or skills lab sessions associated with each NESA course this past reporting year:**

|  |  |
| --- | --- |
| **COURSE** | **# SESSIONS** |
| NSG 1150 |  |
| NSG 1155  |  |
| NSG 1163 |  |
| NSG 1173 |  |
| NSG 1181 BNAD |  |
| NSG 1182 BNAD |  |
| NSG 2250 |  |
| NSG 2254 |  |
| NSG 2255 |  |
| NSG 2263 |  |
| NSG 2279 |  |
| NSG 2290  |  |
| NSG 2293/2255 |  |
| NURS 3020 |  |
| NURS 3125  |  |
| NURS 3230  |  |
| NURS 4510  |  |
| NURS 4511  |  |
| NURS 4520  |  |
| NURS 4530  |  |
| NURS 4750  |  |
| Open session or individuals  |  |
| Orientation  |  |
| Alternate Clinical Day (e.g. Snow Day) |  |
| Custom  |  |
| Other |  |
| Other |  |
| Other |  |
| Total  |  |

**Q71 Please indicate the total number of students who went through the lab in each semester. This number will include students who came as part of classes, for orientation, for clinical, and for individual sessions. These numbers only apply to NESA BN and BNAD students.**

|  |  |
| --- | --- |
| **Semester** | **# Students**  |
| May-August |  |
| September-December |  |
| January-April |  |

**Q72 Please indicate the number of sessions in the lab this year that were comprised of:**

|  |  |
| --- | --- |
| **Type of Activity** | **# Students**  |
| Hi-Fidelity Simulation |  |
| Mid-Fidelity and Case Study |  |
| Low-Fidelity and Skills |  |
| Total  |  |

**Q73 Please select the psychomotor skills taught during this reporting year in the skills lab:**

* Back care and transferring
* Bed-making
* Cardiovascular assessment
* Catheter care/insertion
* Chest tube management
* CVAD/PICC management
* Enteral nutrition
* Fetal monitoring
* Foot care
* Handwashing
* Immunization
* IV initiation
* IV management
* Medication administration
* Neurological assessment
* NG tube insertion
* Ostomy care
* Personal care
* Phlebotomy
* Physical assessment
* Range of motion
* Respiratory assessment
* Tracheostomy care
* Vital signs
* Wound care, surgical
* Wound care, chronic
* Other: Please list briefly \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q96 Thank you for contributing to the NESA BN Program evaluation and reporting process. Your timely contribution is greatly appreciated! A PDF of your responses will be generated by the NESA Front Office (UL) staff and sent back to you, for your records and for continuous quality improvement.**Please email me if you have any questions or comments about the Annual Course Report format.

Sincerely,
Em Pijl PhD, RN

1. It is presumed that clinical courses will cover all of the competencies. [↑](#footnote-ref-1)