

memorandum

DATE: May 30, 2024

TO: Senate

FROM: Dr. David Hornsby, Vice-Provost and Associate Vice-President (Academic), and Chair, Senate

Quality Assurance and Planning Committee

RE: Bachelor of Science in Nursing

New Program Approval

SQAPC Motion

THAT SQAPC recommends to Senate the approval of the Bachelor of Science in Nursing program as presented, to commence in Fall 2025.

Senate Motion

THAT Senate approve the proposed Bachelor of Science in Nursing program as presented to commence in Fall 2025.

Background

The nursing program will be housed in a new School of Nursing and builds on Carleton's strong pedagogical background in health, data, and social sciences. The overall concept for the nursing program is based on the relationship between the nurse, the patient, and the community for which they are a part. The program will leverage extended reality (XR; includes virtual reality [VR]), simulation-based, and work-integrated training to foster a strong theoretical basis which will build up to a high level of bedside competence, critical thinking, and innovativeness through clinical practicums. Thereby, fostering nurses who will be leaders in nursing practice amid the constantly changing health care landscape. The patient is an expert in their experience of their illness, a teacher, and a partner in the healthcare team. Nurses will be trained to welcome, respect, and integrate the patient's beliefs, views and lived experiences when aiding in the patient's healing. Finally, health is interprofessional and nested inside of a diverse local and global community. This program is based on a purposeful partnership with a community partner, the Queensway Carleton Hospital, and nurses will be trained by working alongside other professional healthcare partners and the community to promote equitable and sustainable health outcomes for all.

Attachments

Self-Study with Appendices (Volume I)
Discussant Report
Site visit Agenda

External Reviewer Biographies
External Reviewers' Report
Unit response to the External Reviewers' Report and Implementation plan
Dean's response to the External Reviewers' Report
SQAPC outcome memo
Dean's letter of support
Courseleaf Entries

Quality Assurance Framework and Carleton's Institutional Quality Assurance Process (IQAP)

Upon the above motion being passed by Senate, the required documentation will be submitted to the Ontario Universities' Council on Quality Assurance for approval. A submission to the Ministry for approval will follow. These approvals are required before the program can commence.



Institutional Quality Assurance Process

Compressed Bachelor of Science in Nursing, Honours

New Program Approval Template
(Volume I)

Approvals Table

This table will record that the brief has been approved by: 1) the program lead on behalf of the team; 2) the head of the academic unit or chair of the program committee (in the case of interdisciplinary programs not administered exclusively by one academic unit) on behalf of the unit or program committee; 3) the Faculty Dean(s).

| Martin Holcik | |
|------------------------|-------------|
| Program Lead | <u>Date</u> |
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| | |
| | |
| <u>Danielle Manley</u> | |
| <u>Chair/Director</u> | <u>Date</u> |
| | |
| | |
| | |
| Maria DeRosa | |
| Dean(s): | <u>Date</u> |

Committees Reviews and Approvals

| Vice-Presidents' Academic Research Committee (executive summary) | January 17, 2024 |
|--|-------------------|
| Provost's Budget Working Group (executive summary) | January 29, 2024 |
| Curriculum Committee | February 15, 2024 |
| Faculty Board | February 29, 2024 |
| Senate Committee on Curriculum, Admissions on Studies Policy | |
| Senate Quality Assurance and Planning Committee | |
| Senate | |
| Quality Council | |

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A. The Program

Program overview

Accelerated by the COVID-19 pandemic, the current global (Buchan & Catton, 2023), national (Ahmed & Bourgeault, 2022; Tomblin Murphy et al., 2022), and provincial (Casey et al., 2023; Ontario Hospital Association, 2022; Tomblin Murphy et al., 2022) shortage of nurses is still unresolved. At the provincial and national level, these problems are predicted to persist into the next ten years (Casey et al., 2023; Government of Canada, 2022). Of the many proposed solutions, there is a resounding call for the sustainable solution of increasing nursing seats (Ahmed & Bourgeault, 2022; Buchan & Catton, 2023). In addition, nursing-related organizations are calling for new curriculum and training opportunities created in partnership with underserved communities and sectors to better serve the community (Ahmed & Bourgeault, 2022; Tomblin Murphy et al., 2022) and contribute to Reconciliation (Registered Nurses' Association of Ontario, 2022). There are also calls for programs focused on digital literacy (Buchan & Catton, 2023), resiliency (Tomblin Murphy et al., 2022), and support for specializing in fields such as mental health, intensive care, public health, and long-term care (Buchan & Catton, 2023; Tomblin Murphy et al., 2022). Finally, nursing education should be created through mutually beneficial partnership with employers, utilizing the knowledge of current and late career nurses through teaching secondments (Ahmed & Bourgeault, 2022), and addressing nursing shortages and providing student experience through paid externships (Ahmed & Bourgeault, 2022).

Within the conversation on increasing health and human resources in Ontario, Carleton University's Faculty of Science, and the Queensway Carleton Hospital discussed collaborating to create a new nursing program in December 2022 (Appendix 5). These discussions highlighted that Carleton would bring its strong pedagogical background in health science, data analytics, Equity, Diversity, and Inclusion (EDI), and interprofessional perspectives from the School of Social Work. Queensway Carleton Hospital would bring their robust background in clinical experience, patient care, innovative placement opportunities, and the ability to integrate the workplace into learning opportunities leading to strong bedside manner and critical thinking skills. Through our discussions, Carleton University and the Queensway Carleton Hospital designed a direct entry, compressed, three-year honours program to be completed over the fall, winter, and summer sessions. We are the second program in Ontario to offer a three-year program besides Lakehead University. Across Canada, a few institutions, such as Cape Breton University, Dalhousie University, and the University of New Brunswick (Fredericton campus) offer such a pathway. Locally, nursing programs are four-year direct entry or two year second-entry programs¹. The coursework will be delivered in a hybrid manner, with teaching and simulation occurring on campus and at the Queensway Carleton Hospital. In collaboration with the Future Learning Lab, XR and simulation will be integrated into many of the courses, providing robust opportunities to practice. Furthermore, coursework will be reinforced with smaller, practical, more contained experiential learning courses. Clinical placements and some courses will be bolstered with online modules to ensure nurses are

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¹ University of Ottawa (and its partner Algonquin College), Queens University, Trent-Fleming University, Ontario Tech University, St. Lawrence College, and Loyalist College.

practice ready. Furthermore, clinical experiences will occur in Year 1 and continue throughout the program, rapidly introducing the nursing students to practice. Additionally, we will include a strong data science curriculum that all nurses will complete, creating innovative, tech-savvy nurses.

In response to the Truth and Reconciliation Commission of Canada's Calls to Action (Truth and Reconciliation Commission of Canada, 2015), Canadian and provincial Nursing organization's response to the Truth and Reconciliation Commission's recommendations (Canadian Indigenous Nurses Association, 2023; College of Nurses of Ontario, 2019; Registered Nurses' Association of Ontario, 2022) and Carleton's internal Kinàmàgawin Report and Progress Report (Carleton University Strategic Indigenous Initiatives Committee, 2020, 2022), we will move forward with humility towards Decolonizing the healthcare system by striving to create a curriculum that acknowledges the harm done to Indigenous people through the medical system, provides training in intercultural competency, and incorporates Indigenous healing practices in treatment of Indigenous patients in collaboration with Indigenous Healers and Elders (Truth and Reconciliation Commission of Canada, 2015). This goal is especially important given the Ottawa region is home to Algonquin Anishinaabeg, Mohawk, and other First Nations, Inuit, and Métis communities. However, we are not an Indigenous institution, and to do this we will hire at least one Indigenous Faculty member and ensure non-Indigenous faculty are able to respectfully collaborate and co-teach with Indigenous community members to produce curriculum, in partnership with Carleton University's Centre for Indigenous Support and Community engagement. We will then develop relationships with Indigenous stakeholders such as Sivummut Solutions and the Southwest Ontario Aboriginal Health Access Center, as well as the communities of the Kitigan Zibi Anishinabeg, Algonquins of Pikwakanagan First Nation, and the Mohawk Nation of Akwesasne, and others through close collaboration with the Centre for Indigenous Support and Community Engagement. Through these relationships, we will seek to develop an introductory Indigenous Health course that will be built upon by Indigenous modules spread across the rest of the curriculum and promote nursing educator positions as well as co-teaching opportunities. Through Kinàmàgawin, or learning together, with a curriculum formed through mutually respectful collaboration with Indigenous community members, material taught by Indigenous community members, and a culture that is welcoming, safe, and supportive of Indigenous students, we will provide nursing students with a well-rounded education that encompasses both Western medical practices and Indigenous health knowledge, providing a foundation for meaningful living and learning.

In addition to the core B.Sc. in Nursing, nursing students will have the opportunity to complete nursing research through an Honours Bachelor of Science in Nursing pathway. Furthermore, students will be able to complete a concentration in either Neuroscience and Mental Health, or Nursing Data Science. We believe we are the first to offer a Data Science pathway in nursing in the country. We also plan to follow up this program by creating post-graduate micro-credentials to allow nurses to specialize in Canadian Nurses Association Certified Nursing Practice Specialties (Ahmed & Bourgeault, 2022).

Overall, this program will create practice-ready and innovative nurses with backgrounds in EDI, Indigenous health, and data science. They will be strong critical thinkers, resilient, innovative, and interprofessional. These nurses will gain this experience and these skills not just from the academy but the community for which they are a part.

A.1. Mission and strategic directions

Strategic Integrated Plan

Strategic Direction: Share knowledge, shape the future.

We will prepare students for success in an ever-changing future by offering a program that responds to the societal need for nurses and improves students' employability outcomes by offering a professional degree that leverages and strengthens the community skills necessary to meet the needs of the healthcare community.

We will leverage the power of research to solve critical issues by teaching nurses to find, critique, and mobilize research publications in a professional setting. Additionally, we will provide students the opportunity to investigate solutions to current nursing issues through research projects within the Honours stream (i.e., NURS 4011 Nursing Research Project or NURS 4112 Experiential Learning – Improving Nursing and NURS 4012 Nursing Research Proposal).

Structurally, interdisciplinarity and collaboration are embedded in our program as it was created in partnership with Queensway Carleton Hospital, and we are currently collaborating with the School of Social Work. Furthermore, we are in discussions to collaborate with faculty involved in the Collaborative Specialization in Accessibility. Many of the Experiential Learning courses will be created in collaboration with external community partners. Interprofessional Education (IPE) as it relates to healthcare providers is a key tenant of learning in the proposed structure. Additionally, this will be one of the first proposed medical curriculums in Canada and North America to embed data science and hinges upon collaboration among data science, engineering, and nursing.

We will approach teaching and pedagogy with imagination and new expectations by integrating XR and simulation to bolster the clinical experience of nurses and ensure they are practice ready. Many courses have follow-up Experiential Learning courses and components to provide practical and engaging community experience. It is exceedingly important that traditional Western, colonized tenants of healthcare are addressed and framed as such and that we are supporting students to consider structures of oppression and racism as they may exist and empowering them to be change agents with a strong underlying EDI focus of instruction, and Indigenous health. Later professional nursing courses focus on creating tangible solutions to oversights in the nursing profession and we will promote the Black and Indigenous Summer Research Internships (BISRIs) alongside the research courses.

We will model a culture of organizational excellence by inspiring collaborative leadership through the program's creation and the collaboration with external partners. This will be the first new curriculum development of a nursing program in Ontario in many years and with it comes the opportunity to start with novel and timely concepts that otherwise may be harder to change manage into existing programs elsewhere. With the critical and somewhat pioneering focuses of the new program, this could be a model for all other nursing programs both provincially and federally to follow, as referenced by the College of Nurses of Ontario during our discovery visit. Our coursework has many

opportunities to encourage individuals to innovate nursing care by developing novel interventions, diagnostic tools, and other tools used by nurses.

Strategic Direction: Serve Ottawa, Serve the world

This program opens doors to the community and encourages community engagement in research and learning as it is formed from a direct partnership between a local hospital network, Queensway Carleton Hospital, and Carleton University. We are working to build relationships with Indigenous communities and include Indigenous knowledge as a strong component in teaching and experience. Experiential Learning courses and clinical placements will occur in partnership with local health care institutions and within the community, expanding work-integrated learning opportunities for students. These newly formed relationships can also be leveraged by other units at Carleton to increase the community engagement of other units. This program was created directly in response to developing and fostering partnerships with a purpose, as its creation was based on recognizing shared values and strategic objectives with a local, community partner, Queensway Carleton Hospital. Furthermore, it has also opened an avenue for collaborative research on simulation with an external partner.

We will build bridges to the world and embrace our role as a global institution in a G7 capital by creating a program that meets the international, national, and provincial discussions around healthcare. Furthermore, by joining the Nursing community, we will strengthen our relationships with provincial and federal healthcare governance bodies and institutions. We have also received support for our program from the federal Chief Nursing Officer of Canada, Leigh Chapman (Appendix 5).

Strategic Direction: Strive for wellness Strive for sustainability

We will strive to enhance personal wellness and health and be a national and international leader in sustainability by embedding skill-building activities related to resilience within our courses (e.g., NURS 2012 Resilience Training). Furthermore, course work will promote a commitment to social, physical, cultural, and environmental wellness. Nursing courses will discuss the Nurses role in stewardship and sustainability (e.g., NURS 2000 Community Health, and NURS 3001 Professional Nursing III) and offer an Honours stream proposal or research project on the topic of Improving Nursing.

We will learn to take action together to achieve reconciliation by creating a curriculum where Indigenous knowledge and ceremony is an important foundation in the Nursing program. The program will have one half credit course that introduces students to Indigenous health, and follows up on this with land-based teaching. This course, among others, may be co-taught with Indigenous Knowledge Keepers, Elders and other Indigenous people with learned experience (NURS 1000 Indigenous Health). This course will be developed specifically by our Indigenous faculty member who will specialize in Ceremony. Throughout the rest of the courses, Indigenous modules will be included where Indigenous health perspectives, traditional medicine, and the impact of colonization on health will be applied to the current topic. We will ensure this initiative is sustainable by hiring Indigenous faculty as well as integrating the ability to respectfully and humbly collaborate with Indigenous communities as a hiring metric for non-Indigenous faculty. We will ensure this outcome by including Dr. Kahente Horn-Miller, Associate Vice-President, Indigenous Teaching, Learning, and Research on the hiring committees.

During collaboration, we will promote the nursing educator and co-teaching positions to Indigenous partners. Furthermore, we will support faculty and nursing instructors by recommending that all faculty and staff take the Kinàmàgawin Indigenous Learning Certificate to ensure their ability to create a culturally safe learning environment for both Indigenous and non-Indigenous students. We will direct faculty and nursing educators to collaborate with the Centre for Indigenous Support and Community Engagement throughout curriculum development and beyond. To ensure continual engagement, adaptation, and accountability we will maintain an Indigenous Community Member Advisory Committee made up of Indigenous community members, healthcare partners, faculty, teaching staff, and nursing students to review and create curriculum, provide recommendations on student and instructor recruitment and retention, and provide recommendations for overall program improvement. We will reserve seats for Indigenous students and promote the Indigenous Research in Science (IRIS) program when it is launched to provide honours students a pathway to research topics of their choice. Overall, we will strive to produce and maintain a program with a strong foundation in Decolonization, Indigenization, and Reconciliation based around relationship building between the community, faculty and the students.

We will strive to make our campus, country and our world accessible for all by embedding the promotion of accessibility into the nursing curriculum (e.g., NURS 1003 Adult Health and Illness I, NURS 2011 Health Equity and Social Justice, NURS 2003 Adult Health and Illness II, NURS 1100 Experiential Learning – Simulation 1). Furthermore, we will continue discussions on collaborative accessibility research and integrating accessibility concepts into course work with Dr. Adrian Chan and other faculty at Carleton University (Appendix 5).

We will foster individual distinctiveness and a sense of belonging by embedding the promotion of inclusivity and diversity of perspectives into the nursing curriculum (e.g., NURS 2011 Health Equity and Social Justice) as nurses, by their very function, must be able to respectfully collaborate with all community members whether they are patients or co-workers. Furthermore, faculty will be instructed to utilize the EDI teaching Toolkit, the EDI in research pocket guide and complete the modules "Equity and Human Rights", "Equity in Your (work) Space – Faculty, Staff and Supervisors", "Inclusive Classroom – Faculty", "Responding to Disclosures of Sexual Violence", and "Breaking Down Barriers: Exploring Disability, Dignity and Ableism", all offered by the Department of Equity and Inclusive Communities. We will continue to collaborate with Dr. Krista Craven in the Department of Equity and Inclusive Communities to ensure we continue to embed EDI and Accessibility in the curriculum. With new self-declared EDI data available through the OUAC application, OIRP will provide analyses of applications, acceptances, and confirmations across those EDI categories. This will assist us in determining whether we are meeting our outreach and admissions targets for Nursing.

Strategic Mandate Agreement

Given the societal need for nurses, and their broad applicability across a variety of healthcare contexts, we believe this program will support Carleton's *Graduate Employment Rate in a Related Field* metric by producing students that are strategically positioned to find careers in healthcare.

The nursing program will support Carleton's *Institutional Strength/Focus* of interdisciplinary programs as it is being developed in collaboration with the School of Social Work and the Department of Psychology.

The nursing program will support Carleton's *Graduation Rate* metric by including resiliency training within the curriculum to improve nurses' outcomes within the course and during their nursing careers.

Community/Local Impact of Student Enrolment is a key aspect of the program. Many of the Experiential Learning Simulations will be performed in collaboration with local community members and will improve links between our students and the local community. Furthermore, we will work directly with local community members, including Queensway Carleton Hospital to find alternative clinical placement opportunities and reduce the potential impacts on clinical placement availabilities.

The Economic Impact (Institution specific) of the nursing program in the form of company creation is supported by the programs focus on innovation and improving healthcare, as well as the focus on healthcare technologies and data science. By nurturing this mindset, we believe we will produce leaders in innovative nursing practices and technologies that may develop these solutions for the healthcare market.

The Department of Health Sciences, the Department of Neuroscience, and other academic units will be able to leverage the relationships and increased research capacity formed by the creation of the School of Nursing, to increase the opportunities for applying for *federal, tri-agency research funding & capacity*.

The nursing program will promote *Experiential Learning* as it starts with experiential learning in year one and continues through all three years of the program.

The nursing program is increasing *research revenue attracted from private sector sources* by building a simulation lab in collaboration with an external partner and hiring a Tier 1 Research Chair in Acute Care and Simulation to utilize the space for research.

The nursing program will improve *Graduate Employment Earnings* as experience is a key contributor to earning potential and the program has a strong experiential learning component. Furthermore, we will seek to include externship opportunities to increase student earnings during their degrees and aid in their ability to support themselves during the program.

The *Skills and Competencies* of nursing students will be improved through the innovative use of XR and simulation to bolster student's practical and personal skills throughout the nursing program. Students will also apply the lens of EDI, Indigeneity, and Accessibility to their application and practice, and provide critical opportunity to innovate and develop new tools for use in the healthcare setting. Furthermore, leadership and data sciences skills will be a core part of the curriculum.

Kinàmàgawin (Learning Together) Report and Progress Report

Within the 94 Truth and Reconciliation Commission's (TRC) Calls to Action², seven directly apply to Health (Calls to Action 18-24; Truth and Reconciliation Commission of Canada, 2015). Call to Action 24 specifically refers to nursing schools:

24. We call upon medical and nursing schools in Canada to require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights, and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism.

Furthermore, three additional CAs in this section are important for our nursing program:

- 20. In order to address the jurisdictional disputes concerning Aboriginal people who do not reside on reserves, we call upon the federal government to recognize, respect, and address the distinct health needs of the Métis, Inuit, and off-reserve Aboriginal peoples.
- 22. We call upon those who can effect change within the Canadian health-care system to recognize the value of Aboriginal healing practices and use them in the treatment of Aboriginal patients in collaboration with Aboriginal healers and Elders where requested by Aboriginal patients.
- 23. We call upon all levels of government to:
- i. Increase the number of Aboriginal professionals working in the health-care field.
- ii. Ensure the retention of Aboriginal health-care providers in Aboriginal communities.
- iii. Provide cultural competency training for all healthcare professionals.

In response to the TRC Calls to Action, Carleton University has its own Calls to Action in the Kinàmàgawin (Learning Together) Report (2020) and Progress Report (2022). Guiding development of the nursing program are the following Calls to Action:

- 10. We call for the development of an Indigenous Recruitment Strategy to include admission policies that ensure seats for First Nation, Métis and Inuit students into competitive programs; including specific seats for Algonquin students from the communities of Kitigan Zibi Anishinabeg and Algonquins of Pikwakanagan First Nation.
- 15. We call for a best practice review of coteaching models with the goal of allowing for the inclusion of Indigenous doctoral students, Knowledge Keepers, language experts and those with lived experience in the teaching process.

² The Truth and Reconciliation report contains the use of the term "Aboriginal", however, we recognize that this is a dated term and only use it in quotation of the document.

- 19. We call for opportunities for Indigenous students to participate in land-based learning.
- 20. We call for the creation of specifically designed pathways for Indigenous students in science, technology, engineering, architecture, mathematics and linguistics.
- 21. We call for the development of appropriate measures to ensure that every student graduating from Carleton University achieves basic learning outcomes with regards to Indigenous history and culture.
- 25. We call for professional development and educational opportunities for faculty, staff and administration towards obtaining core competencies in Indigenous and Canadian histories and experiences.
- 33. We call for the continuous increase of the number of Indigenous employees at Carleton, supported by the development of Indigenous hiring policies for Indigenous specific faculty and staff positions.
- 40. We call on each Faculty and each support unit on campus to develop their own strategies to support these 41 Calls to Action.

In response, we will move forward with humility towards Decolonization, Indigenization, and Reconciliation through the nursing program's curriculum, and community based pedagogical culture. Within the curriculum itself, we will acknowledge the history, legacy, and current systemic harms perpetuated by the Canadian Healthcare system towards Indigenous people (TRC CA 23, 24; Kinàmàgawin CA 21). Furthermore, the curriculum will provide students with training on intercultural competency, the impact of colonization, Indigenous legal rights, respectfully incorporating Indigenous healing practices in the treatment of Indigenous patients in collaboration with Indigenous Healers and Elders, and the distinct health perspectives of Indigenous people in Canada (TRC CA 20, 22, 23, 24). This training will occur in an introductory Indigenous health course and will be built upon with newly developed Collaborative Indigenous Learning Bundles and other modules spread across the rest of the curriculum (Kinàmàgawin CA 15).

As we are not an Indigenous school, we require Indigenous faculty, Indigenous collaborators, and non-Indigenous faculty trained to respectfully work and co-teach with Indigenous community members (TRC CA 23; Kinàmàgawin CA 33). Within the first year of program development, we will hire an Indigenous faculty member with expertise in Ceremony. This faculty member will develop the primary, half-credit Indigenous Health course as they see fit. This course introduces students to Indigenous health and will have an experiential component that may contain land-based teaching and may be co-taught with Indigenous Knowledge Keepers, Elders and other Indigenous people with learned experience (NURS 1000 Indigenous Health; TRC CA 24; Kinàmàgawin CA 19). This course will prepare students for the rest of the curriculum which will contain modules on Indigenous perspectives on the healthcare topic.

To develop this material, we will need to develop relationships with Indigenous stakeholders such as Sivummut Solutions and the Southwest Ontario Aboriginal Health Access Center, as well as the communities of the Kitigan Zibi Anishinabeg, Algonquins of Pikwakanagan First Nation, the Mohawk

Nation of Akwesasne, and others through close collaboration with the Centre for Indigenous Support and Community Engagement. During the relationship building process, we will promote the available faculty and nursing educator positions, the seats reserved for Indigenous students, as well as the Indigenous Research in Science (IRIS) and the Black and Indigenous Summer Research Internship (BISRI) programs which will provide Indigenous students with the opportunity to research topics of their choice (TRC CA 23; Kinàmàgawin CA 10, 15, 20, 33).

To ensure support for our Indigenous faculty members, nursing educators, and students we will include the ability to respectfully and humbly collaborate with Indigenous communities as a hiring metric for non-Indigenous faculty. We will ensure this outcome by including Dr. Kahente Horn-Miller, Vice President, Indigenous Teaching, Learning, and Research on the hiring committees. Furthermore, we will recommend non-Indigenous faculty and nursing instructors take the Kinàmàgawin Indigenous Learning Certificate to ensure their ability to create a culturally safe learning environment (Kinàmàgawin CA 25). We will also direct faculty and nursing educators to collaborate with the Centre for Indigenous Support and Community Engagement throughout curriculum development and beyond. To ensure continual engagement, adaptation, and accountability we will also maintain an Indigenous Community Member Advisory Committee made up of Indigenous community members, healthcare partners, faculty, teaching staff, and nursing students to review and create curriculum, provide recommendations on student and instructor recruitment and retention, and provide recommendations for overall program improvement.

Through Kinàmàgawin, or learning together, with a curriculum formed through mutually respectful collaboration with Indigenous community members, material taught by Indigenous community members, and a culture that is welcoming, safe and supportive of Indigenous students, we will provide nursing students with a well-rounded education that encompasses both Western medical practices and Indigenous health knowledge, providing a foundation for meaningful living and learning.

Carleton University Equity, Diversity and Inclusion Action Plan

We will strive to meet the strategic actions laid out in the Carleton University Equity, Diversity, and Inclusion Action plan through a variety of avenues. Equity-driven and responsive nursing practices will be discussed and utilized throughout the course work (e.g., NURS 1003 Adult Health and Illness I, NURS 2011 Health Equity and Social Justice, NURS 2003 Adult Health and Illness II) and during clinical placements. Furthermore, students will have the opportunity to complete research projects applying EDI principles in response to community needs (SA1 - Curriculum and Pedagogy; SA3 - Research). We will ensure students are supported by promoting instructors utilize to tools such as the Faculty of Science EDI Teaching Toolkit, the Faculty of Science EDI in research pocket guide, and the School of Journalism and Communication's EDI checklist. Furthermore, we will promote instructors and nursing staff to complete EDI and anti-racism modules such as "Equity and Human Rights", "Equity in Your (work) Space – Faculty, Staff and Supervisors, "Inclusive Classroom – Faculty", "Responding to Disclosures of Sexual Violence", and "Breaking Down Barriers: Exploring Disability", Dignity and Ableism", all offered by the Department of Equity and Inclusive Communities. Institutional support for equity deserving groups will put into contracts and agreements with external stakeholders that are part of the program (SA2 –

Student Supports, SA5 – General Leadership Development (Non-Academic Employees), SA6 – General Leadership Development (Academic Employees)). Finally, this program is centred within the community and requires mutually respectful partnerships with a variety of community stakeholders and equity deserving groups. These partnerships will support change, and drive both the institution and the students towards dismantling structural underappreciation. A key mandate of the new faculty members will be to maintain these partnerships throughout the lifetime of the program, and we will endeavour to hire faculty members that best represent the diversity of the nursing profession (SA8 – Representation and Outreach). We will continue to collaborate with Dr. Krista Craven in the Department of Equity and Inclusive Communities to ensure we continue striving to embed EDI in the curriculum.

Coordinated Accessibility Strategy: Education and Training

To contribute to the Coordinated Accessibility Strategy's Education and Training we will ensure our students have a strong background in accessibility in their coursework (e.g., NURS 1003 Adult Health and Illness I, NURS 2011 Health Equity and Social Justice, NURS 2003 Adult Health and Illness II, NURS 1100 Experiential Learning – Simulation 1) Furthermore, we will work with the Paul Menton Centre to ensure students are able to complete their clinical placements free from accessibility barriers.

A.2. Relationship to other academic programs at Carleton

The nursing program parallels the School of Social Work as they are both professional programs, they require strong community connections for their placements, and they require the same simulation and training infrastructure. We are partnering with the School of Social Work to design interprofessional course work, coordinate community partnerships, design a robust framework for managing the necessary certifications for placements, and bolster our training methodologies and technologies (Appendix 5). Mental health is a strong component of a nursing education, and we have full support from Dr. Guy Lacroix, the Chair of Psychology, for the Psychology courses we have listed above (Appendix 5), as well as Dr. Matthew Holahan, Chair of Neuroscience. Dr. Holahan has also provided support for the Concentration in Neuroscience and Mental Health (Appendix 5). Core coursework will occur in the Faculty of Science's Department of Health Science (Appendix 5), and the Department of Neuroscience (Appendix 5). The Data Science Concentration has support from Dr. Michel Barbeau, Director of the School of Computer Science, and Dr. Robert Burk, Director of the School of Mathematics and Statistics. Furthermore, mentorship for new nursing students will be bolstered by Health Science and Neuroscience students within Carleton's Science Student Success Centre. Representatives from the Departments of Health Science, and Neuroscience³ as well as members of the Office of the Dean⁴ are on the steering committee to ensure consultation with the necessary academic units in the Faculty of Science and discussion of potential teaching assistant positions.

³ Chair of Health Science: Dr. Martin Holcik; Chair of Neuroscience: Dr. Matthew Holahan.

⁴ Dean of Science: Dr. Maria DeRosa; Associate Dean, Faculty Affairs: Dr. Sue Bertram; Associate Dean, Student Recruitment, Wellness and Success: Dr. Kim Hellemans; Associate Dean, Undergraduate Affairs: Dr. Julia Wallace.

B. Program Learning Outcomes and Assessment

B.1 Program learning outcomes

Table B.1: Learning outcomes

Learning Outcomes

- 1. Clinician and scholar: Integrates clinical knowledge, personal skills, and professional practice to provide safe, competent, ethical, compassionate, and evidence-informed care across the lifespan, in response to client needs.
- 2. Professional: Demonstrates accountability and fitness to practice by appraising one's scope of practice and identifying personal values and bias.
- 3. Advocate: Utilizes active listening to promote healthy client relationships and advocates and supports the client voice to achieve optimal health outcomes
- 4. Collaborator and coordinator: Determines and acts within their professional and interprofessional role within the healthcare community. Ensures continuous, safe care throughout the client's health care service delivery.
- 5. Leader: Integrates continuous quality improvement principles to provide innovative, ethical, and safe workplaces.
- 6. Educator and communicator: Applies current educational strategies, evidenced informed communication, and information and communication technologies across diverse clients and contexts.

B2: MAPPING LEARNING OUTCOMES TO PROVINCIAL DEGREE-LEVEL EXPECTATIONS (DLES)

The Council of Ontario Universities has established a framework of Degree Level Expectations (DLEs) that specify what students should know, and be able to do, after successfully completing degree program., List each program's learning outcomes and how these ensure that the appropriate degree level expectations are met.

Undergraduate DLEs:

1. Depth and breadth of knowledge

- 2. Knowledge of methodologies
- 3. Application of knowledge
- 4. Communication skills
- 5. Awareness of the limits of knowledge
- 6. Autonomy and professional capacity
- 7. Experiential Learning

Graduate DLEs

- 1. Depth and breadth of knowledge
- 2. Research and scholarship
- 3. Level of application of knowledge
- 4. Level of communication skills
- 5. Awareness of the limits of knowledge
- 6. Professional capacity/autonomy
- 7. Experiential Learning

Table B.2: Learning outcomes and degree level expectations

| Learning Outcomes | Degree Level Expectations Met⁵ |
|--|--|
| Clinician and scholar | 1. Depth and breadth of knowledge, |
| | 2. Knowledge and methodologies, |
| | 3. Application of knowledge |
| 2. Professional | 3. Application of knowledge, |
| | 4. Communication skills, |
| | 5. Awareness of the limits of knowledge, 6. Autonomy |
| | and professional capacity, |
| | 7. Experiential Learning |
| 3. Advocate | 4. Communication skills, |
| | 5. Awareness of the limits of knowledge, 6. Autonomy |
| | and professional capacity, |
| | 7. Experiential Learning |
| Collaborator and Coordinator | 4. Communication skills, |
| | 5. Awareness of the limits of knowledge, 6. Autonomy |
| | and professional capacity, |
| | 7. Experiential Learning |
| 5. Leader | 3. Application of knowledge, |
| | 4. Communication skills, |
| | 5. Awareness of the limits of knowledge, 6. Autonomy |
| | and professional capacity |
| 6. Educator and communicator | 1. Depth and breadth of knowledge, |
| | 2. Knowledge of methodologies, |
| | 3. Application of knowledge, |
| | 4. Communication skills, |
| | 5. Awareness of the limits of knowledge, 6. Autonomy |
| | and professional capacity, |
| | 7. Experiential Learning |

⁵ Additional information on the DLEs can be found at: https://oucqa.ca/framework/appendix-1/

B.3 Program structure and curriculum map

Program structure

The main programs are 2 direct entry, 3-year accelerated Bachelor of Science in Nursing programs. Students will enter the program as an Honours Bachelor of Science in Nursing student. Students can obtain a Bachelor of Science in Nursing Major by completing the degree with a CGPA of 4.0 overall and a CGPA of 4.0 in their major. Students can obtain an Honours Bachelor of Science in Nursing by completing an additional 0.5 credits in a research pathway (NURS 4011 Nursing Research Project or NURS 4112 Experiential Learning – Improving Nursing and NURS 4012 Nursing Research Proposal) and obtain an overall CGPA of 5.0 and a CGPA of 6.5 in their major. Furthermore, they can add a 3.5 credit concentration in either Data Science or Neuroscience and Mental Health. These program structures are outlined in Appendix 1.

Course work will take place on campus, or off-site in the case of clinical practicums and some Experiential Learning courses. Furthermore, online supplements will be created for clinical practicums. Clinical practicums will begin early in the program, both to ensure students have a strong applied clinical knowledge and to allow students to have a full understanding of the nursing profession early on⁶. Coursework will be bolstered with alternate reality and virtual reality delivery modalities (XR) and both off-site and on-site simulation. In our collaborations with Queensway Carleton Hospital, the School of Social Work, and various external clinical partners, each clinical experience will promote greater understanding of interprofessional practice.

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⁶ Students and recent nursing graduates noted in an in-person discussion at Queensway Carleton Hospital on July 17, 2023 that clinical practicums were a key experience when deciding whether to stay in the nursing program.

a. Program curriculum map

Program Curricular Mapping Connection to External Accreditation

All Nursing degree granting programs in Ontario must meet the external accreditation requirements from the College of Nurses of Ontario. Nursing programs meet these by providing evidence that the program prepares nurses to meet the Registered Nurse Entry to Practice Competencies (RN ETPC's). There are nine domains of ETPC's which include Clinician, Professional, Communicator, Collaborator, Coordinator, Leader, Advocate, Educator, and Scholar. There are ninety-three competencies that fall within the nine domains. Each competency requires evidential support for how the competency is met in theory, application, and evaluation with between one and three supportive explanations and sources of evidence. This mapping and submission included ~600 sources of evidence and explanations. The nine RN ETPC domains consistently cross-over and build from each other.

The nine RN ETPC domains for our external accreditation requirements have been condensed into our six program level learning outcomes that meet our internal quality assurance requirements. Therefore, in completing the RN ETPC mapping, we also complete our mapping for our internal Learning Outcomes providing additional, rigorous, quality assurance support and alignment of demonstration in program creation and maintenance.

Table B.3: Program curriculum map summary

| | Learning Outcomes | Year(s) to be Assessed ⁷ | Program Components ⁸ | Level ⁹ (I, R, M) | Activities and Artifacts ¹⁰ |
|----|-------------------|-------------------------------------|---------------------------------|---------------------------------|--|
| _ | | | • | (1, 11, 141) | |
| 1. | Clinician and | 2025, 2026, 2027 | NURS 1003 | l | Clinical Evaluation Tool, |
| | Scholar | | Adult Health | | Final Exam |
| | | | and Illness I | | |
| | | | NURS 2003 | R | Clinical Evaluation Tool, |
| | | | Adult Health | | Final Exam |
| | | | and Illness II | | |
| | | | NURS 3201 | М | Clinical Evaluation Tool, |
| | | | Clinical | | Final Exam |
| | | | Practicum - | | |
| | | | Consolidated | | |
| | | | Practicum I | | |

⁷ The year the learning outcome will be assessed, with each learning outcome assessed a minimum of two times.

⁸ Program components should include those core courses, elective courses, options (co-op, internship, mention Français, international experience), and other program requirements (language requirement, international experience) which contribute most directly to the achievement of the particular learning outcome.

⁹ Level of delivery of each program component related to the particular learning outcome: I = introductory; R = Reinforcement; M = Mastery (relevant to the expected outcome at the degree level).

¹⁰ Activities can include presentations, group work, performance, role play, etc. Artifacts can include exams, papers, reports, portfolios, cases, etc.

| 2. | Professional | 2025, 2026, 2027 | NURS 1001 | I | Portfolio |
|----|--------------|------------------|----------------|---|-----------------------|
| | | | Professional | | |
| | | | Nursing I | | |
| | | | NURS 2001 | R | Portfolio |
| | | | Professional | | |
| | | | Nursing II | | |
| | | | NURS 3001 | М | Portfolio |
| | | | Professional | | |
| | | | Nursing III | | |
| 3. | Advocate | 2025, 2026, 2027 | NURS 1001 | I | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing I | | , , |
| | | | NURS 2001 | R | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing II | | , , |
| | | | NURS 3001 | М | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing III | | |
| 4. | Collaborator | 2025, 2026, 2027 | NURS 1003 | I | Case Studies |
| | and | , , | Adult Health | | |
| | coordinator | | and Illness I | | |
| | | | NURS 2003 | R | Case Studies |
| | | | Adult Health | | |
| | | | and Illness II | | |
| | | | NURS 3001 | М | Case Studies |
| | | | Professional | | |
| | | | Nursing III | | |
| 5. | Leader | 2025, 2026, 2027 | NURS 1001 | 1 | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing I | | |
| | | | NURS 2001 | R | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing II | | |
| | | | NURS 3001 | М | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing III | | |
| 6. | Educator and | 2025, 2026, 2027 | NURS 1001 | 1 | Case Studies, Weekly |
| | communicator | | Professional | | Reflections, Projects |
| | | | Nursing I | | |
| | | | NURS 2001 | R | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing II | | |
| | | | NURS 3001 | М | Case Studies, Weekly |
| | | | Professional | | Reflections, Projects |
| | | | Nursing III | | |

(Notes: Please see Appendix 6 for further breakdown of program level learning outcome assessments and further curricular details)

Nursing Core Course Mapping

(Does not include concentrations)

Legend

| NURS Core Theory Class (required) |
|--|
| NURS Core Experiential Learning (required) |
| NURS Core Clinical Practicum (required) |

| Term | Core Course | | | | | | | | | | |
|-----------|---------------|-----------------|---------------|------------------|-------------------|-----------------|------------------|------------|---------------|--|--|
| 1F | NURS 1001 | NURS 1002 | | | NURS 1000 | | | | | | |
| | Professional | Human | | | Indigenous Health | | | | | | |
| | Nursing I | Anatomy and | | | | | | | | | |
| | | Physiology I | | | | | | | | | |
| | NURS 1202 | | | | NURS 1000 | | | | | | |
| | CP_Long-Term | Care | | | Indigenous Health | | | | | | |
| 1W | | | | NURS 1004 | | | | | | | |
| | | | | Pharmacology and | | | | | | | |
| | | | | Medication | | | | | | | |
| | | | | Management I | | | | | | | |
| | NURS 1100 Ex_ | Simulation I | | | | | | | | | |
| ļ | NURS 1201 CP_ | Chronic Care | | | | | | | | | |
| 1S | | | | | NURS 2011 | NURS 2016 | NURS 2000 | NURS 2012 | NURS 2013 | | |
| | | | | | Health Equity and | Introduction to | Community | Resilience | Interpersonal | | |
| | | | | | Social Justice | Health IT | Health | Training | Communication | | |
| | | | | | | | | | | | |
| | | | | | | | NURS 2100 | | | | |
| | | | | | | | Ex_Simulation II | | | | |
| 2F | NURS 2001 | | NURS 2014 | | | | | | | | |
| | Professional | | Mental Health | | | | | | | | |
| | Nursing II | | | | | | | | | | |
| | NURS 2108 Ex_ | Simulation III | | | | | | | | | |
| ļ | NURS 2200 CP_ | Mental Health 8 | Obstetrics | | | | | | | | |
| 2W | | NURS 2002 | | NURS 2004 | | | | | | | |
| | | Human | | Pharmacology and | | | | | | | |
| | | Anatomy and | | Medication | | | | | | | |
| | | Physiology II | | Management II | | | | | | | |
| | NURS 2201 CP_ | Acute Care | | | | | | | | | |
| 25 | | | NURS 3005 | | | NURS 3016 | NURS 3000 | | | | |

| | | | Pediatric and Youth NURS 3200 CP_Pediatrics | | | Research Methods for Nurses | | |
|------------|----------------|-------------------|--|-----------------------|--|--------------------------------|-----------|--|
| 3F | NURS 3001 | | NURS 3010 | NURS 3006 | | | | |
| | Professional | | Maternal Care | Palliative and End of | | | | |
| | Nursing III | | | Life Care | | | | |
| | NURS 3100 Ex_0 | Consolidation Sir | nulation IV | | | | | |
| | NURS 3002 Dire | cted Studies_NC | LEX | | | | | |
| 3W | | | | | | | NURS 4011 | |
| | | | | | | _ | Nursing | |
| | | | | | | • | Research | |
| | | | | | | | Project | |
| | | | | | | NURS 4112 | | |
| | | | | | | Ex_Improving | | |
| | | | | | | Nursing | | |
| | NURS 3101 Ex_0 | Consolidation Sin | nulation V | | | | | |
| | NURS 3201 CP - | Consolidated Pr | racticum I | | | | | |
| 3 S | NURS 4200 CP - | - Consolidated Pi | racticum II | | | | | |

The above mandatory, core course table outlines the structure of the proposed three-year Honours Bachelor of Science in Nursing program across each of the total nine terms (Fall, Winter, and Summer) providing a comprehensive overview of the core courses and their respective focus areas.

The core program employs three interwoven types of courses (Expanded descriptions in Appendix 6) including:

- 1. Core Theory class based, primarily theoretical.
- 2. Core Experiential Learning simulation laboratory based, primarily application focused using clinical scenarios and case studies. May also incorporate pre and post theory elements to set up and consolidate experiences.
- 3. Core Clinical Practicum clinical placement experiences, primarily direct application in a clinical setting. May also incorporate pre and post theory elements to set up and consolidate experiences.

B.4 Program learning outcomes assessment plan

The Bachelor of Science – Nursing Curriculum Committee (BSNCC) will be responsible for developing the assessment methodologies and conducting program-level learning outcome assessment. This will occur concurrently with CNO Competencies monitoring as the learning outcomes are based on the CNO competencies. The BSNCC will ensure assessments in the courses (e.g., exam questions, reports, simulation performance) that cover CNO competencies and learning outcomes are collected each year and utilized to monitor students understanding of the outcomes and competencies and reports will be generated from these data as required. The Nursing School Board will review the findings of the BSNCC assessment as well as any proposed curriculum changes recommended by the BSNCC. As the Nursing School Board is made up of the faculty members, the assessment plan and its findings will be reviewed and disseminated at the Nursing School Boards meetings as they are completed.

B.5 Program Essential Requirements

PREAMBLE

"Program essential requirements are defined by the Ontario Human Rights Commission as "the knowledge and skills that must be acquired or demonstrated in order for a student to successfully meet the learning objectives of that... program." The program essential requirements are components that contribute to the achievement of the learning outcomes of the program.

"An appropriate accommodation at the post-secondary level would enable a student to successfully meet the essential requirements of the program, with no alteration in bona fide standards or outcomes, although the way the student demonstrates mastery, knowledge and skills may be altered."

- Ontario Human Rights Commission's Policy on Accessible Education for Students with Disabilities (2018)

The aim of accommodation in a post-secondary context is to provide equal opportunities to all students to enjoy the same level of benefits and privileges and meet the requirements for acquiring an education. Based on these principles, an accommodation will be considered appropriate where it will result in equal opportunity for an otherwise qualified student with a disability to attain the same level of performance,

or enjoy the same level of benefits and privileges experienced by others, without compromising bona fide academic requirements.

"Program essential requirements are defined by the Ontario Human Rights Commission as "the knowledge and skills that must be acquired or demonstrated in order for a student to successfully meet the learning objectives of that... program." The program essential requirements are components that contribute to the achievement of the learning outcomes of the program.

"An appropriate accommodation at the post-secondary level would enable a student to successfully meet the essential requirements of the program, with no alteration in bona fide standards or outcomes, although the way the student demonstrates mastery, knowledge and skills may be altered."

- Ontario Human Rights Commission's Policy on Accessible Education for Students with Disabilities (2018)

The aim of accommodation in a post-secondary context is to provide equal opportunities to all students to enjoy the same level of benefits and privileges and meet the requirements for acquiring an education. Based on these principles, an accommodation will be considered appropriate where it will result in equal opportunity for an otherwise qualified student with a disability to attain the same level of performance, or enjoy the same level of benefits and privileges experienced by others, without compromising bona fide academic requirements.

Paul Menton Centre For Students with Disabilities (PMC)

The Paul Menton Centre is responsible for assessing requests for academic accommodation of students with disabilities through evaluations that are carried out on an individual basis, in accordance with human rights legislation and University policy, and with the support of relevant, professional/medical documentation. Students will only receive academic accommodation if the functional limitations of their disability impact directly on their academic performance."

General Comments – Clinical Nursing Placement Accommodations (PMC)

- "Each student with a disability is entitled to reasonable accommodation that will assist her/him
 to meet the program standards and academic requirements. Reasonable accommodation
 cannot compromise the essential requirements of a program or client/patient safety and wellbeing. The purpose of a reasonable accommodation is to ensure the student with a disability has
 the same opportunity as his/her student peers to attain the required operational level, but is
 not meant to guarantee success in the program." (Council of Ontario Universities, 2019)
- It will be important for the academic unit in consultation with the PMC to establish a process
 and guidelines for students to request accommodations for their clinical nursing practicum. See
 sample procedures/guidelines from York University: <u>Clinical-Placement-Accomodation-Guidelines Oct2020.pdf (yorku.ca)</u> and the University of Alberta:
 https://www.ualberta.ca/nursing/student-services/undergraduate/clinicals/clinical-accommodations.html.

- General tips for supporting students with disabilities in field practicum: https://paracor.org/supporting-students-with-field-practicum-adaptations
- Some best practices to mitigate risks (e.g., avoid human rights complaints, ensure quality and standards, ensure safety for clients at placement sites)
 - Work with academic unit to develop essential requirements and comprehensive detailed technical standards for all students. Essential program requirements and standards must be clear and match the nature of the program. Standards should mirror applicable professional standards, accreditation requirements, and licensing requirements. Incorporate behavior and professionalism requirements into the technical standards.
 - Communicate these standards and expectations when students are applying. Some
 nursing programs (e.g., Queen's) published a Statement on Student Accommodations
 when students are applying to their program <u>Statement on Student Accommodations</u> |
 <u>School of Nursing | Queen's University (queensu.ca)</u>
 - Communicate clearly the differences between course and clinical placement accommodations with the standards and risks being higher in the latter.
 - Establish clear guidelines and process for students to request accommodations for both courses and clinical practicum with deadlines.

C. Governance

The Bachelor of Science – Nursing program is housed in the School of Nursing and the Faculty of Science. The program is administered by the Nursing School Board which is made up of the Director, acting as chair of this committee, the faculty members of the school, and representation from the nursing educators and nursing students. This is the main decision-making body of the School and reviews all proposals for curriculum changes before submitting them to Science Committee on Academic Planning (SCAP). The School Board meets at least once a semester.

The Experiential Learning and Clinical Placement Committee (ELCPC) is made up of all practicum coordinators, and representation from faculty, the lab coordinators and nursing students. This committee will be chaired by a practicum coordinator. The occupational health nurse can attend in an advisory role. The ELCPC committee will liaise with external stakeholders directly involved with the program to ensure sustainable, safe, and mutually respectful collaborations within the Experiential Learning Labs and Clinical Placements. This committee also provides recommendations to the School Board for changes to the Clinical or Experiential Learning Lab curriculum and is responsible for producing the forms and procedures for clinical practicums and experiential learning labs. The chair of this committee, along with the director of the School, as necessary, will represent the School at the Regional Clinical Resource Committee meetings as well as other, external clinical placement committees.

The School of Nursing is committed to ensuring a strong community voice in the program. External Stakeholder Committees will be created to seek guidance from community members on how the program can best meet its focus on Indigenization, Decolonization and Reconciliation; integrating the patient and family voice; Equity, Diversity, Inclusion, and Belonging; and interprofessional practice. Additional committees will be formed and maintained as the School's relationships and the goals develop. Membership on these committees will be formed through community guidance, but will primarily consist of a faculty member acting as chair, and the necessary community members. The chair of the committee will be appointed by the director. These committees will regularly meet to provide guidance on how the Nursing program and its curriculum can better serve the members of the community and communicate recommendations to the School Board via committee chair reports.

The Bachelor of Science – Nursing Curriculum Committee (BSNCC) undertakes the duties necessary to ensure the maintenance of accreditation and the continued development of the nursing curriculum. The BSNCC is made up of the Undergraduate Program Supervisor who chairs the committee, and representation from faculty, and the nursing students. At least once a year, the committee will review the curriculum and make recommendations to ensure the curriculum is in-line with the current nursing accreditation bodies, as well as the school's mission. The committee can create new courses as the need arises, review and provide feedback on new university policies that affect the program, update and maintain forms involved with directed studies and research projects, review the learning outcomes of the program, and review the admissions process to ensure it is fair and equitable.

Support for this program is provided by the undergraduate program administrator in consultation with the director and Undergraduate Program Supervisor.

The undergraduate nursing students have the right to democratically form and maintain a society, governed by the society's constitution, to represent the interests of all full- and part-time undergraduate nursing students within the program. The affairs of this organization shall be in compliance with the policies and procedures of the Nursing School Board and the Carleton University Students' Association's policies. This organization is responsible for democratically selecting student representatives for the committees listed above, and reviewing and revising the society's constitution as necessary.

D. The Faculty

D.1. Faculty appointed to the unit or program.

We have recruited one faculty member and will recruit four more for the program. Currently, Danielle Manley is on a term contract until completion of the program's approval. Her position will convert to Associate Professor after program approval. Danielle brings an expertise in Health Informatics as well as Professional Practice. We will add an Associate Professor position with a specialty in Acute Care and Simulation. This position will be a Tier 1 Canadian Research Chair position and will utilize the research space in ARISE in collaboration with an external partner. Furthermore, this will be a senior appointment and will occur in 2025. We will hire three Instructor positions with specializations in:

- Indigenous Ceremony
- Geriatrics, Frailty, and Palliative Care
- Mental Health and Health Care Worker Resilience

These specialties were chosen in collaboration with Queensway Carleton Hospital. The Indigenous Instructor position with a specialty in Ceremony will be hired in 2025 to contribute to the first-year curriculum. The other hires will follow in 2026 and 2027. These appointments will provide a strong faculty background for Indigenization of the curriculum, Acute and Chronic Care, Health Informatics, professional practice, and for a strong research component in healthcare simulation. Throughout the hiring process, gender balance and diversity will be at the forefront. We will ensure this by starting with creating diverse hiring committee for each position. To reduce bias during the interviews, we will utilize a pre-approved rubric of questions evaluated in advance. Furthermore, Dr. Kahente Horn-Miller will be part of the hiring committee for the Indigenous Ceremony Instructor position and will guide the hiring process for other faculty members to ensure they are able to co-teach courses and develop curriculum with Indigenous Knowledge Keepers, Elders, and those with lived experiences, as well as support the programs Indigenous faculty and nursing educators. We do not foresee any retirements occurring within the school. As there are no graduate programs, all current resources will be allocated to the undergraduate program at this time.

Table D.1: Core program faculty

| Faculty Name | Rank | Appointment Status | Percentage Appointment | Supervision Privileges* | Area of Specialization/Field Affiliations |
|-----------------|--------------|-----------------------|---------------------------|----------------------------|---|
| Danielle | Instructor I | Term | 100% | M | Health Informatics and |
| Manley | (Assistant | (Preliminary) | | | Professional Practice |
| (September | Professor) | | | | |
| 2024) | | | | | |

^{*}D=full privileges; M=full privileges at master's level only; CD=co-supervision privileges at doctoral level, full privileges at master's level; CDM=co-supervision privileges only at both doctoral and master's level; CM=co-supervision privileges at master's level, no privileges at doctoral level

D.2. Faculty research funding.

As we have not hired research faculty yet, we cannot comment on their funding. However, the specialities above were chosen to allow for faculty to support the delivery of the practicums, the key curricular pillars of the program, and will allow for students to pursue honours projects in a variety of topics.

D.3. Distribution of thesis supervision.

As there is only an undergraduate nursing program, faculty will supervise honours thesis projects in nursing. Students will find a faculty supervisor by approaching current faculty and applying to complete a research project with them.

Table D.3: Distribution of thesis supervision (to be completed by the unit)

| Faculty | Rank | nk Completed Current | | | | | | | |
|--------------------|------|----------------------|----------|-----|-----|---------------|----------|-----|-----|
| Name | | Undergraduate | Master's | PhD | PDF | Undergraduate | Master's | PhD | PDF |
| Danielle Manley | 1 | (0) | (0) | (0) | (0) | (0) | (0) | (0) | (0) |

D.4. Nursing Educators

The core pillars of the course are taught and managed by faculty members. In alignment with the professional nature of the program, a high number of the courses (~36% of the courses) will be taught by nurse educator positions. By utilizing contracted nurse educators, we will maintain a strong, updated basis of practical and professional experience in the nursing programs as many nurse educators will come from working backgrounds or backgrounds with lived experiences. The choice to use a high number of nurse educators was in response to Queensway Carleton Hospital's recommendations and we are in discussions with Queensway Carleton Hospital to source nurse educators from their hospital. We will procure nursing educators from government offices (e.g., Health Canada) and future, local partners to build stronger connections to these local partners.

E. Program Admission and Enrolment

E.1. Admissions requirements

The minimum cut off range is 78-82% to reflect the competitive nature of the program. The admission requirements reflect the strong biomedical science background (4U (or equivalent) Biology, Chemistry, Advanced Functions with no individual grade below 70%) which is necessary to support the student's ability to achieve the learning outcomes of *Clinician and Scholar*. 4U English is necessary for being an *Educator and Communicator*. Short answer question and the CVs are added to further assess the prerequisites necessary for *Educator and Communicator*, as well as assessing whether the applicant has a strong *professional*, *advocacy*, *collaborative*, or *leadership* background. These two requirements were added in response to discussions with the School of Social Work (Appendix 3).

E.2. Class sizes and course and program capacity

We will have class sizes of 100-120 for the classes. This class size will be maintained throughout the program. We plan to have a maximum lab size of 50-60, but we will break the labs into smaller groups as necessary dependent on the activity. Labs using AR or VR may occur synchronously across sizes of 50 students, however, simulations will occur in groups of 10-15 students.

E.3. Projected enrolment

We project an initial enrolment of 110 students (100 domestic and 10 international), increasing to 165 students in year 3 (150 domestic and 15 international) and 220 (200 domestic and 20 international) students by year six. Ten of these seats will be reserved for Indigenous students. This number of seats based on internal data from the Office of Institutional Research and Planning showing a high demand for direct entry, English, 4-year B.Sc.N. Nursing programs in Ontario, and Ottawa specifically. There are 4823 ± 121 (mean \pm standard deviation) English students¹¹ applying a year, with 1646 ± 14 nursing students registering in Ontario Universities per year, leaving 3177 ± 130 potential nursing students¹² available in the province¹³. The University of Ottawa has the second highest mean number of English applications with 802 ± 50 applicants, 294 ± 37 registrants, and 508 ± 78 remaining applicants. Therefore, there is a strong regional demand for undergraduate B.Sc.N. programs. Additionally, Queensway Carleton Hospital has also noted that potential nursing candidates are increasingly interested in three-year, direct entry nursing programs of which there are very few in Canada. Therefore, we expect a strong and sustainable demand for the program.

¹¹ First-choice applicants are used as opposed to raw applicants as applicants can only indicate one first choice and are therefore a valid measure of a single applicant.

¹² Measured as the number of first choice applicants – the number of registrants as opposed to number of applications-number of registrants. Therefore, the total number of students still desiring to apply in this region are potentially underestimated.

¹³ Data was collected from TMU, Ottawa, McMaster, Western, Queen's, Trent, Windsor, Ontario Tech, Brock, Nipissing, and Laurentian from 2017-2020. York was removed due to incomplete reporting, and Lakehead did not report details on their Nursing programs.

To ensure our recruitment activities for nursing will reach a diverse pool of applicants, we will utilize Carleton University's existing undergraduate recruitment initiatives and maintain a strong presence in these recruitment activities over the duration of the program. Our Associate Dean Recruitment, Wellness and Success, will also oversee internal, Faculty-led initiatives, and work in collaboration with Undergraduate Recruitment to direct regional, provincial, national, and International, recruitment strategies.

The nursing program will be heavily featured in both the communication to prospective students and the events and initiatives for prospective students. The nursing program will be highlighted in undergraduate recruitment newsletters, email, phone and social media campaigns and will be featured in the general viewbook, the Indigenous student viewbook and science-specific printed publications. The nursing program will be added to the Undergraduate Admissions website, virtual tour and Carleton360 and will highlight the spaces where nursing students will study as well as include testimonials from faculty. The nursing program will be prominently highlighted during the over 500 high school visits – both in mainstream and Indigenous student recruitment – that happen across the country and especially in the diverse Greater Toronto Area. The high school and community visits in the GTA and other diverse areas of the province will provide a more direct connection between the program and the communities it serves. All recruitment activities and promotional materials will feature and promote that there are spaces in the Nursing program for Indigenous students. It is important to highlight this to actively encourage Indigenous students to apply. This will be heavily promoted during Indigenous recruitment activities and in recruitment materials developed for Indigenous students.

Nursing faculty members will participate in large-scale and popular recruitment events such as the Ontario Universities' Fair as well as three on-campus Open Houses events (Fall, Winter, and Spring). The program will host its own program spotlight event held on campus specifically for students interested in the nursing program. We will produce a spotlight video and online question and answer sessions to provide information to prospective students unable to attend the on-campus spotlight. Nursing faculty will also speak directly to Guidance Counsellors at the Guidance events that reach both Ottawa and GTA Guidance Counsellors.

To support outreach to younger high school grades, the Nursing program will also participate in high school workshops of which the Faculty of Science has a strong presence (e.g., Food Science, Neuroscience, Physics, Computer Science). These workshops may be held at a high school or as a field trip to Carleton.

To support additional applications, Queensway Carleton Hospital will promote its partnership with Carleton University for current staff as well as support recruitment to the program in its current diverse health provider population. We are in the process of discussing how to announce this program through federal, provincial and local government stakeholders in the media which will provide a large platform for advertising the program.

F. Student Experience and Satisfaction

F.1. Student orientation, advising, and mentoring

Working in collaboration with the Associate Dean, Recruitment, Wellness and Success and with the support of the Science Student Success Centre, we plan to have an orientation day for students before the first week of class. During this orientation, the Director will welcome the students, introduce the faculty members and staff, provide an overview of Carleton's services, tour campus and key locations and provide an overview of the curriculum. This will prepare the students for their upcoming year and familiarize them with the location of lab spaces and the resources available to the students. Following this, there will be a Q&A session with a panel of experienced nurses from Queensway Carleton Hospital and then an informal lunch with the faculty. Afterwards, students will tour the campus and the skills labs. The orientation will end with a workshop on an introduction to professionalism and ethics in nursing and a networking session afterwards. Overall, this will ensure the students are familiar with the program, the faculty, the university and their choice to embark on their futures as nurses.

Students will be guided throughout the program in the development of a learning plan portfolio submission. This activity is a requirement of the College of Nurses Quality Assurance program and aims to develop self-reflective and continuous growth for the student nurses. This allows for multiple touch points between students, faculty and supervisors to understand and be supported in their experiences. The student learning plan will be formally evaluated in each year of the program in Professional Nursing I (NURS 1001), Professional Nursing II (NURS 2001) and Professional Nursing III (NURS 3001) and cumulatively prior to graduation in the last clinical consolidation placement. Additionally, students will be oriented to a Student Handbook which includes a Code of Conduct and helpful resources specific to the nursing program. The program will look to build in peer mentorship as it progresses to give upper year nursing students the experience of mentoring and supporting lower year students. Students can contact the undergraduate program administrator and faculty members for advising and mentoring during program completion. We will also have a designated mentorship team within the Science Student Success Centre, consisting of upper year volunteers. Initially, these will be students in Health Sciences and Neuroscience, but over time they will be upper-year Nursing students. The main methods planned for communication to students include Brightspace, email, the university website and in-class/in person.

Faculty will take AODA Information and Communications Training and the AODA Customer Service Standards courses. Additionally, we will endeavour to ensure faculty members have completed the Kinàmàgawin Indigenous Learning Certificate within the first year of their appointments. Faculty and staff will also be instructed to utilize the Faculty of Science EDI teaching Toolkit, the Faculty of Science EDI in research pocket guide and complete the modules "Equity and Human Rights", "Equity in Your (work) Space – Faculty, Staff and Supervisors, "Inclusive Classroom – Faculty", "Responding to Disclosures of Sexual Violence", and "Breaking Down Barriers: Exploring Disability, Dignity and Ableism", all offered by the Department of Equity and Inclusive Communities.

F.2. Career paths of graduates

Registered Nurses can be frontline healthcare workers and can find employment in a variety of settings such as acute care hospitals, addiction & mental health centres/psychiatric hospitals, complex continuing care hospitals, rehabilitation hospitals, blood transfusion centres, cancer centres, children

treatment centres, client's environment, community care access centres, community health centres, community mental health programs, diabetes education centres, family health teams, hospices, local health integration network home and community care services, nurse practitioner led clinics, nursing/staffing agencies, physician's offices, public health units/departments, remote nursing stations, long-term care facilities, retirement homes, colleges, universities, correctional facilities, regulatory bodies, government, unions, health-related businesses/industry, schools, spa's, and telephone health advisory services (College of Nurses of Ontario, 2022). Registered Nursing positions can include job titles additional to Registered Nurse that may include Administrator, Nurse Manager, Professor, Program Developer, Assessor, Clinical Lead, Informaticist, Charge Nurse, Occupational Health Nurse, Psychotherapist, School Nurse and Consultant to name a few. Registered Nurses in Ontario can continue to graduate school where they may obtain a Masters or PhD degree. The most common graduate programs Registered Nurses pursue include Nursing, Education, Health Administration, and Business Administration which allows career progression into higher administrative or faculty positions. Nurses can complete specialty programs in a variety of topics such as diabetes education, foot care, wound care, palliative care, oncology, critical care, perioperative and intraoperative care, spiritual care, and nephrology to name a few. As summarized in the introduction, Ontario is experiencing a nursing shortage and therefore the outlook for available nursing positions is high and will remain so in the future. Furthermore, due to recent changes, by passing the NCLEX-RN exam, nurses can work in all Canadian provinces outside of Ontario and be considered for eligibility within all of North America.

G. Resources

This program will be housed within a new School of Nursing, inside of the Faculty of Science, similar to the School of Social Work housed within the Faculty of Public Affairs. The school will initially be made up of a director, undergraduate program supervisor, and three practicum coordinators. These positions will be filled by one existing faculty member and four more additional hires (see D.1. for details). One of these hires will be a Tier 1 Canada Research Chair. To support the program, we will hire five nursing educators (see D.4. for details), an undergraduate program administrator, an occupational health nurse, five lab coordinators, and 72.5 teaching assistants within the first three years of the program Additional nursing educators and teaching assistants will be added as necessary in the following years.

G.1. Support and technical staff

We will hire five lab coordinators who will aid in the design and maintenance of the experiential learning courses during the first cohort of the program. We will hire an undergraduate program administrator to oversee the administration of the program and provide guidance to the students in collaboration with the director of the program. We will hire a full-time occupational health nurse to verify immunization records, N95 fittings, provide immunizations, liaise with Environmental Health and Safety, and perform other duties involved with practicum management. This position will be utilized by the School of Social Work as well for the same functions involved in the School of Social Work's practicum management. 72.5 teaching assistants will be added for instructor support throughout the course work.

G.2. Space

We will utilize a variety of spaces for this program. Classes will be taught in pre-existing classroom spaces. We will utilize the Teaching and Learning Services' Experiential Learning Hub for XR simulation space. Experiential Learning courses will occur in on-campus teaching spaces as well as in off-campus spaces as defined with community partners. The simulation space will be housed in ARISE, and created and outfitted in collaboration with an external partner. Also, a 4100 SQFT suite in CTTC will be renovated into office and meeting space. Renovating this suite will facilitate a move out of current occupants in the INCO wing of Herzberg to allow the School of Nursing to be housed in Herzberg. Housing the School of Nursing in Herzberg is ideal given the proximity of Herzberg to ARISE. (Appendix 5).

a. Laboratory facilities

The nursing program will utilize a variety of laboratory facilities. It will utilize space in ARISE being allocated for a state-of-the-art skills and simulation lab with ancillary support spaces. Additionally, we will collaborate with Teaching and Learning Services to utilize the Experiential Learning Hub (TLS; Appendix 5) for XR simulation, as well as the School of Social Work's sim space. Off-campus, in-situ space will be determined in consultation with Queensway Carleton Hospital and other partners.

b. Unit/program and affiliated research facilities

We will utilize pre-existing classroom spaces and are currently discussing this with Scheduling and Systems at Carleton University. A 4100 SQFT suite in CTTC will be utilized as an office space for faculty, and meeting space for faculty and students. A space will be allocated in ARISE to house a simulation space outfitted by an external partner. This space will be utilized by the Tier 1 CRC for research on simulation education and will be utilized by students of the program for innovative simulation training.

c. University and unit/program computer facilities and computing resources

Students will provide their own computing resources for completing assignments as well as viewing online content and digital artifacts. We are providing access to 25 Meta Quest 3 XR headsets which will be available for nursing students to utilize for XR training, in addition to those available from the Future Learning Lab. Students will have access to recordings of their sim experiences for review outside of labs. Students will utilize a variety of high and low fidelity training mannequins, and other equipment such as gurneys and trolleys. Some of the facilities housing this equipment will be off-site at the Queensway Carleton Hospital.

G.3. Library Resources

An analysis of Carleton University Library's information resources and services in support of the Honours Bachelor of Science in Nursing program demonstrates that the Library will require the following base funds for collections and services to be able to support it:

- \$56,475 annually in ongoing funds (for subscriptions)
- \$74,335-\$118,052 + benefits annually for addition of one librarian position.

The Library's collection includes specific resources to support the Honours Bachelor of Science in Nursing program. These include 100% of the top-ranked nursing journals in Journal Citation Reports, classified under the Nursing category. In addition, the Library's collections of resources supporting the Health Sciences program are strong.

While the Library currently provides support for related programs, such as Health Sciences and Biomedical Sciences, the clinical nature of nursing education necessitates additional resources. Access to appropriate and timely resources (bibliographic databases, point of care tools, full text of journal articles, etc.) is essential for evidence-based practice. Since clinical decisions are made beyond regular working hours, digital resources are recommended as they are available and accessible at all times.

To enhance our existing collection, the Library is recommending the following products based on an examination of resources held by other Ontario university libraries who support Nursing programs. Note that these are primarily databases with annual, continuing costs. While these costs represent a best estimate as of June 2023, prices may be subject to change and adjustments may need to be made depending on available funding. These resources are:

- OVID Nursing Package (13 simultaneous users)
- Proguest Nursing and Allied Health Premium
- CINAHL Plus with Full Text
- Springer Nursing Curated Ebook package

The Report from the Library is included as **Appendix 4** of the self-study.

PREAMBLE

The Library report is prepared by the librarian or subject specialist responsible for the subject area(s) covered by the program, using a common template developed from guidelines established by the Ontario Council of University Libraries. The main purpose of the report is to specify whether any new resources or services are necessary in order to support the program, for example, whether the Library needs to purchase new books or subscribe to new journals or electronic resources.

The librarians and subject specialists preparing the reports rely on their own professional experience with collecting resources in the subject areas in order to make assessments about whether there are gaps in the collection that need to be filled in order to provide the appropriate teaching and research

support for new, modified, or reviewed programs. They consult various sources for information about published resources in the subject area, including the database maintained by the Library's main monographs vendor, publishers' lists and websites, handbooks and guides to the literature, the library collections of universities that offer the program, various specialized sites relevant to the subject from professional societies and organizations, as well as basic information available in tools such as Google Scholar or generally on the web. They also generally consult faculty members (e.g., the Library representative or the department chair) to discuss their assessment of the strengths and gaps. The Library makes a clear distinction between those resources which are essential to the program and those which are simply "nice to have." Generally speaking, the reports list only the essential resources, with costing obtained from the vendors or agents from which the Library would obtain the materials: each item is listed and costed individually, and the total amount is recorded in the report.

The report also provides context by providing information about the following, when possible or applicable: percentage of top-ranked journals which the Library subscribes to in the subject area(s); how much funds have been spent in the past fiscal year on e-resources, journals, and printed books in support of the subjects covered by the program; how much funds have been spent in the past 8 years on printed monographs for the program; specialized collections in archives, maps, data, and government information; instruction, teaching, and practicums carried out by Library staff in the classroom or in the Library; highlights from the Library website (e.g., links for subject and course guides and to online tutorials); research partnerships between the Library and the department or program; research consultations; help desk visits; and selected detailed statistical information about the Library

G. Development of the Self-Study

The steering committee for the nursing program consisted of internal representatives:

- Sue Bertram, Associate Dean, Faculty Affairs, Faculty of Science
- Maria DeRosa, Dean of Science, Faculty of Science
- Kim Hellemans, Associate Dean, Student Recruitment, Wellness, and Success, Faculty of Science
- Ethan Hermer, Professional Programs Officer, Office of the Dean of Science, Faculty of Science
- Matthew Holahan, Chair, Department of Neuroscience, Faculty of Science
- Martin Holcik, Nursing Program Lead, Chair, Department of Health Sciences, Faculty of Science
- Allison Jaworski, Director of Operations, Office of the Dean of Science, Faculty of Science
- Danielle Manley, Interim Director, School of Nursing, Faculty of Science
- Benny Michaud, Centre for Indigenous Support and Community Engagement, Office of the Provost and Vice-Provost (Academic)
- Jeff Smirle, Director of External Affairs, Office of the Dean of Science, Faculty of Science
- Julia Wallace, Associate Dean, Undergraduate Affairs, Faculty of Science

And external representatives:

- Jen Plant, Director, Clinical Practice, Queensway Carleton Hospital
- Yvonne Wilson, Vice President Patient Care & Chief Nursing Executive, Queensway Carleton Hospital

All representatives listed above contributed to the creation of the nursing program throughout the Executive Summary, Business Plan, or Volumes. Note that Danielle Manley started on the committee as the Manager, Nursing Professional Practice for Queensway Carleton Hospital before becoming the Interim Director of the School of Nursing. Dr. Kahente Horn-Miller provided the early recommendation to take the Kinàmàgawin Learning certificate and has provided comments on Volume 1. Lane Bourbonnière provided the Kinàmàgawin Learning certificate training to the steering committee and advised throughout the process. Dr. Sarah Todd provided advice on student recruitment, and program design. Nathasha Macdonald and the OIRP provided nursing application data in Ontario. Students and recent graduates at Queensway Carleton Hospital provided comments on pre-existing nursing programs. Alastair Mullin provided guidance on Government relations. Jamie Carmichael, Julia Piatigorskaia-Teplit and Phay Mui provided guidance on space allocation for the nursing program. Jen Sugar provided guidance on the admission criteria and recruitment. Jen Elliot provided guidance on recruitment. Dr. Krista Craven and Dr. Rowan Thomson provided guidance on incorporating EDI in the program. Dr. Adrian Chan provided guidance on incorporating accessibility into the program. Christine Noja, Sharzie Khoshnazar, Morgan Rooney, Natalie Phelan, Erika Strathearn and Dr. Lizzie Yan provided guidance on the curriculum and learning outcomes. Dr. Robyn Green provided guidance throughout the creation of Volume 1. We are currently applying to the College of Nurses of Ontario for preliminary program approval. Dr. Gautam Goel (Data Science), Nora Small (RN, Student Handbook), Michael Weedmark (RN, Interpersonal Communication and Health Equity), and Victoria Gervais (Clinical Practice) produced curricula and other materials for the CNO. Dr. Ojistoh Horn provided comments on the curriculum.

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Appendix 1 - Course Calendar

Nursing

B.Sc.N. Honours (20 credits)

| A. Credits included in the Major CGPA (14.0 credits) | | |
|--|---|-----|
| 1. 7.5 credits in: | | 7.5 |
| NURS 1000 [0.5] | Indigenous Health | |
| NURS 1001 [0.5] | Professional Nursing I | |
| NURS 1002 [0.25] | Human Anatomy and Physiology I | |
| NURS 1003 [0.5] | Adult Health and Illness I | |
| NURS 1004 [0.25] | Pharmacology and Medication Management I | |
| NURS 2000 [0.25] | Community Health | |
| NURS 2001 [0.5] | Professional Nursing II | |
| NURS 2002 [0.25] | Human Anatomy and Physiology II | |
| NURS 2003 [0.5] | Adult Health and Illness II | |
| NURS 2004 [0.25] | Pharmacology and Medication Management II | |
| NURS 2011 [0.25] | Health Equity and Social Justice | |
| NURS 2012 [0.25] | Resilience Training | |
| NURS 2013[0.25] | Interpersonal Communication | |
| NURS 2014 [0.25] | Mental Health | |
| NURS 2016 [0.25] | Introduction to Health IT | |
| NURS 3000 [0.25] | Research Methods for Nurses | |
| NURS 3001 [0.5] | Professional Nursing III | |
| NURS 3002 [0.25] | Directed Studies - NCLEX | |

| Pediatrics and Youth Palliative and End of Life Care Maternal Care Introduction to AI and ML in Healthcare Experiential Learning — Simulation I Experiential Learning — Simulation III Experiential Learning — Consolidation Simulation IV | 1.75 |
|--|--|
| Maternal Care Introduction to AI and ML in Healthcare Experiential Learning — Simulation I Experiential Learning — Simulation II Experiential Learning — Simulation III Experiential Learning — Consolidation Simulation IV | 1.75 |
| Introduction to AI and ML in Healthcare Experiential Learning – Simulation I Experiential Learning – Simulation II Experiential Learning – Simulation III Experiential Learning – Consolidation Simulation IV | 1.75 |
| Experiential Learning — Simulation I Experiential Learning — Simulation II Experiential Learning — Simulation III Experiential Learning — Consolidation Simulation IV | 1.75 |
| Experiential Learning – Simulation II Experiential Learning – Simulation III Experiential Learning – Consolidation Simulation IV | 1.75 |
| Experiential Learning – Simulation II Experiential Learning – Simulation III Experiential Learning – Consolidation Simulation IV | |
| Experiential Learning – Simulation III Experiential Learning – Consolidation Simulation IV | |
| Experiential Learning – Consolidation Simulation IV | |
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| Experiential Learning – Consolidation Simulation V | |
| | 4.25 |
| Clinical Practicum – Long-Term Care | |
| Clinical Practicum – Chronic Care | |
| Clinical Practicum – Mental Health & Obstetrics | |
| Clinical Practicum – Acute Care | |
| Clinical Practicum – Pediatrics | |
| Clinical Practicum - Consolidated Practicum I | |
| Clinical Practicum - Consolidated Practicum II | |
| | 0.5 |
| Nursing Research Project | |
| | |
| Nursing Research Proposal | |
| Experiential Learning – Improving Nursing | |
| | Clinical Practicum – Long-Term Care Clinical Practicum – Chronic Care Clinical Practicum – Mental Health & Obstetrics Clinical Practicum – Acute Care Clinical Practicum – Pediatrics Clinical Practicum - Consolidated Practicum I Clinical Practicum - Consolidated Practicum II Nursing Research Project |

| 5. 2.5 credits in: | | 2.5 |
|------------------------|-----------------------------------|------|
| HLTH 1001 [0.5] | Principles of Health I | |
| HLTH 2004 [0.5] | Microbiology and Virology | |
| PSYC 1001 [0.5] | Introduction to Psychology I | |
| PSYC 1002 [0.5] | Introduction to Psychology II | |
| PSYC 2301 [0.5] | Introduction to Health Psychology | |
| 6. 3.5 credits in free | electives. | 3.5 |
| Total Credits | | 20.0 |

Nursing

B.Sc.N. Major (20 credits)

| A. Credits included in the Major CGPA (14.0 credits) | | |
|--|---|-----|
| 1. 7.5 credits in: | | 7.5 |
| NURS 1000 [0.5] | Indigenous Health | |
| NURS 1001 [0.5] | Professional Nursing I | |
| NURS 1002 [0.25] | Human Anatomy and Physiology I | |
| NURS 1003 [0.5] | Adult Health and Illness I | |
| NURS 1004 [0.25] | Pharmacology and Medication Management I | |
| NURS 2000 [0.25] | Community Health | |
| NURS 2001 [0.5] | Professional Nursing II | |
| NURS 2002 [0.25] | Human Anatomy and Physiology II | |
| NURS 2003 [0.5] | Adult Health and Illness II | |
| NURS 2004 [0.25] | Pharmacology and Medication Management II | |
| NURS 2011 [0.25] | Health Equity and Social Justice | |

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| NURS 4200 [1.0] | Clinical Practicum - Consolidated Practicum II | |
|--|--|------|
| B. Credits not Included in the Major (6.5 Credits) | | |
| 4. 2.5 credits in: | | 2.5 |
| HLTH 1001 [0.5] | Principles of Health I | |
| HLTH 2004 [0.5] | Microbiology and Virology | |
| PSYC 1001 [0.5] | Introduction to Psychology I | |
| PSYC 1002 [0.5] | Introduction to Psychology II | |
| PSYC 2301 [0.5] | Introduction to Health Psychology | |
| 5. 4.0 credits in free | electives. | 3.5 |
| Total Credits | | 20.0 |

Concentration in Data Science (3.5 credits)

| A. Credits included in | the Concentration (3.5 credits) | |
|------------------------|--|-----|
| 1. 0.5 credits from: | | 0.5 |
| NURS 4011 [0.5] | Nursing Research Project | |
| or | | |
| NURS 4112 [0.25] | Experiential Learning – Improving Nursing | |
| & NURS 4012 [0.25 | Nursing Research Proposal | |
| 2. 3.0 credits in: | | 3.0 |
| NURS 2026 [0.5] | Data Management and Advanced Data Analytics in Healthcare | |
| NURS 2036 [0.5] | Designing and Deploying Technology Enabled Clinical Workflows | |
| NURS 2046 [0.5] | Healthcare Technology Evaluation, Procurement and Project Management | |
| NURS 2056 [0.5] | Ethics, Legalities and Regulation in Healthcare Data Science | |
| NURS 3000 [0.25] | Research Methods for Nurses | |

| Total Credits | | 3.5 |
|------------------|---|-----|
| NURS 3066 [0.5] | Seminar – Nursing Data Science | |
| NURS 3016 [0.25] | Introduction to AI and ML in Healthcare | |

Concentration in Neuroscience and Mental Health (3.5 credits)

| A. Credits included in the Concentration (3.5 credits) | | |
|--|--|-----|
| 3. 3.0 credits in: | | 3.0 |
| NEUR 1202 [0.5] | Neuroscience of Mental Health and Psychiatric Disease | |
| NEUR 1203 [0.5] | Neuroscience of Mental Health and Neurological Disease | |
| NEUR 2201 [0.5] | Cellular and Molecular Neuroscience | |
| NEUR 2202 [0.5] | Neurodevelopment and Plasticity | |
| NEUR 3204 [0.5] | Neuropharmacology | |
| NEUR 4306 [0.5] | The Neural Basis of Addiction | |
| 5. 0.5 credits from: | | 0.5 |
| NEUR 3304 [0.5] | Hormones and Behaviour | |
| NEUR 3401 [0.5] | Environmental Toxins and Mental Health | |
| NEUR 3501 [0.5] | Neurodegeneration and Aging | |
| NEUR 3502 [0.5] | Neurodevelopmental Determinants of Health | |
| Total Credits | | 3.5 |

Appendix 2 - Course Descriptions

New Courses

NURS 1000 [0.5 credit]

Indigenous Health

Learners will review the Calls to Action of the Truth and Reconciliation Commission of Canada and begin to understand their role in transforming health systems and addressing Indigenous specific racism through theory and practice.

Includes: Experiential Learning Activity

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 1001 [0.5 credit]

Professional Nursing I

Introduction to professional nursing practice. Develops understanding and application of key principles essential for professional identity as a Registered Nurse, including self-regulation, accountability, ethical conduct, and professional integrity.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 1002 [0.25 credit]

Human Anatomy and Physiology I

Comprehensive understanding of human body structure and function, emphasizing nursing and health assessment focus from cells to systems.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 1003 [0.5 credit]

Adult Health and Illness I

Foundational skills in patient management and human physical assessment for effective nursing care, focusing on patient-centered approaches, ethical decision-making, and interprofessional teamwork. Includes: Experiential Learning Activity

Prerequisite(s): NURS 1001, NURS 1002. Restricted to Bachelor of Science in Nursing students. Lectures three hours a week.

NURS 1004 [0.25 credit]

Pharmacology and Medication Management I

In-depth exploration of pharmacology for nursing. Covers drug effects, patient care roles, and practical application, guided by the CNO Foundational Standard, Medication.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

NURS 1100 [0.25 credit]

Experiential Learning – Simulation I

Connects NURS 1002 theory with augmented reality, virtual reality, and simulation applications. Topics include patient management, protective equipment, and assessment techniques.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 1004. Restricted to Bachelor of Science in Nursing students.

Lecture three hours a week.

NURS 1200 [0.25 credit]

Clinical Practicum – Long-Term Care

Clinical practicum introducing healthcare environment, focusing on applying theoretical nursing knowledge, policy understanding, and practice in an interdisciplinary context.

Includes: Experiential Learning Activity

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

On and off-campus placements from 20-100 hours a semester.

NURS 1201 [0.5 credit]

Clinical Practicum – Chronic Care

Clinical practicum on chronic illness care, integrating theoretical knowledge with practical skills in assessment, documentation, and medication administration.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 1001, NURS 1002, and NURS 1200. Restricted to Bachelor of Science in Nursing students.

Off-campus placements from 20-100 hours a semester.

NURS 2000 [0.25 credit]

Community Health

Introduction to nursing community support systems, focusing on Ontario-based community care delivery models, harm reduction, epidemiology and navigating healthcare systems. Covers well child promotion and immunization.

Prerequisite(s): NURS 1003, NURS 1100. Restricted to Bachelor of Science in Nursing students. Lectures three hours a week.

NURS 2001 [0.5 credit]

Professional Nursing II

Builds on NURS 1001, moves from understanding general role of a Registered Nurse to personal identity as a Registered Nurse. Incorporates Quality Assurance, Safety and Harm mitigation principals.

Prerequisite(s): NURS 1001. Restricted to Bachelor of Science in Nursing students.

NURS 2002 [0.25 credit]

Human Anatomy and Physiology II

Advanced course on human anatomy and physiology, focusing on complex body system interactions and pathophysiology.

Prerequisite(s): NURS 1002. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2003 [0.5 credit]

Adult Health and Illness II

Advances from NURS 1003, integrates complex patient care management and systems focus, pharmacology, and consolidated nursing practice knowledge.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 1003. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2004 [0.25 credit]

Pharmacology and Medication Management II

Deepens pharmacological knowledge and skills, focusing on complex aspects of pharmacology and its application in nursing practice. Introduces RN Prescribing.

Prerequisite(s): NURS 1004. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2011 [0.25 credit]

Health Equity and Social Justice

Develops understanding of social determinants of health and their impact on health outcomes. Reviews specific populations to understand health beyond physiology.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2012 [0.25 credit]

Resilience Training

Explores resilience, grit, and psychological safety in nursing, focusing on thriving under stress, reflecting on the COVID-19 pandemic's impact, and developing personal resilience strategies.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

NURS 2013 [0.25 credit]

Interpersonal Communication

Focuses on introduction and development of effective communication strategies in healthcare, including therapeutic, interprofessional, closed loop, conflict resolution and feedback skills.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2014 [0.25 credit]

Mental Health

Introduces Mental Health Nursing in Ontario, covering disease, diagnosis, care plans, pharmacological management, DSM-IV, and The Mental Health Act.

Prerequisite(s): NURS 1003. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2016 [0.25 credit]

Introduction to Health IT

Introduces clinical informatics and health IT, covering coding, data management, electronic health records (EHRs), telehealth, wearables, and the impact of social determinants on technology access and usability.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2026 [0.5 credit]

Data Management and Advanced Data Analytics in Healthcare

Advanced data analytics and management in healthcare, including predictive modelling, statistical analysis, and constructing data mining workflows.

Prerequisite(s): NURS 2016. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2036 [0.5 credit]

Designing and Deploying Technology Enabled Clinical Workflows

Techniques for integrating technology into clinical workflows, focusing on wearables, AI tools, and technology deployment challenges.

Prerequisite(s): NURS 2016. Restricted to Bachelor of Science in Nursing students.

NURS 2046 [0.5 credit]

Healthcare Technology Evaluation, Procurement and Project Management

Evaluation, procurement, and project management of healthcare technologies, focusing on AI-specific metrics and implementation strategies.

Prerequisite(s): NURS 2016. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2056 [0.5 credit]

Ethics, Legalities and Regulation in Healthcare Data Science

Ethical, legal, and regulatory frameworks around AI and data security in healthcare, examining technology's impact on access and ethical deployment.

Prerequisite(s): NURS 2016. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2100 [0.25 credit]

Experiential Learning – Simulation II

Expands on NURS 1100 with more complex patient management scenarios, using augmented reality, virtual reality, and simulation.

Includes: Experiential Learning

Prerequisite(s): NURS 1100. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2108 [0.25 credit]

Experiential Learning – Simulation III

Advanced simulation lab, focusing on complex patient management and health assessment in various clinical scenarios.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 2100, NURS 2014. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 2200 [0.5 credit]

Clinical Practicum - Mental Health & Obstetrics

Clinical practicum in mental health and maternal/child care, integrating complex assessments, documentation, and medication administration.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 1201. Restricted to Bachelor of Science in Nursing students.

Off-campus placements from 20-100 hours a semester.

NURS 2201 [0.5 credit]

Clinical Practicum - Acute Care

Clinical practicum in acute illness care, applying advanced theoretical knowledge and practice in rapidly changing clinical scenarios.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 1002, NURS 1003, NURS 1004, and NURS 2001. Restricted to Bachelor of Science in Nursing students.

Off-campus placements from 20-100 hours a semester.

NURS 3000 [0.25 credit]

Research Methods for Nurses

Explores research methodologies essential for evidence-based nursing practice, aiming to equip students with critical analysis, research ethics, and independent research skills.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 3001 [0.5 credit]

Professional Nursing III

Continued understanding of professional identity in a regulated profession. Incorporates role of leadership, advocacy and educator.

Prerequisite: NURS 2001. Restricted to Bachelor of Science in Nursing students.

Lectures three hours per week.

NURS 3002 [0.25 credit]

Directed Studies - NCLEX

Directed studies integrating material from throughout the program in preparation for NCLEX exam writing.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 3005 [0.5 credit]

Pediatrics and Youth

Pediatrics and youth healthcare, covering physical, psychological, and social assessment, and family healthcare.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 3006 [0.5 credit]

Palliative and End of Life Care

Comprehensive course on palliative and end-of-life care, covering symptom management, advanced care planning, MAiD and ethical considerations.

Prerequisite(s): Restricted to Bachelor of Science in Nursing students.

NURS 3010 [0.25 credit]

Maternal Care

Care for maternal and newborn health, including lactation support, childbirth practices, and family healthcare assessment.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 2002, NURS 2003, NURS 2004, and NURS 2200. Restricted to Bachelor of Science

in Nursing students.

Lectures three hours a week.

NURS 3016 [0.25 credit]

Introduction to AI and ML in Healthcare

Fundamentals of AI and ML in healthcare, covering data classification, mining, ethical data use, and exploring AI/ML architectures.

Prerequisite(s): NURS 2016. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 3066 [0.5 credit]

Seminar - Nursing Data Science

Seminars and discussions on current Nursing Data Science topics.

Prerequisite(s): Third-year standing in the Nursing program. Restricted to Bachelor of Science in Nursing students.

Seminars three hours a week.

NURS 3100 [0.5 credit]

Experiential Learning – Consolidation Simulation IV

Consolidated simulation lab for complex clinical scenario practice, supporting final clinical practicum preparation.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 2108, NURS 3200. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 3101 [0.5 credit]

Experiential Learning - Consolidation Simulation V

Consolidated simulation lab for complex clinical scenario practice, supporting final clinical practicum preparation.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 3100. Restricted to Bachelor of Science in Nursing students.

Lectures three hours a week.

NURS 3200 [0.5 credit]

Clinical Practicum – Pediatrics

Clinical practicum in pediatrics, focusing on complex care, assessments, and integrating pediatric healthcare principles.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 2200. Restricted to Bachelor of Science in Nursing students.

Off-campus placements from 20-100 hours a semester.

NURS 3201 [1.0 credit]

Clinical Practicum - Consolidated Practicum I

Students complete clinical placement to consolidate theory and application to advance toward graduation.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 3200. Restricted to Bachelor of Science in Nursing students.

Off-campus placements with at least 250 hours a semester.

NURS 4000 [0.25 credit]

Topics in Nursing I

Specific topics of current interest. Topics may vary from year to year.

Includes: Experiential Learning Activity

Prerequisite(s): Third-year standing in the Nursing program. Restricted to Bachelor of Science in Nursing students.

Lecture, seminars or workshops three hours per week.

NURS 4001 [0.5 credit]

Topics in Nursing II

Specific topics of current interest. Topics may vary from year to year.

Includes: Experiential Learning Activity

Prerequisite(s): Third-year standing in the Nursing program. Restricted to Bachelor of Science in Nursing students.

Lecture, seminars or workshops three hours per week.

NURS 4011 [0.5 credit]

Nursing Research Project

An independent research project undertaken in the field and/or the laboratory, under the direct supervision of a faculty adviser. Evaluation is based on a written thesis.

Prerequisite(s): NURS 3000. Restricted to Bachelor of Science in Nursing students.

NURS 4012 [0.25 credit]

Nursing Research Proposal

An independent critical review and research proposal, using library resources, under the direct supervision of a Faculty advisor. Evaluation is based on a written report.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 3000. Restricted to Bachelor of Science in Nursing students.

Workshop three hours a week.

NURS 4112 [0.25 credit]

Experiential Learning – Improving Nursing

Seminars on current issues in nursing.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 3000. Restricted to Bachelor of Science in Nursing students.

Lectures and seminars three hours a week.

NURS 4200 [1.0 credit]

Clinical Practicum - Consolidated Practicum II

Students complete clinical placement to consolidate theory and application to advance toward graduation.

Includes: Experiential Learning Activity

Prerequisite(s): NURS 3201, NURS 3101. Restricted to Bachelor of Science in Nursing students.

Off-campus placements with at least 300 hours a semester.

Existing Courses

HLTH 1001 [0.5 credit]

Principles of Health I

Health and illness will be considered from an interdisciplinary perspective, including biomedical, cultural, psychosocial and environmental.

Precludes additional credit for HLTH 1000.

Lecture three hours a week.

HLTH 2004 [0.5 credits]

Microbiology and Virology

Introduction to the pathogenic microorganisms, including fungal, bacterial, viral and prion. Biochemical, genetic, pathological and epidemiological aspects in the human context; their interaction with host defense systems and strategies for antibiotic and vaccine development.

Includes: Experiential Learning Activity

Precludes additional credit for HLTH 3301 (no longer offered).

Prerequisite(s): HLTH 1000 and BIOL 1103 or permission of the department.

Lecture three hours a week, and laboratory three hours a week.

NEUR 1202 [0.5 credit]

Neuroscience of Mental Health and Psychiatric Disease

Clinical symptoms of psychiatric disease, including biological, developmental, experiential and environmental factors that contribute to disease. Topics may include depressive and anxiety disorders, schizophrenia, autism, ADHD, anorexia, narcolepsy, and substance use disorders.

Precludes additional credit for NEUR 1201 (no longer offered).

NEUR 2201 [0.5 credit]

Cellular and Molecular Neuroscience

Core principles in cellular and molecular neuroscience, including signal transmission along and between neurons, ion channels and transporters, intracellular signaling pathways, and regulation of gene expression.

Precludes additional credit for PSYC 3200 (no longer offered) and NEUR 3200 (no longer offered).

Prerequisite(s): Either NEUR 1201 and NEUR 1203, or NEUR 1202 and NEUR 1203, or both BIOL 1103 and BIOL 1104.

Lectures three hours a week, online labs.

NEUR 2202 [0.5 credit]

Neurodevelopment and Plasticity

Core principles in nervous system development from embryogenesis to plasticity in the adult brain. Topics include neural induction, neurogenesis, apoptosis, neuronal migration and axon growth, synaptogenesis and synaptic pruning both under normal conditions and in psychopathology. Precludes additional credit for PSYC 3200 (no longer offered) and NEUR 3200 (no longer offered).

Prerequisite(s): NEUR 2201.

Lectures three hours a week, online labs.

NEUR 3204 [0.5 credit]

Neuropharmacology

Overview of chemical neurotransmission and key neurotransmitter systems. A description of licit and illicit drugs covering topics that range from historical perspectives to pharmacology to mechanisms of action in the brain. Discussion of neurochemical basis of psychiatric diseases including anxiety, depression and schizophrenia.

Precludes additional credit for PSYC 3204 (no longer offered).

Prerequisite(s): NEUR 2200 or NEUR 2201.

Lectures and seminars three hours a week.

NEUR 3304 [0.5 credit]

Hormones and Behaviour

The effects of hormones throughout life at all levels of the nervous system. The role of hormones in mediating behaviours that are both basic (feeding, reproduction and social interactions) and complex (motivation, emotion, learning and memory).

Prerequisite(s): NEUR 2200 or both NEUR 2201 and NEUR 2202.

Lectures three hours a week.

NEUR 3401 [0.5 credit]

Environmental Toxins and Mental Health

Exposure to environmental toxins from the air, water or food can interfere with neuronal function, alter neurodevelopment, and damage the brain. This course will explore associations between toxins and diseases such as Parkinson's disease, multiple sclerosis and depression, focusing on mechanisms underlying development of pathology.

Prerequisite(s): NEUR 2200 or both NEUR 2201 and NEUR 2202.

NEUR 3501 [0.5 credit]

Neurodegeneration and Aging

Perspectives on aging and neurodegeneration from psychosocial and neuroscience points of view. How factors including TBI, stroke and alcohol make the brain vulnerable and contribute to neurodegeneration. Clinical overview of Alzheimer's, Parkinson's, Huntington's and ALS and the underlying pathology that differentiates these diseases.

Prerequisite(s): NEUR 2200 or both NEUR 2201 and NEUR 2202.

Lectures three hours a week.

NEUR 3502 [0.5 credit]

Neurodevelopmental Determinants of Mental Health

Development of the human brain, the generation and differentiation of the various cell types, and the formation of the vast network of neural connections. How neurodevelopmental dysregulation can result in pathologies including dyslexia, ADHD, schizophrenia and autism.

Prerequisite(s): NEUR 2200, or both NEUR 2201 and NEUR 2202.

Lectures three hours a week.

NEUR 4306 [0.5 credit]

The Neural Basis of Addiction

How substance and behavioural addictions impact neural function to ultimately lead to the neuropathology of addiction in vulnerable populations. Contemporary neurobiological theories of addiction will also be addressed.

Precludes additional credit for NEUR 3306.

Prerequisite(s): NEUR 3204.

Lecture three hours a week.

PSYC 1001 [0.5 credit]

Introduction to Psychology I

A survey of topics associated with psychology's role as a natural science, including neuroscience, cognition, and learning.

Precludes additional credit for PSYC 1000.

Lecture three hours a week.

PSYC 1002 [0.5 credit]

Introduction to Psychology II

A survey of topics associated with psychology's role as a social science, including social psychology, personality, clinical psychology, and mental health.

Precludes additional credit for PSYC 1000.

Prerequisite(s): PSYC 1001.

PSYC 2301 [0.5 credit]

Introduction to Health Psychology

Using a multidisciplinary approach, this introductory course outlines the reciprocal interactions among physical health and illness, and psychological factors, including emotional well-being, coping and appraisal processes.

Precludes additional credit for PSYC 3406.

Prerequisite: PSYC 1001 and PSYC 1002.

Lectures and seminars three hours a week.

Appendix 3 - Admission Requirements

Admissions Requirements:

- OSSD with six Grade 12 courses at the 4U or 4M level (or equivalent)
- Prerequisite courses must be at the 4U level with no individual grade below 70%
- Grade 12 4U/4M credits for co-op work experience will not be considered as part of the six courses
- Students are expected to present a minimum percentage grade and prerequisite average. Please see the chart below for minimum cut-off ranges. Grade ranges apply to the overall and prerequisite average.
- The overall average required for admission is determined each year on a program-by-program basis. All programs have limited enrolment. Admission is not guaranteed and all requirements are subject to change.

Required Courses:

- English
- Advanced Functions
- Biology
- Chemistry

(Calculus and Vectors strongly recommended)

Minimum Cut-off range

78-82%

Students will also be asked to submit a supplementary application consisting of a few short (500 word maximum) questions that will be determined on a year-by-year basis, and fill out an online CV.

Also note that Nursing will be added to the list of programs that require a fully passing English language score. You can see the bulleted list here: https://admissions.carleton.ca/esl/ underneath table 2.

Appendix 4 - Library Report



Institutional Quality Assurance Process

Library Report for Honours Bachelor of Science- Nursing Program

New Program

Date: June 13, 2023

Compiled by: Laura Newton Miller, Head of Collections & Assessment; & George Duimovich,

Collections Librarian

Submitted to: Christina Noja, Manager, Office of the Vice-Provost and Associate

Vice-President (Academic)

cc Amber Lannon, University Librarian

Sarah Simpkin, Associate University Librarian, Academic Services

Sally Sax, Head of Electronic Resources & Acquisitions

Joel Rivard, Head of Research Support Services

Overview and Recommendations

An analysis of Carleton University Library's information resources and services in support of the Honours Bachelor of Science in Nursing program demonstrates that the Library will require the following funds for collections and services to be able to support it:

- \$56,475 annually in ongoing funds (for subscriptions)
- \$74,335-\$118,052 +benefits annually for addition of one librarian position

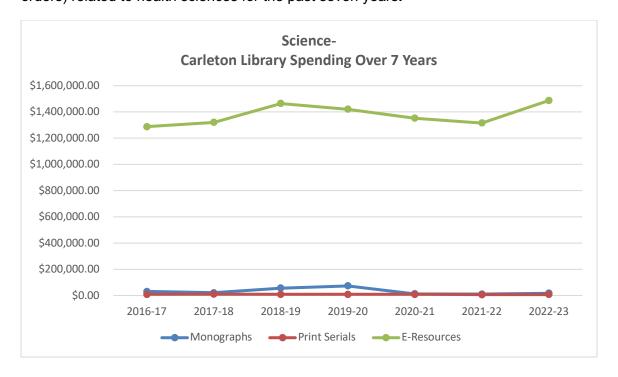
See Appendix for a costed list of the required titles and services.

Library Collections Subject Specific

The Library's collection includes specific resources to support the Honours Bachelor of Science in Nursing program. These include 100% of the top-ranked nursing journals in Journal Citation Reports, classified under the Nursing category. In addition, the Library's collections of resources supporting the Health Sciences program are strong.

During the 2022-23 academic year, the Library's spending for collections in all areas was about \$8.77 million. 88% of the entire collections budget is spent on electronic resources. Over \$3.1 million was spent on general electronic resources which benefit all subject areas.

In addition to that amount, the following shows the amounts spent on electronic resources (databases, journals, ebook packages, indexes), print journals, and monographs (individual orders) related to health sciences for the past seven years:



The Library does not yet have a subject profile for Nursing to guide collections decisions in this area. However, our Health Sciences subject profile may be found here: http://www.library.carleton.ca/about/policies/collection-development-subject-profiles.

Teaching, Learning, and Research

Carleton Library is a vibrant and active partner in teaching, learning, and research across all disciplines of the university. Library staff take pride in supporting students to develop the skills required to locate, evaluate, use, and communicate information effectively and responsibly. Our programs and services are grounded in Ontario's Quality Assurance Framework.

The Health & Biosciences Librarian works collaboratively with faculty to address students' information competencies in several ways, including:

Instruction, Teaching, and Practicums

A total of 469 in-class instruction sessions were provided by Library staff in all subject areas during 2022-23, and a total of 12,542 students attended those sessions. These sessions were also supplemented by the creation of over 200 videos with over 31,000 total views. The Health & Biosciences Librarian designs and delivers instruction sessions and practicum opportunities to meet the needs of specific assignments and course requirements while addressing broad learning objectives.

Online Learning Support

The Library website (library.carleton.ca) guides students through each step of the research process: identifying, accessing, borrowing, evaluating, and citing resources. Google Analytics recorded almost 1 million visits to the Library website during 2022-23. Library users can conduct a comprehensive search of the entire collection using the Omni search interface. Recent enhancements to Omni allow Carleton users to easily request items from university libraries across Canada, the United States, and other countries.

Highlights of the Health Sciences guides available on the Library's website include:

- Health Subject Guide
- Pubmed Help Guide
- HLTH 2001: Health Research Methods & Skills Course Guide
- HLTH 2003: Social Determinants of Health Course Guide
- HLTH 4909: Capstone Course-Field Placement & Research Project Course Guide

Research Partnerships

Active research is the foundation of a strong academic program, and an increasingly important part of student learning and development. The Library provides resources, services, and expertise to facilitate the Carleton research community at all levels and through all stages of the research process. This research support is provided at key service points, and through individual consultations and more formal collaborations.

Of note, the Library offers support for knowledge syntheses (including systematic and scoping reviews) for students, postdoctoral fellows, research assistants and faculty. This support is offered on a tiered service model. For more information, please see our website.

Services

Individual Research Consultations

Library staff provided 2274 individual research consultations across all faculties in 2022-23. Consultations can be scheduled for discipline-based research support, as well as support for numeric and geospatial data, research data management, open access publishing, evidence synthesis, copyright, knowledge mobilization, and many related topics.

Research Help – Desks & Chat

Onsite research help is provided through two service points: a Research Help desk on the main floor of the Library and a help desk in Archives and Special Collections (ASC). These two service points had a total of 2685 visits in 2022-23. This service is supplemented by an extended online Ask a Librarian chat service. A total of 1860 Carleton patron questions were answered via Ask a Librarian in 2022-23.

Results from recent user surveys show that the Library performs well in providing off-campus access to resources and services, and that these resources help people to be successful at university. It was noted that help is available from Library staff when needed. The Library also does well at providing accurate answers to questions and providing course reserves that help both faculty and students.

General Information about the Library

Carleton Library consists of five stories, totaling over 214 thousand square feet. Two floors are dedicated to silent study, while three others allow for quiet conversation. As of Fall 2019, the Library had a total of 2400 seats for students. This included 179 public computers and 41 bookable group study rooms. User surveys show the need for more group and silent spaces with outlets for power, and so renovations throughout the Library in the past few years continue to focus on new study space for students.

Thanks to \$1 million in funding from the Government of Ontario's Training Equipment and Renewal Fund and a matching contribution from the university, the fourth floor of Carleton Library has been transformed into a newly designed space called the Future Learning Lab. This multi-purpose space can be adapted to suit a wide range of needs. It is envisioned as both a physical space and a set of programs designed to foster innovation and incentivize student-centred ways of teaching.

The New Sun Joy MacLaren Adaptive Technology Centre (JMC) provides students access to assistive technologies and accessible individual and group study rooms. Rooms are equipped with a variety of adjustable furniture, desks and assistive technologies and hardware. The Library's collection includes approximately 1.2 million print monographs, 2.8 million e-books, and over 277,000 e-journals in a wide range of subjects and disciplines. In addition, the Library has substantial collections of government documents and other resources, maps, data, rare books and other special research collections, printed journals, archives, theses, multimedia resources (audio, DVD, streaming video), musical scores, as well as licensed access to full-text and indexing databases in a broad range of subjects.

Members of the Library's Collections & Assessment Department build and maintain the Library's collection by developing collection policies that guide the systematic selection of materials. The Library also welcomes purchase suggestions from members of the Carleton community. A purchase suggestion form is available on the Library's website to gather suggestions.

In order to enhance its purchasing power (particularly for electronic resources), the Library is an active member of two major cooperative partnerships: the Ontario Council of University Libraries (OCUL), a consortium of the 21 academic libraries in the province; and the Canadian Research Knowledge Network (CRKN), a consortium of 75 academic libraries across the country. Carleton Library is also a member of HathiTrust, a not-for-profit collaborative of academic and research libraries which gives students, staff, and faculty access to a digital repository of millions of books, serials, and other materials from research institutions and libraries from around the world.

The Library's annual acquisitions budget for the 2023-24 fiscal year is \$8.6 million, and its staffing and operating budget is \$14.4 million.

The Library acquisitions budget is not protected from inflation, exchange rates, or cuts, which often challenges the Library's ability to provide all the necessary resources in support of teaching, learning, and research at Carleton. Consideration of the funds necessary for the Library's acquisitions budget is part of the academic planning and Quality Assurance processes for new programs. The Library is dedicated to regular assessment of its resources and services. Staff use an assortment of qualitative and quantitative techniques to evaluate collections and services in order to make sound decisions within budget parameters.

The Library strongly supports the principles and practices of open access (OA). The University's institutional repository was established in 2011 and is maintained by the Library. It includes a growing archive of the broad intellectual output of the University, as well as digitized versions of most of the theses accepted at Carleton since 1955. The Library contributes to CURIE, the University's program to provide funding for faculty and researchers who are publishing in open access journals, and has also entered into a number of agreements with publishers that offer no-charge open access publishing or discounts. The Library's journal hosting service allows Carleton-affiliated scholars to publish open access journals as a means of increasing the availability of scholarly research and writing, as well as to increase involvement in disciplinary discourse. For more information about the Library's support for open access and research dissemination, please see our website.

Appendix: Costed List of Collections and Services Required to Support an Honours Bachelor of Science- Nursing Program

Collections Required

While the Library currently provides support for related programs, such as Health Sciences and Biomedical Sciences, the clinical nature of nursing education necessitates additional resources. Access to appropriate and timely resources (bibliographic databases, point of care tools, full text of journal articles, etc.) is essential for evidence-based practice. Since clinical decisions are made beyond regular working hours, digital resources are recommended as they are available and accessible at all times.

To enhance our existing collection, the Library is recommending the following products based on an examination of resources held by other Ontario university libraries who support Nursing programs. Note that these are primarily databases with annual, continuing costs. While these costs represent a best estimate as of June 2023, prices may be subject to change and adjustments may need to be made depending on available funding.

| Recommended resource | Description | Annual cost |
|---|--|--------------|
| OVID Nursing Package (13 simultaneous users) | Evidence Based Medicine Reviews (EBMR)- Provides systematic reviews of topics, article reviews, and access to definitive controlled trials. | \$26,112 CDN |
| | Medline & Pre-Medline- Provides bibliographic citations & author abstracts to more than 5500 biomedicine and life sciences journals. | |
| | Healthstar- Contains citations to published literature on health services, technology, administration, and research, focusing on both the clinical and non-clinical aspects of health care delivery. | |
| | LWW Nursing and Health Professions Premier Journals (Lippincott Williams & Wilkins are preeminent journals in medicine, allied health, and nursing) | |
| Proquest Nursing and Allied Health Premium | This package combines the Nursing & Allied Health Database and Alexander Street's Nursing Education in Video. | \$17,136 CDN |

| CINAHL Plus with Full Text | Indexes more than 3000 journals from the fields of nursing and allied health. It also offers access to health care books, nursing dissertations, selected conference proceedings, standards of practice, educational software, audiovisuals, and book chapters. CINAHL Plus with Full Text- provides full text for more than 770 journals. | \$2475 CDN The Library currently subscribes to CINAHL Basic Index for \$9025 CDN. This upgrade will provide access to full-text journals. |
|--|---|--|
| Springer Nursing Curated Ebook package | This product will form a starter collection of recently-published nursing ebooks (2022-2023 publication years. We would then plan to purchase this package on an annual basis to maintain a timely collection. | \$10,742 CDN |
| | TOTAL | \$56,465 CDN |

Staffing Resources Required

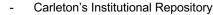
Beyond augmenting the Library's collections, there is also a need to increase our staffing capacity to adequately support nursing students, faculty, and affiliated researchers. Library services commonly offered in support of nursing include: advanced research support such as systematic and scoping reviews, consultations on research strategies and grant applications, as well as information literacy instruction (including training on the use of specialized resources). Without additional staff capacity, we will be limited in terms of the level of support we are able to offer the program. For this reason, we are recommending the addition of one continuing librarian position.

Librarian II salary range (2023-2024): \$74,335-\$118,052 + benefits

AT A GLANCE: CARLETON UNIVERSITY LIBRARY

Statistics as of May 1, 2023 except where indicated. Labour disruption*, new system implementation & effects of the pandemic** including an entire year online *** has affected some numbers

Research Highlights



- Open Access Funding for Faculty, Staff, & Students; Open Access Awards for Graduate Students
- Research Data Management Training
- Professional Skills Training for Graduate Students

Collection Spending:

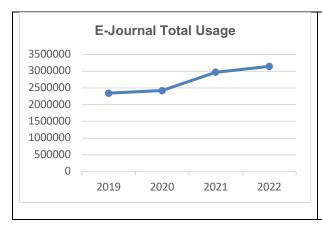
- \$8.77 million; 88% of the entire collections budget spent on electronic resources
- \$3.1 million spent on general electronic resources which benefit all subject areas

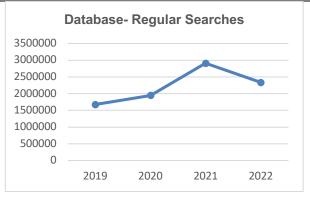


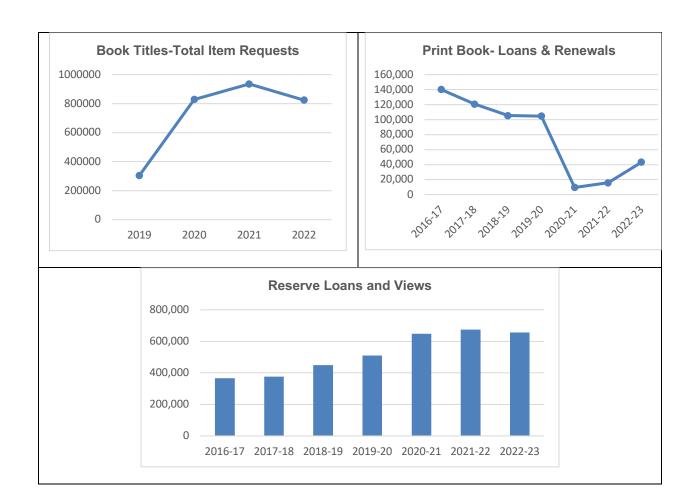
*2020-21- purchased a lot of one-time material to support the switch to online learning which did not have to be paid for again. Annual cost increases for subscriptions were lower than usual due to ongoing pandemic, & a favourable exchange rate lowered our overall spend as most of our invoices are paid in USD.

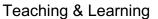
Collections- Usage

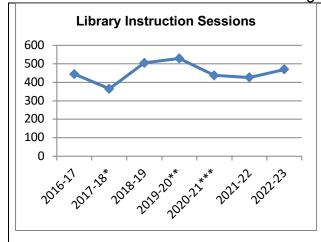
COUNTER 5-compliant data from a selection of major e-publishers/vendors (2019 onward only)

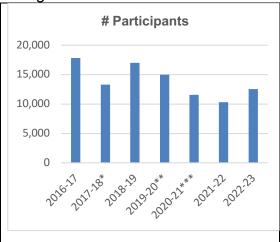


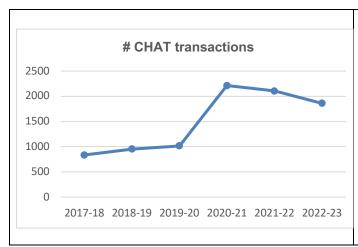












Highlights for 2022-23:

- 469 instruction sessions; 12,542 students attending
- 2274 individual research consultations in 2022-23 for all faculties
- 2685 research help questions answered on site
- 1860 Carleton patron questions answered (CHAT)
- Over 200 instruction videos created with over 31,000 total views

Space

Almost 1 million visits to Library website in a year

Future Learning Lab

Adaptive Technology Centre

Innovative Study areas

Group & graduate study rooms

Book Arts Lab, an experiential learning space

Appendix 5 - Letters of Support



June 9, 2023

Letter of support

Over the past three years, both educational and healthcare organizations have been required to navigate a response to the delivery of education and health care. As we emerge from the pandemic, we must reconsider and define new models of delivery to meet the evolved needs of healthcare starting with our clinical programs and extending to our partnerships to support them. In January, Carleton University and Queensway Carleton Hospital met to discuss our lived experiences and how, through a partnership, we could tackle our challenges.

In the health care realm, there was an impact on the education of our health care providers with the greatest impact to nursing. During the height of the pandemic, students in many cases were unable to complete their inperson clinical rotations. This impact has resulted in a decrease in the application of knowledge, a decrease in development of therapeutic communication skills and most importantly a decrease in hands-on critical thinking that is found and developed in the irreplaceable in-person clinical opportunities. Many nursing programs have a four-year program with experiential learning opportunities occurring in the last two years of their program. In Ontario, we are faced with a critical shortage of nurses and a high rate of burnout. In 2022, the Registered Nurses Association of Ontario (RNAO) posed their Call to Action. Based on their finding that the majority of hospital nurses and front-line workers have "experienced severe or extremely severe levels of depression, anxiety and stress" (2022, p.4) with 69% of respondents planning to leave the profession in the next 5 years (RNAO)" we need to identify a plan. Looking forward, we must strategize how we develop our future nursing work force to ensure that they are well prepared and have better transition into the health care workforce to give our patients the care they deserve.

Over the past several months, we have collaboratively begun to explore the development of a school of nursing. We are currently in the process of curriculum mapping which embeds early experiential learning opportunities, bridges gaps in technological innovation and critically includes underserved populations while addressing the Truth and Reconciliation's Calls to Action. In the past 18 months, Queensway Carleton Hospital has utilized low and high-fidelity simulation to provide a safe opportunity to "learn by doing" as an interprofessional team. There is a fantastic opportunity to further evolve the use of simulation through our partnership. We at Queensway Carleton Hospital recognize the importance of supporting clinical placements and are committed to providing clinical placement opportunities as well as working with our partners (Ontario Health Teams (OHT), Community partners, Hospitals) to identify robust opportunities with the University. We have several educators and staff members who would be open to participating as clinical instructors or teach nursing content in our partnership.

Sincerely,

Yvonne Wilson

Vice President Patient Relations & Chief Nursing Executive

Queensway Carleton Hospital

3045 Baseline Road, Ottawa ON K2H 8P4 t: 613,721,2000



School of Social Work

1125 Colonel By Drive Ottawa, ON K1S 5B6 Canada Tel: (613) 520-5601

Fax: (613) 520-7496

June 8, 2023

To Whom It May Concern:

It is my pleasure to write this letter in support of the proposed Honours Bachelor of Science – Nursing Program. The establishment of another human service professional program at the University provides several exciting opportunities. These include the prospect of developing robust curricula on interprofessional collaboration, innovating with professional programs that centre EDI, and the joint use of workplace integrated learning and simulation-based learning as highly applied pedagogical approaches to professional education.

At the School of Social Work, we are often in search of opportunities to integrate our students with other professional groups who draw on different values, ethics, and knowledges so that students can develop the skills to learn and work in interprofessional settings. This has sometimes been a challenge at Carleton, but with the proposed nursing program we will be able to create curricula that enables exchanges between the sciences and social sciences, and collaborative knowledge development between these two human professional groups.

Second, EDI, anti-oppressive practice, and Indigenization have been key ideals guiding the evolution of social work practice and education the past few decades. Seeing these in the proposed program provides exciting opportunities for innovation that can further enrich the health care field. The ability to bring students together to reflect on their own experiences, biases, and to interrogate the ways in which the limits of our social service and health care systems disproportionately impact marginalized group is exciting. I hope from this, we will be able to develop interprofessional curricula focused on how to create more equitable human services.

In addition, the technological advancements in professional education have significantly expanded in recent years with the use of virtual simulation and other simulation-based pedagogies. These technologies have emerged while workplaces have expressed the need to have workplace-ready students in practicum and employment. These technologies are extraordinarily helpful in transitioning students from learning *about* a professional practice to learning *how to do the practice*. In human service professions, this could not be more important. The successful social worker and nurse is one who knows a lot about social working and nursing, while simultaneously having a keen understanding of how to apply that knowledge with a wide range of human beings in challenging contexts. Simulation-based technologies allow educators

to create realistic practice situations in which students can rehearse and build skills without harming clients or patients.

Finally, we are so excited to see that the proposed program includes the resourcing of an occupational health nurse. With hundreds of students learning in workplaces every year, the need for an occupational health nurse to oversee immunization, masking, and other required certifications has been a long-standing concern. While we have been so grateful for the extraordinary work of our institutional partners in providing our students with these supports, the need far exceeds our institutional capacity. Our students and community partners will be well served by this resource which will reduce a long-standing tension between the institution and, particularly, though not exclusively, our health care partners. It will also create more institutional parity between Carleton and University of Ottawa.

In sum, we could not be more excited about the proposed nursing program and are in full support.

Sincerely,

Sarah Todd

Professor and Director School of Social Work

Sarah Todd

Carleton University

STATEMENT OF SUPPORT FROM SISTER UNIT

RE: Honours Bachelor of Science - Nursing program

The Faculty of Science is proposing a new BSc in nursing. This program would require three courses from the Department of Psychology: PSYC 1001 during the fall term, PSYC 1002 during the winter term, and PSYC 2301 during the fall term. The expected cohort would be approximately 100 students. Considering that enrollment figure and the understanding that each course's prerequisites must be met, the Department of Psychology offers its full support to this new program and will make the necessary space available to its students in these three courses (at the appropriate terms).

If the Nursing program were to grow substantially beyond 100 students or if courses not listed here were to be requested, our Department would require additional resources to meet these demands. Therefore, they would need to be the object of additional negotiation between the nursing program's management and the Department of Psychology, and a second Statement of Support from Sister Unit would be needed.

| A 1 Support | this change unconditionally. |
|--------------|--|
| [] I do not | support this change. |
| [] I suppor | t this change, with the following reservations: |
| Signature: | Guy Lacroix Company Company National Company C |
| Name: Guy I | Lacroix |

Title: Associate Professor and Chair

V. Lauranart this shangs un conditionally

Academic unit: Psychology

Date: June 9, 2023



Office of the Vice-President (Finance and Administration) 503 Tory Building

1125 Colonel By Drive Ottawa, ON K1S 5B6 Tel: (613) 520-3804

December 19, 2023

To Whom it May Concern,

This letter is to confirm that the space in the Carleton Technology and Training Centre currently occupied by Workplace Safety and Prevention Services will be vacated by April 2024. To support the proposed Nursing Program at Carleton University, this space will be allocated to the Faculty of Science. The space is approximately 4100 square feet and located on the 3rd floor of the CTTC building.

As the program is staffed, Carleton Facilities, Management, and Planning will work closely with the Faculty of Science to ensure that new hires have sufficient office and meeting space to fulfill the University's obligations through our collective agreements.

We look forward to the launch of the nursing program at Carleton University, scheduled for Fall 2025.

Sincerely,

Dr. Lorraine Dyke

Xanaine Wyke

Vice-President, Finance and Administration

Carleton University

RE: Honours Bachelors of Nursing, Faculty of Science

| [X] I support this change unconditionally. |
|---|
| [] I do not support this change. |
| [] I support this change, with the following reservations: |
| Signature: |

Name: Dr. David J. Hornsby

Title: Associate Vice-President Teaching and Learning

Academic unit: Teaching and Learning Services

Date: 06/06/2023

Notes:

TLS is an enthusiastic supporter to establish a nursing program at Carleton – and will align teaching and learning support resources to foster a culture of learner centred pedagogies and encourage innovative teaching practices. Through the University's Experiential Learning Hub (eXLH), nursing educators and learners will be able to experiment, author adopt and integrate simulations and mixed reality into teaching and learning practices.

We recommend that the School of Nursing add budget line items for mobile device management software licensing (\$110 USD per device) to support remote management of its XR headsets. MDM software is essential for the efficient and secure management of settings, users, and software on a pool of XR headsets. Additionally, budget for the evergreening of devices and technology deployed in the program needs to be planned.

The EON-XR authoring platform at Carleton is in year one of a three year contract. It is uncertain at this time if the contract for the platform will be renewed beyond three years. If the contract is not renewed, alternative platforms for delivering medical lessons in the Experiential Learning Hub will need to be explored.

Unit page #

Carleton University is proposing an Honours Bachelor of Science – Nursing program housed in a new School of Nursing that builds on Carleton's strong pedagogical background in health, data, and social sciences.

| [X] I support this change unconditionally. | |
|---|--|
| [] I do not support this change. | |
| [] I support this change, with the following reservations: | |

On behalf of the School of Mathematics and Statistics, I support creating the Honours Bachelor of Science – Nursing program and the proposed concentration stream of Nursing Data Science.

While not included in the proposal, we also see potential overlap in elective courses. There may be courses that students enrolled in the new Nursing degree would be interested in taking that we offer, and our students may be interested in some of the courses offered as part of this degree. We look forward to future collaboration on expanding elective options for undergraduate students in our respective programs.

Signature:

Name: Robert Burk Title: Director

Academic unit: School of Mathematics and Statistics

Carleton University is proposing an Honours Bachelor of Science – Nursing program housed in a new School of Nursing that builds on Carleton's strong pedagogical background in health, data, and social sciences.

| [X] I support this change unconditionally. | |
|---|--|
| [] I do not support this change. | |
| [] I support this change, with the following reservations: | |

On behalf of the School of Computer Science, I support creating the Honours Bachelor of Science – Nursing program and the proposed concentration stream of Nursing Data Science.

While not included in the proposal, we also see potential overlap in elective courses. There may be courses that students enrolled in the new Nursing degree would be interested in taking that we offer, and our students may be interested in some of the courses offered as part of this degree. We look forward to future collaboration on expanding elective options for undergraduate students in our respective programs.

Signature: Michel Barbeau

Name: Michel Barbeau

Title: Director

Academic unit: School of Computer Science



February 12, 2024

To Whom it May Concern,

This letter is an expression of my support, in my role as federal Chief Nursing Officer, for the proposed *Honours Compressed Bachelor of Science in Nursing (BScN) program*, offered by Carleton University in collaboration with Queensway Carleton Hospital. This support also extends to future nursing education capacity planning within this program, including a Registered Practical Nurse to Registered Nurse bridging program; Internationally Educated Nurse bridging program; certification and specialty certification programs; and a graduate level, Master of Nursing program for Nurse Practitioners.

There is a clear need to increase the number of nurses in Canada, which can be met by increased opportunities for all levels of nursing education. The areas of focus of this proposed BScN program, which include Indigeneity, Neuroscience and Mental Health, and Data Science, look to bridge the theory-practice gap by equipping graduates with the required skills to be compassionate clinical leaders and resilient and resourceful nurses.

This program as proposed, also provides a model for new program creation by incorporating innovative strategies and increased experiential learning opportunities. The compressed nature of program, while generalist in scope, is aimed at supporting some of our healthcare systems' greatest areas of needs an efficient manner.

Although the proposed *Honours Compressed Bachelor of Science in Nursing (BScN) program* would need provincial approval through various channels and mechanisms, the promise of a *de novo* nursing education program in Canada at Carleton University is extremely promising and, once approved, will bode well for increased capacity in nursing education in Canada.

Sincerely,

Leigh Chapman (she/elle) RN PhD

& CUAPMAN

Chief Nursing Officer (CNO) | Infirmière en chef (IC) du Canada

Health Canada | Santé Canada



Carleton University is proposing an Honours Bachelor of Science – Nursing program housed in a new School of Nursing that builds on Carleton's strong pedagogical background in health, neuroscience, data, and social sciences.

| | X] I support this change unconditionally. |
|---|--|
| I |] I do not support this change. |
| I | I support this change, with the following reservations |

I support creating the Honours Bachelor of Science – Nursing program. I support continued discussions on collaborative accessibility research with students and faculty and integrating accessibility concepts into the Nursing course work.

Signature:

Name: Adrian Chan

Title: Professor

Academic unit: Systems and Computer Engineering

Date: April 17, 2024

Carleton University is proposing an Honours Bachelor of Science – Nursing program housed in a new School of Nursing that builds on Carleton's strong pedagogical background in health, neuroscience, data, and social sciences.

[X] I support this change unconditionally.

[] I do not support this change.

[] I support this change, with the following reservations:

On behalf of the Department of Health Sciences and as a member of the Nursing program steering committee, I support creating the Honours Bachelor of Science – Nursing program. The Health Sciences courses proposed in the Nursing program's core curriculum can accommodate additional students.

While not included in the proposal, we also see potential overlap in elective courses, given our expertise in health policy and government regulation. There may be courses that students enrolled in the new Nursing degree would be interested in taking that we offer, and our students may be interested in some of the courses offered as part of this degree. We look forward to future collaboration on expanding elective options for undergraduate students in our respective programs.

The following Health Science courses will support nurses as part of the program: HLTH 1001 Principles of Health I, and HLTH 2004 Microbiology and Virology. Prerequisites of HLTH course would be modified accordingly for nursing students.

Signature:

Name: Martin Holcik

Sonti Holing

Title: Chair

Academic unit: Department of Health Sciences

Date: April 18, 2024

Carleton University is proposing an Honours Bachelor of Science – Nursing program housed in a new School of Nursing that builds on Carleton's strong pedagogical background in health, neuroscience, data, and social sciences.

| [X] I support this change unconditionally. | |
|---|----------|
| [] I do not support this change. | |
| [] I support this change, with the following reser | vations: |

Leveraging the strengths of Carleton University's undergraduate program in Neuroscience, the Neuroscience and Mental Health concentration looks to build upon these strengths and incorporate mental health components to prepare nursing students to address the needs of a society with an overwhelming mental health crisis throughout the lifespan of patients.

On behalf of the Department of Neuroscience, I support creating the Honours Bachelor of Science – Nursing program and the proposed concentration stream in Neuroscience and Mental Health.

The following Neuroscience courses will support nurses as electives in a Neuroscience and Mental Health Nursing concentration: NEUR 1202 Neuroscience of Mental Health and Psychiatric Disease, NEUR 1203 Neuroscience of Mental Health and Neurological Disease, NEUR 2201 Cellular and Molecular Neuroscience, NEUR 2202 Neurodevelopment and Plasticity, NEUR 3204 Neuropharmacology, NEUR 4306 The Neural Basis of Addiction, NEUR 3304 Hormones and Behaviour, NEUR 3401 Environmental Toxins and Mental Health, NEUR 3501 Neurodegeneration and Aging, NEUR 3502 Neurodevelopmental Determinants of Health.

Signature:

Name: Dr. Matthew Holahan

Title: Chair

Academic unit: Department of Neuroscience

Appendix 6 - Curricular Details & Assessment Tools

Curriculum Mapping Overview

Some RN ETPC's are required to be met in the context of a clinical practicum to meet their specific requirements, while others will be simulated to ensure they are completed by nursing students or due to safety concerns, or for both reasons. Additionally, RN ETPC domains like "Clinician" require scaffolding across multiple courses as this domain holds the most competencies. Generally, material will be scaffolded by introducing theory, and then moving on to mixed theory and application. Finally, it will be consolidated via application-based learning from multiple sources of reasoning to further engage the learner in autonomous and self-reflective practice – the end goal of RN entry-to-practice. Intuitively, "Advocate" and "Educator" can only be met after fundamental elements of "Clinician" are achieved and are also part of this scaffolded approach. It is worth noting that the RN ETPC's create a highly prescriptive curriculum. Students have very little choice in electives as all of core nursing courses in the program are required. This is one of the reasons that informed the development of the two concentration streams. This will ensure students will still have some choice and meet the RN ETPC's as presented to CNO while gaining skills in addition to the core nursing program.

1. Core Theory

Professional Nursing occurs across the three years. Professional Nursing I (NURS 1001) will take place in first year, first semester, and introduces students to the essentials of nursing safety prior to introducing them to a clinical environment. From here, the course will introduce major concepts and competencies related to nursing regulations, power and authority, privacy, professionalism, and clinical elements like policy and practice. Professional Nursing II (NURS 2001) expands on these ideas in the second year, first semester, and integrates the application of clinical experiences and experiential learning to move the learning from introduction to professional practice integration and development of professional practice shifting to advocate, leader, and collaborator. Finally, in third year, first semester, Professional Nursing III (NURS 3001) will consolidate all clinical practice experiences and the personal growth of the learners.

As demonstrated by the program map, the additional classes are heavy on theory in the first year and scaffold to less theory and higher application via Experiential and Clinical Practicum courses in the second and third year. Aside from Professional Nursing, these courses include; Indigenous Health (NURS 1000), Human Anatomy and Physiology I, II (NURS 1002, NURS 2002), Adult Health and Illness I, II (NURS 1003, NURS 2003), Pharmacology and Medication Management I, II, (NURS 1004, NURS 2004) Health Equity and Social Justice (NURS 2011), Introduction to Health IT (NURS 2016), Community Health (NURS 2000), Resilience Training (NURS 2012), Interpersonal Communication (NURS 2013), Mental Health (NURS 2014), Pediatric and Youth (NURS 3005), Introduction to AI and ML in Healthcare (NURS 3016), Palliative and End of Life Care (NURS 3006). Scaffolding within these courses is denoted by their numbering (i.e., Human Anatomy and Physiology I and II, NURS 1002, NURS 2002), where the first course will introduce concepts with an initial application and evaluation opportunity and the second course will build upon these concepts. Research courses are introduced in the third semester of the

second year with Research Methods for Nurses (NURS 3000). This course will set up the Honors stream by being a pre-requisite for the Nursing Research Proposal or Project and further to potential Topics in Nursing.

2. Core Experiential

The experiential learning courses, Simulation I, II, and III (NURS 1100, NURS 2100, NURS 2108) scaffold concepts over each year. The Simulation courses draw on theory from Professional Nursing I, II, and III (NURS 1001, NURS 2001, NURS 3001), Adult Health and Illness I and II (NURS 1003, NURS 2003), Human Anatomy and Physiology I and II (NURS 1002, NURS 2002), Mental Health (NURS 2014), Pharmacology and Medication Management I and II (NURS 1004, NURS 2004), Pediatric and Youth (NURS 3005), Maternal Care (NURS 3010), Palliative and End of Life Care (NURS 3006) and clinical experiences from clinical practicums. The Simulation courses will build initially in year one from a single/simple concept application with instructor support, to a consolidation of multiple/complex concepts with minimal instructor support in the final year - striving to achieve an autonomous entry-topractice ready student. In these courses, simulation as a pedagogy will be used. This will include situating learners in goals and objectives of the simulation which might include theory in the pre-briefing stage, and again situating and discussing outcomes in the de-briefing stage which may also include theory. In the final year, Simulation III will have structured outcomes/case studies for the first six weeks and for the second six weeks learners will identify the simulation or objective they feel is most supportive for their learning. The coordinator or instructor will group students based on common identified outcomes and students will be supported in developing their own clinical scenarios aligned with achieving their learning outcomes. The self-reflections and feedback in the student's portfolio submissions discussed in the previous paragraph will inform these opportunities. Students will therefore be 'consolidating' their clinical knowledge, skills and abilities in the last mentored clinical teaching lab.

3. Core Clinical Practicum

The Core Clinical Practicums are historically a foundational set of courses in any medical degree, especially nursing. These courses are so foundational that recently graduated nurses noted in a focus group that Practicums were where students truly understood what was required of nurses. Practicums require that students spend a pre-determined number of hours in a clinical environment that complements the learning outcomes from theory-based classes and achieves the associated experiential and application-based learning outcomes. In our program, Practicums begin with single/simple concepts in first year and rapidly introduce students to the nursing environment. We have early exposure to clinical practicums based on recommendations from the aforementioned focus group. Across years, clinical practicums advance to complex/multiple concepts and total autonomy in their consolidation (i.e., final clinical practicum; NURS 3201 Clinical Practicum - Consolidated Practicum I, NURS 4200 Clinical Practicum - Consolidated Practicum II). Clinical hours increase as the students' progress from around 2 hours in first semester to 200-300 hours final year clinical practicums. We will leverage the majority of our clinical placements from our partner, Queensway Carleton Hospital (QCH) and its affiliates. We will also leverage many opportunities outside of QCH to such as The Ottawa Hospital, The Royal Ottawa Hospital, CHEO, Hospice Care Ottawa, Bayshore Home Care, and others.

Concentration Streams

The program proposes two different concentration streams. These include Nursing Data Science, and Neuroscience and Mental Health.

Nursing Data Science

Based on a needs assessment of all Canadian nursing programs in addition to feedback from a diverse number of clinical areas, there is an overwhelming practice gap in Nursing informatics and more broadly, Nursing Data Science. Clinicians are increasingly asked to incorporate technology and data into their practice. However, they are very rarely given the knowledge of how this technology functions from a basic design level, up to an integrated functional model. The Nursing Data Science concentration aims to cover this gap and support nurses as key, informed stakeholders. The concentration seeks to; introduce students to health technology and informatics, artificial intelligence and machine learning in healthcare, the fundamentals of coding (including computational methods of predictive modelling and statistical analysis), the fundamentals of workflow analysis related to technological integration, technological governance principals, regulation, and ethics, and to project management concepts related to technological integration. As the first nursing program in Canada to incorporate a Data Science concentration stream, this could be a prime opportunity for development of a framework for other programs to model and will likely lead to sought-out recruitment of graduates from this niche and highly desirable stream.

The courses for this concentration include two core courses; Research Methods for Nursing (NURS 3000) and Introduction to AI and ML in Healthcare (NURS 3016), and bolster these courses with Data Management and Advanced Data Analytics in Healthcare (NURS 2026), Designing and Deploying Technology Enabled Clinical Workflows (NURS 2036), Healthcare Technology Evaluation, Procurement and Project Management (NURS 2046), and Ethics, Legalities and Regulation in Healthcare Data Science (NURS 2056), and a Seminar in Nursing Data Science (NURS 3066). Students will also need to complete the Honours courses (NURS 4011 Nursing Research Project or NURS 4112 Experiential Learning – Improving Nursing and NURS 4012 Nursing Research Proposal). In future state, these courses are designed to support a possible certification stream for external students as well.

Neuroscience and Mental Health

Leveraging the strength of Carleton's neuroscience program, the Neuroscience and Mental Health concentration looks to build upon these foundations and incorporate nursing mental health components to equip nursing students to support the needs of a society in an overwhelming mental health crisis throughout the lifespan of patients. Students are required to take Neuroscience of Mental Health and Psychiatric Disease (NEUR 1202), Neuroscience of Mental Health and Neurological Disease (NEUR 1203), Cellular and Molecular Neuroscience (NEUR 2201), Neurodevelopment and Plasticity (NEUR 2202), Neuropharmacology (NEUR 3204), and The Neural Basis of Addiction (NEUR 4306). Additionally, students taking the Neuroscience and Mental Health concentration will choose an additional 0.5 credits from:

NEUR 3304 Hormones and Behaviour

- NEUR 3401 Environmental Toxins and Mental Health
- NEUR 3501 Neurodegeneration and Aging
- NEUR 3502 Neurodevelopmental Determinants of Health.

Course level methods of assessment and connection to program level

These sequential courses are meticulously designed to build upon each other, fostering a progressive development of nursing skills, knowledge, and clinical acumen. This approach allows students to deepen their understanding progressively, creating a robust framework that is not only integral components of the curriculum but also serve as pillars supporting the program's commitment to continuous learning. Their thoughtful integration, closely alignment with program learning outcomes, and progressive nature contribute significantly to the comprehensive and dynamic educational experience offered within the nursing program.

The nursing program features a diverse array of core courses that complement the major four series, enhancing the students' knowledge and skills across various facets of nursing. These additional core courses contribute to the well-rounded education provided by the nursing program, addressing diverse aspects of nursing practice, from communication and mental health to research methodologies and emerging technologies in healthcare.

Key Program Learning Outcome Assessment Tool

To prepare students for the College of Nurses Quality Assurance requirements post-graduation, students will utilize the same post-graduation self-reflective tool in a multi-part, cumulative, three-year portfolio submission during the program (LO 2). This tool (provided below) leverages self-reflection and evaluation, peer-evaluation, demonstration and situatedness of which competency the learner should be meeting and when (Clinical Evaluation Tool / ETPC Mapping, LO1). The goal of this tool is to a) develop a self-regulated b) autonomous and c) self-reflective practitioner who d) engages as a partner in actively finding learning experiences and e) becomes an expert in giving, seeking, and receiving feedback while becoming familiar with a tool they must maintain while licensed as an RN. This tool will follow the learner like a journal for each semester of the program for them to track their progress, identify where they need additional support or experiences and to receive feedback. Not only will this feedback be used to support growth, but it will also serve to support celebration of accomplishments of the student learning and progress throughout the program. The Portfolio Assessment includes a selection of formative and summative assessments that are completed by the student across nursing Theory classes, Experiential classes, and Clinical Practicums and formally assessed in accordance to the above program level learning outcomes. The elements of this tool are purposefully selected assessments for program level LO's because of the alignment to the ultimate target of the program to have learners meet Entry to Practice Competencies as outlined by the CNO, and in support of on-going program evaluation through multiple types of strategically placed assessments.

The Portfolio Assessment (LO2) includes 4 parts:

1. An on-going CNO Quality Assurance modelled Learning Plan (a requirement of licensed Registered Nursing practice in Ontario) which will be assessed and evaluated in Nursing Professional Practice I, II, III (NURS 1001, NURS 2001, and NURS 3001).

- 2. A Clinical Evaluation Tool (**LO1**) using both self and peer reflection demonstrating application of competencies and assessed by clinical instructors which will be evaluated in Adult Health and Illness I, II (NURS 1003, NURS 2003) and Clinical Practicum Consolidated Practicum I and II (NURS 3201, NURS 4200).
- 3. An example of a pre-clinical Patient Demographics collection, assessed and evaluated in all Clinical Practicums.
- 4. A collection of Clinical Reflections, for formative assessment of knowledge application using self-reflection that will be assessed in all Clinical Practicums.

Proposed Self Reflection Tool

Clinical Practicum, Expectations and Evaluations

Clinical Practicum, Entry to Practice Competency Student Evaluation

Students in the BScN undergraduate program will have seven clinical placements throughout the three-year program. These placements will begin year one, semester one and end year three, semester three. There will be two clinical consolidations in the last two semesters of the program where students apply multiple concepts in total patient and system level care. Each placement will introduce students to new nursing topics, supported and in sync with concurrent nursing courses such as Simulation, Adult Health and Illness, Anatomy and Physiology, etc. The student will be expected to demonstrate the Entry to Practice Competency (ETP) relevant to supported theoretical learning as defined below in each clinical placement in order to be considered successful in that clinical placement.

Students, learning to become self-regulated professionals, will use the clinical ETP Checklist to self-direct their learning and seek experiences that meet the ETP associated to their placements. Students must demonstrate experience with each ETP as defined. Should a student not meet the ETP experience, there will be a plan constructed with the instructor/preceptor to understand the risks and opportunities to meet this requirement. All students *MUST* have documented reflection and feedback of each ETP as defined on the master list by the end of their final consolidation to support their readiness into Entry to Practice as defined by the College of Nurses of Ontario.

Pre-placement Certification Requirements

Students will have up to date basic life support (BLS) credentialing as well as strongly recommended ASIST (Applied Suicide Intervention Skills Training) credentialing prior to beginning their clinical placements. Students will be given an opportunity to attain GPA (Gentle Persuasive Approach)

credentialling as they progress and will be encouraged to seek additional credentialing applicable to their consolidation or areas of interested such as ACLS (advanced cardiovascular life support).

Clinical Requirements/Submissions for Evaluation

- 1. Students are required to maintain an on-going QA Learning Plan (supplemental document) for self-evaluation and goal building. The student learning plan will not be formally evaluated in clinical practicum. The learning plan will serve as a supportive communication tool to promote what the student's focus is for the semester and for the clinical shift.
- 2. Students will be required to review the *ETP Competencies & Foundational Practice Standards Student Evaluation* (Appendix A) before and after each shift with the instructor/preceptor/supervisor. This will be evaluated for completeness/adherence at the mid and end of the course.
- 3. Students will be required to complete patient demographics (Appendix B) to support the safe practice and demonstration of knowledge to care for clients in clinical practice. Instructors may choose to incorporate additional case-study elements related to theory/application/evidence-based practice, as required, on an on-going basis to achieve student understanding and application (i.e., describe the pathophysiology of Chronic Obstructive Pulmonary Disease (COPD), list the common medications and details of medication ordered for COPD and discuss the nursing interventions most relevant for this diagnosis).
- 4. Students are required to submit regular *Clinical Reflections* (Appendix C) for formative assessment of knowledge application (frequency determined in each Clinical Practicum syllabus).

Agency orientation

All agencies are required to orient both the instructor/preceptor and students to the following non-negotiable ETP's. Should there not be an affiliation agreement by the agency listing the below criteria to be signed off by the student, the clinical placement coordinator will be responsible for its creation prior to commencing clinical placement.

ETPs

(2.10) Demonstrates fitness to practice

The program provides opportunities to students to understand the concept of fitness to practice. Students articulate the concept and significance of fitness to practice in the context of nursing practice, self-regulation and public protection. Students will self-assess and reflect on their ability to provide safe and ethical nursing care.

Students are required to evaluate and demonstrate their fitness to practice prior to and throughout each clinical placement shift and identify any contraindications to fitness to practice immediately to their clinical supervisors.

(7.1) Recognizes and takes action in situations where client safety is actually or potentially compromised.

Students are clear about the reporting and escalation process and expectations of the agency in their role prior to beginning clinical placement.

(7.2) Resolves questions about unclear orders, decisions, actions or treatment.

The program teaches students to question, in a professional manner, orders that may be unclear, incorrect or unsafe. Students will take action on unclear orders, decisions or actions made by other health care team members that are inconsistent with client outcomes, best practices and health safety standards. Students analyze orders, care plans and actions and do not passively administer medication or perform nursing interventions without questions.

(9.2) Translates knowledge from relevant sources into professional practice.

The program provides opportunities for students to ask questions, provide opinions and seek additional knowledge. Students will have learning opportunities such as reading groups or seminars, professional practice activities or client care conferences to support critical inquiry. Students collaborate with the health care team to share new information, knowledge and best practices that may influence or change client care. Students use knowledge of theories and frameworks relevant to health and healing as rationale for providing nursing care.

| Course Name | Orientation to program | ETP Met from Clinical Evaluation Tool in this course |
|-------------------------------|---|--|
| | First year, theory and experiential learning in a method | |
| | organized and defined by indigenous nursing leader* | |
| NURS 1000 Indigenous Health | TBD | |
| | First year, first semester, just a general overview of | |
| NURS 1200: Clinical Practicum | clinical placement, intro to interprofessional teams, | |
| Long-Term Care | intro to patients, intro to policies/unions, etc. | |
| NURS 1201: Clinical Practicum | First year, second semester, Medication admin is added, | |
| Chronic Care | patient management is added | |
| NURS 1100: Experiential | First year, second semester, first assessment course (see | |
| Learning - Simulation I | syllabus) | Introduction to Nursing Process (1.6) |
| NURS 2100: Experiential | | |
| Learning - Simulation II | First year, third semester - (see syllabus) | |
| NURS 2108: Experiential | | |
| Learning – Simulation III | Second year, first semester - (see syllabus) | |
| | Second year, first semester, new types of patients, more | |
| NURS 2200: Clinical Practicum | complex care and working to full patient assignment | |
| Mental Health & Obstetrics | (including medication and care plans) | |
| | Second year, second semester, more complex care, full | |
| NURS 2201: Clinical Practicum | patient assignment (including medication and care | |
| Acute Care | plans) | 1.6 |
| | Second year, third semester, new types of patients, | |
| NURS 3200: Clinical Practicum | more complex care, full patient assignment (including | |
| Pediatrics | medication and care plans) | |

| NURS 3100: Experiential | | |
|-------------------------------|--|---|
| Learning Consolidated | Third year, first semester, complex scenarios to prepare | |
| Simulation Lab IV | for autonomous clinical practice (12 weeks) | |
| NURS 3201: Clinical Practicum | Third year, first semester, working to autonomous | Students must demonstrate ALL ETP Clinical Evaluation |
| Consolidated Practicum I | practice | competencies |
| NURS 4112: Experiential | | |
| Learning Improving Nursing | Research focused | |
| NURS 4200: Clinical Practicum | Third year, third and final semester, autonomous | Students must demonstrate ALL ETP Clinical Evaluation |
| - Consolidated Practicum II | practice | competencies |
| NURS 3101: Experiential | | |
| Learning, Consolidated | Third year, second semester, working to autonomous | |
| Simulation Lab V | practice | |

Appendix A Entry to Practice & Foundational Standards, Student Competency Evaluation

| Domain | Student Comments | Evaluator Comments | Met (M) |
|--|------------------|---------------------------|-----------|
| | | | Unmet (U) |
| 1. Clinician | | | |
| (1.2) Conducts a holistic nursing assessment to collect comprehensive information on client health status. | | | |
| (1.4) Analyses and interprets data obtained in client assessment to inform ongoing decision-making about client health status. | | | |
| (1.5) Develops plans of care using critical inquiry to support professional judgment and reasoned decisionmaking. | | | |

| (1.6) Evaluates effectiveness of plan of | | |
|--|--|--|
| care and modifies accordingly. | | |
| | | |
| | | |
| (1.7) Anticipates actual and potential | | |
| health risks and possible unintended | | |
| outcomes. | | |
| | | |
| (1.8) Recognizes and responds | | |
| immediately when client safety is | | |
| affected. | | |
| | | |
| | | |
| (1.9) Recognizes and responds | | |
| immediately when client's condition is | | |
| deteriorating | | |
| | | |
| (1.10) Prepares clients for and | | |
| performs procedures, treatments, and | | |
| follow up care. | | |
| | | |
| | | |
| (1.12) Implements evidence-informed | | |
| practices of pain prevention, manages | | |
| client's pain, and provides comfort | | |

| through non-pharmacological | | |
|--|--|--|
| interventions. | | |
| | | |
| | | |
| | | |
| (1.13) Implements therapeutic nursing | | |
| interventions that contribute to the care | | |
| and needs of the client. | | |
| | | |
| | | |
| (1.14) Provides nursing care to meet | | |
| palliative and end-of-life care needs. | | |
| | | |
| | | |
| (1.16) Must be met in MH placement - | | |
| Students learn motivational | | |
| interviewing techniques to inform | | |
| | | |
| compassion, dignity, respect, privacy, freedom from cruel, inhuman and | | |
| | | |
| degrading treatment when caring for | | |
| clients with misuse substances. | | |
| | | |
| | | |
| (1.18) Provides recovery-oriented | | |
| nursing care in partnership with clients | | |
| who experience a mental health | | |
| condition and/or addiction. | | |
| | | |
| | | |
| | | |

| (1.19) Incorporates mental health | | |
|--|--|--|
| promotion when providing nursing | | |
| care. | | |
| | | |
| (1.26) Adapts practice in response to | | |
| the spiritual beliefs and cultural | | |
| practices of clients. | | |
| • | | |
| | | |
| (4.05) 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| (1.27) Implements evidence-informed | | |
| practices for infection prevention and | | |
| control. | | |
| | | |
| | | |
| | | |
| | | |
| Therapeutic Nurse Client Relationship | | |
| The apeute Wase Chem Relationship | | |
| A) Students understand the adverse | | |
| impact on client safety and quality of | | |
| care when professional boundaries in | | |
| the nurse-client relationship become | | |
| blurred or crossed. | | |
| of crossed. | | |
| | | |
| | | |
| B) Students understand that there are | | |
| significant client safety and quality of | | |
| care risks if the client does not have a | | |
| full understanding/comprehension of | | |
| | | |
| informed consent. | | |
| | | |

| | T | |
|--|---|---|
| | | |
| Medication | | |
| A) Students understand their | | |
| accountabilities in preventing and reducing the likelihood of medication | | |
| errors. | | |
| B) Students understand that nurses | | |
| and/or other colleagues who divert | | |
| drugs pose significant threats to client | | |
| safety. | | |
| (1.11) Applies knowledge of pharmacology and principles of safe | | |
| medication practice. | | |
| (1.12) Implements evidence-informed | | |
| practices of pain prevention, manages | | |
| client's pain, and provides comfort | | |
| through pharmacological interventions. | | |
| | | |
| | | |
| | | |
| 2. Professional | | İ |
| | | |
| (2.1) Demonstrates accountability, | | |
| accepts responsibility, and seeks | | |

| assistance as necessary for decisions and actions within the legislated scope of practice. | | |
|---|--|--|
| (2.2) Demonstrates a professional | | |
| presence, and confidence, honesty, integrity, and respect in all interactions. | | |
| ORIENTATION REQUIREMENT (2.3) Exercises professional judgment when using agency policies and procedures, or when practising in their absence. | | |
| (2.4) Maintains client privacy, confidentiality, and security by complying with legislation, practice standards, ethics, and organizational policies. | | |
| (2.5) Establishes and maintains professional boundaries with clients and the health care team. | | |

| - Students understand that inappropriate access to client information may adversely affect client safety and quality of care and undermine the client's relationship with providers. | | |
|--|--|--|
| 3. Communicator | | |
| (3.1) Introduces self to clients and health care team members by first and last name, and professional designation (protected title). | | |
| (3.2) Engages in active listening to understand and respond to the client's experience, preferences, and health goals. | | |
| (3.3) Uses evidence-informed communication skills to build trusting, compassionate, and therapeutic relationships with clients. | | |

| | | |
|--|------|--|
| (3.6) Uses information and communication technologies (ICTs) to support communication. | | |
| (3.7) Communicates effectively in complex and rapidly changing situations. | | |
| - Students understand that accurate, timely and complete nursing documentation decreases the potential for miscommunication and errors, and is a critical factor for client safety. (3.8) Documents and reports clearly, concisely, accurately, and in a timely manner. | | |
| 4. Collaborator | | |
| | | |

| (4.1) Demonstrates collaborative professional relationships. | | |
|--|--|--|
| (4.2) Initiates collaboration to support care planning and safe, continuous transitions from one health care facility to another, or to residential, community or home and self-care. (4.3) Determines their own professional and interprofessional role within the team by considering the roles, responsibilities, and the scope of practice of others. | | |
| 5. Coordinator | | |
| (5.1) Consults with clients and health care team members to make ongoing adjustments required by changes in the | | |

| availability of services or client health status. | |
|--|--|
| Students recognize changes in client health status and coordinate aspects of client care within the healthcare team to address and identify strategies for care planning. Students will have opportunities to participate in and contribute to team care conferences (such as rounds), and articulate themselves in a professional manner. | |
| (5.2) Monitors client care to help ensure needed services happen at the right time and in the correct sequence. | |
| (5.3) Organizes own workload, assigns nursing care, sets priorities, and demonstrates effective time management skills. | |

| (5.5) Participates in decision-making to manage client transfers within health care facilities. | | |
|---|--|--|
| (5.7) Prepares clients for transitions in care. | | |
| Student is observed doing TOA | | |
| (5.8) Prepares clients for discharge. | | |
| 6. Leader | | |
| (6.6) Demonstrates self-awareness through reflective practice and solicitation of feedback. | | |
| (6.8) Uses and allocates resources wisely. | | |

| (6.9) Provides constructive feedback to | | |
|---|--|--|
| promote professional growth of other | | |
| members of the health care team. | | |
| | | |
| | | |
| | | |
| 7. Advocate | | |
| (7.1) Recognizes and takes action in | | |
| situations where client safety is | | |
| actually or potentially compromised. | | |
| actuary of potentiarry compromised. | | |
| | | |
| | | |
| (7.2) Resolves questions about unclear | | |
| orders, decisions, actions, or treatment. | | |
| | | |
| | | |
| (7.5) Supports environmentally | | |
| responsible practice. | | |
| responsible practice. | | |
| | | |
| | | |
| Safety & Reporting: All students in | | |
| clinical placements must report actual | | |
| and potential (near-miss) incidents | | |
| based on the policy of the agency, and | | |
| further discuss incident with instructor | | |
| to ensure adequate support has been | | |
| provided in follow up to either address | | |
| the issue and/or mitigate risk from | | |
| recurrence. | | |
| | | |

| (7.6) Advocates for safe, competent, compassionate and ethical care for clients. | | |
|--|--|--|
| 8. Educator | | |
| | | |
| (8.1) Develops an education plan with the client and team to address learning needs. | | |
| (8.4) Evaluates effectiveness of health teaching and revises education plan if necessary. | | |
| (8.5) Assists clients to access, review, and evaluate information they retrieve using information and communication technologies (ICTs). | | |
| 9. Scholar | | |
| | | |

| (9.1) Uses best evidence to make | | |
|----------------------------------|--|--|
| informed decisions. | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Appendix B

Patient Demographics

Each clinical placement student researches their patient to include: Diagnosis, medication summary, pathophysiology, care plan, discharge plan. All students must have completed this exercise and reviewed with instructor prior to commencing clinical.

| Patient (Rm#) | Diagnosis | Allergies/Adverse Reactions | Care Plan | Orders | Medications | Treatments/Procedures | Family | Goals of Care | Assessments (Frequency, i.e., CBS) |
|------------------|-----------|--------------------------------|--------------|--------|-------------|-----------------------|--------|---------------------|--|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

Appendix C

Clinical Self-Reflection

Self-reflection is an essential component of clinical practice and a legal requirement for all nurses in Ontario (CNO, 2010). As nursing students, you will be required to reflect on your clinical practice and write a note to your clinical professor/ preceptor. These reflective notes are an excellent resource to help you complete your practicum self-evaluation and for monitoring clinical progress. Reflection on clinical practice events help you derive meaning and learning from your nursing practice. For example, reflection can help you approach a similar practice situation differently next time, help you perceive the experience through the patient's or family's eyes and help you examine aspects of yourself.

A reflective note should be based on a clinical scenario with relevance to the identified theme or objective in your corresponding health assessment or professional practice course and may include scenarios like:

An experience in which you feel your intervention really made a difference towards achieving a clinical outcome;

An experience that went unusually well;

An experience in which there was a breakdown in communication;

An experience that was particularly demanding.

The frequency and date for submission of Reflective Notes is outlined in the practicum course syllabus. The clinical professor/preceptor will review each Reflective Note and provide written feedback. The student can be asked to provide further detail or possibly resubmit a new reflective note if the clinical professor/preceptor indicates that the student did not follow the steps in submitting the reflective note.

Follow each of the steps provided below to complete these notes.

Step 1 – Description

Describe in detail the incident or event that you are reflecting on. Details may include:

Where you were;

Who else was there;

Why you were there;

What you were doing;

What was the context of the event;

What happened;

What was your part in this;

What parts did the other people play;

What was the result?

Step 2 - Critical Reflection

May include with this critical reflection:

What were you thinking and feeling at the time of the incident The importance of the incident to you;
Why you and/or others acted the way you did.

Step 3 - Analysis/Conclusion

Break the event down into its component parts so they can be explored separately. This may include:

What went well overall;

What did you do well;

What did others do well;

What went wrong or did not go well

When concluding, try to evaluate or make a judgment about what has happened. Incorporate evidence base practice into your response.

This may include:

What you could have done differently;

Other approaches you could have taken during the event;

What you have learned for the event;

How this learning relates to your competency as an evolving professional and knowledgeable worker

Step 4: Action Plan

This may include:

How you will prepare for this or a similar situation in the future;

What future learning needs you have identified as a result of this event;

How you would act differently if you encountered the same or similar incident; What resources you need to increase your competence.

References

College of Nurses of Ontario. (n.d.). Self-Assessment. Self-assessment.

https://www.cno.org/en/myqa/self-assessment/

Self-Reflection Rubric

| Name | ID # | Week | Instructor | | | |
|----------------------------|---------------------------|-------------------|------------|--------------|------|--|
| Date Submitted | | | | | | |
| □No submission this week | Late Submission Penalty: | □N/A or 5% /day x | day(s) = | % deduction. | | |
| ***Each critarian can only | ha scarad in one column** | k | | | | |

^{***}Each criterion can only be scored in one column***

| Evaluation Scale/Marks | Unacceptable (0.0 per item) | Needs Improvement (0.25 per item) | Acceptable (0.5 per item) |
|---|---|---|--|
| Look back at a recent meaningful nursing practice situation /0.5 | ☐ The event selected by student lacks relevance to current clinical setting and stage of development in the semester. | ☐ The event selected by student is remotely meaningful and partially demonstrates its relevance to current (within 2 weeks) clinical setting or to expected stage of development in the semester. | ☐ The event selected by student is meaningful, demonstrates relevance to current (within 2 weeks) lab practice and stage of development in the semester. |
| Elaborate (Reference: Clinical Performance Self Evaluation Tool- Knowledge Application, | ☐ The description of the event is disorganized and does not include any details of the event. | ☐ The description of the event is mildly disorganized and does not include enough details of the event. | ☐ The description of the event is well organized and includes details of the event. |

| CNO Entry to Practice Competency for RNs # 64, 119) | ☐ Student does not describe his/her/their feelings and does not assess the effects of one's own actions or client's response, or focuses on another's practice. | | ☐ Student describes his/her/their feelings and assesses the effects of one's own actions and clients, response. |
|--|---|--|--|
| /1.5 | □ No standard with indicator identified | □One standard with no indicator identified □ One standard with no indicator identified | ☐ One standard with one indicator identified |
| Analyze (Reference: Clinical Performance Self Evaluation Tool- Continuing | □ Reflection lacks evidence of understanding of nurse's role in the particular setting. | □ Reflection demonstrates some and/or limited understanding of the nurse's role in the particular setting. | □ Reflection demonstrates insight, personal assessment and in-depth understanding of the nurse's role in the particular setting. |
| Competence) /1.5 | □ Does not identify relationship between theory / clinical practice. Points are not clearly expressed. | □ Requires more depth in theoretical or clinical relationship and/or lacks details in points being clearly expressed. | ☐ Clear detailed identification of relationship between theory /practice established. Points are clearly expressed. |
| | ☐ Does not provide any examples from professional nursing literature to support | □ Provides irrelevant or incomplete examples from scholarly nursing literature and does not fully support his/her ideas, reflections and claims. | □ Provides specific and convincing examples from scholarly nursing literature to support his/her ideas, reflections and claims. |

| | his/her ideas, reflections and claims. □ Does not provide any examples from professional nursing literature to support his/her ideas, reflections and claims. | | |
|--|--|---|---|
| Revise (Reference: Clinical Performance Self Evaluation Tool- Knowledge and CNO Entry to Practice Competency for RPNs #4, 5, 18) | □ No evidence of problem- solving skills, no identification of strengths and/or weaknesses. □ No evidence of goals and /or plan for the practice improvement. | □ Evidence of some problem- solving includes either his/her/their strengths OR weaknesses, but not both □ Identified goals and strategies for the practice improvement are unclear, irrelevant and/ or weak. | □ Evidence of problem- solving includes his/her/their strengths and weakness □ Evidence of problem- solving includes his/her strength and weakness □ Student identifies what worked well and/ or what needs to be changed for the practice improvement. |
| New Perspective /1.5 | □ No rationale applied for strategies/interventions. □ Does not demonstrate awareness of learning, new skills and strategies required for nursing | ☐ Demonstrates some awareness of learning that has taken place and a beginning understanding of new skills and strategies required for | □ Applies legitimate rationale to justify selected strategies/interventions. □ Demonstrates awareness of learning that has taken place and understanding of new skills and strategies required for nursing practice. |
| | □ Example did not demonstrate student | nursing practice. | ☐ Examples of learning and professional growth provided by student. |

| | learning or professional growth. | | |
|---|---|---|---|
| Format and Comprehension | ☐ Difficulty or limited ability expressing ideas, feelings, or descriptions. | ☐ Style detracts from communication of ideas, feelings, or descriptions. | ☐ Fluent expression of ideas, feelings, or descriptions. |
| (Reference: Clinical Performance Self Evaluation Tool- Relationships and Clinical Applications course outline-Essential Employability Skills) | ☐ Many spelling and grammar errors, and poor sentence and paragraph structure | □ Full, correct sentence and paragraph structure. Fewer than 3 spelling mistakes. Fewer than 3 grammar errors | ☐ Clear communication with full, correct sentence and paragraph structure. No spelling mistakes, no grammar errors. |
| | □ Reflection is unorganized, unreadable in format and not following guidelines in format. | □ Reflection entry is difficult to read or lacks organization of ideas. | □ Reflection is readable and provides ideas that are well organized and follows guidelines correctly e.g., Appropriate length and subtitles used. |
| /2.0 | □ References do not meet the APA requirements | ☐ References included but have some format errors with the APA requirements. | ☐ Reference follows the APA requirements correctly. |
| | Subtotal: | Subtotal: | Subtotal: |
| Total /8 | | | |
| Need 60% to pass. | | | |

| Date returned to student | (within 2 weeks of submission date |
|--------------------------|--|
| Instructor Signature | |

Failure to maintain client confidentiality will result in an automatic grade of 0.

Discussant Report

New Program Review

Name: Hashmat Khan

April 24, 2024

Program being reviewed

Bachelor of Science in Nursing (Honours)

Review of self-study (Volume I)

The self-study is well-written and provides a clear sense of the distinguishing features of the new program and its partnership with the Queensway Carleton Hospital. The incoming students will be in the accelerated 3-year Bachelor of Science Nursing program and can choose from one of two concentrations: (i) Nursing Data Science, and (ii) Neuroscience and Mental Health. These concentrations, and the early clinical placements, are among the distinguishing features of the program.

Review of External Reviewers' Report

The external reviewers noted the above-mentioned aspects of the program as being 'Original within Ontario' and also praised the effort in putting together an 'elaborate and well-thought-out program'. The reviewers made twelve recommendations.

Review of Unit Response and Implementation Plan

Unit Response and Implementation Plan: Summary of Recommendations

The reviewers made twelve recommendations, of which ten recommendations are 'agreed to un-conditionally' while two are 'agreed to in principle'.

Six recommendations are flagged as 'opportunity', four as 'concern', and two as 'weakness'. Both the unit and the Dean responses adequately address these categories. However, in many instances, the responses do not provide a clear timeline of implementation.

DISCUSSANT'S CONCERN:

None.

DISCUSSANT RECOMMENDATION:

To add a clear timeline where action is agreed to unconditionally.

Recommendation of program categorization

Recommended to commence

Site Visit Schedule for the New Program in Nursing March 20-21st, 2024

External Reviewers: Dr. Francesco Leri, University of Guelph

Dr. Hugo Lehmann, Trent University

Internal Reviewer: Dr. Pam Wolff, Carleton University

All meetings can be accessed at:

Join Zoom Meeting

https://us06web.zoom.us/j/89850581038

Meeting ID: 898 5058 1038

*Please note that there is a 15 minute buffer between some meetings to allow for breaks and/or resolution of technical difficulties.

| EST Time | March 20, 2024 | Zoom |
|-----------------|--|------|
| 8:45-9:00 | Day #1 Meet and Greet ((Dr. Leri, Dr. Lehmann, | Zoom |
| | Dr.Wolff) | |
| 9:00-10:00 | Meeting with Maria DeRosa, Danielle Manley, Martin | Zoom |
| | Holcik, Ethan Hermer, Jeffrey Smirle, Kim Hellemans | |
| 10:00-10:15 | BREAK | Zoom |
| 10:15–11:00 | Meeting with the Dr. Maria DeRosa Dean, Faculty of Science | Zoom |
| 11:00-11:15 | BREAK | Zoom |
| 11:15-12:00 | Meeting with the Faculty Representatives from the | Zoom |
| | concentrations (Kim Hellemans, Martin Holcik, | |
| | Danielle Manley, Michael Weedmark) | |
| 12:00-12:30 | BREAK | Zoom |
| 12:30–1:30 | Meeting with Clinical Partner Queensway Carleton | Zoom |
| | Hospital (Yvonne Wilson, Dr. Gautam Goel) | |
| 1:30-2:00 | Meeting with Operations, Equipment, and Space | Zoom |
| | (Allison Jaworski, Jeffrey Smirle, Maria DeRosa, | |
| | Danielle Manley) | |
| 2:00-2:30 | BREAK | Zoom |
| 2:30–3:00 | Meeting with Dr. Pauline Rankin, Provost and Vice- | Zoom |
| | President (Academic) and Dr. David Horsnby, Vice- | |
| | Provost and Associate Vice-President (Academic) | |
| 3:00-315 | Day #1 Wrap Up Meeting (Dr. Leri, Dr. Lehmann, | Zoom |
| | Dr.Wolff) | |
| | | |

| EST Time | March 21, 2024 | Zoom |
|-----------------|--|------|
| 9:15-9:30 | Opening Meeting Day #2 (Dr. Leri, Dr. Lehmann, | Zoom |
| | Dr.Wolff) | |
| 9:30-10:00 | Meeting with Dr. Kahente Horn Miller, Associate | Zoom |
| | Professor, Indigenous Studies | |
| 10:00-10:30 | Closing Meeting with Dr. Hashmat Khan, Associate | Zoom |
| | Vice-President (Academic Planning and Strategic | |
| | Priorities) | |
| 10:30-11:30 | External Reviewers Report Preparation Meeting | Zoom |
| 11:30-12:00 | Additional time (to be used only if technical issues | Zoom |
| | require the rescheduling of a meeting) | |

External Reviewer Biographies

New Program in Nursing



Dr. Francesco Leri

University of Guelph, Associate Dean Research & Graduate Studies for CSAHS

Dr. Leri's general area of expertise is behavioural neuroscience. He investigates psychological and neuropharmacological mechanisms involved in the development, persistence and recurrence of behaviours reinforced by chemical (cocaine, heroin, oxycodone) and natural (monosaccharaides and disaccharides) rewards. Through psychological (i.e., conditioning), pharmacological and neurobiological experimentations in laboratory animals, his studies

have been providing basic scientific knowledge critical to the understanding of hedonic processes, reinforcement mechanisms, as well as addictions and their long-term treatments. Current projects are: 1) neuropharmacology of reinforcing stimuli; 2) food addiction: studies of bio-behavioral links between nutrition and opiate addiction; and 3) biomarkers of depression.



Dr. Hugo Lehmann

Trent University, Dean of Nursing

The primary focus of my research program is to determine the contributions of different brain structures to learning, memory, and emotion. Specific aims are to: 1) understand the neural circuits involved in acquiring, storing, and retrieving memory; 2) delineate the mechanisms involved in long-term

consolidation and temporally graded retrograde amnesia; and 3) determine how deficits in emotion may undermine mnemonic function. Related research projects normally involve assessing whether surgical lesions and pharmacological manipulations in rats cause anterograde and/or retrograde amnesia as well as changes in fear and anxiety in several types of behavioural paradigms.

A second focus of my research program is to examine the means to reverse or attenuate cognitive deficits, such as memory loss, by promoting regeneration of damaged brain circuitry. Projects examine the effects of promoting neurogenesis with different treatments (e.g., growth factor, enriched environment) on recovery of mnemonic function from a cellular to a behavioural level.

EXTERNAL REVIEWER REPORT

| Program being reviewed: | Compressed Bachelor of Science in Nursing, Honours |
|------------------------------|--|
| Date of review: | March 20 & 21, 2024 |
| Names and Emails of External | Dr. Francesco Leri (University of Guelph; fleri@uoguelph.ca) |
| Reviewers: | Dr. Hugo Lehmann (Trent University; hugolehmann@trentu.ca) |
| Date of Report: | April 3, 2024 |

Program Objectives

The Honours Bachelor of Science in Nursing program at Carleton University aligns with the institution's mission and strategic plans by preparing students for the evolving future of healthcare. It bridges global and local health discussions, supports wellness and sustainability, and integrates resilience training within its curriculum. The program fosters knowledge sharing and shapes the future through innovative teaching methods, experiential learning, and a focus on professional, advocacy, and scholarly competencies. It also emphasizes community engagement and interprofessional collaboration, meeting the needs of the healthcare sector and contributing to personal and environmental wellness.

The program is original within Ontario on three fronts: 1- the entire program is delivered in three years and includes summer programming, 2- it introduces a concentration in Neuroscience (mental health), 3- as well as another concentration in Nursing Data Science.

We commend Danielle Manley's work in developing this new program. We recognize that many individuals and partners contributed to this project, but Danielle, as Interim Director, quickly and thoroughly put on paper an elaborate a well-thought program.

Program Requirements

Appropriateness of the program's structure and the requirements to meet its objectives and programlevel learning outcomes.

The program's structure has been designed to meet its objectives and program-level learning outcomes, ensuring alignment with the College of Nurses of Ontario's Registered Nurse Entry to Practice Competencies (RN ETPC's). The curriculum has been mapped to cover nine domains of ETPC's, condensed into six program-level learning outcomes, which will be assessed to maintain quality assurance and demonstrate effectiveness.

The assessment plan, developed by the Bachelor of Science – Nursing Curriculum Committee (BSNCC), appears robust and incorporates a variety of methodologies such as exams, reports, simulation performance, and multi-part cumulative portfolio submissions. This approach should prepare students for the College of Nurses Quality Assurance requirements post-graduation, as well as foster a self-regulated, autonomous, and self-reflective practitioner capable of continuous learning and feedback integration.

The program includes diverse core courses and experiential learning opportunities that contribute to the depth and breadth of knowledge, professional capacity, and application of knowledge, which are key undergraduate Degree Level Expectations (DLEs). Additionally, the program supports students' development through particular activities (case studies, weekly reflections, and projects) strategically distributed during the three years to meet learning outcomes.

Appropriateness of the program's structure, requirements, and program-level learning outcomes to meet Carleton's own undergraduate or graduate Degree Level Expectations.

The Honours Bachelor of Science in Nursing program at Carleton University is expected to meet, and possibly exceed, DLEs set by the Council of Ontario Universities. The program's learning outcomes are directly mapped to the provincial DLEs, ensuring that students acquire a deep and broad knowledge base, understand and can apply methodologies, and are proficient in communication, professional capacity, and experiential learning.

The curriculum is designed to prepare students as clinicians and scholars, professionals, and advocates, with a strong emphasis on accessibility, equity, and social justice. Additionally, the program supports interdisciplinary collaboration, community engagement, and resiliency training, which are integral to Carleton's mission and strategic directions. The program's structure, requirements, and learning outcomes are thus appropriately designed to produce well-rounded, competent nursing graduates ready to meet the demands of the healthcare sector.

Appropriateness and effectiveness of the mode(s) of delivery to facilitate students' successful completion of the program-level learning outcomes.

Overall, the program's mode of delivery appears appropriate and effective in ensuring that students meet program-level learning outcomes, preparing them for the demands of the nursing profession and aligning with Carleton University's commitment to providing a high-quality educational experience.

The modes of delivery are thoughtfully designed to facilitate students' successful completion of the program-level learning outcomes. The curriculum incorporates a blend of theoretical knowledge and experiential learning, which is essential for nursing education. Core courses cover a wide range of topics, ensuring depth and breadth of knowledge, while simulation courses scaffold concepts over the years, progressively moving from simple applications to complex, autonomous scenarios. This pedagogical approach aligns with the DLEs, particularly in fostering application of knowledge, communication skills, and professional capacity.

The clinical practice, which are highly valued by students, will offer real-world experience and are considered as cornerstone of the program, ensuring that theoretical knowledge is applied in practical settings. Starting experiential learning and clinical placements in the first year of the program underscores their significance as integral components. By engaging in such hands-on experiences early on, students can cultivate a solid foundation and gain valuable insights into the complexities of nursing practice, thereby better preparing them for the challenges they will encounter throughout their education and future careers. The requirement for students to maintain a QA Learning Plan and review ETP Competencies & Foundational Practice Standards before and after each shift will further reinforce the integration of theory and practice.

OPPORTUNITY: A comprehensive breakdown of clinical hours across each term in the proposal would enhance comprehension of the structured progression of clinical learning. Additionally, it would offer insight into the resources required to effectively support the delivery of the clinical program component.

Ways in which the curriculum addresses the current state of the discipline or area of study.

The Honours Bachelor of Science in Nursing addresses the current state of the discipline by integrating several key elements that reflect modern nursing education and practice needs. Firstly, it incorporates a strong focus on experiential learning through simulation labs and clinical practica, which are essential for developing practical skills in a controlled, yet realistic healthcare environment. This approach ensures that students are practice-ready and can adapt to the dynamic nature of clinical settings. Second, the program emphasizes the importance of understanding and addressing traditional Western, colonized tenets of healthcare by incorporating an Equity, Diversity, and Inclusion focus, and Indigenous health knowledge. This prepares students to consider and challenge structures of oppression and racism in healthcare, empowering them to become change agents. Third, recognizing the importance of digital literacy and emerging technologies in healthcare, the program introduces a specialized concentration in Nursing Data Science, which is the first of its kind in Canada, aiming to equip nurses with the knowledge and skills to effectively integrate technology and data into their practice. This concentration includes courses on health technology, informatics, artificial intelligence (AI), machine learning (ML), coding, predictive modeling, statistical analysis, workflow analysis, technological governance, regulation, ethics, and project management. Finally, neuroscience will play a significant role in the nursing program at Carleton University by providing a concentration stream in Neuroscience and Mental Health. This concentration is designed to equip nursing students with specialized knowledge and skills to address the growing mental health crisis and support patient needs across their lifespan. Students in this concentration will explore the epidemiology of neurological disorders, the effects of environmental toxins on mental health, and the neurodevelopmental determinants of health. This concentration stream leverages Carleton's strong neuroscience program to build a foundation that integrates nursing and mental health components, fostering a progressive development of knowledge and clinical acumen in neuroscience. This focus prepares nursing graduates to contribute effectively to mental health care, with a deep understanding of the neurological underpinnings of mental health conditions and the ability to apply this knowledge in clinical practice.

ldentification of any unique curriculum or program innovations or create components, or significant high impact practices.

The nursing program at Carleton University features several unique curriculum innovations and high-impact practices that set it apart:

1. Integration of EDI principles: The program embeds Equity, Diversity, and Inclusion principles into the curriculum, with specific courses like NURS 1004 Health Equity and Social Justice. Faculty are required to use EDI teaching tools and complete modules offered by the Department of Equity and Inclusive Communities. This will ensure that graduates will be culturally competent and prepared to work respectfully with diverse populations.

- 2. Use of Extended Reality (XR) and Simulation: The program integrates XR and simulation to enhance clinical experience, ensuring that students are practice ready. Experiential Learning Labs complement many courses, providing hands-on community experience and addressing traditional Western healthcare perspectives.
- 3. Focus on Organizational Excellence and Collaborative Leadership: The program has been developed in collaboration with the Queensway Carleton Hospital and aims to serve as a model for nursing education, both provincially and federally.
- 4. Data Science in Nursing: As indicated above, the program is one of the first in Canada and North America to embed data science into the medical curriculum, fostering collaboration among data science, engineering, and nursing disciplines.
- 5. Research and Critical Inquiry: Students will be taught to find, critique, and mobilize research publications and will be given opportunities to investigate solutions to current nursing issues through research projects within the Honours stream.
- 6. Interprofessional Education (IPE): The curriculum includes IPE, which is essential for collaborative practice among healthcare providers.
- 7. Scaffolded Learning and Competency Evaluation: The curriculum is designed to scaffold knowledge from theory to application, with a focus on autonomous and self-reflective practice. The program uses a multi-part, cumulative portfolio submission for competency evaluation, aligning with the College of Nurses Quality Assurance requirements.
- 8. Accessibility and Inclusive Design: The program promotes courses on critical disability studies and inclusive design as potential electives and pursues research and curriculum collaborations in accessibility.
- 9. Black and Indigenous Summer Research Internships (BISRIs): These internships will be promoted alongside research courses to provide students from equity deserving groups with hands-on research experience.
- 10. The nursing program at Carleton University places a significant emphasis on Indigenous knowledge, aiming to foster reconciliation and create a culturally safe learning environment. The curriculum includes foundational courses such as NURS 1000 Indigenous Health and NURS 1100 Experiential Learning Lab Indigenous Health, which are developed and potentially co-taught by Indigenous faculty specializing in Ceremony. Indigenous health perspectives, traditional medicine, and the impacts of colonization are integrated throughout the curriculum. The program is committed to sustainable practices by hiring Indigenous faculty and incorporating collaboration with Indigenous communities as a hiring metric for all faculty. An Indigenous Community Member Advisory Committee will be established to guide curriculum development, faculty recruitment, and program improvement. The program also reserves seats for Indigenous students and promotes research opportunities through the Indigenous Research in Science (IRIS) program.

OPPORTUNITY: Given this foundation and the program's objectives, it would be valuable to consider the development of a specific area of concentration in Indigenous Nursing. This concentration could focus on addressing the unique health needs of both non-rural and rural

Indigenous communities. It would provide nursing students (indigenous and not) with a deeper understanding of Indigenous health issues, cultural competencies, and the skills necessary to deliver culturally safe and effective healthcare in diverse settings.

The concentration could include advanced study in Indigenous health policy, community engagement, traditional healing practices, and the social determinants of health affecting Indigenous populations. It would also benefit from the program's existing collaborations with Indigenous communities and healthcare partners, as well as the guidance of the Indigenous Community Member Advisory Committee.

OPPORTUNITY: Extending on the point above and considering experiential learning beyond traditional clinical settings, integrating immersive placements in Indigenous rural communities into the program would not only enrich students' understanding of culturally sensitive care but also provide invaluable exposure to unique healthcare challenges and practices. Nursing in these communities requires a nuanced approach that acknowledges cultural beliefs, traditions, and community dynamics. By immersing students in such environments, they can develop a deeper appreciation for cultural diversity, enhance their communication skills, and gain firsthand experience in addressing the healthcare needs of Indigenous populations. Moreover, these placements will offer an opportunity for students to collaborate with local healthcare providers and community members, fostering mutual learning and building sustainable partnerships.

Developing such a concentration and placements would not only enhance the program's offerings but also contribute to a more equitable healthcare system by preparing nurses to work effectively in Indigenous communities. It would align with Carleton University's strategic directions to serve Ottawa and the world, and it would support the university's commitment to creating a culturally safe learning environment for both Indigenous and non-Indigenous students. This initiative could further position the program as a leader in Indigenous health education and as a model for other nursing programs nationally and internationally.

Assessment of Teaching and Learning

- Appropriateness and effectiveness of the plans to monitor and assess:
 - The overall quality of the program
 - o Whether the program continues to achieve in practice its objectives
 - Whether its students are achieving the program-level learning outcomes
 - How the resulting information will be documented and subsequently used to inform continuous program improvement

The plans to monitor and assess the overall quality of the program, its objectives, and student achievement of program-level learning outcomes seem both appropriate and effective. The Bachelor of Science – Nursing Curriculum Committee (BSNCC) will develop assessment methodologies and conducting program-level learning outcome assessments, ensuring alignment with the College of Nurses of Ontario (CNO) competencies as well as potential accreditation with the Canadian Association of Schools of Nursing (CASN). The program employs a variety of assessment tools, including exams, reports, simulation performance, and a multi-part, cumulative portfolio submission, which is reflective of the College of Nurses Quality Assurance requirements. Clinical requirements and submissions for evaluation, such as the QA Learning Plan and the review

of ETP Competencies & Foundational Practice Standards, further support the monitoring of student progress and the achievement of learning outcomes. The library will also contribute to the program's quality by ensuring that essential resources are available to support teaching and research. Finally, the BSNCC and the Nursing School Board will review findings from various self-assessments and self-evaluations embedded within the program and will recommend curriculum changes as needed. This structured approach to assessment and feedback loops ensures that the program will remains current, effective, and aligned with professional standards, while also being responsive to areas for enhancement.

Admission Requirements

Appropriateness of the program's admissions requirements given the program's objectives and the program-level learning outcomes.

The program's admissions requirements are generally appropriate given the program's objectives and the program-level learning outcomes. The minimum cutoff range of 80% reflects the competitive nature of the program and ensures that students have a strong biomedical science background, which is important to support their ability to achieve the learning outcomes of Clinician and Scholar. The inclusion of prerequisites such as English, Advanced Functions, Biology, and Chemistry aligns with the foundational knowledge required for nursing practice. Additionally, the requirement for no individual grade below 70% in these courses ensures that students have a solid understanding of the essential scientific principles. However, while these requirements are aligned with the program's objectives and learning outcomes, the substantial expansion of nursing seats in Ontario (expansion is current BScN programs and the addition of new BScN programs at colleges) may require Carleton to have more flexibility in their admissions criteria.

CONCERN: The program should decrease the cumulative cutoff to 75%. This would increase the chances of meeting acceptance objectives despite the increased number of nursing seats across programs in Ontario. Ultimately, with a very strong pool of applicants, the entrance average could still meet the intended 80%, but at the very least the program would not be overly constrained or limited by lower requirements.

In addition, there may be a need to revise the admissions criteria to ensure inclusivity and accessibility for equity-seeking or equity-deserving groups. This could involve re-evaluating the weight given to certain prerequisites or the overall cutoff range to accommodate diverse educational backgrounds and life experiences. The program already demonstrates a commitment to Equity, Diversity, and Inclusion principles, and Indigenous health knowledge, which suggests a willingness to adapt admissions practices to enhance accessibility and representativeness within the nursing cohort.

CONCERN: It is important to ensure that the admissions process does not inadvertently create barriers for individuals from underrepresented groups. By considering accommodations and alternative admission strategies where appropriate, the program can maintain its high standards while also promoting a diverse and inclusive student body that reflects the communities they will serve. This approach aligns with the Ontario Human Rights Commission's Policy on Accessible Education for Students with Disabilities and will support the program's overarching goals of fostering inclusivity and diversity in healthcare.

Resources

Participation of a sufficient number of qualified core faculty who are competent to teach and/or supervise in and achieve the goals of the program and foster the appropriate academic environment.

The program has outlined a strategic plan to recruit a number of qualified core faculty who possess the necessary competencies to teach, provide clinical training, and develop independent research programs. The current recruitment of one faculty member, Danielle Manley, with expertise in Health Informatics and Professional Practice, and the planned addition of four more faculty members, including an Associate Professor specializing in Acute Care and Simulation, and three Instructor positions with various specializations, demonstrate a commitment to achieving the program's goals and fostering an appropriate academic environment. Moreover, the program's intention to fill a Tier 1 Canadian Research Chair position by 2025, with a focus on utilizing research space in ARISE and collaborating with external partners, further underscores the emphasis on research excellence. This senior appointment is indeed very likely to significantly contribute to the program's research profile and capabilities.

However, it is important to recognize that the direct involvement of faculty in teaching and clinical training responsibilities can often present challenges to maintaining a robust research agenda. To mitigate this, the program may need to be strategic in balancing faculty workloads and providing support structures that enable research productivity. This could include offering research sabbaticals, facilitating research collaborations, providing grant writing assistance, and ensuring access to research facilities and technical support. Additionally, the program's collaboration with various departments, such as Health Science and Neuroscience, and the involvement of the steering committee members from the Faculty of Science, suggests an interdisciplinary approach that could enhance research opportunities and outcomes. The program's focus on embedding data science within the curriculum also opens avenues for innovative research in healthcare technology. Perhaps, if this was strategically identified as a defining research focus, the program could attract fellow researchers who share complementary expertise and interests, making it easier to utilize each other's strengths to collaboratively attain a high standards of research excellence.

CONCERN: it will be crucial to strategically promote research excellence and manage faculty workloads to ensure that teaching and clinical training do not impede progress in research endeavors.

Moreover, recruiting Registered Nurse faculty members with completed doctorates and established research programs has become increasingly challenging. The number of RNs completing their doctorates annually is limited, while the demand for faculty positions in university BScN programs continues to grow. Furthermore, the expansion of BScN programs at the college level is creating additional demand for qualified faculty.

To address this challenge, Carleton should consider broadening its recruitment criteria to include RN faculty with graduate degrees in related fields, as well as individuals in the final stages of completing their doctorates. By widening the pool of potential candidates, the university can enhance its ability to attract faculty members who bring diverse perspectives and expertise to the program. This approach not only strengthens the faculty team but also enriches the educational experience for students, fostering interdisciplinary collaboration and innovation within the

nursing program.

CONCERN: It is strongly encouraged to 1) consider RN faculty with graduate degrees related to but outside of nursing, 2) be open to hiring faculty that have yet completed their doctorate (e.g., a year from completion), 3) provide opportunities to support completion of their doctorate (e.g., a course release), 4) provide mentorship and support for these faculty to establish independent research programs, and 5) determine tenure criteria emphasizing research promise over established research programs.

OPPORTUNITY: Nursing accreditation and approval bodies, such as the CNO and CASN, mandate that nursing content courses must be instructed by registered nurse (RN) faculty or instructors. However, with RN faculty in high demand, implementing co-taught courses within the program could alleviate some of the teaching burden on RN faculty while introducing a broader spectrum of expertise. By pairing RN and non-RN instructors in the delivery of nursing courses, programs can maintain compliance with accreditation standards while diversifying teaching methodologies and perspectives. Alternatively, this program could include courses offered by other units/departments as a strategy to reduce the teaching demands on RN instructors.

➤ Discussion/explanation of the role and approximate percentage of adjunct and part-time faculty/limited term appointments used in the delivery of the program and the associated plans to ensure the sustainability of the program and quality of the student experience.

It is common practice for BScN programs to rely on a significant number of part-time instructors, as many registered nurses prefer to maintain their clinical practice while engaging in sessional teaching or part-time positions. This arrangement offers several advantages, as these instructors retain direct exposure to current nursing demands, practices, and challenges within our healthcare system. Moreover, the majority of clinical instructors in BScN programs are practicing RNs who choose to contribute to the education of future nurses. This firsthand experience enriches the educational experience for students, as these instructors can provide real-world insights, practical knowledge, and relevant case studies. Their ongoing involvement in clinical practice ensures that students receive up-to-date training aligned with the evolving needs of the healthcare sector.

Overall, the participation of part-time instructors and practicing RNs as clinical educators strengthens the BScN program by bridging the gap between academia and the clinical environment, thereby preparing students for the realities of contemporary nursing practice.

Provision of supervision of experiential learning opportunities

In the proposed program, the supervision of nursing students in clinical placements follows the established model where clinical instructors oversee groups of students and preceptors provide one-on-one supervision to individual students. However, to ensure effective support and coordination, it is imperative to include a managerial or coordinative role within the program structure. This individual would provide essential support, facilitation, and even supervision to clinical instructors and preceptors, ensuring the smooth operation of clinical placements.

WEAKNESS: It is critical that program formally includes a new administrative position to better support clinical instructors and preceptors. This will optimize the learning experience for students and the effectiveness of clinical instruction and is required in some form from nursing

accreditation bodies. This responsibility cannot be delegated to the Program Director or a faculty member as the workload will be too great once the program is fully operational.

Adequacy of the administrative unit's utilization of existing human, physical and financial resources

The utilization of existing human, physical, and financial resources within the new School of Nursing at Carleton University appears to be well-planned and adequate for the program's initial launch and short-term needs. The program has begun the strategic recruitment of qualified core faculty and plans to fill additional faculty positions to support the delivery of key curricular pillars and supervise honours thesis projects, which is essential for maintaining the program's academic rigor.

The program has also allocated resources for support and technical staff, including lab coordinators and an undergraduate program administrator who will provide guidance to the students. The program is also planning to hire an occupational health nurse to offer some support to practicum management and non-academic student requirements (NARS). This latter position will be shared with the School of Social Work. All these staff will be necessary, but likely insufficient to support a program that hosts 500-600 nursing students in the program.

WEAKNESS: As the program reaches full operational capacity, the necessity for a dedicated full-time Lab and Simulation Manager/Director/Supervisor will be needed. This individual would be tasked with supervising lab coordinators, collaborating closely with faculty to design and refine lab and simulation activities, and maintaining stringent quality control over this crucial experiential learning component. Given the extensive scope of these responsibilities, assigning them to the Director or a faculty member would prove overwhelming and potentially compromise the effectiveness of both teaching and administration. Thus, the inclusion of a specialized managerial role dedicated to lab and simulation management is essential for the program's success.

OPPORTUNITY: The proposed program as well as the School of Social Work should consider moving to a third-party for the NARS verification process (e.g., Synergy). This could offset some costs (verification is paid by the students), reduce NARS-dedicated time, and offer more time to the Occupational Health Nurse to attend to other responsibilities, such as placement agreements and coordination of placement groups.

Physical resources seem addressed appropriately using pre-existing classroom spaces, a dedicated suite in CTTC for faculty offices and meetings, and a simulation space in ARISE for research and student training.

To ensure that students and faculty have access to the latest research and information in the field, financial support has been allocated to the library to address the need for essential resources to support the program, including subscriptions to top-ranked journals and purchases of e-resources, journals, and books.

However, to enhance the program's long-term sustainability and to expand research opportunities, it would be beneficial to establish official linkages with graduate programs within the Faculty of Science. Such linkages could provide a reliable source of qualified teaching assistants, who are often graduate students, thereby supporting undergraduate teaching and

learning. Additionally, these connections could facilitate more numerous and diverse research opportunities, allowing for interdisciplinary collaboration and the sharing of resources and expertise.

Employing co-teaching strategies through these linkages could also be advantageous. Co-teaching can facilitate the creation of new courses that draw on the strengths of complementary disciplines, and it can improve course delivery by bringing different perspectives and areas of expertise into the classroom. This approach would align with the program's commitment to innovation and excellence in nursing education.

OPPORTUNITY. While the program has made commendable efforts in utilizing its current resources, forging stronger connections with graduate programs could significantly enhance the program's capacity to provide high-quality education and research opportunities, thereby contributing to its continuous improvement and success.

➤ Evidence that there are adequate resources to sustain the quality of scholarship and research activities produced by students, including library support, information technology support, and laboratory access.

Addressed above.

Summary of Recommendations/Program Enhancements

| Rec | ommendation | Category (Weakness, Concern, Opportunity) |
|-----|---|---|
| 1. | The program as well as the School of Social Work should consider moving to a third-party for the non-academic requirements (NARS) verification process | Opportunity |
| 2. | Forging stronger connections with graduate programs could significantly enhance the program's capacity to provide high-quality education and research opportunities | Opportunity |
| 3. | Adding a comprehensive breakdown of clinical hours across each term in the proposal | Opportunity |
| 4. | Consider the development of a specific area of concentration in Indigenous Nursing | Opportunity |
| 5. | Integrate immersive placements in Indigenous rural communities into the program | Opportunity |
| 6. | Implement co-taught courses by pairing RN and non-RN instructors in the delivery of nursing courses. Use courses already offered by other programs/departments | Opportunity |
| 7. | Revise admission cut-off criteria from 80% to 75% to maximize chances of a successful intake given the high number of BScN seats at Ontario institutions | Concern |

| 8. | The admissions process must avoid inadvertently creating barriers for individuals from underrepresented groups | Concern |
|-----|---|----------|
| 9. | Strategically promote research excellence and manage faculty workloads to ensure that teaching and clinical training do not impede progress in research endeavors | Concern |
| 10. | Consider hiring RN faculty near completions of the doctorate as well as those that have completed their graduate degrees in areas complementary to nursing | Concern |
| 11. | Formally include a new administrative position to better support clinical instructors and preceptors | Weakness |
| 12. | As the program reaches full operational capacity, a dedicated full-time Lab and Simulation Manager/Director/Supervisor will be needed | Weakness |

Bachelor of Science in Nursing Unit Response to External Reviewers' Report & Implementation Plan Programs Being Reviewed: Undergraduate Programs

Note: This document is forwarded to Senate, the Quality Council and posted on the Vice- Provost's external website.

Introduction & General Comments

Please include any general comments regarding the External Reviewers' Report.

The School of Nursing was pleased to receive the Reviewers' very positive External Reviewers' report on April 4th, 2024. This report was shared with the nursing program team, and we are committed to the continual improvement of our programs to enhance the student, staff, and faculty experience. This document contains both a response to the External Reviewers' Report and an Implementation Plan (Section B) which have been created in consultation with Maria DeRosa, Dean of Science.

For each recommendation one of the following responses must be selected:

Agreed to unconditionally: used when the unit agrees to and is able to take action on the recommendation without further consultation with any other parties internal or external to the unit.

Agreed to if additional resources permit: used when the unit agrees with the recommendation, however action can only be taken if additional resources are made available. Units must describe the resources needed to implement the recommendation and provide an explanation demonstrating how they plan to obtain those resources. In these cases, discussions with the Deans will normally be required and therefore identified as an action item.

Agreed to in principle: used when the unit agrees with the recommendation, however action is dependent on something other than resources. Units must describe these dependencies and determine what actions, if any, will be taken.

Not agreed to: used when the unit does not agree with the recommendation and therefore will not be taking further action. A rationale must be provided to indicate why the unit does not agree (no action should be associated with this response).

Calendar Changes

If any of the action items you intend to implement will result in calendar changes, please describe what those changes will be. To submit a formal calendar change, please do so using the Courseleaf system.

| UNIT RESPONSE AND IMPLEMENTATION PLAN | | | | | | |
|---|---|--|---|---|--|--|
| Programs Being Reviewed: Bachelor of I Prepared by (name/position/unit/date) | | | | | | |
| External Reviewer Recommendation & Categorization | Unit Response: 1- Agreed to unconditionally 2- Agreed to if additional resources permit (describe resources) 3- Agreed to in principle 4- Not agreed to Rationales are required for categories 2, 3 & 4 | Action Item | Owner | Timeline | Will the action described require calendar changes? (Y or N) | |
| The program as well as the School of Social Work should consider moving to a third-party for the non-academic requirements (NARS) verification process (Opportunity) | 1. Agree to unconditionally. | The program has registered for the use of a non-academic requirement software as of January, 2024 called HSPNet. This software is used by regional partners and QCH, and is a requirement of the regional Nursing Clinical Resources Committee. | Director of School | Registration completed. Activation pending first student intake to be completed by August, 2025 (projected registration based on first cohort, April 2025). | N | |
| Forging stronger connections with graduate programs could significantly enhance the program's capacity to provide high-quality education and research opportunities (Opportunity) | Agree to unconditionally. | a) Other program's graduate students: The opportunity to employ Teaching Assistants from other Departments and Schools such as Health Science, Neuroscience, Computer Science, and Mathematics and Statistics and Biology has been discussed within the Faculty of Science Chairs and Directors meeting and is the projected path forward. b) Other program's research: Interdisciplinary research opportunities have already begun. Some of the opportunities that exist include accessibility research with Dr. Adrian Chan in the Faculty of | Director of School, the Dean of Science | The Unit has discussed this possibility with other Units and will continue discussions throughout the creation of the program. Each year, the Dean will allocate teaching assistant positions to Health Science, Neuroscience, Computer Science, Mathematics and Statistics, and Biology, and other units. Initially, many of the TA positions will be held by graduate students in these units, and as the program reaches full capacity in September 2029, some of these positions will be allocated to third-year nursing students. However, the program will continue to rely on outside units for | N | |

| | | Engineering, faculty members in the Departments of Neuroscience and Health Sciences, and School of Computer Science and we will be seeking further collaboration with the Health and Counselling services on campus as a natural clinical fit for the curriculum, to support clinical placements, and most importantly to support the student mental wellness in this type of program. We will also explore collaborative research opportunities with Ottawa U, Algonquin college, and other local institutions undertaking clinical research. c) Queensway Carleton Hospital and Carleton University have created a memorandum of understanding whereby Queensway Carleton has promised to not turn away a clinical placement until all resources have been exhausted. This currently extends to all Graduate programs at Carleton and thus strengthens the interdisciplinary clinical research opportunities for the future. | | program is established. During the hiring process in the first three years, the unit and Dean will highlight the interdepartmental research opportunities. Furthermore, in year two of the program, (September 2026) we will approach these units to set up research opportunities and mentorship opportunities for graduate students and their supervisors to supervise nursing students in their third-year honours research project courses. | |
|---|--|---|-----------------------|--|---|
| Adding a comprehensive breakdown of clinical hours across each term in the proposal (Opportunity) | Agreed to unconditionally. | A projection of soft upper and lower limits of clinical placement hours has been reviewed based on all other programs of nursing in Ontario. As this number is highly variable and informs a fundamental pedagogical stance, we have based our resource projections on the upper limits and will determine specific clinical hours upon faculty hiring as a collaborative Unit level decision prior to program start. | Director of School | The Director confirmed support from each clinical organization proposed in the program thus far to accommodate all its needs. Clinical hours will be reviewed by the Unit as a standing committee item. | N |

| 4. Consider the development of a specific area of concentration in Indigenous Nursing (Opportunity) | 3. Agree to in principle. | Based on the discussion and recommendations of the steering committee, the initial focus of the program will be to develop each course with dedicated space for Indigenous health concepts. This idea was largely supported to negate the possibility to elect to learn about Indigenous concepts through a chosen concentration and instead enforce the Unit to design each course with the vision of dedicated effort toward 'unlearning' or reframing traditional Western health care practices and embedding Indigenous health practices alongside. With the support of Dr. Kahente Horn-Miller, and in alignment with Kinàmàgawin, the Unit will seek to create Indigenous learning bundles to embed throughout the program. Once the unit has established these foundations, the Unit will endeavor to create a concentration or specialization in concepts as mutually developed with Indigenous partners that may also serve to support recommendation number 5. | Director of School, the Indigenous Member Advisory Committee, Nursing School Board | The possibility has been explored during the creation of the program (from June 2023-current), and will continue to be developed with the formation of the Indigenous Member Advisory Committee. Indigenous built curriculum is a standing agenda item in the Nursing Steering Committee and will remain a standing agenda item during Unit Committee Meetings set to begin June 2025 Upon Indigenous faculty hire in fall of 2024, a strategy will be created with the broader committee to inform scope of Indigenous health concepts and delivery. This strategy will be completed by summer of 2025. | Y |
|---|------------------------------|---|--|---|---|
| 5. Integrate immersive placements in Indigenous rural communities into the program (Opportunity) | Agree to unconditionally | This recommendation is one of the primary goals of the program. To achieve this goal there are numerous sensitive relationships and milestones that must be introduced and developed. Due to the very nature of colonization, this work will be on-going throughout the lifespan of this program with the vision of achieving partnership with multiple Indigenous communities so we as an Academic Centre can strive to achieve trust and mutual | Director of School, the Indigenous Member Advisory Committee, Nursing School Board | This is an on-going multi phased approach. - January 2024, met with two communities to discuss integration and needs. - March 2024, met with an additional community to understand collaboration and transportation as a key current barrier - May 2024, Queensway Carleton Hospital has met with a community | N |

| | | collaboration as defined by different Indigenous groups. Understanding the different needs of these groups will be imperative to creating a clinical placement strategy that is beneficial to the community and not just to the proposed program. | | to establish a partnership based again on understanding the community needs - Upon Indigenous faculty hire targeted for fall 2024, there will be a strategy created to understand what is in scope and not in scope for the curriculum and clinical opportunities and develop meaningful connections and review competencies in alignment with these communities and the requirements of the College of Nurses of Ontario. This strategy will be completed by summer of 2025. | |
|---|------------------------------|--|-----------------------|--|---|
| 6. Implement co-taught courses by pairing RN and non-RN instructors in the delivery of nursing courses. Use courses already offered by other programs/departments (Opportunity) | Agree to unconditionally | The requirement of a Registered Nurse as a teacher of nursing concepts is held by the College of Nurses of Ontario (CNO) and Canadian Association of Schools of Nursing (CASN) accreditation requirements. Implementing co-taught courses and using courses taught by other units for non-clinical content is an excellent strategy, and the design of the curriculum is supportive of this ability. Additionally, this supports resource optimization and will be implemented with the first cohort. | Director of School | Will be in effect for the start of the program (as proposed, September 2025). | N |
| 7. Revise admission cut-off criteria from 80% to 75% to maximize chances of a successful intake given the high number of BScN seats at Ontario institutions (Concern). | 3. Agree to in principle | The Unit will remain consistent with the admission cut-off of Carleton's BSc. Honours degrees which is between 78-82% to support a unified approach in the Science programs and allow for more confluent transferability between programs. The Unit will review the impact of the cutoff average after an initial program cycle to determine if it would be | Director of School | Have discussed this change with Admissions and the Registrar's office to be implemented for first intake (January 2025, as proposed) | N |

| | | supportive to make any modifications at that time. | | | |
|--|-----------------------------|--|-----------------------|--|---|
| 8. The admissions process must avoid inadvertently creating barriers for individuals from underrepresented groups (Concern) | 1. Agree to unconditionally | The Unit has discussed this with the School of Social Work and will be utilizing a supplementary fillable CV as part of the application where students can highlight their non-academic experience and bolster their application. Furthermore, the Unit has discussed the admission process to expand accessibility criteria to ensure equitable and fair consideration through channels such as the enriched support program for Indigenous students (IESP), as well as seeking support in development of an accommodation's standard with the Paul Menton Center, considering the requirements as set out by the College of Nurses of Ontario and as posted on OUAC for comparative nursing programs. The Unit will review accessibility and equity as related to their admission criteria on an on-going basis. | Director of School | Have had follow up discussions with the Registrar's office and Admissions (April 2024). Currently working to refine the process of applying with ranking weighed between academic average and CV submission using the model/take-aways from architecture and social work. This will be implemented for the admissions process which is underway at this time (May 2024) awaiting confirmation of program approval. This will be finalized before the first cohort, as proposed by September 2025. This process will be evaluated each year with Admissions and the Academic unit to understand optimization opportunities. | N |
| 9. Strategically promote research excellence and manage faculty workloads to ensure that teaching and clinical training do not impede progress in research endeavors (Concern) | 1. Agree to unconditionally | The Unit recognizes the importance of research excellence and will be hiring a Tier 1 CRC with a focus on Acute Care and Simulation whose position will primarily focus on this research. Furthermore, we will be hiring faculty with a focus on Indigenous Ceremony; Geriatrics, Frailty, and Palliative Care; and Mental Health, and Health Care Worker Resilience. However, the Unit understands that these | Dean of Science | Will be ongoing throughout the program approval process. - Posting CRC (summer 2024), primary role of this position will be research - Posting Indigenous Faculty (summer 2024) - Annually the Unit will review teaching and research loads of all | N |

| | | faculty members' focus will mainly be on teaching and creating the curriculum at the program's start. | | employees to ensure alignment with Unit needs. In summer 2026 after initial stabilization, the Unit will discuss program expansion to include a Masters degree which will strengthen the research arm of the Nursing program further | |
|--|--|--|---|---|---|
| 10. Consider hiring RN faculty near completions of the doctorate as well as those that have completed their graduate degrees in areas complementary to nursing (Concern) | 1. Agree to unconditionally | The Unit will consider hiring Registered Nurse (RN) faculty near the completion of their doctorates as well as those who have completed graduate degrees in areas complementary to nursing. These opportunities have been discussed with Queensway Carleton Hospital and will be promoted when working with external partners to reach these groups of potential faculty. | Dean of Science, Director of School | This process will be implemented effective immediately (March 2024). Job descriptions will be created in May/June 2024, and include "Master Degree in Nursing or Equivalent" where Masters is required, and "PhD in Nursing or Equivalent" where Doctoral level is required. An example of an equivalent would be in Education, Quality and Safety, Health Administration, Biomedical Engineering, Health Policy, etc. | N |
| 11. Formally include a new administrative position to better support clinical instructors and preceptors (Weakness) | Agree to unconditionally | Reallocating: proposed 11PE position will support clinical instructors and preceptors in addition to an FTE Faculty (hired in year 0). | Dean of Science, Director of School | Faculty position to be recruited in 2024-2025 fiscal (aim for July 2025), 11PE position to be recruited in 2025-2026 fiscal (aim for July 2026) | N |
| 12. As the program reaches full operational capacity, a dedicated full-time Lab and Simulation Manager/Director/Supervisor will be needed (Weakness) | Agree to unconditionally | Similar to recommendation 11, there have been on-going discussions related to current terminology and job descriptions for traditional requirements in the Faculty of Science as compared to requirements in Nursing. In review of resource proposal, reallocation of resources will achieve this recommendation and still fall within the job descriptions as they currently exist. | Dean of Science, Director of School | Full operational capacity as proposed will be in 2028, budget review will occur in 2027 to ensure adequate support. | N |

Nursing

Dean's Response

Programs Being Reviewed: Bachelor of Science in Nursing

Date: April 16th, 2024 Version: 1

Instruction

The table below has been pre-populated with the external reviewer recommendations. Please complete the Dean's Response column by providing a separate response to each of the external reviewers' recommendations, as required by the QAF (5.3.1).

| Dean's Response | |
|---|---|
| Programs Being Reviewed: Bachelor of Science in | |
| Nursing | |
| Prepared by: Maria DeRosa | |
| External Reviewer Recommendation & Categorization | Dean's response A response is required for each recommendation listed. |
| The program as well as the School of Social Work should consider moving to a third-party for the non-academic requirements (NARS) verification process (Opportunity) | The regional software resource manager of choice for non-academic requirements for clinical programs is HSPNet. HSPNet affiliation is via the Council of Ontario Programs of Nursing Director, Michelle Cyr. The CU Nursing program has registered for HSPNet, and the budget to support HSPNet is proportional to students and users and has been included in the 2024-2025 budget as approved by PBWG and will be carried forward for budget continuation under on-going professional fees. |
| Forging stronger connections with graduate programs could significantly enhance the program's capacity to provide high-quality education and research opportunities (Opportunity) | a) Other program's graduate students: As TA budget is centrally managed and allocated to Faculties, the Faculty of Science will look to leverage the proposed new TA positions to support graduate students from biology, neuroscience, health science, and mathematics and statistics. The proposed budget for TAs to support the Nursing program has been approved in principle by PBWG. b) Other program's research: I agree with the response. One of the goals in the Faculty of Science's Strategic Integrated Plan is to further develop our interdisciplinary and fundamental research areas of life sciences, next generation technologies and data science with internal and external partners. c) QCH/CU MOU: Since beginning the proposal, Queensway Carleton Hospital as an active partner has reviewed opportunities to support new clinical placements for Carleton in the Master of Health Science Technology and the Capstone project for Bachelor of Health Science students. This partnership has enabled additional opportunities for clinical research and as we proceed forward in the development, this partnership strengthened by our memorandum of understanding will open designated clinical opportunities for graduate studies in and outside of the nursing program ultimately strengthening the healthcare presence of Carleton. |

| 3. | Adding a comprehensive breakdown of clinical hours across each term in the proposal (Opportunity) | a) Clinical hours to support placements: This is a foundational and reputational pedagogical decision. The average number of hours of clinical placements has been reviewed from other provincial programs and discussed with our partner Queensway Carleton Hospital to inform soft lower and upper limits that have informed the development of the curriculum and CNO submission thus far. I support the decision to determine the specific number of clinical hours of each placement at such time as there is a core faculty hired to collaborate on the decision. I foresee no risk working within the defined upper and lower limits at this time. b) Clinical hours to support operational capacity: In a review of resources to inform PBWG submission, soft upper and lower limits were used to determine if the program resource proposal was sufficient, and it is. No additional resources would be required based on this outstanding item understanding the hours would fall within the parameters as assessed provincially. |
|----|--|--|
| 4. | Consider the development of a specific area of concentration in Indigenous Nursing (Opportunity) | This has been an area of deep discussion in the development of the program. It is the direction of the steering committee that to ensure we are achieving our vision of embedding Indigenous Health concepts in all courses as a fundamental value, rather than leaving Indigenous Health concepts to an elected stream, we are mindfully starting the program without a concentration stream to hold accountability to the development of each course and each course's content to support Indigenous Health concepts. Dr. Kahente Horn-Miller has recommended to instead focus on the development of Indigenous Health / Indigenous Nursing bundles to provide course instructors with resources created by Indigenous experts. |
| 5. | Integrate immersive placements in Indigenous rural communities into the program (Opportunity) | This is a long-term goal that will require relationship and trust building between Carleton and Indigenous rural communities. We have started conversations with several Indigenous communities to understand our role as a stakeholder in what is required from an educational institution, and what is beneficial to their communities. This remains a priority for the program, and with the support of our Indigenous Registered Nurse Faculty member, a position approved by PBWG for preliminary recruitment in 2024, we will create a placement strategy identifying findings from our reviews and next steps to continue to build our program and create these important partnerships. |
| 6. | Implement co-taught courses by pairing RN and non-RN instructors in the delivery of nursing courses. Use courses already offered by other programs/departments (Opportunity) | This will be implemented and encouraged. The Faculty of Science reviews opportunities for efficiencies in the delivery of content during its annual retreat and on-going curriculum committee meetings. The School of Nursing will be part of these discussions. |
| 7. | Revise admission cut-off criteria from 80% to 75% to maximize chances of a successful intake given the high number of BScN seats at Ontario institutions (Concern). | I support the change of the admissions average to 78-82% and reviewing the admissions average at the end of the program cycle effectively immediately for admissions information distribution. |
| 8. | The admissions process must avoid inadvertently creating barriers for individuals from underrepresented groups (Concern) | I agree with the use of resources and processes as described by the Unit. This concern is shared generally across the Faculty of Science and is a discussion point during various committees as related to on-going engagement and supports available to students. The School of Nursing will be supported by the Faculty of Science to maintain active work in its review of removing barriers for individuals from underrepresented groups, and the Faculty of Science is looking forward to a review of the process of CV submission for application as a possible model for others to consider. |
| 9. | Strategically promote research excellence and manage faculty workloads to ensure that teaching and clinical training do not impede progress in research endeavors (Concern) | The Faculty of Science provides a variety of supports to help new faculty launch their research programs, including our New Faculty Mentoring program, access to research facilitators, grant-writing assistance, etc. As the unit drafts its standards for tenure and promotion, they will also have the opportunity to outline the range of scholarly output that could constitute a thriving research program. The initial hire of a Tier 1 CRC, and the early engagement of an industry technology partner will help establish the research culture of the unit. As the first new nursing program at a university in Ontario in over 20 years, there will also be an incredible opportunity to engage in pedagogical research, which could attract faculty members with that |

| | interest. |
|--|---|
| | |
| 10. Consider hiring RN faculty near completions of the doctorate as well as those that have completed their graduate degrees in areas complementary to nursing (Concern) | This strategy is supported and active (ex. The Interim Director of the School of Nursing) and will inform the creation of our job descriptions as we move toward recruitment. |
| 11. Formally include a new administrative position to better support clinical instructors and preceptors (Weakness) | We undertook a review of resources based on standard job titles in the Faculty of Science and compared them with standard job titles in other nursing units. Based on our budget ask and resources approved from PBWG we can reallocate resources to meet recommendations 11 and 12 and stay within our approved budget and maintain job descriptions as they currently exist in both CUASA and CUPE2424. |
| and Simulation Manager/Director/Supervisor will be needed (Weakness) | We undertook a review of resources based on standard job titles in the Faculty of Science and compared them with standard job titles in other nursing units. Based on our budget ask and resources approved from PBWG we can reallocate resources to |
| | meet recommendations 11 and 12 and stay within our approved budget and maintain job descriptions as they currently exist in both CUASA and CUPE2424. When they are at full capacity, the school will have the opportunity to ask for additional resources, just as is the case for all programs, in their pre-budget submissions. |



DATE: May 9th, 2024

TO: Dr. Maria DeRosa, Dean, Faculty of Science

FROM: Dr. David Hornsby, Vice-Provost and Associate Vice-President (Academic)

CC: Dr. Pauline Rankin, Provost and Vice-President (Academic); Chair, Vice-Presidents'

Academic and Research Committee

Dr. Hashmat Kahn, Associate Vice-President (Academic and Strategic Initiatives)

Dr. Julia Wallace, Associate Dean (Academic Affairs), Faculty of Science Dr. Jeffrey Smirle, Director, External Affairs, Office of the Dean of Science

Dr. Matthew Holahan, Chair Department of Neurocience Dr. Martin Holcik, Chair, Department of Health Sciences

Dr. Ethan Hermer, Professional Programs Officer, Office of the Dean of Science

Danielle Manley, Director (Nursing Program), Faculty of Science

Christina Noja, Director, Office of Academic Programs and Strategic Initiatives

(Academic)

Dr. Robyn Green, Program Officer, Office of Academic Programs and Strategic Initiatives

Dr. Lizzie Yan, Program Assessment Specialist, Office of Academic Programs and

Strategic Initiatives

Alicia Hollington, Program Coordinator, Office of Academic Programs and Strategic

Initiatives

RE: Outcome of New Program Proposal

The Senate Quality Assurance and Planning Committee (SQAPC) met on **May 9th, 2024** to consider the unit's response to the External Reviewers' report for the following new program proposal:

Bachelor of Science, Nursing (Honours and Major)

In accordance with article 3.5.8 of Carleton's Institutional Quality Assurance Process, SQAPC has determined the outcome of the programs as "Recommended to commence".

The External Reviewers' Report made a number of recommendations, which the committee felt were appropriately addressed.

The Committee wishes to thank the unit for their submission and congratulate the unit on a successful new program proposal. The next stage in the new program approval process is the submission of the new program brief to Carleton University Senate (June 7th, 2024). Before the program can be advertised and



officially commence, approval from both the Ontario Universities' Council on Quality Assurance and the Ministry of Advanced Education and Skills Development is required.

Please do not hesitate to contact me should you have any questions or concerns. Sincerely,

Professor David J Hornsby, BA (Hons), MA, PhD (Cantab)

Vice-Provost and Associate Vice-President (Academic)

Professor of International Affairs



FACULTY OF SCIENCE 3230 HERZBERG LABORATORIES CARLETON UNIVERSITY 1125 COLONEL BY DRIVE OTTAWA, ONTARIO, K1S 5B6

May 3, 2024

Re: Letter of Support for the Bachelor of Science, Nursing

To whom it may concern,

I am delighted to offer my unconditional and enthusiastic support for the proposed honours program Bachelor of Science, Nursing. The genesis of this nursing program was from discussions between Carleton University and the Queensway Carleton Hospital that focused on the need to provide nurses with a broad background in interprofessional practice, Equity Diversity, Inclusion and Indigeneity (EDII) and robust clinical experience, patient care, and critical thinking skills primarily obtained through work-integrated learning. To create a program focused on these needs, Carleton University and Queensway Carleton Hospital partnered to design an Accelerated, First-Entry, Honours Bachelor's of Science in Nursing program that will take place over three years, with students taking courses over the Fall, Winter and Spring/Summer semesters.

The Faculty of Science sees a real opportunity for Carleton to train highly-skilled clinicians who can leverage technology and data to improve patient care. Some unique features of the program include a heavy emphasis on XR and simulation and that clinical experiences will begin in Year 1 and continue throughout the program, rapidly introducing the nursing students to practice. Additionally, we will include a strong data science curriculum that all nurses will complete, creating innovative, tech-forward nurses. Opportunities to pursue concentrations in Neuroscience and Mental Health, or Nursing Data Science, will allow our students to have these unique skill sets. Indigenous health and reconciliation will be woven into every aspect of the program. Given the acute need for nurses in Ontario, the launch of this program within the next year, and the compressed nature of the program (honours degree in three years) is particularly timely. The proposed program has received strong support from the entire university and all relevant units. This innovative program has the potential to strengthen collaboration within the health care system and place to Ontario at the cutting edge of nursing and nursing education. I therefore strongly support the proposal of this new program.

Sincerely,

Maria DeRosa, Ph.D. Dean, Faculty of Science

Carleton University

M Delose

New Program Proposal

Date Submitted: 04/22/24 10:58 am

Viewing: TBD-2253: Nursing B.Sc.N. Honours

Last edit: 04/22/24 11:04 am

Last modified by: nataliephelan

Changes proposed by: nataliephelan

Effective Date 2025-26

Workflow majormod

Program Code TBD-2253

Level Undergraduate

Faculty Faculty of Science

Academic Unit Nursing

Degree

Title Nursing B.Sc.N. Honours

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. CalEditor

Approval Path

- 1. 04/22/24 12:00 pm Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace (juliawallace): Approved

661.50

for SCI FBoard

Program Requirements

Nursing

B.Sc.N. Honours (20.0 credits)

A. Credits Included in the Major CGPA (14.0 credits)

| Λ. | credits included in the iviajor co | rA (14.0 Credits) | |
|----|------------------------------------|---|------|
| 1. | 7.5 credits in: | | 7.5 |
| | NURS 1000 [0.0] | Indigenous Health | |
| | NURS 1001 [0.0] | Professional Nursing I | |
| | NURS 1002 [0.0] | Human Anatomy and Physiology I | |
| | NURS 1003 [0.0] | Adult Health and Illness I | |
| | NURS 1004 [0.0] | Pharmacology and Medication Management I | |
| | NURS 2000 [0.0] | Community Health | |
| | NURS 2001 [0.0] | Professional Nursing II | |
| | NURS 2002 [0.0] | Human Anatomy and Physiology II | |
| | NURS 2003 [0.0] | Adult Health and Illness II | |
| | NURS 2004 [0.0] | Pharmacology and Medication Management II | |
| | NURS 2011 [0.0] | Health Equity and Social Justice | |
| | NURS 2012 [0.0] | Resilience Training | |
| | NURS 2013 [0.0] | Interpersonal Communication | |
| | NURS 2014 [0.0] | Mental Health | |
| | NURS 2016 [0.0] | Introduction to Health IT | |
| | NURS 3000 [0.0] | Research Methods for Nurses | |
| | NURS 3001 [0.0] | Professional Nursing III | |
| | NURS 3002 [0.0] | Directed Studies - NCLEX | |
| | NURS 3005 [0.0] | Pediatrics and Youth | |
| | NURS 3006 [0.0] | Palliative and End of Life Care | |
| | NURS 3010 [0.0] | Maternal Care | |
| | NURS 3016 [0.0] | Introduction to AI and ML in Healthcare | |
| 2. | 1.75 credits in: | | 1.75 |
| | NURS 1100 [0.0] | Experiential Learning - Simulation I | |
| | NURS 2100 [0.0] | Experiential Learning - Simulation II | |
| | NURS 2108 [0.0] | Experiential Learning - Simulation III | |
| | NURS 3100 [0.0] | Experiential Learning - Consolidation Simulation IV | |
| | NURS 3101 [0.0] | Experiential Learning - Consolidation Simulation V | |
| 3. | 4.25 credits in: | | 4.25 |
| | NURS 1200 [0.0] | Clinical Practicum – Long-Term Care | |
| | NURS 1201 [0.0] | Clinical Practicum - Chronic Care | |
| | NURS 2200 [0.0] | Clinical Practicum - Mental Health & Obstetrics | |
| | NURS 2201 [0.0] | Clinical Practicum - Acute Care | |
| | NURS 3200 [0.0] | Clinical Practicum - Pediatrics | |
| | NURS 3201 [0.0] | Clinical Practicum - Consolidated Practicum I | |
| | NURS 4200 [0.0] | Clinical Practicum - Consolidated Practicum II | |
| 4. | 0.5 credit from: | | 0.5 |
| | NURS 4011 [0.0] | Nursing Research Project | |

OR

NURS 4012 [0.0] Nursing Research Proposal

& NURS 4112 [0.0] Experiential Learning - Improving Nursing

B. Credits Not Included in the Major CGPA (6.0 credits)

| 5. 2.5 credits in: | 2.5 |
|--------------------|-----|
| 5. 2.5 credits in: | 2.5 |

HLTH 1001 [0.5] Principles of Health I

HLTH 2004 [0.5] Microbiology and Virology

PSYC 1001 [0.5] Introduction to Psychology I

<u>PSYC 1002</u> [0.5] Introduction to Psychology II

PSYC 2301 [0.5] Introduction to Health Psychology

6. 3.5 credits in free electives. 3.5 Total Credits 20.0

New Resources No New Resources

Summary New Program Bachelor of Science in Nursing.

In response to regional, provincial and national needs for a sustainable solution to the health and human resources crisis in nursing, we are creating a three-year Bachelor of Science in Nursing program. This program will provide practice-ready nurses with strong backgrounds in data science, resiliency and Indigenous health. This program has been designed with our local partner Queensway Carleton Hospital (QCH) and will utilize virtual reality, simulation and early clinical experience in collaboration with QCH and other local partners. Nursing students can pursue innovative research focused on improving nursing to receive an Honours degree.

Transition/Implementation

Program reviewer comments

Rationale

Key: 2253

New Program Proposal

Date Submitted: 04/22/24 10:58 am

Viewing: TBD-2254: Nursing B.Sc.N. Major

Last edit: 04/22/24 11:50 am

Last modified by: nataliephelan

Changes proposed by: nataliephelan

Effective Date 2025-26

Workflow majormod

Program Code TBD-2254

Level Undergraduate

Faculty Faculty of Science

Academic Unit Nursing

Degree

Title Nursing B.Sc.N. Major

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. CalEditor

Approval Path

- 1. 04/22/24 12:03 pm Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

for SCI FBoard

Program Requirements

Nursing

B.Sc.N. Major (20.0 credits)

A. Credits Included in the Major CGPA (13.5 credits)

| | 7.5 |
|---|---|
| Indigenous Health | |
| Professional Nursing I | |
| Human Anatomy and Physiology I | |
| Adult Health and Illness I | |
| Pharmacology and Medication Management I | |
| Community Health | |
| Professional Nursing II | |
| Human Anatomy and Physiology II | |
| Adult Health and Illness II | |
| Pharmacology and Medication Management II | |
| Health Equity and Social Justice | |
| Resilience Training | |
| Interpersonal Communication | |
| Mental Health | |
| Introduction to Health IT | |
| Research Methods for Nurses | |
| Professional Nursing III | |
| Directed Studies - NCLEX | |
| Pediatrics and Youth | |
| Palliative and End of Life Care | |
| Maternal Care | |
| Introduction to AI and ML in Healthcare | |
| | 1.75 |
| Experiential Learning - Simulation I | |
| Experiential Learning - Simulation II | |
| Experiential Learning - Simulation III | |
| Experiential Learning - Consolidation Simulation IV | |
| Experiential Learning - Consolidation Simulation V | |
| | 4.25 |
| Clinical Practicum – Long-Term Care | |
| Clinical Practicum - Chronic Care | |
| Clinical Practicum - Mental Health & Obstetrics | |
| Clinical Practicum - Acute Care | |
| Clinical Practicum - Pediatrics | |
| Clinical Practicum - Consolidated Practicum I | |
| Clinical Practicum - Consolidated Practicum II | |
| ajor CGPA (6.5 credits) | |
| | 2.5 |
| | Professional Nursing I Human Anatomy and Physiology I Adult Health and Illness I Pharmacology and Medication Management I Community Health Professional Nursing II Human Anatomy and Physiology II Adult Health and Illness II Pharmacology and Medication Management II Health Equity and Social Justice Resilience Training Interpersonal Communication Mental Health Introduction to Health IT Research Methods for Nurses Professional Nursing III Directed Studies - NCLEX Pediatrics and Youth Palliative and End of Life Care Maternal Care Introduction to Al and ML in Healthcare Experiential Learning - Simulation II Experiential Learning - Simulation III Experiential Learning - Consolidation Simulation IV Experiential Learning - Consolidation Simulation V Clinical Practicum - Long-Term Care Clinical Practicum - Acute Care Clinical Practicum - Pediatrics Clinical Practicum - Consolidated Practicum I Clinical Practicum - Consolidated Practicum II |

| <u>HLTH 1001</u> [0.5] | Principles of Health I |
|------------------------|-------------------------------|
| <u>HLTH 2004</u> [0.5] | Microbiology and Virology |
| <u>PSYC 1001</u> [0.5] | Introduction to Psychology I |
| PSYC 1002 [0.5] | Introduction to Psychology II |

PSYC 2301 [0.5] Introduction to Health Psychology

5. 4.0 credits in free electives 4.0 Total Credits 20.0

New Resources No New Resources

Summary New program Bachelor of Science in Nursing Major, 20 credit non-honours.

In response to regional, provincial and national needs for a sustainable solution to the health and human resources crisis in nursing, we are creating a three-year Bachelor of Science in Nursing program. This program will provide practice-ready nurses with strong backgrounds in data science, resiliency and Indigenous health. This program has been designed with our local

partner Queensway Carleton Hospital (QCH) and will utilize virtual reality, simulation and

early clinical experience in collaboration with QCH and other local partners.

Transition/Implementation

Program reviewer comments

Rationale

4/30/24, 4:22 PM

ethanhermer (04/22/24 11:10 am): Missing: NURS 2100 Experiential Learning - Simulation II NURS 2108 Experiential Learning - Consolidation Simulation IV NURS 3101 Experiential Learning - Consolidation Simulation V

Key: 2254

New Program Proposal

Date Submitted: 04/22/24 11:00 am

Viewing: TBD-2255: Concentration in Data Science - B.Sc.N.

Last edit: 04/22/24 11:04 am

Last modified by: nataliephelan

Changes proposed by: nataliephelan

Effective Date 2025-26

Workflow majormod

Program Code TBD-2255

Level Undergraduate

Faculty Faculty of Science

Academic Unit Nursing

Degree

Title Concentration in Data Science - B.Sc.N.

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. CalEditor

Approval Path

- 1. 04/22/24 11:33 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved

Program Requirements

Concentration in Data Science (3.5 credits)

| 1 | . 0.5 credit from: | | 0.5 |
|---|--------------------------|--|-----|
| | NURS 4011 [0.0] | Nursing Research Project | |
| | OR | | |
| | NURS 4112 [0.0] | Experiential Learning - Improving Nursing | |
| | & <u>NURS 4012</u> [0.0] | Nursing Research Proposal | |
| 2 | . 3.0 credits from: | | 3.0 |
| | NURS 2026 [0.0] | Data Management and Advanced Data Analytics in Healthcare | |
| | NURS 2036 [0.0] | Designing and Deploying Technology Enabled Clinical Workflows | |
| | NURS 2046 [0.0] | Healthcare Technology Evaluation, Procurement and Project Management | |
| | NURS 2056 [0.0] | Ethics, Legalities and Regulation in Healthcare Data Science | |
| | NURS 3000 [0.0] | Research Methods for Nurses | |
| | NURS 3016 [0.0] | Introduction to AI and ML in Healthcare | |
| | NURS 3066 [0.0] | Seminar - Nursing Data Science | |
| T | otal Credits | | 3.5 |
| | | | |

New Resources No New Resources

Summary Assoc with NP Bachelor of Science in Nursing TBD-2253.

As healthcare continues to evolve and incorporates a diverse amount of technology, clinicians are required to understand and develop further competencies in use of technology and assessment of data obtained and used by this technology. The first-of-its-kind nursing Data Science concentration equips future nurses to be at the forefront of technology and data science use to enable them to be practice ready and lead change in their organizations. Our concentration aims to address the ever-expanding gap of inter-professional technical

competencies and support greater nursing knowledge to lead innovation in the field of data

science.

Transition/Implementation

Program reviewer comments

Rationale

Key: 2255

New Program Proposal

Date Submitted: 04/22/24 10:59 am

Viewing: TBD-2256: Concentration in Neuroscience and Mental Health - B.Sc.N.

Last edit: 04/23/24 3:16 pm

Last modified by: nataliephelan

Changes proposed by: nataliephelan

Effective Date 2025-26

Workflow majormod

Program Code TBD-2256

Level Undergraduate

Faculty Faculty of Science

Academic Unit Nursing

Degree

Title Concentration in Neuroscience and Mental Health - B.Sc.N.

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- **5. PRE SCCASP**
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. CalEditor

Approval Path

- 1. 04/22/24 11:15 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace (juliawallace): Approved

Program Requirements

Concentration in Neuroscience and Mental Health (3.5 credits)

| 1. 3.0 credits in: | | 3.0 | | |
|--|--|-----|--|--|
| <u>NEUR 1202</u> [0.5] | Neuroscience of Mental Health and Psychiatric Disease | | | |
| <u>NEUR 1203</u> [0.5] | Neuroscience of Mental Health and Neurological Disease | | | |
| <u>NEUR 2201</u> [0.5] | Cellular and Molecular Neuroscience | | | |
| NEUR 2202 [0.5] | Neurodevelopment and Plasticity | | | |
| NEUR 3204 [0.5] | Neuropharmacology | | | |
| NEUR 4306 [0.5] | The Neural Basis of Addiction | | | |
| 2. 0.5 credit from: | | 0.5 | | |
| <u>NEUR 3304</u> [0.5] | Hormones and Behaviour | | | |
| <u>NEUR 3401</u> [0.5] | Environmental Toxins and Mental Health | | | |
| <u>NEUR 3501</u> [0.5] | Neurodegeneration and Aging | | | |
| NEUR 3502 [0.5] | Neurodevelopmental Determinants of Mental Health | | | |
| Total Credits | | 3.5 | | |
| New Resources | No New Resources | | | |
| Summary | Assoc with NP Bachelor of Science in Nursing. | | | |
| Mental healthcare needs of Canadians are increasing, and mental health remains on predominate specialty areas of nursing. This concentration aims to support the adva knowledge of neuroscience as related to mental health nursing practice to prepare need the societal demand for these services as providers. This concentration has an additional focus on provider wellness in response to the Registered Nurses Association Ontario calls to action in preventing and mitigating provider fatigue, educational recommendations. | | | | |
| Transition/Implementation | | | | |

Transition/Implementation

Program reviewer comments

Key: 2256

Date Submitted: 04/22/24 11:06 am

Viewing: NURS 1200 : Clinical Practicum –

Long-Term Care

Last edit: 04/22/24 11:06 am

Changes proposed by: katearmstrongfurniva

Programs referencing this course

Nursing B.Sc.N. Honours Nursing B.Sc.N. Major

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:20 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

for SCI FBoard

Effective Date 2025-26

Workflow majormod

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 1200

Title Clinical Practicum – Long-Term Care

Title (short) Long-Term Care Practicum

Academic Unit Nursing

Credit Value 0.25

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning

Practica or Placements (including Clinical Placements)

Course Description

Clinical practicum introducing healthcare environment, focusing on applying theoretical nursing knowledge, policy understanding, and practice in an interdisciplinary context. Graded SAT/UNS.

Prerequisite(s)

restricted to Bachelor of Science in Nursing students.

Class Format

On and off-campus placements from 20-100 hours a semester.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Satisfactory/Unsatisfactory

Schedule Type *Practicum

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10885

<u>Preview Bridge</u>

Date Submitted: 04/22/24 11:07 am

Viewing: NURS 1201: Clinical Practicum -

Chronic Care

Last edit: 04/22/24 11:07 am

Changes proposed by: katearmstrongfurniva

Programs referencing this course

Nursing B.Sc.N. Honours Nursing B.Sc.N. Major

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:21 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

for SCI FBoard

2025-26 Effective Date

Workflow majormod

No New Resources **New Resources**

Level Undergraduate

NURS Course Code

Course Number 1201

Clinical Practicum - Chronic Care Title

Chronic Care Practicum Title (short)

Academic Unit Nursing

Credit Value 0.50

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning

Practica or Placements (including Clinical Placements)

Course Description Clinical practicum on chronic illness care, integrating theoretical knowledge with practical skills in

assessment, documentation, and medication administration. Graded SAT/UNS.

Prerequisite(s) NURS 1001, NURS 1002, and NURS 1200. Restricted to Bachelor of Science in Nursing students.

Class Format Off-campus placements from 20-100 hours a semester.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Satisfactory/Unsatisfactory

Schedule Type *Practicum

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10888

<u>Preview Bridge</u>

Date Submitted: 04/22/24 11:08 am

Viewing: NURS 2200 : Clinical Practicum - Mental Health & Obstetrics

Last edit: 04/22/24 3:04 pm

Changes proposed by: katearmstrongfurniva

Programs referencing this course

Nursing B.Sc.N. Honours
Nursing B.Sc.N. Major

2025-26

Workflow majormod

Effective Date

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 2200

Title Clinical Practicum - Mental Health & Obstetrics

Title (short) Mental Health & Obs.

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- **5. PRE SCCASP**
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:23 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm
 Julia Wallace
 (juliawallace): Approved
 for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

Academic Unit Nursing

Credit Value 0.50

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning Practica or Placements (including Clinical Placements)

Course Description

Clinical practicum in mental health and maternal/child care, integrating complex assessments,

documentation, and medication administration. Graded SAT/UNS.

Prerequisite(s)

NURS 1201. Restricted to Bachelor of Science in Nursing students.

Class Format

Off-campus placements from 20-100 hours a semester.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Satisfactory/Unsatisfactory

Schedule Type *Practicum

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer comments

ethanhermer (04/22/24 11:22 am): Does Practicum fit at the end of the short title? ethanhermer (04/22/24 11:23 am): To make things easier, we decided to remove the: concurrent

with NURS 2014 language.

Key: 10903

Date Submitted: 04/22/24 11:10 am

Viewing: NURS 3200: Clinical Practicum -

Pediatrics

Last edit: 04/22/24 11:10 am

Changes proposed by: katearmstrongfurniva

Programs referencing this course

Nursing B.Sc.N. Honours
Nursing B.Sc.N. Major

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:17 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

for SCI FBoard

Effective Date 2025-26

Workflow majormod

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 3200

Title Clinical Practicum - Pediatrics

Title (short) Pediatrics Practicum

Academic Unit Nursing

Credit Value 0.50

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning

Practica or Placements (including Clinical Placements)

Course Description

Clinical practicum in pediatrics, focusing on complex care, assessments, and integrating pediatric

healthcare principles. Graded SAT/UNS.

Prerequisite(s)

NURS 2200. Restricted to Bachelor of Science in Nursing students.

Class Format

Off-campus placements from 20-100 hours a semester.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Satisfactory/Unsatisfactory

Schedule Type *Practicum

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10912

Date Submitted: 04/22/24 11:09 am

Viewing: NURS 2201: Clinical Practicum -

Acute Care

Last edit: 04/22/24 11:09 am

Changes proposed by: katearmstrongfurniva

Programs referencing this course

Nursing B.Sc.N. Honours
Nursing B.Sc.N. Major

Effective Date 2025-26

Workflow majormod

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 2201

Title Clinical Practicum - Acute Care

Title (short) Acute Care Practicum

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- **5. PRE SCCASP**
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:24 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm
 Julia Wallace
 (juliawallace): Approved
 for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

Academic Unit Nursing

Credit Value 0.50

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning Practica or Placements (including Clinical Placements)

Course Description Clinical practicum in acute illness care, applying advanced theoretical knowledge and practice in

rapidly changing clinical scenarios. Graded SAT/UNS.

Prerequisite(s) NURS 1002, NURS 1003, NURS 1004 and NURS 2001. Restricted to Bachelor of Science in Nursing

students.

Class Format Off-campus placements from 20-100 hours a semester.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Satisfactory/Unsatisfactory

Schedule Type *Practicum

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10908

Date Submitted: 04/22/24 11:29 am

Viewing: NURS 3201 : Clinical Practicum - Consolidated Practicum I

Last edit: 04/22/24 11:29 am

Changes proposed by: katearmstrongfurniva

Programs referencing this course

Nursing B.Sc.N. Honours
Nursing B.Sc.N. Major

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:56 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

for SCI FBoard

Effective Date 2025-26

Workflow majormod

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 3201

Title Clinical Practicum - Consolidated Practicum I

Title (short) Consolidated Practicum I

Academic Unit Nursing

Credit Value 1.0

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning

Practica or Placements (including Clinical Placements)

Course Description

Students complete clinical placement to consolidate theory and application to advance toward

graduation. Graded SAT/UNS.

Prerequisite(s)

NURS 3200. Restricted to Bachelor of Science in Nursing students.

Class Format

Off-campus placements with at least 250 hours a semester.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Satisfactory/Unsatisfactory

Schedule Type *Practicum

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10923

<u>Preview Bridge</u>

Date Submitted: 04/22/24 11:21 am

Viewing: **NURS 4011 : Nursing Research Project**

Last edit: 04/22/24 11:21 am

Changes proposed by: katearmstrongfurniva

Programs referencing

Nursing B.Sc.N. Honours

this course

Concentration in Data Science - B.Sc.N.

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:56 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm
 Julia Wallace
 (juliawallace): Approved
 for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

for SCI FBoard

Effective Date 2025-26

Workflow majormod

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 4011

Title Nursing Research Project

Title (short) Nursing Research Project

Academic Unit Nursing

Credit Value 0.50

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning

None

Course Description

An independent research project undertaken in the field and/or the laboratory, under the direct

supervision of a faculty adviser. Evaluation is based on a written thesis.

Prerequisite(s)

NURS 3000. Restricted to Bachelor of Science in Nursing students.

Class Format

TBD

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Standard Letter Grade

Schedule Type *Research Project

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10920

<u>Preview Bridge</u>

Date Submitted: 04/22/24 11:27 am

Viewing: NURS 4012 : Nursing Research Proposal

Last edit: 04/22/24 11:27 am

Changes proposed by: katearmstrongfurniva

Programs referencing

Nursing B.Sc.N. Honours

this course

Concentration in Data Science - B.Sc.N.

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:56 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

for SCI FBoard

Effective Date 2025-26

Workflow majormod

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 4012

Title Nursing Research Proposal

Title (short) Nursing Research Proposal

Academic Unit Nursing

Credit Value 0.25

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning

None

Course Description

An independent critical review and research proposal, using library resources, under the direct

supervision of a Faculty advisor. Evaluation is based on a written report.

Prerequisite(s)

NURS 3000. Restricted to Bachelor of Science in Nursing students.

Class Format

Workshop three hours a week.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Standard Letter Grade

Schedule Type *Workshop

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10921

Date Submitted: 04/22/24 11:34 am

Viewing: NURS 4200 : Clinical Practicum - Consolidated Practicum II

Last edit: 04/22/24 11:34 am

Changes proposed by: katearmstrongfurniva

Programs referencing this course

Nursing B.Sc.N. Honours Nursing B.Sc.N. Major

Effective Date 2025-26

Workflow majormod

New Resources No New Resources

Level Undergraduate

Course Code NURS

Course Number 4200

Title Clinical Practicum - Consolidated Practicum II

Title (short) Consolidated Practicum II

In Workflow

- 1. NURS ChairDir UG
- 2. SCI Dean
- 3. SCI FCC
- 4. SCI FBoard
- 5. PRE SCCASP
- 6. SCCASP
- 7. SQAPC
- 8. Senate
- 9. PRE CalEditor
- 10. Banner

Approval Path

- 1. 04/22/24 11:46 am Ethan Hermer (ethanhermer): Approved for NURS ChairDir UG
- 2. 04/30/24 3:53 pm Julia Wallace (juliawallace): Approved for SCI Dean
- 3. 04/30/24 3:54 pm Julia Wallace (juliawallace): Approved for SCI FCC
- 4. 04/30/24 3:55 pm Julia Wallace

(juliawallace): Approved

Academic Unit Nursing

Credit Value 1.0

Special/Selected

Topics

Not Applicable

Significant

Experiential Learning

Practica or Placements (including Clinical Placements)

Course Description

Students complete clinical placement to consolidate theory and application to advance toward

graduation. Graded SAT/UNS.

Prerequisite(s)

NURS 3201, NURS 3101. Restricted to Bachelor of Science in Nursing students.

Class Format

Off-campus placements with at least 300 hours a semester.

Precluded Courses

Also listed as

Piggybacked Courses

Grade Mode Satisfactory/Unsatisfactory

Schedule Type *Practicum

*May constitute a major modification under Carleton's IQAP. Please consult https://carleton.ca/viceprovost/major-minor-modifications/ for more details.

Unpaid Placement No

Summary Assoc with NP Nursing BScN.

Rationale for new

course

Courses are created to align with CNO entry-to-practice competencies for Registered Nurses.

Course reviewer

comments

Key: 10925

Associated Minors

| Course Code | Course Name | Course Value | Action |
|------------------------|---|--------------|----------------|
| NURS 1000 | Indigenous Health | 0.5 | Added |
| NURS 1001 | Professional Nursing I | 0.5 | Added |
| NURS 1002 | Human Anatomy and Physiology I | 0.25 | Added |
| NURS 1003 | Adulty Health and Illness I | 0.5 | Added |
| NURS 1004 | Pharmacology and Medication | 0.25 | Added |
| | Management I | | |
| NURS 1100 | Experiential Learning-Simulation I | 0.25 | Added |
| NURS 2000 | Community Health | 0.25 | Added |
| NURS 2001 | Professional Nursing II | 0.5 | Added |
| NURS 2002 | Human Anatomy and Physiology II | 0.25 | Added |
| NURS 2003 | Adult Health and Illness II | 0.5 | Added |
| NURS 2004 | Pharmacology and Medication | 0.25 | Added |
| | Management II | | |
| NURS 2011 | Health Equity and Social Justice | 0.25 | Added |
| NURS 2012 | Resilience Training | 0.25 | Added |
| NURS 2013 | Interpersonal Communication | 025 | Added |
| NURS 2014 | Mental Health | 0.25 | Added |
| NURS 2016 | Introduction to Health IT | 0.25 | Added |
| NURS 2026 | Data Management and Advance Data | 0.5 | Added |
| | Analysis in Healthcare | | |
| NURS 2036 | Designing and Deploying Technology | 0.5 | Added |
| | Enable Clinical Workflows | | |
| NURS 2046 | Healthcare Technology Evaluation, | 0.5 | Added |
| | Procurement and Project Management | | |
| NURS 2056 | Ethics, Legalities and Regulation in | 0.5 | Added |
| NU IDC 2400 | Healthcare Data Science | 0.25 | A .l.1l |
| NURS 2100 | Experiential Learning-Simulation II | 0.25 | Added |
| NURS 2108 | Experiential Learning-Simulation III Research Methods for Nurses | 0.25 | Added |
| NURS 3000 | | 0.25 | Added |
| NURS 3001 NURS 3002 | Professional Nursing III | 0.5 | Added |
| | Directed Studies-NCLEX | 0.25 | Added |
| NURS 3005 | Pediatrics and Youth Palliative Care and End of Life | 0.5 | Added |
| NURS 3006 | Maternal Care | 0.5 0.25 | Added |
| NURS 3010 | Introduction to Al and ML in Healthcare | | Added |
| NURS 3106 | | 0.25 | Added Added |
| NURS 3066 | Seminar—Nursing Data Science | 0.5 | |
| NURS 3100 | Experiential Learning-Consolidation Simulation IV | 0.5 | Added |
| NURS 3101 | Experiential Learning-Consolidation | 0.5 | Added |
| INDV2 2101 | Simulation V | 0.5 | Auueu |
| NURS 4000 | Topics in Nursing I | 0.25 | Added |
| NURS 4001 | Topics in Nursing I | 0.23 | Added |
| NURS 4112 | Experiential Learning-Improving Nursing | 0.25 | Added |
| NUN3 4112 | Experiential Learning-Improving Nursing | 0.25 | Auded |