

understanding of the dynamics of this teaching method (Helms et al., 2005; Sargent, Allen, Frahm, & Morris, 2009).

The importance of faculty professional development prior to the creation and implementation of integrated course design and team teaching is of paramount priority. The successful integration of team teaching is contingent upon building effective team partnerships that allow each member of the team to benefit from the advantages associated with this approach (Robb & Gerwick, 2013). Effective faculty partnerships provide a supportive network for addressing the potential disadvantages of team teaching and are built upon the foundational concepts of organization, collaboration, and communication further role modeling to our students the importance of working in teams. The overarching goal of learning within the SON is to provide meaningful and engaging learning opportunities to create a more overt and measurable link between theory in the classroom and application of theoretical knowledge in a practical setting, so that nursing students can explicitly recognize and engage more meaningfully with nursing knowledge and practice, ultimately leading to a skilled professional practitioner.

2.5 Detailed Course Creation Community of Practice

Faculty will design and implement integrated nursing courses utilizing significant learning experiences guided by the Interactive Nature of Significant Learning (Fink, 2013). The design guides faculty in course development that is simple, holistic, practical, integrative and normative (Fink). Learning goals, teaching and learning activities, and feedback and assessment must be connected and integrated with program outcomes and major curricular concepts. Course development will be guided by the 12 steps of integrated course design (Fink):

Initial Phase: Build Strong Primary Components

1. Identify important situational factors
2. Identify important learning goals
3. Formulate appropriate feedback and assessment procedures
4. Selective effective teaching and learning activities
5. Make sure the primary components are integrated

Intermediate Phase: Assemble to Components into a Coherent Whole

6. Create a schematic structure for the course
7. Select or create a teaching strategy
8. Integrate the course structure and the instructional strategy to create an overall scheme of learning activities

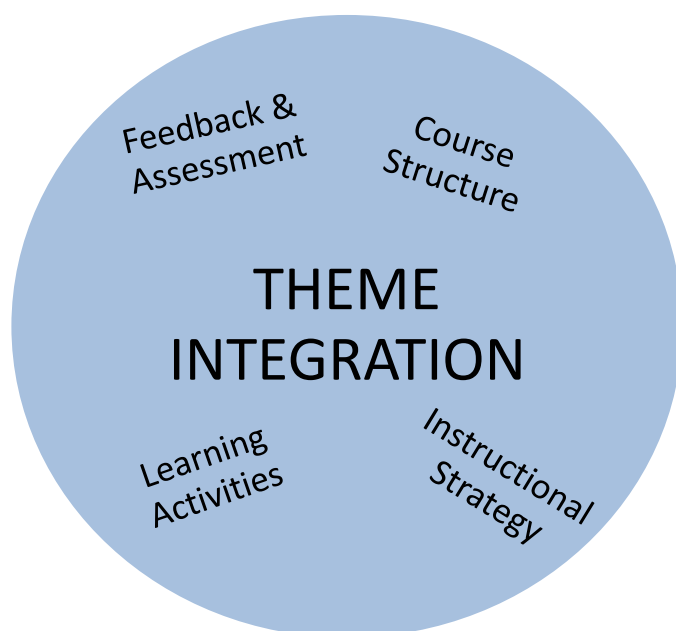
Final Phase: Finish Important Remaining Tasks

9. Develop the grading system
10. Debug the possible problems
11. Write the course syllabus
12. Plan an evaluation of the course and of your teaching

Procedural and approval requirements and processes required us to complete steps 1, 2, 9 and 11, leaving seven steps to complete once final program approval was received. When looking at the tasks left to complete, it became apparent that in order to have a highly integrated curriculum, the design phase also needs to be highly integrated with the selection of learning and teaching strategies and activities, the course structure and instructional strategy, as well as appropriate feedback and assessment procedures, all leading to the creation of a schematic structure for each course and semester. Adapting the remaining steps in Fink's course design

model to reflect integration and to guide course detailed development is depicted in the diagram below. Dalhousie SON Course Development:

Figure 4: The integration of significant learning through development of simultaneous interconnected learning. (Fink, 2013)



The Detailed Course Creation Phase began in August 2015 with a core group of faculty, The Curriculum Development Team. Learning how to develop integrative course designs that are learner-centered and team taught is transformative in the current climate of nursing education; it requires the development of expertise in pedagogy, including collaborative teaching and role modelling to facilitate active learning rather than passive learning. Active learning requires doing and observing of experiences as well as reflection on what one is learning and how one is learning, individually and collectively. Integrated course design will enable faculty to set more ambitious learning goals, enlarge the kinds of learning activities utilized, create rich learning experiences, provide multiple opportunities for in-depth reflection on the learning process, find alternative ways to introduce students to the content of the course, create a coherent and meaningful course structure, and, to create a dynamic instructional strategy (Fink). Faculty need to make a deliberate and intentional change in the way that they teach, from an individual pedagogical model to a team teaching pedagogy, to move away from passive learning and into the realm of active learning. The approach that the Team chose to guide our learning with course development was to view ourselves as a Community of Practice, with several sub-communities, i.e. within semesters, across semesters, and preparation for collaborative teaching. Semester 3, 4 and 5 are to be fully developed by June 2016; Semesters 6, 7 and 8 to be fully developed by June 2017.

2.6 Program of Study

Semester 1 and 2 focus on required non-nursing courses and include 30 credit hours of study.

Table 1: Non-nursing requirements

SEMESTER 1 (FALL)	
ANAT 1010.03	<p>Basic Human Anatomy (3 CH) Format: Lecture 3 hours or online This course is offered by the Department of Medical Neuroscience primarily to students in the Schools of Nursing (Section 01). A limited number of seats are available for Special Health Professions, Arts and Science, or Non-Degree students. Note that this course is also offered by DISTANCE EDUCATION (ANAT: 1010.03, Section 02) during the Regular Term (Fall or Winter). Upon successful completion of the course, the student will be able to explain and describe, at a basic level, the gross anatomy and histology of the human body. This course uses an online Virtual Anatomy Laboratory.</p>
PHYL 1001.03 (online version) PHYL 1011.03 (in-class version) X (Fall) of a two-term course	<p>Human Physiology (2 semesters of physiology) Format: Lecture 3 hours, supplemented with tutorials This is a full-credit introductory human physiology course equivalent to PHYL 1000X/Y.06 when combined with Semester 2. The functions of body organs and body systems, as well as integrative functions of the whole organism are studied. This course is intended primarily for students in the Health Professions.</p>
STAT 1060.03	<p>Introductory Statistics for Science and Health Sciences Format: Lecture 3 hours, tutorial 1 hour This course gives an introduction to the basic concepts of statistics through extensive use of examples. The topics include experimental design, descriptive statistics, simple linear regression and the basics of statistical inference. Students will learn to use the statistical package MINITAB.</p>
HAHP 2000.03	<p>Human Growth and Development Format: 3 Lecture hours (Optional but recommended) A study of factors influencing human growth and development from birth to maturity and throughout the lifespan as revealed by observational and experimental studies.</p>
	Open Elective .03
SEMESTER 2 (WINTER)	
BIOC 1420.03	<p>Introductory Biochemistry for Nursing Students Format: Lecture 3 hours, tutorial 2 hours (Optional but recommended) Topics discussed include the structure, biosynthesis and functions of biologically important compounds, enzymes, control of metabolism, genetic engineering and nutrition. Medical aspects are stressed.</p>
ENGL 1100.03	Writing for University

	An introduction to rhetoric and composition, this course is designed to prepare students to write analytic and research papers. Grammatical and rhetorical terms are addressed, and the course includes a number of assignments to hone writing skills from outline to revision.
PHYL 1002.03 (online version) PHYL 1012.03 (in-class version) Y (winter) of a two-term course	Human Physiology (2 semesters of physiology) Format: Lecture 3 hours, supplemented with tutorials This is a full-credit introductory human physiology course equivalent to PHYL 1000X/Y.06 when combined with Semester 1. The functions of body organs and body systems, as well as integrative functions of the whole organism are studied. This course is intended primarily for students in the Health Professions.
MICI 1100.03	Health Science Microbiology Format: Lecture 3 hours An introduction to microbiology and infectious diseases designed for healthcare professionals. It includes a study of the structure and physiology of microorganisms, the ways microorganisms cause disease in man and the way they affect man's wellbeing.
	Open Elective .03

Table 2 outlines our curriculum for Semesters 3 through 8 which include required nursing courses with opportunities for nursing or other electives

Table 2: Nursing Requirements

Semester 3 (15CR) (Fall and Summer)	Semester 4 (15CR) (Winter and Fall)	Semester 5 (15CR) (Summer and Winter)
<p>NURS 2710.06: Nursing and Population Health (6CR) The structures and relationships we live in are fundamental to the development of human potential and nursing practice. Mental and physical health concerns that have significant impact on health and social wellbeing are explored. Community concepts essential for a healthy society are introduced. Format: Lecture/Seminar equivalent to 6 hrs/week + 1 hr tutorial</p>	<p>NURS 2740.06: Nursing and Family Health: (6CR) Nurses combine knowledge from primary health care and public health, social and nursing sciences, recognizing the uniqueness and diversity in family systems to support transitions that occur across the life course. Understanding health promotion, protection and prevention of illness in the context of family development is the focus. Format: Lecture/Seminar equivalent to 6 hrs/week + 1 hr tutorial</p>	<p>NURS 3710.06: Nursing and Episodic Illness: Preventative Care and Interventions (6CR) Collaborating with clients across the life course during the acute phase of physical or mental illness requires a focus on preventative and curative care strategies. Utilization of evidence and application of nursing and inter-professional collaborative care and informed decision-making is examined within the context of person, family and society.</p>

		Format: Lecture/Seminar equivalent to 6 hrs/week + 1 hr tutorial
<p>NURS 2720.03: Health and Healing I: Pathophysiology and Therapeutics (3CR) Fundamentals of health and disease patterns, the role of genetics, developmental biology and environment are explored. Cellular mechanisms, inflammatory and infectious responses and cellular biology of cancer are investigated. Diagnosis and therapeutic concepts including preventative therapies and pharmacological and non-pharmacological interventions with consideration of age and cultural variations are introduced. Format: Lecture or online equivalent to 3hrs/week + 1 h tutorial</p>	<p>NURS 2750.03: Health and Healing II: Pathophysiology and Therapeutics (3CR) Integrating knowledge of disease, diagnosis and people-centred management is key to successful nursing practice. Specific disease processes related to body systems are described and mechanisms of therapeutic options for management are evaluated. Evidence to support use of pharmacological, non-pharmacological, alternative and complimentary treatments is evaluated. Format: Lecture or online equivalent to 3hrs/week + 1 h tutorial</p>	
<p>NURS 2730.03: Foundations of Nursing Practice (3CR) Ethical, professional, legal concepts and theories guiding professional nursing practice are examined. Professional identity, collaboration, comportment, and reasoning related to nursing practices are developed. Theories and frameworks are used to investigate health and social care constructs and the impact of hierarchal structures on individual, communal and global health. Format: Lecture/seminar or online equivalent to 3 hrs/week</p>	<p>NURS 2760.03: Nursing Research and Evidence Informed Practice (3CR) Examines the methods used to generate, evaluate and apply knowledge in nursing and health care focusing on the basic processes of quantitative and qualitative research. The emphasis is on analysis, synthesis and evaluation of research and the implications for theory and evidence-informed nursing practice. Collaboration with interprofessional research teams is described. Format: Lecture/seminar or online equivalent to 3 hrs/week</p>	<p>NURS 3720.03: Professional Formation of Nursing Practice: Leadership Perspectives (3CR) Leadership is integral to the practice of every nurse. Examining and applying leadership theories and behaviours enable effective practices to be evaluated. The nursing role in conflict resolution, crisis intervention and therapeutic communication to manage complex situations using multiple perspectives is examined. Format: Lecture/seminar or online equivalent to 3 hrs/week</p>
<p>NURS 2715.03: Clinical Integration 1 (3CR): Integration of foundational nursing skills and practices, such as health history and assessment, safety, infection control,</p>	<p>NURS 2725.03: Clinical Integration 2 (3CR): Population health, family and perinatal theoretical concepts and evidence are utilized in a variety of practice settings.</p>	<p>NURS 3715.06: Clinical Integration 3 (6CR): Using simulation and clinical experiential learning students apply knowledge related to caring for clients with acute, episodic</p>

<p>communication and relational inquiry occurs in clinical application settings. Students use multiple learning modalities to master fundamentals of nursing practice. Format: Laboratory and Clinical Experiential Learning equivalent to 110 hrs/term</p>	<p>Family health assessments across various family life stages including focused fetal/newborn/child and parental care in dynamic interprofessional settings enable students to apply theory to practice. Format: Laboratory and Clinical Experiential Learning equivalent to 110 hrs/term</p>	<p>illnesses from birth to death. Interprofessional practice and evaluation of the impact of collaborative care will be a focus. Format: Laboratory and Clinical Experiential Learning equivalent to 220 hrs/term</p>
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Semester 6 (15 cr) (Fall and Summer)	Semester 7 (15 cr) (Winter and Fall)	Semester 8 (15 cr) (Summer and Winter)
<p>NURS 3730.06: Nursing in the Context of Persistent Illness: Prevention and Recovery (6CR) Using nursing and other theoretical frameworks, students focus on clients/families living with chronic and life altering diseases across the life course. Students use the nursing process, relational practice, critical inquiry and evidence to apply principles of disease management and advanced communication with a people-centred, interprofessional approach. Format: Lecture/Seminar equivalent to 6 hrs/week + 1 hr tutorial</p>	<p>NURS 4710.03: Relational Practice and Advanced Clinical Reasoning (3CR) Students engage in relational inquiry, clinical reasoning and multiple ways of knowing related to health and social care. Evaluation of evidence in the context of person centred care forms the basis for reflective practice that promotes health and wellness and supports management of complex situations. Format: May be offered as lecture/seminar or online equivalent to 3 hrs/week</p>	
<p>Nursing Elective (3 CR) Option to pursue focus in Nursing Practice Format: Lecture or online equivalent to 3 hrs/week</p>	<p>Nursing Elective (3 CR) Option to pursue focus in Nursing Practice Format: Lecture or online equivalent to 3 hrs/week</p>	
	<p>NURS 4720.03: Professional Formation: Nursing and Social Responsibility (3CR) Collaborating with and across professions, theoretical frameworks are critiqued and applied to gain insight into the nursing role</p>	

	that influences policies and practices in health care. Evaluation of the processes that influence and support change, as well as system inertia, will assist in developing strategies to improve health for society. Format: Lecture/seminar 3 hrs/week	
<p>NURS 3725.06: Clinical Integration 4 (6 CR) Students apply theoretical and practical knowledge in caring for individuals and families from conception to death focusing on chronic and/or terminal illness. Significant issues related to life threatening illness, dying, and the promotion of quality of life using a collaborative care model will form the basis for practice. Format: Laboratory and Clinical Experiential Learning equivalent to 220 hrs/term</p>	<p>NURS 4715.06: Exploratory Nursing Practice (6CR): Students engage in a broad range of clinical, research or theoretical activities, under the direction of faculty or clinical preceptor/facilitator to complete a project relevant to nursing practice. These learning experiences will assist the student to understand the complexity of the integrated nursing role across a range of settings. Format: Laboratory, Seminar and Clinical Experiential Learning equivalent to 220 hrs/term (potential for continuous placement or concentrated placement over 4 weeks)</p>	<p>NURS 4725.15 Transition to Practice (15 CR): Students consolidate nursing knowledge and entry-to-practice competencies through intensive, reflective, mentored practice. Emphasizing the professional nursing role, collaboration, interprofessional teamwork, advocacy, time management, priority setting and leadership are key components of relational practice. Peer-to-peer mentoring and self-directed lifelong learning skill development support preparation for National Licensure examination and ongoing professional development. Format: Clinical Application involving Laboratory and Clinical Experiential Learning: minimum 440 hrs/term</p>

2.7 Admission Requirements

- **Application Process**

Applications for admission into the Baccalaureate of Science (Nursing) will be accepted until March 15th for September admissions. All students (direct entry and advanced standing) begin their program of study in September. Application and admission decisions are made by the Registrar's Office.

Following acceptance into the program all pre- clinical requirement documents (Immunizations, Criminal Record Check, CPR- HCP and Standard First Aid) are due on or before September 30.

- **Admission Requirements**

To be eligible to enter the BScN program as a direct entry student, requirements include satisfactory completion of grade 12 or equivalent with at least five academic university preparatory courses including: English, Biology, Chemistry and Academic Math. A minimum overall average of 70% is required in the five university preparatory courses used to meet admission requirements.

To be eligible to enter the BScN program as an advanced standing student, applicants must have completed at least 30 credit hours, with a minimum grade of **B-** in the required subjects at the Post-Secondary level. Required subjects include university 1000 level anatomy, physiology and/or biological sciences, microbiology, statistics, English and completion of electives. A minimum cumulative GPA of **2.5** based on overall Post-Secondary career or most recent year of studies (30 credit hours).

2.8 Progression and Graduation Requirements

The following outlines our progression, probation, dismissal and graduation requirements.

- **Progression:**

To progress in our program, a minimum C grade is required in each non-nursing course and minimum C+ or Pass (P) in each nursing course. Progression in the Program requires a GPA of 2.30 or greater (Semester to Semester) for all years of the program. F and INC are failing grades; ILL and W are considered neutral. Students must pass any pre-requisite courses in the BScN Program in order to progress to the next course in the program.

Students are permitted to repeat any course (including non-nursing courses, core nursing courses including clinical practica and electives) in the BScN program only once. A second failure in any course (including non-nursing courses, core nursing courses including clinical practica and electives) in the program will result in dismissal from the program for 1 year. Students are permitted to reapply to the program. Readmission to the program is not guaranteed and the applicant must demonstrate their preparation to return to studies. If the student is readmitted, subsequent failure in any course (including non-nursing courses, core nursing courses including clinical practica and electives) will result in dismissal from the program. Faculty of Health Professions students who have been dismissed twice will not be allowed to reapply for admission (Dalhousie University Faculty of Health Professions, Regulation 20.1.6)

Probation:

Students with a cumulative GPA of less than 2.29 and greater than or equal to 1.70 who have completed at least 24 credit hours will be placed on academic probation. Students on probation are allowed to continue to register on probation provided their term GPA is at least 2.30. Students will be returned to “good standing” when they achieve a cumulative GPA of 2.30. Students on probation who do not achieve a term GPA of 2.30 will be academically dismissed. Students require a cumulative GPA of 2.30 to graduate. Therefore, students are not able to graduate while on academic probation.

- **Academic Dismissal:**

Students with a cumulative GPA of less than 1.70 who have completed at least 24 credit hours will be academically dismissed for a 12 month period. Students on probation who do not achieve a term GPA of 2.30 or greater will be academically dismissed for a 12 month period. Students who have been academically dismissed will not be allowed to apply for readmission for at least 12 months. Students who have been academically dismissed for the first time and have subsequently been re-admitted after an absence of a 12 month period may re-register on probation.

Students are permitted to reapply to the program. Readmission to the program is not guaranteed and the applicant must demonstrate their preparation to return to studies.

If the student is readmitted, subsequent failure in any course (including non-nursing courses, core nursing courses including clinical practica and electives) will result in dismissal from the program. Faculty of Health Professions students who have been dismissed twice will not be allowed to reapply for admission.

- **Graduation:**

Completion of all required non-nursing and nursing courses, totaling 120 credit hours, and a minimum cumulative GPA of 2.30 is required for the awarding of the Bachelor of Science (Nursing) Degree.

Section 3: Curriculum Details

This section outlines the main themes of each semester and course implementation, beginning in Semester 3 and ending in the final semester of the nursing program, Semester 8.

3.1 Semester 3 to Semester 8

Once a student begins Semester 3 of the nursing program, they will be immersed in nursing courses that are highly integrated and consist of theoretical and practical learning with the integration of knowledge use throughout, and at the end, of each semester. Each semester of study is 15 credit hours. Semester 3 has 4 nursing courses: Nursing and Population Health, Foundations of Nursing, Health and Healing I and Clinical Integration 1. Semester 3 will have 10-11 weeks of theory and clinical integration throughout the semester; final exams will be written in week 12-13, depending upon length of term. The focus of this semester is on community wellbeing and functioning, and mental health.

Semester 4 has 4 nursing courses: Nursing and Family Health, Nursing Research and Evidence-Informed Practice, Health and Healing II, and Clinical Integration 2. This semester has 9-10 weeks of theory and clinical integration, followed by a 2 week clinical experience and a final exam week. The focus of this semester is on families at all stages and ages of development, as well as families in transitions.

Semester 5 consists of three nursing courses: Nursing and Episodic Illness: Preventative Care and Interventions, Professional Formation of Nursing Practice: Leadership Perspectives, and Clinical Integration 3. Students will have 7-8 weeks of theory and clinical integration, followed by a 4 week clinical practice rotation, and a final exam week. The focus of this semester is on episodic care with people of all ages and stages, including pediatrics, adults, and childbearing families, experiencing interferences with their physical and/or mental wellbeing.

Semester 6 has two required nursing courses and one elective course (3 CR): Nursing in the Context of Persistent Illness: Prevention and Recovery and Clinical Integration 4. This semester includes 7-8 weeks of theory and clinical integration, followed by a 4 week clinical practice rotation, and a final exam week. The focus of this semester is on persistent illness, prevention and recovery with people of all ages and stages, including pediatrics, adults, and childbearing families, experiencing interferences with their physical and/or mental wellbeing, and palliative and end-of-life care. During this semester students will have the opportunity to choose their elective area of study, including specific nursing foci areas for a 3 credit hour course.

Semester 7 consists of 3 required nursing courses and one elective course (3 CR): Relational Practice and Advanced clinical Reasoning, Professional Formation: Nursing and Social Responsibility, and Exploratory Clinical Practice. The Exploratory Clinical Practice in this semester is 220 hours and is student self-selected with students choosing an area in which they would like to engage in more in-depth learning, as a nursing foci. This semester has 7-8 weeks of theory and integration followed by a 4 week clinical practice rotation and a final exam week.

The focus of this semester is on advanced clinical reasoning and nursing's' societal responsibility, in a variety of nursing practice environments.

Semester 8 has one 15 credit hour nursing course: Transition to Practice which is a 13 week preceptored clinical practice course. Students will indicate their first three choices for a clinical practicum area and be preceptored with a Registered nurse to complete this course. The main focus of this semester is on transition to practice and includes:

1. **People Centredness**

Students will articulate the nursing role in the context of people centred, culturally competent, interprofessional care. Students will practice entry level and complex skills that promote safe, effective, relational nursing practice. The use of theories supported by evidence will form the basis of practice and students will articulate how this impacts health outcomes. Students will question and seek information as part of the normal practice of nursing.

2. **Health Systems and Social Care**

In this transition students apply principles of primary health care to all practice settings and recognize the need for nursing leadership in care delivery. Students are able to advocate for clients and provide safe care through application of evidence and maintenance of standards of practice. The understanding of the impact of social determinants of health and using the lens of critical social theory, students will be patient advocates and active participants in all aspects of the health care system.

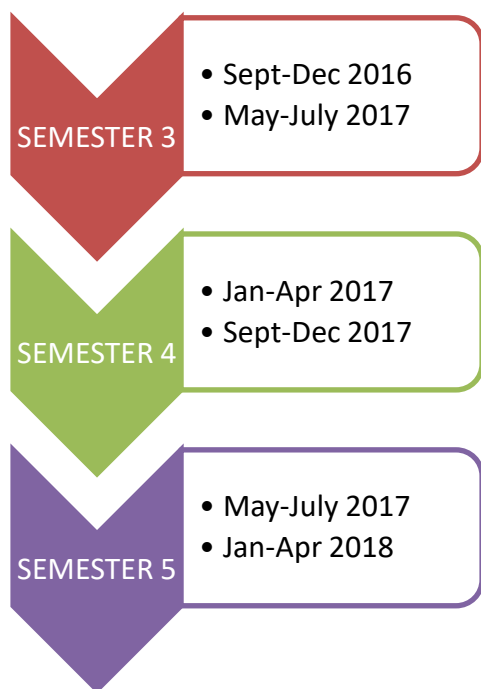
3. **Professional Transformation**

Transition to Practice: students will demonstrate all aspects of Entry to practice Competencies outlined in the CRNNS. These competencies include knowledge and application of legal and ethical standards of practice, accountability for his/her own practice. Students will have the competence to recognize the limitations of knowledge and skills as they transition from student to Registered Nurses and the confidence to seek information from appropriate sources. A sound theory and evidence base provide students with a basis to explore imaginative and innovative thinking and to act as change agents in the health care system. Students demonstrate a thorough understanding of fitness to practice as it relates to self-care and life-long learning.

3.2 Program Evaluation

The Dalhousie University BSCN Program Evaluation Plan 2016-2021 (separate document) was approved by School Council on March 27, 2017. The Plan is a developmental approach to evaluation and follows the program evaluation timeline as indicated below.

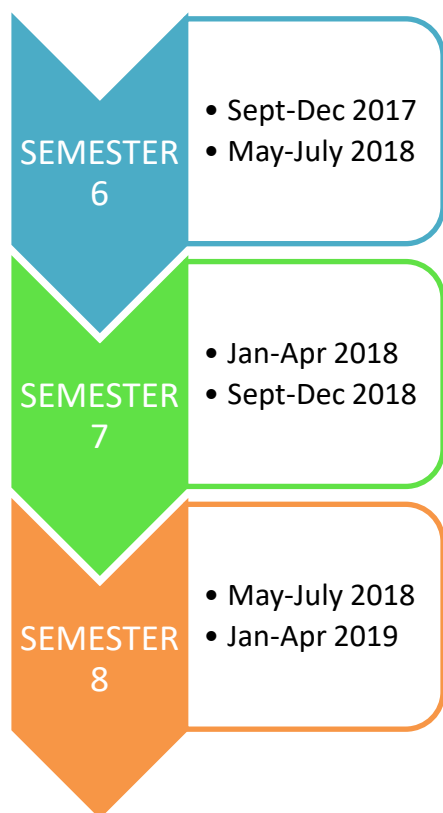
PROGRAM EVALUATION (2016-2019)



Evaluate	Date	Date
Semester 3 students	Jan 2017	Sept 2017
Semester 3 faculty	Jan 2017	Sept 2017
Clinical placement agencies		Sept 2017
Semester 4 students	May 2017	Jan 2018
Semester 4 faculty	May 2017	Jan 2018
Clinical placement agencies		Jan 2018
Semester 5 students	Sept 2017	May 2018
Semester 5 faculty	Sept 2017	May 2018
Clinical placement agencies		May 2018

“True genius resides in the capacity for evaluation of uncertain, hazardous, and conflicting information.”

Winston Churchill



Semester 6 students	Jan 2018	Sept 2018
Semester 6 faculty	Jan 2018	Sept 2018
Clinical placement agencies		Sept 2018
Semester 7 students	May 2018	Jan 2019
Semester 7 faculty	May 2018	Jan 2019
Preceptors		Jan 2019
Graduates: Program evaluation	July 2018	Apr 2019
Faculty: Program evaluation	July 2018	Apr 2019
Clinical placement agencies	Aug 2018	Apr 2019
Preceptors	Aug 2018	Apr 2019

4: Glossary of Terms

Active Learning: is a process whereby students engage in activities, such as reading, writing, discussion, or problem solving that promote analysis, synthesis, and evaluation of class content. Active learning requires doing and observing of experiences as well as reflection on what one is learning and how one is learning, individually and collectively.

Capstone Project: is a multifaceted assignment that serves as a culminating academic and intellectual experience for students with most being long-term investigative projects that culminate in a final product, presentation, or performance. Students are encouraged to connect their projects to community strengths, issues or vulnerabilities.

Clinical application: Clinical application includes, but is not limited to, low, medium and high fidelity simulation, online simulation, and nursing practice in laboratories, community and institutional placements.

Health: is the capacity of people to respond successfully to life circumstances and challenges, adversity and developmental alterations in ability/function through the application of innate abilities and strengths, acquired knowledge and skills, and social, emotional and cultural support over the life span. Health is largely determined by factors outside of the delivery of health services.

Illness: is a temporary or ongoing alteration in capacity to respond that requires the application of self-care and/or support from a health professional.

People: individuals, families, and communities in local and global environments.

Primary Care: is the “first line” clinical services that provide an entry point to the health care system.

Primary Health Care: is defined as essential health care made universally accessible to individuals and families within communities by means acceptable to them, through their full participation and at a cost that the community and country can afford. It includes promotive, preventive, curative, rehabilitative and supportive/palliative care and involves the application of the following five principles: accessibility, health promotion and disease prevention, public participation, intersectoral collaboration and appropriate technology. The main focus of Primary Health Care is on preventing illness and promoting health.

Semester: is defined as a 12-13 week period of time that students will be engaged in nursing studies. The beginning of each semester is the same as the term start date as set by the Registrar’s office at Dalhousie University for Fall and Winter terms with the end date being different from the set “Term Dates” therefore, to avoid confusion, the School of Nursing refers to our Fall, Winter and Summer periods of learning as Semesters. Fall semester ends November 30, Winter semester ends April 7 and Summer semester ends July 31.

5: Appendices

5.4 Appendix A: SON Academic Plan

Dalhousie University School of Nursing



Academic Plan 2013-2018



Mission

The School of Nursing advances health and social justice by educating nurses to be leaders; generating, translating and applying nursing knowledge; and informing and influencing health-related public policy, practice and planning.

Vision

The School of Nursing will become one of the top five Faculties/Schools of Nursing in Canada.

We will be recognized for our:

Leadership in innovative nursing education, research, scholarship and practice
Interdisciplinary, interprofessional, inter-sectoral and collaborative approaches
Strategic role in the formulation and realization of healthy public policy, and
Contributions to the betterment of society, regionally, nationally and globally

Values

We Value:

Excellence, innovation and leadership in education, research, scholarship and practice
Professional competence, integrity and accountability
Critical inquiry and open exchange of ideas
Faculty governance
Diversity, equity and social justice
Inter-sectoral, interprofessional and interdisciplinary collaboration
Effective partnerships with our communities, and
A positive working environment that supports respect, creativity and scholarship

Strategic Directions

1. Continue to Advance our Educational Excellence

Objective:

Further program excellence, teaching practices and learner outcomes through formal, objective review processes

Initiatives:

Enrich teaching and learning practice
Continued development of innovative programs and relevant curricula
Recruitment and engagement of excellent faculty, clinical educators and preceptors
Dalhousie School of Nursing is seen to provide a critical role within the health care sector in Nova Scotia and Atlantic Canada
Scholarly development of graduates who work with the practice community to influence and support scholarly practice

2. Position our Research Programs Nationally and Internationally

Objective:

A nationally renowned nursing research centre

Initiatives:

Enhance visibility of our research to our partners, the public and the scientific community
Recruit, support and retain excellent researchers to support our students, programs and health care initiatives
Provide opportunities to enhance the success, reputation and contribution of graduates
Expand our research capacity
Increase external funding

Engage effective research partnerships for greater reach and impact

3. Advance Equity in Health

Objective:

Our internal practices and external influences contribute to social justice

Initiatives:

Enhance diversity and inclusivity within the student population

Enhance diversity and inclusivity within the faculty

Create a supportive environment which encourages faculty and student education, research and practice in advancing health equity

Strengthen capacity to advocate for equity in health related policy and practice

4. Transform our Structures

Objectives:

Effective structures and processes to promote achievement of vision and mission

Initiatives:

Implement and evaluate a new governance structure

Secure and manage resources to build capacity in education, research and partnerships

Build effective internal and external partnerships

Approved: School of Nursing Full Faculty, April 15, 2015 Revision Approved: Full Faculty, April 17, 2014.

5.2 Appendix B: Bibliography

- Benner, P., Sutphen, M., Leonard, V., & Day, L. (2010). *Educating nurses: A call for radical transformation*. San Francisco, CA: Jossey-Bass.
- Boud, D. (1995). Assessment and learning: Contradictory or complementary? In P. Knight (Ed.) *Assessment for learning in higher Education*. (pp. 35-48). London: Kogan.
- Browne, A. (2000). The potential impact of critical social theory to nursing science. *Canadian Journal of Nursing Research*, 32(3), 35-55.
- Buckley, F. J. (2000). *Team teaching: What, why and how?* Thousand Oaks, CA: Sage.
- Canadian Association of Schools of Nursing (2011). *CASN Position Statement on Baccalaureate Education and Baccalaureate Programs*. Retrieved from <http://casn.ca/wp-content/uploads/2014/10/BaccalaureatePositionStatementEnglishFinal.pdf>
- Canadian Association of Schools of Nursing (2011). *CASN Position Statement on the Education of Registered Nurses in Canada*. Retrieved from <http://casn.ca/wp-content/uploads/2014/10/EducationofRNsInCanadaEng.pdf>
- College of Registered Nurses of Nova Scotia. (2012). *Standards and criteria for baccalaureate undergraduate nursing education programs*. Retrieved from <http://crnns.ca/wp-content/uploads/2015/04/Standands-and-Criteria-Baccalaureate-Undergraduate-Nursing-Education-Programs.pdf>
- Dalhousie University (2013). *Survey of Student use of Online Technologies*. Retrieved from <http://www.dal.ca/content/dam/dalhousie/pdf/elt/e-learning/Student%20Write%20up%20for%20dissemination.pdf>
- Dyrud, M. (2010). Team teaching: Part I. *Business Communication Quarterly*, 73(1), 80–105.
- Fink, D. (2013). *Creating significant learning experiences*. San Francisco, CA: Jossey Bass.
- Gardner, H. (2008). *Five minds for the future*. Boston, MA: Harvard Business Press.
- Gaytan, J. (2010). Instructional strategies to accommodate a team-teaching approach. *Business Communication Quarterly*, 73(1), 82–87.
- Giddens, J. F. & Brady, D.P. (2007). Rescuing nursing education from content saturation: The case for a concept-based curriculum. *Journal of Nursing Education*, 46 (2), 65–68.
- Giddens, J. F. & Horton, N. (2010). Report card: An evaluation of a concept-based curriculum. *Nursing Education Perspectives*, 31(6), 372–377.
- Helms, M., Avis, J., & Willis, M. (2005). Planning and implementing shared teaching: An MBA team-teaching case study. *Journal of Education for Business*, 81(1), 29–34.
- Hodges, H.F. (2011). Preparing new nurses with complexity science and problem-based learning. *Journal of Nursing Education*, 50, 7-13.
- Human Anatomy and Physiology Society (2011). *Distributed Learning Position Statement*. Retrieved from http://www.hapsweb.org/?page=Distributed_position
- Institute of Medicine. (2011). *The future of nursing: Leading change, advancing health*. Washington, DC: National Academies Press. Retrieved from http://books.nap.edu/openbook.php?record_id=12956
- Jacob, H., Honey, R., & Jordan, C. (2002). Getting the most out of sequential teaching. Paper presented at the 11th Annual Teaching and Learning Forum, Edith Cowan University, Australia.

- Malette, S., Loury, S., Engelke, M.K., & Andrews, A. (2005). The integrative clinical preceptor model: A new method for teaching undergraduate community health nursing. *Nurse Educator*, 30, 21-26.
- Mitchell, G. J., Jonas-Simpson, C.M., & Cross, N. (2013). Innovating nursing education: Interrelating narrative, conceptual learning, reflection and complexity science. *Journal of Nursing Education and Practice*, 3(4), 30–39.
- Oblinger, D. G., & Maruyama, M. K. (1996). *Distributed learning*. CAUSE Professional Paper Series, #14. Retrieved from <http://net.educause.edu/ir/library/pdf/pub3014.pdf>
- Parente, D., Duck, J., Zhae, X., & Fizel, J. (2007). Collaboration: Leading and learning by example. *Merlot Journal of Online Learning and Teaching*, 3(2), 170–178.
- Robb, M., & Gerwick, M. (2013). Team teaching: A resource guide for nurse educators. *Teaching and Learning in Nursing*, 8, 78-82.
- Rolloff, M. (2010). A constructivist model for teaching evidence-based practice. *Nursing Education Perspectives*, 31, 290-293.
- Sargent, L., Allen, B., Frahm, J., & Morris, G. (2009). Enhancing the experience of student teams in large classes: Training teaching assistants to be coaches. *Journal of Management Education*, 33(5), 526–552.
- Stevens, D. D., & Levi, A.J. (2005). *Introduction to rubrics*. Sterling, Va: Stylus.
- Walvoord, B., & Anderson, V. (2010). *Effective grading*. (2nd ed.). San Francisco: Jossey-Bass.

5.3 Appendix C: Modified Program Approval Dates

Document	Approving Body	Date
Concept Paper: BScN Modified Program	School of Nursing, Undergraduate Studies Committee Recommendation to School Council	May 2014
Concept Paper: BScN Modified Program	School of Nursing, School Council	May 2014
Concept Paper: BScN Modified Program	Faculty Council	June 2014
Concept Paper: BScN Modified Program	Faculty of Health Professions, Academic Review Committee	June 2014
Concept Paper: BScN Modified Program	Academic Programs Sub-Committee (APSC)	December 2014
Concept Paper: BScN Modified Program	Senate Academic Research and Programs Committee (SAPRC)	January 2015
BScN Modified Program Proposal	School of Nursing, Undergraduate Studies Committee Recommendation to School Council	February 2015
BScN Modified Program Proposal	School of Nursing, School Council	February 2015
BScN Modified Program Proposal Application	AACHHR	February 2015
BScN Modified Program Proposal	Faculty of Health Professions, Academic Review Committee	March 2015; Final course outline approvals May 2015
BScN Modified Program Proposal	Academic Programs Sub-Committee (APSC)	April 2015
BScN Modified Program Proposal	Senate Academic Research and Programs Committee (SAPRC)	May 2015
BScN Modified Program Proposal- Academic Regulation Changes	Senate Committee on Teaching and Learning	June 2015
BScN Modified Program Proposal	Dalhousie University Senate Committee	June 18, 2015
University Approved BScN Modified Program Proposal Application	Maritimes Province of Higher Education (MPHEC)	November 19, 2015