

Psychiatric Nursing Education Standards and Indicators

This document should be reviewed with [BCCNM Education Program Review Policies](#).

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Entry-Level Psychiatric Nursing Education Programs Standards and Indicators

Standard 1 – Administration

The post-secondary education provider develops and maintains a comprehensive strategic and tactical plan, as well as supporting policies, procedures, processes and practices, to ensure the overall effectiveness of the program in producing graduates who have the RPN entry-level competencies and can meet the standards of practice.

INDICATORS:

- 1.1 The program objectives are clearly articulated, including achieving entry-level competencies, and are congruent with the values and approach to psychiatric nursing in the Code of Ethics and the standards of practice.
- 1.2 The program aligns with the education provider's Academic Plan, Mission, and Vision.
- 1.3 The program is consistent with societal and holistic health care trends and the program meets the current and emerging future health and mental health needs of society.
- 1.4 Those in leadership roles with the post-secondary education provider are committed to the viability of the program.
- 1.5 There is an organizational structure that supports the division or department responsible for the program in meeting its objectives.

- 1.6 The environment within which the program takes place is appropriate for the instructional needs of the learners.
- 1.7 The physical, human, and fiscal resources are sufficient in quantity and quality to ensure the program objectives are met; and the technological opportunities and challenges that have implications for the program have been appropriately considered and addressed.
- 1.8 Appropriate strategies are used for maintaining liaison with stakeholders, including BCCNM, relevant government ministries, health authorities, employers, RPNs in practice, other health professions and students.
- 1.9 The program fosters inclusion and diversity – in its students, academic staff, curriculum content and philosophical approach.

Standard 2 – Curriculum

The curriculum provides the learning experiences necessary for graduates who have the RPN entry-level competencies and can meet the standards of practice.

INDICATORS:

- 2.1 The curriculum is consistent with current concepts and practices of adult education and has a clearly articulated conceptual framework that is reflective of contemporary, evidence-based psychiatric nursing theory, research, education, and clinical practice, encompassing the four meta-paradigms of person, health, psychiatric nursing, and environment.
- 2.2 The curriculum is clearly described and mapped against the *Registered Psychiatric Nurse Entry-Level Competencies* (2014), and the standards of practice to demonstrate how the intended goals and learning outcomes are integrated throughout the curriculum and will be achieved.
- 2.3 The curriculum meets the BCCNM's minimum requirements for psychiatric nursing and medical-surgical clinical practice hours. The curriculum also prepares students to pass the Registered Psychiatric Nurses of Canada Examination.
- 2.4 The curriculum length, structure, selection, the logical sequencing of its concepts and processes (vertical and horizontal curriculum threads), and the delivery of learning experiences ensure graduates meet entry-level competencies and the standards of practice, including preparing graduates to:
 - Utilize reflection, clinical judgment, and critical thinking processes in the delivery of psychiatric nursing care;
 - Incorporate scientific knowledge and research in the approach to practice;
 - Apply psychiatric nursing principles to the care of clients with varying health status and across a variety of settings;
 - Access and utilize health care systems and community resources on behalf of the client.

- 2.5 The standards of practice requirements are systematically introduced and developed through psychiatric nursing courses (theoretical, laboratory, clinical practice).
- 2.6 Elective courses are complementary to psychiatric nursing.
- 2.7 The rationale for the inclusion of required non-psychiatric nursing courses indicate relevance to practice and the achievement of entry-level competencies and the standards of practice.
- 2.8 The program holds regular meetings with a Program Advisory Committee composed of relevant stakeholders.
- 2.9 The curriculum is evaluated on an ongoing basis and revised to ensure it remains current and future-oriented to address the changing needs of society and to reflect stakeholder input.
- 2.10 The curriculum and teaching methods foster inter-professional collaborative partnerships.

Standard 3 – Students

The ways in which students are selected, supported, evaluated and advanced foster student success and attainment of the program goals.

INDICATORS:

- 3.1 Students are informed about the requisite skills and abilities needed to achieve entry-level competencies, including English proficiency, and BCCNM's requirements for registration to practice.
- 3.2 Student admission requirements are transparent and encourage enrollment of students from diverse cultural and linguistic backgrounds and with diverse academic, work and life experiences reflective of societal diversity.
- 3.3 Policies and procedures for admission, evaluation, progression in the program, failure, appeal, and readmission are clearly documented, fair (valid) and familiar to students and faculty to support effective decision making.
- 3.4 Mechanisms are in place to document and examine the relationship among admission requirements, student attrition and success, and to make changes based upon the findings.
- 3.5 Students are engaged in the planning, implementation, and evaluation of the program and/or course offerings.
- 3.6 Students receive well-timed formative and summative evaluation feedback about their theoretical and practice learning to facilitate their progress towards meeting the BCCNM RPN entry-level competencies and the standards of practice.
- 3.7 Consistent expectations and evaluations of student performance at different levels in the program are achieved through orientation and support strategies for faculty and preceptors.
- 3.8 Students are provided with varied and relevant learning experiences that accommodate differences

in their learning styles. They are also supported in developing communication, collaboration and leadership skills.

- 3.9 Students are supported to learn about self-regulation and fitness to practice and to understand their professional responsibility for their continuing competence.
- 3.10 Student fitness to practice and public protection are considered in progression, failure and readmission decisions.

Standard 4 – Faculty

The quality, expertise and number of faculty provide students with the support necessary to achieve program goals, gain the RPN entry-level competencies and meet the standards of practice.

INDICATORS:

- 4.1 There is an adequate number of qualified faculty to achieve program goals.
- 4.2 All psychiatric nursing courses are taught by Registered Psychiatric Nurses with current practicing registration.
- 4.3 Faculty hold a qualification that is higher than the qualification for which their students are studying (or exceptions must be justified).
- 4.4 Faculty are qualified to fulfill their teaching responsibilities, including a minimum of five years of practice experience and current competence in their area of teaching,
- 4.5 Faculty serve as positive role models for students.
- 4.6 New faculty are provided a comprehensive orientation to their roles and responsibilities.
- 4.7 Faculty are required to maintain their competence and participate in professional development opportunities.
- 4.8 Faculty use current research in teaching and learning.
- 4.9 There is institutional support for a scholarly environment that models a culture of inquiry with opportunities for faculty research and student engagement in scholarship.
- 4.10 There is a leadership development plan that fosters consultative leadership and succession planning to enable the growth and development of faculty.
- 4.11 There is ongoing evaluation of the teaching effectiveness of faculty.

Standard 5 – Practicums

Practice experience placements support students to meet entry-level competencies and the standards of practice.

INDICATORS:

- 5.1 The post-secondary education provider ensures each student has a minimum of 1000 clinical practice hours placement, and the maximum hours take into account the provincial placement capacity of the health care system.
- 5.2 The post-secondary education provider has arranged an appropriate number and variety of practice placements, which are systematically tracked and monitored to ensure all students have appropriate experiences (e.g., health status, age groups, and settings) to achieve entry-level competencies and the standards of practice.
- 5.3 Students have the opportunity to apply entry-level competencies in situations of direct care as early as is educationally sound so there is early engagement with the professional context.
- 5.4 The timing and academic content of course work prepares students for the timing and content of practice experience placements.
- 5.5 Placement sites are selected on the basis of best practices, innovative approaches, mental health service trends, and representation of different aspects of psychiatric nursing practice.
- 5.6 Through the use of nursing laboratories and other learning modalities, students demonstrate their ability to provide safe nursing care before they practice directly with clients.
- 5.7 All environments where students are placed to gain their practice experience are assessed and minimized for risk.
- 5.8 Faculty and preceptors engaged in supporting and/or assessing students in practice experience placements are appropriately experienced and prepared for the role, and there are enough qualified faculty to support the students and preceptors.
- 5.9 There is an orientation process for preceptors that ensures familiarity with the learning objectives of the practice experience and explains the roles and responsibilities of the preceptor.
- 5.10 There is an open, meaningful and ongoing communication mechanism between preceptors and the program.
- 5.11 Discrepancies between academic performance and clinical performance are dealt with in a timely and effective manner.

Standard 6 – Evaluation, Quality Assurance, and Improvement

There is ongoing monitoring, evaluation and improvement of the program to ensure quality and accountability.

INDICATORS:

- 6.1 Program evaluation processes are in place to provide relevant and on-going information and these are used to continually improve the quality of the program in preparing graduates to meet BCCNM entry-level competencies and the standards of practice.
- 6.2 Feedback is systematically sought from stakeholders, including students, graduates, employers, preceptors, faculty and, where feasible, the public and consumers regarding how well the program is preparing students or has prepared graduates to practice safely, competently and ethically.
- 6.3 Graduate success rates on the registration examination are monitored, analyzed and used to inform program decisions.
- 6.4 The program evaluation methods for data collection and validation meet the requirements of informed consent.

Standard 7 – Establishment of New Educational Program

There is a demonstrated need for a new educational program.

INDICATORS:

- 7.1 There is a clear rationale for the development of a program.
- 7.2 A program is needed in that particular area of the province.
- 7.3 The program goals and outcomes are congruent with the purposes and strategic goals of the post-secondary education provider.
- 7.4 There is evidence that the program will have sufficient and appropriate practice experience placements for their students.
- 7.5 There has been consultation with stakeholders (relevant government ministries and agencies, health authorities and other employers, and others whose support has significance for the program), and there is support for the program from these stakeholders.

Psychiatric Nursing Program – Refresher Program

Standard 1 – Administration

The post-secondary education provider develops and maintains a comprehensive strategic and tactical plan, as well as supporting policies, procedures, processes and practices, to ensure the overall effectiveness of the program in producing graduates who have the RPN entry-level competencies and can meet the standards of practice¹

INDICATORS:

- 1.1 The program objectives are clearly articulated, including achieving entry-level competencies, and are congruent with the values and approach to psychiatric nursing in the Code of Ethics and standards of practice¹.
- 1.2 The program aligns with the education provider's Academic Plan, Mission, and Vision.
- 1.3 The program is consistent with societal and holistic health care trends and the program meets the current and emerging future health and mental health needs of society.
- 1.4 Those in leadership roles with the post-secondary education provider are committed to the viability of the program.
- 1.5 There is an organizational structure that supports the division or department responsible for the program in meeting its objectives.
- 1.6 The environment within which the program takes place is appropriate for the instructional needs of the learners.
- 1.7 The physical, human, and fiscal resources are sufficient in quantity and quality to ensure the program objectives are met; and the technological opportunities and challenges that have implications for the program have been appropriately considered and addressed.
- 1.8 Appropriate strategies are used for maintaining liaison with stakeholders, including BCCNM, relevant government ministries, health authorities, employers, RPNs in practice, other health professions and students.
- 1.9 The program fosters inclusion and diversity – in its students, academic staff, curriculum content and philosophical approach.

¹ Standards of practice includes the Professional Standards, the Scope of Practice Standards, and the Practice Standards

Standard 2 – Curriculum

The curriculum provides the learning experiences necessary for graduates who have the RPN entry-level competencies and can meet the standards of practice.

INDICATORS:

- 2.1 The curriculum is consistent with current concepts and practices of adult education and has a clearly articulated conceptual framework that is reflective of contemporary, evidence-based psychiatric nursing theory, research, education, and clinical practice, encompassing the four meta-paradigms of person, health, psychiatric nursing, and environment.
- 2.2 The curriculum is clearly described and mapped against the *Registered Psychiatric Nurse Entry-Level Competencies* (2014), and Standards of Psychiatric Nursing Practice to demonstrate how the intended goals and learning outcomes are integrated throughout the curriculum and will be achieved.
- 2.3 The curriculum meets the BCCNM's minimum requirements of 330 hours of theory and 160 hours of clinical practice hours.
- 2.4 The curriculum length, structure, selection, the logical sequencing of its concepts and processes (vertical and horizontal curriculum threads), and the delivery of learning experiences ensure graduates meet entry-level competencies and the standards of practice, including preparing graduates to:
 - Utilize reflection, clinical judgment, and critical thinking processes in the delivery of psychiatric nursing care;
 - Incorporate scientific knowledge and research in the approach to practice;
 - Apply psychiatric nursing principles to the care of clients with varying health status and across a variety of settings
 - Access and utilize health care systems and community resources on behalf of the client.
- 2.5 The standards of practice requirements are systematically introduced and developed through psychiatric nursing courses (theoretical, laboratory, clinical practice).
- 2.6 The program holds regular meetings with a program advisory committee composed of relevant stakeholders.
- 2.7 The curriculum is evaluated on an ongoing basis and revised to ensure it remains current and future-oriented to address the changing needs of society and to reflect stakeholder input.
- 2.8 The curriculum and teaching methods foster inter-professional collaborative partnerships.

Standard 3 – Students

The ways in which students are selected, supported, evaluated and advanced foster student success and attainment of the program goals.

INDICATORS:

- 3.1 Students are informed about the requisite skills and abilities needed to achieve entry-level competencies (including English proficiency) and BCCNM's requirements for registration to practice.
- 3.2 Student admission requirements are transparent.
- 3.3 Policies and procedures for admission, evaluation, progression in the program, failure, appeal, and readmission are clearly documented, fair (valid) and familiar to students and faculty to support effective decision making.
- 3.4 Students are engaged in the planning, implementation, and evaluation of the program and/or course offerings.
- 3.5 Students receive well-timed formative and summative evaluation feedback about their theoretical and practice learning to facilitate their progress towards meeting BCCNM professional practice requirements, including entry-level competencies and the standards of practice
- 3.6 Consistent expectations and evaluations of student performance at different levels in the program are achieved through orientation and support strategies for faculty and preceptors.
- 3.7 Students are provided with varied and relevant learning experiences that accommodate differences in their learning styles. They are also supported in developing communication, collaboration and leadership skills.
- 3.8 Students are supported to learn about self-regulation and fitness to practice and to understand their professional responsibility for their continuing competence.
- 3.9 Student fitness to practice and public protection are considered in progression, failure and readmission decisions.

Standard 4 – Faculty

The quality, expertise and number of faculty provide students with the support necessary to achieve program goals, gain RPN entry-level competencies and meet the standards of practice.

INDICATORS:

- 4.1 There is an adequate number of qualified faculty to achieve program goals.
- 4.2 All psychiatric nursing courses are taught by Registered Psychiatric Nurses with current practicing registration.

- 4.3 Faculty hold a minimum qualification of a relevant degree.
- 4.4 Faculty are qualified to fulfill their teaching responsibilities, including a minimum of five years of practice experience and current competence in their area of teaching,
- 4.5 Faculty serve as positive role models for students.
- 4.6 New faculty are provided a comprehensive orientation to their roles and responsibilities.
- 4.7 Faculty are required to maintain their competence and participate in professional development opportunities.
- 4.8 Faculty use current research in teaching and learning.
- 4.9 There is institutional support for a scholarly environment that models a culture of inquiry.
- 4.10 There is a leadership development plan that fosters consultative leadership and succession planning.
- 4.11 There is ongoing evaluation of the teaching effectiveness of faculty.

Standard 5 – Practicums

Practice experience placements support students to meet entry-level competencies and the standards of practice.

INDICATORS:

- 5.1 The post-secondary education provider ensures each student has a minimum of 160 clinical practice hours placement, and the maximum hours take into account the provincial placement capacity of the health care system.
- 5.2 The post-secondary education provider has arranged the clinical practicum to ensure students gave appropriate experiences to achieve entry-level competencies and the standards of psychiatric nursing practice.
- 5.3 The timing and academic content of course work prepares students for the timing and content of practice experience placements.
- 5.4 Placement sites are selected on the basis of best practices, innovative approaches, mental health service trends, and representation of different aspects of psychiatric nursing practice.
- 5.5 Through the use of nursing laboratories and other learning modalities, students demonstrate their ability to provide safe nursing care before they practice directly with clients.
- 5.6 All environments where students are placed to gain their practice experience are assessed and minimized for risk.

- 5.7 Faculty and preceptors engaged in supporting and/or assessing students in practice experience placements are appropriately experienced and prepared for the role, and there are enough qualified faculty to support the students and preceptors.
- 5.8 There is an orientation process for preceptors that ensures familiarity with the learning objectives of the practice experience and explains the roles and responsibilities of the preceptor.
- 5.9 There is an open, meaningful and ongoing communication mechanism between preceptors and the program.
- 5.10 Discrepancies between academic performance and clinical performance are dealt with in a timely and effective manner.

Standard 6 – Evaluation, Quality Assurance, and Improvement

There is ongoing monitoring, evaluation and improvement of the program to ensure quality and accountability.

INDICATORS:

- 6.1 Program evaluation processes are in place to provide relevant and on-going information and these are used to continually improve the quality of the program in preparing graduates to meet BCCNM entry-level competencies and the standards of practice.
- 6.2 Feedback is systematically sought from stakeholders, including students, graduates, employers, preceptors, faculty and, where feasible, the public and consumers regarding how well the program is preparing students or has prepared graduates to practice safely, competently and ethically.
- 6.3 Graduate success rates are monitored, analyzed and used to inform program decisions.
- 6.4 The program evaluation methods for data collection and validation meet the requirements of informed consent.

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