

UNIVERSITY COUNCIL
ACADEMIC PROGRAMS COMMITTEE
REQUEST FOR DECISION

PRESENTED BY: Carolyn Augusta, Chair, Academic Programs Committee

DATE OF MEETING: January 30, 2025

SUBJECT: **Master of Nursing: Nurse Practitioner Replacement Program**

MOTION: *It is recommended by the Academic Programs Committee that Council approve the Master of Nursing: Nurse Practitioner Replacement Program effective May 2026.*

CONTEXT AND BACKGROUND:

The College of Graduate and Postdoctoral Studies is proposing a replacement program for the Master of Nursing: Nurse Practitioner program. The revised curriculum being proposed is in response to the new Canadian Regulatory Model for Nurse Practitioners. The new model will shift away from current specialty streams in Nurse Practitioner Education, thus removing the need for the currently used Primary Health Care concentration. Admission changes include an increase to the cumulative weighted average and addition of a statement of intent and up-to-date CV. The proposed admission and curricular changes will be effective for students starting the program in September 2026.

CONSULTATION:

The Graduate Programs Committee in CGPS reviewed the replacement proposal at its meeting on October 23, 2024. The committee was impressed by the detail in the proposal and highlighted the thought put into developing the courses in stages. The proponents met with the committee and discussed the rationale for waiving 6 credit units of course work for students with previous credit for NURS 818 and NURS 821. The proponents clarified the rationale in the proposal and made minor editorial corrections, which were cleared by the Graduate Committee Chair following the approval of the proposal.

On January 8, 2025, the College of Graduate and Postdoctoral Studies and the College of Nursing brought forward the proposal to the Academic Programs Committee of Council (APC). Members had the opportunity to review the proposal, ask questions and participate in a thorough discussion. APC voted in favour of this replacement program.

NEXT STEPS:

University Council has the authority to approve changes to admissions qualifications. Senate confirmation of the decision is required before the changes can take effect.

The admission changes for the Master of Nursing: Nurse Practitioner Program are proposed for the 2026-2027 admission intake.

ATTACHMENTS:

1. Master of Nursing: Nurse Practitioner Replacement Program Proposal

Master of Nursing Nurse Practitioner Replacement Program

Table of Contents

Memorandum from CGPS	2
Proposal	3
Consultation	28
New Course Proposal Forms and Syllabi	48-526
Consultation with the Registrar (CWR)- Proposal Highlights	527



MEMORANDUM

To: Academic Programs Committee of Council
From: Graduate Programs Committee, CGPS
Date: December 20, 2024
Re: Master of Nursing: Nurse Practitioner replacement program

The College of Graduate and Postdoctoral Studies is recommending approval of a replacement program for the Master of Nursing: Nurse Practitioner (NP) program. Revised curriculum is being proposed in the response to the new Canadian regulatory model for Nurse Practitioners. The new model will shift away from current specialty streams in Nurse Practitioner education, thus removing the need for the currently used Primary Health Care concentration. Admission changes include an increase to the cumulative weighed average and addition of a statement of intent and up-to-date CV. The proposed admissions and curricular changes will be effective for students starting the program in September 2026.

The Graduate Programs Committee reviewed the replacement proposal at its meeting on October 23, 2024. The committee was impressed by the detail in the proposal and highlighted the thought put into developing the courses in stages. The proponents met with the committee and discussed the rationale for waiving 6 credit units of course work for students with previous credit for NURS 818 and NURS 821. The proponents clarified the rationale in the proposal and made minor editorial corrections, which were cleared by the committee chair following the approval of the proposal. The proposal was approved with the following motion:

Motion: To recommend approval of the replacement program for the Master of Nursing: Nurse Practitioner program, including 13 new courses, conditional on the minor revisions noted. **McIntyre/Martin – CARRIED unanimously**

Attached please find the proposal for the Master of Nursing, Nurse Practitioner replacement program.

If you have any questions, please contact the Academic Affairs Specialist at gradprograms.academicaffairs@usask.ca.



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Proposal for New Programs or Curricular Changes

Title of proposal: Master of Nursing Nurse Practitioner

Degree(s): Master of Nursing Nurse Practitioner (MN-NP)

Field(s) of Study: Nursing

Level(s) of Concentration: None

Option(s):

Degree College: College of Graduate and Postdoctoral Studies

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Proposed date of implementation: Sept 2026

Proposal Document

Please provide information which covers the following subtopics. The length and detail should reflect the scale or importance of the program or revision. Documents prepared for your college may be used. Please expand this document as needed to embrace all your information.

Academic Justification:

a. Describe why the program would be a valuable addition to the university from an academic programming perspective.

Nurse Practitioners (NPs) are Registered Nurses with graduate degrees and advanced competencies to independently diagnose and treat illnesses, order and interpret diagnostic tests, prescribe medications, perform procedures and manage overall patient care. With a broad and independent scope of practice, NPs are important providers to help meet the healthcare needs of Canadians in both hospital and community settings.

Canada is implementing a new regulatory model for NPs which includes revised NP entry-level competencies addressing diverse populations and practice settings, one national entry-level examination for all NPs, and one NP registration category. The new regulatory model will shift away from the current specialty streams of NP education and registration (i.e. Primary Health Care, Adult, Pediatric, Neonatal) to one common NP entry-to-practice and registration, requiring Canadian universities to review and revise NP curricula to align with changes. The University of Saskatchewan College of Nursing currently has a highly popular Master of Nursing, Nurse Practitioner concentration in Primary Health Care program and Postgraduate Degree Specialization Certificate: Nurse Practitioner program (PGDSC). These programs require adaptation to meet the new regulatory requirements and remove the specialty focus, thus allowing the University to continue educating NPs to help meet regional and national health care needs and provider shortages.

b. Considering strategic objectives, specify how the new program fits the university signature areas and/or institutional plans and/or the college/school and/or department plans.

The University of Saskatchewan has the bold ambition to *be what the world needs*. Educating nurses to develop NP competencies as advanced

providers, leaders, advocates, scholars, collaborators and educators holds great potential to help address current local and global health care needs. As health care providers, NPs help improve health outcomes for individuals, families, communities and populations, addressing current health human resources shortages.

The revised MN-NP program will also help the College of Nursing address their Strategic Plan goals of delivering high-quality responsive graduate nursing education, building up the Indigenous nursing workforce across Saskatchewan and Canada, and contributing to the health of our communities.

c. *Is there a particular student demographic this program targets, and if so, what is that target? (e.g., Indigenous, mature, international, returning)*

Similar to the current MN-NP and PGDSC programs, the new MN-NP program will target Registered Nurses with a minimum of 2-years clinical experience interested in advancing their knowledge, skills and competencies. Select seats are reserved for Saskatchewan (17 seats, in alignment with government funding) and Indigenous students (16.67%), with a focus on recruitment of students to meet the needs of rural, remote and underserved areas/populations of Western and Northern Canada.

d. *What are the most similar competing programs in Saskatchewan and Canada? How is this program different?*

There are a variety of models for Graduate NP education used in Canada responding to different student learning preferences, regional needs, and modes of learning. The University of Saskatchewan offers a distance education program, aligned with the College of Nursing “Learn where you live” approach. The program is front loaded meaning that students take theory courses to gain foundational knowledge prior to engaging in experiential clinical courses in the later year of their program. Theory courses are delivered synchronously online using web conferencing (i.e. Zoom) which provides an opportunity for real-time engagement and interaction between students and course instructors to support learning. Within Saskatchewan, the Collaborative Nurse Practitioner (CNPP) program offered through a partnership between Saskatchewan Polytechnic and the University of Regina is the only other NP program. The CNPP differs from the USask NP program in that it is delivered

asynchronously online, with clinical integrated throughout. Both the USask and CNPP programs are offered in 2 and 3-year study options, are funded by the Saskatchewan government for Saskatchewan student seats, and support graduation of students to meet the increasing NP workforce needs in Saskatchewan and Canada. The programs address different learning styles and preferences of students, with the USask program attracting those who desire real-time classes, and the CNPP attracting those who prefer self-directed asynchronous classes. There is currently sufficient demand for both NP programs within the province and high applicant numbers from both in and out-of-province students for the USask NP program.

Table 1. NP Student Applications 2018/19 – 2024/25

Academic Year	Total Applications	Saskatchewan	Non-Saskatchewan
2018/19	74	28	46
2019/20	104	23	81
2020/21	107	19	90
2021/22	174	39	135
2022/23	140	35	105
2023/24	255	52	203
2024/25	223	47	176

Admissions:

The **Admission Framework** document must be reviewed to determine how an applicant will be considered for admission. There are several factors to consider when creating a new program. The Manager, Admissions and Transfer Credit, can assist in the development of the criteria. Information determined here should then be used to inform the completion of an Admission Template as found on <https://programs.usask.ca/programs/admission-requirements.php>

- a. **What are the admissions requirements of this program – high school subjects, secondary or post-secondary standing, minimum averages, English proficiency, and minimum scores on standardized tests?**

The language of instruction and examination at the University of Saskatchewan is English. Minimum standards of English proficiency are required in all components, including written, spoken, reading, and listening, to ensure that students can understand and communicate clearly to be successful in their graduate programs. Canadian applicants are generally not required to provide proof of language proficiency. All other

applicants for admission to the College of Graduate and Postdoctoral Studies are required to present proof of proficiency in English. Higher than minimum scores will be required for the TOEFL and IELTS to align with proposed changes to the admission requirements for all College of Nursing graduate programs.

The admission cutoff grade of 75% reflects the high academic standards necessary for success in this competitive program. As nurse practitioners take on advanced clinical responsibilities in diagnosing and prescribing, applicants must demonstrate not only solid academic performance but also a strong foundation in their role as Registered Nurses (RNs). The 75% cutoff helps ensure that candidates possess the knowledge and critical thinking skills needed for the rigorous graduate level coursework and clinical practice ahead.

Requiring a statement of intent and an up-to-date CV allows the admissions committee to assess each candidate's professional experience, career goals, and commitment to advanced practice nursing. These documents provide insight into the candidate's ability to succeed in the program by highlighting their practical experience, leadership potential, and readiness to take on more complex clinical responsibilities and graduate level education.

The following admissions requirements will be applied to the new MN-NP program:

- A bachelor's degree in Nursing, from a recognized college or university
- A cumulative weighted average of at least 75% (USask grade system equivalent) over final 60cu of BSN or approved post BSN Post-secondary courses
- 3600 hours of clinical practice in Canada as a RN within the past five years
- Current licensure as a RN in a Canadian province or territory
- Equivalent of three credit units in each of physical assessment, pharmacology, physiology, statistics, and research methods at the undergraduate level
- Language Proficiency Requirements: Proof of English proficiency may be required for applicants to graduate programs. Proof of English proficiency may be demonstrated through:
 - A minimum of three consecutive years of full-time study or completion of a graduate degree at a recognized post-secondary institution, where the exclusive language of instruction and examination of the program and/or institution is English; or

- Provision of evidence of English language proficiency, using one of the approved tests listed in the English Language Proficiency Policy.

Acceptable test scores are as follows:

- TOEFL: a combined minimum total score of 94, with a minimum **of 24 out of 30 in the writing component, and a minimum of 22 out of 30 in the reading, listening, and speaking components.**
- IELTS: an overall score of 7.0 with no score below 6.5 in each

- Essay (Statement of Intent)
- Up-to-date CV

Required Documents for Admission:

- Proof of current Canadian license as a Registered Nurse
- Proof of 3600 clinical practice hours in a Canadian healthcare setting within the past 5 years
- Transcripts from all post-secondary institutions attended
- Three references – one clinical, one academic, and one additional reference who can speak to your ability to succeed in graduate studies (i.e. academic, clinical, supervisor)

b. What are the selection criteria – how will you rank and select applicants? For example, ranking by admission average, admission test scores, interview scores, departmental recommendations, auditions, portfolios, letters of reference, admission essays, and definition of essential abilities for professional practice?

Applicants who meet minimum admission criteria will be reviewed by the College of Nursing NP Program Admissions Committee and ranked based on comprehensive scoring of the application package including consideration of total of admission average, CV, essay, and references. Geographical location will also be considered as the ability to secure clinical placements is integral to program completion.

c. What are admission categories – regular admission, special admission, and Indigenous equity admission?

- Regular Admission
- Indigenous Equity Admissions

- d. Intake** - how many seats are required to be filled – for first year and transfer students, reserved for Indigenous, Saskatchewan, out-of-province, and international students?

17 seats will be funded by the Saskatchewan government's Health Human Resources program. 16.67% of seats will be reserved for Indigenous students. Priority for seats beyond the 17 seats reserved for Saskatchewan students will be given to students from the Yukon, Northwest Territories, and Nunavut where there is currently no NP program offered, as well as rural/remote areas of Western Canada to fit with the *Learn where you Live* approach of the College of Nursing.

- e. What are the application process and timelines – September or January intakes, online application, application and document deadlines, and scholarship deadlines to consider?**

September intake

Online applications managed through RMS.

Applications will open in October for possible admission the following September.

Application window and document deadline will be in mid-January.

- f. Which office will manage the admission process – TLSE, college, department, or a combination?**

Admissions will be managed by collaboration between the College of Nursing Graduate Program and University of Saskatchewan College of Graduate and Postdoctoral Studies, consistent with current practices within the College for admissions to Graduate Nursing programs.

- g. Marketing and Promotion of New Program – consideration needs to be given to a communications plan and marketing of the new program.**

Marketing for the current NP programs will be shifted to the new NP program including updating of College of Nursing website materials, social media/online marketing, conference attendance, and other advertisements. We do not anticipate additional budget will be required for marketing as resources will shift from the old, to the new program.

- h. Admissions Appeal – what will this process be.**

As a program of the College of Graduate and Post-doctoral Studies (CGPS), the CGPS processes for admissions appeals will be followed. <https://cgps.usask.ca/policy-and-procedure/Admissions/admissions.php>

i. Transfer Credit – when will this be assessed and by which office?

The [College of Nursing Graduate Policy for Transfer Credit](#) will be applied to determine transfer credit within the program. As per this policy:

When a student has been admitted to a College of Nursing master's program they are eligible to transfer coursework from another institution:

- After the student has established a satisfactory registration record at the U of S for at least one term in a regular academic year.
- On recommendation from the graduate chair, NP director or student supervisor.
- Within the four-year time limit
- When at least 60% of the program requirements are completed at the University of Saskatchewan.
- To a maximum of:
 - 9cu for students in the **professional practice**
 - 6cu for students in the **thesis**
 - 6cu for student in the **nurse practitioner**

Description of the program:

a. What are the curricular objectives, and how are these accomplished?

Curricular objectives support students to achieve regulatory standards and competencies, critical inquiry skills, knowledge in health care improvement, and professional attributes required of entry-level nurse practitioners. Specific program outcomes include:

By completion of the MN-NP program students will:

1. Meet the professional practice, ethical standards and entry-level competencies for nurse practitioners with respect to the safe and effective delivery of health care to individuals, groups and populations. [Regulatory Standards]

2. Use the principles of evidence-informed practice and possess the ability to contribute to the body of evidence related to nurse practitioner practice and knowledge [Critical Inquiry]
3. Analyze, evaluate, and apply advanced nursing knowledge to improve health, health equity and health outcomes. [Promoting Health Outcomes]
4. Demonstrate entry-level nurse practitioner proficiencies in leadership, interprofessional collaboration, advocacy, education, scholarship and clinical practice. [NP Competencies]
5. Demonstrate accountability, autonomy, integrity, and a professional growth mindset in a nurse practitioner role [Professional Attributes].

These outcomes will be achieved through a blended learning approach that includes synchronous and asynchronous learning, lab and clinical experiences.

b. Describe the modes of delivery, experiential learning opportunities, and general teaching philosophy relevant to the programming. Where appropriate, include information about whether this program is being delivered in a distributed format.

The NP program will continue to use the distributed *Learn Where you Live* approach, allowing students to pursue graduate education from their home community, something our current NP student body has found attractive. Classes will be delivered in various formats including synchronous online seminars, labs, and asynchronous online courses. Mode of content delivery will be guided by course content as well as practical considerations such as scheduling synchronous classes when students are in clinical placements. On-site skills labs are integrated into the program to teach hands-on clinical skills such as procedures and advanced physical examination. Experiential learning through clinical placements is included in the final year of the program to apply, develop and consolidate to advanced clinical competencies required of NPs.

As a graduate degree, the USask NP program requires students to apply advanced-level thinking, analysis, critical evaluation, and self-direct learning. Course design is based on a professional, self-directed learning environment in which instructors

facilitate and support student development of entry level NP competencies (ELCs) and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#), 2022). As adult learners, students are expected to take responsibility for their own learning, identifying personal learning needs and engaging in learning activities to meet course learning outcomes.

All courses use the University LMS [currently Canvas] to facilitate course delivery with synchronous online seminars using Zoom as the videoconferencing platform for delivery.

c. Provide an overview of the curriculum mapping.

The new MN-NP Program will build on foundations and strengths of the current Masters of Nursing Primary Health Care Nurse Practitioner program with adaptations to encompass broader health care settings/populations, revised NP Entry Level Competencies (ELCs), and opportunities for program improvement identified through evaluation of the current program. A comparison of the current and new NP programs is found in Table 2.

The biggest changes in the program come through enhanced emphasis on leadership, health care improvement, advocacy, and counselling competencies as well educating NPs for diverse health care settings, in response to the revised NP entry-level competencies. Clinical courses changes are also more significant, capitalizing on opportunities for improvement identified through program evaluation. Current NP clinical courses are heavy for 3-credit unit courses, including 240 clinical hours, clinical assignments to assess clinician competencies, asynchronous learning modules to develop theoretical knowledge, and evaluative components to assess other NP competency roles (i.e. scholarship, advocacy, leadership). If a student is successful meeting competencies in the clinical component of the course, but not the theory component, they are required to repeat the entire course, however, may have little benefit from repeating the portion of the course for which they have already met competency. Program evaluation identified opportunity to better streamline content so

clinical courses focus specifically on clinician competencies and an NP role development course is added to focus on other competencies that support NP role development. Opportunity to enhance the NP program project through integration of scaffolded assignments that provide opportunity for feedback, revision and refinement, was also identified. Currently student complete a project proposal as part of their final practicum course. Spacing this project over multiple terms provides time for students develop, implement and evaluate the project, better meeting NP ELCs and MN learning outcomes related to leading (designing, implementing and evaluating) health care improvement initiatives.

Table 2. Comparison of Current and New MN-NP Programs

Subject Matter	Current MN-NP Program (CU)	NEW MN-NP Program (CU)	Summary of Changes
Research/Evidence-Informed Practice	NURS 821.3: Evidence-Informed Practice in Nursing (3.0 CU)	NURS 821.3: Evidence-Informed Practice in Nursing (3.0 CU)	<ul style="list-style-type: none"> • No changes. • Common to MN-NP and MN-course based programs, addressing common MN competencies in research and statistics
Statistics	NURS 818.3: Applied Statistical Methods in Nursing (3.0 CU)	NURS 818.3: Applied Statistical Methods in Nursing (3.0 CU)	<ul style="list-style-type: none"> • No changes. • Common to MN-NP and MN-course based programs, addressing common MN competencies in research and statistics
Theoretical Foundations	NURS 883.3: Theory for Advanced Practice Nursing Roles and Primary Health Care (3.0 CU)	NURS XXX.3 Theory for Nurse Practitioner Practice (3.0 CU)	<ul style="list-style-type: none"> • Minor revisions • Enhanced focus on NP role identity • Integration of revised NP competencies
Pathophysiology and Pharmacology	NURS 881.3/886.3: Pathophysiology-Pharmacology for Advanced Nursing Practice I (3.0 CU) and II (3.0 CU)	NURS 881.3/886.3: Pathophysiology-Pharmacology for Nurse Practitioner Practice I (3.0 CU) and II (3.0 CU)	<ul style="list-style-type: none"> • Minor revisions • Enhanced alignment of topics with other courses • Integration of revised NP ELCs
Advanced Health Assessment and Diagnostic Reasoning	NURS 884.3/879.3: Advanced Health Assessment & Diagnostic Reasoning I (3.0 CU) and II (3.0 CU)	NURS 884.3/879.3: Advanced Health Assessment & Diagnostic Reasoning I (3.0 CU) and II (3.0 CU)	<ul style="list-style-type: none"> • Minor revisions • Enhanced alignment of topics with other courses • Integration of revised NP ELCs
Clinical Preparation/Lab	NURS 875.3: Transition to Advanced Nursing Practice (3.0 CU)	NURS 875.3 Transition to Nurse Practitioner Practice (3.0 CU)	<ul style="list-style-type: none"> • Minor revisions • Enhanced alignment of topics with other courses • Integration of revised NP ELCs
Health Promotion and Counselling	NURS 885.3: Therapeutics I Individual to Community (3.0 CU)	NURS xxx.3 Therapeutic Foundations for Nurse Practitioner Practice (3.0 CU)	<ul style="list-style-type: none"> • Significant revisions • Focus on health promotion, advanced communication, counselling, and culturally safe care • Support development of foundational non-pharmacological therapeutics strategies for expanded NP role • Emphasis on NP roles as advocate, educator and counsellor.

<p>Clinical I</p>	<p>NURS 880.3: Practicum I Advanced Practice Nursing in Primary Health Care (3.0 CU)</p>	<p>NURS xxx.3 Nurse Practitioner Clinical Residency I (3.0 CU)</p> <p>AND</p> <p>NURS xxx.3 Nurse Practitioner Role Development I (3.0 CU)</p>	<ul style="list-style-type: none"> • Clinical and theory components separated <p>Clinical I</p> <ul style="list-style-type: none"> • Asynchronous • 200 clinical hours in primary care • Focus on clinician competencies in assessment and diagnosis <p>NP Role Development I</p> <ul style="list-style-type: none"> • Blended asynchronous learning with bi-weekly seminars offering opportunity for real-time discussion/engagement • Focus on non-clinician NP competencies (leadership, scholar, advocate) • Capstone project proposal related to NP role in healthcare improvement
<p>Clinical II</p>	<p>NURS 888.3: Practicum II: Nursing Therapeutics and Advanced Management (3.0 CU)</p>	<p>NURS xxx.3 Nurse Practitioner Clinical Residency II (3.0 CU)</p> <p>AND</p> <p>NURS xxx.3 Nurse Practitioner Role Development II (3.0 CU)</p>	<ul style="list-style-type: none"> • Clinical and theory components separated <p>Clinical II</p> <ul style="list-style-type: none"> • Asynchronous • 250 clinical hours in primary care + specialized setting • Focus on clinician competencies with increasingly complex presentations; management and counselling <p>NP Role Development II</p> <ul style="list-style-type: none"> • Blended asynchronous learning with bi-weekly seminars offering opportunity for real-time discussion/engagement • Focus on non-clinician NP competencies (leadership, scholar, advocate) • Capstone project implementation and final report
<p>Clinical III</p>	<p>NURS 878.3: Practicum III: Advanced Practice Nursing with Vulnerable Populations (3.0 CU)</p>	<p>NURS xxx.3 Nurse Practitioner Clinical Residency III (3.0 CU)</p> <p>AND</p>	<ul style="list-style-type: none"> • Clinical and theory components separated <p>Clinical III</p> <ul style="list-style-type: none"> • Asynchronous • 300 clinical hours

		NURS xxx.3 Nurse Practitioner Role Development III (3.0 CU)	<ul style="list-style-type: none"> Consolidation of competencies to the level of an entry-level NP NP Role Development III <ul style="list-style-type: none"> Blended asynchronous learning with bi-weekly seminars offering opportunity for real-time discussion/engagement Focus on non-clinician NP competencies (leadership, scholar, advocate) Capstone project proposal dissemination Comprehensive Exam
Non-Credit Courses	NURS 990, GPS 960	NURS 990, GPS 960	
Total Courses, Credit Units	12, 36 cu	15, 45 cu	

The overall credit units in the program will increase from 36 credit units to 45 credit units, which is in the average range when compared to other Canadian MN-NP Programs. A comparison of the credit units in Canadian U15 Universities MN-NP programs is found below. Of note, most programs are currently undergoing revisions to address the revised regulatory standards with potential increases to courses/credit units to address expanded NP competencies.

Table 3. Comparison of Program Credit Units across U15 MN-NP Programs

U 15 University	Credit Units
McGill (Higher)	75
UBC (Higher)	56
UofA (Similar)	42 (thesis), 39 (Course based)
UofM (Similar)	45
UOttawa (Similar)	48
Dalhousie (Lower)	36

d. Identify where the opportunities for synthesis, analysis, application, critical thinking, problem-solving are, and other relevant identifiers.

Synthesis, analysis, application, critical thinking/appraisal, and problem solving are integrated throughout the curriculum as integral components of graduate nursing education and NP competencies. Students are introduced to concepts of critical appraisal, evidence synthesis and analysis in the Foundations for Nurse Practitioner Practice course, further developing this knowledge in the Evidence-Informed Practice for Nursing (NURS 821) and Applied Statistics for Nursing (NURS 818) then applying knowledge in the NP Role Development courses. Skills in critical thinking and problem solving, as they related to assessment and diagnosis of health concerns are introduced in the Advanced Health Assessment and Diagnostic Reasoning courses, with further opportunity for application of these competencies in Transition to NP Clinical Practice and clinical courses. Synthesis, analysis, application, and problem solving related to management of health concerns is included in Pathophysiology-Pharmacology courses and Therapeutic Foundations, with further opportunity for application in the NP clinical courses. The capstone project also supports development and evaluation of these skills through development and evaluation of a project to address health care improvement.

e. Referring to the university “Learning Charter”, explain how the learning pursuits are addressed and what degree attributes and skills will be acquired by graduates of the program.

Learning Charter Pursuit	How Pursuit is Addressed	Degree Attributes and Skills
<p>Truth and Understanding</p> <ul style="list-style-type: none"> Applying critical and creative mamitoneyihtamowin / naakatwayhtamihk (i.e., thinking) to problems, including analysis, synthesis, and evaluation. Being open to and adept at different ways of 	<p>Critical thinking and lifelong learning are central to nursing studies and emphasized in all MN-NP courses. Students are introduced to critical thinking at the graduate level early in their program during the Theory for Nurse Practitioner Practice course, expanding</p>	<ul style="list-style-type: none"> Critical thinking Critical appraisal Growth mindset in pursuit of lifelong learning <p>Program Learning Outcome 2: Use the principles of evidence-informed practice and possess the</p>

<p>knowing and learning, including independently, experientially, and collaboratively.</p> <ul style="list-style-type: none"> • Possessing intellectual flexibility, ability to manage change, open-mindedness with the unfamiliar and an enthusiasm for life-long and life-wide learning. 	<p>on critical thinking related to assessment, diagnosis, management and health system improvement in subsequent courses. Learning activities including seminar discussion, simulation, case studies, presentations, written assignments, and clinical experiences provide opportunity for students to apply and refine skills in critical thinking, with real-time feedback from instructors and mentors. Students are also evaluated in their development of critical thinking through course evaluation.</p>	<p>ability to contribute to the body of evidence related to nurse practitioner practice and knowledge [Critical Inquiry]</p>
<p>Knowledge</p> <ul style="list-style-type: none"> • Achieving a comprehensive knowledge of one's subject area, discipline, or profession. • Understanding how one's subject area may intersect with related disciplines, perspectives, and worldviews different than one's own, including Indigenous worldviews. • Understanding how one's subject area, discipline or profession connects to and impacts Indigenous and non-Indigenous communities in Saskatchewan, and beyond where applicable. • Utilizing and applying one's knowledge with manacihitowin / manachihitookh (i.e., respect of all individuals). 	<p>NP curriculum develops specialized knowledge to address the expanded scope of practice and roles of NPs as clinicians, leaders, advocates, educators, and scholars. All courses support development of advanced knowledge necessary to meet NP competencies, first introducing theoretical concepts, followed by opportunity to apply and receive feedback then evaluating competency development. Knowledge related to Indigenous health and cultural safety is integrated across courses, providing foundational knowledge early in the program during Therapeutic Foundations for Nurse Practitioner Practice, with opportunity for ongoing reflection, development and application of knowledge in subsequent courses and clinical, preparing students to provide equitable, inclusive,</p>	<ul style="list-style-type: none"> • Specialized body of knowledge related to NP practice • Cultural humility and competence • Reflective Practice <p>Program Learning Outcome 4: Demonstrate entry-level nurse practitioner proficiencies in leadership, interprofessional collaboration, advocacy, education, scholarship and clinical practice. [NP Competencies]</p>

	culturally safe care to all populations.	
<p>Integrity and Respect</p> <ul style="list-style-type: none"> Exercising intellectual integrity and ethical behaviour with kitimakeyichikewin / kitimakaymitoohk (i.e., kindness by self to others). Recognizing and thinking through moral and ethical issues in a variety of contexts, perspectives, and alternative worldviews. Recognizing the limits to one's knowledge, skills and understanding, and acting in accordance with these limits. Developing understanding and appreciation for one's own perspectives, strengths and worldview, while demonstrating mutual and reciprocal respect for the diverse perspectives, strengths and worldviews of others and their communities. 	<p>All graduate students at the University are required to take GPS 960 to enhance knowledge of intellectual integrity and ethical behaviour expected at the graduate level. Concepts of integrity and ethical practice are further integrated into NP courses in discussion of ethical research practices and ethically challenging health care situations that may be encountered by NPs. Reflective practice activities provide opportunity for students to enhance understanding and appreciation for their own strengths and worldview, how this impacts interactions with others, and strategies to support respectful relationships and understanding with divergent worldviews.</p>	<ul style="list-style-type: none"> Professionalism Cultural Competence and Safety Ethical decision making Practicing self-awareness to minimize personal bias and promote diverse, equitable, inclusive and culturally safe interactions <p>Program Learning Outcome 1: Meet the professional practice, ethical standards and entry-level competencies for nurse practitioners with respect to the safe and effective delivery of health care to individuals, groups and populations. [Regulatory Standards]</p>
<p>Skills and Practices</p> <ul style="list-style-type: none"> Developing and applying appropriate skills of research, inquiry and knowledge creation and translation. Communicating clearly, substantively and persuasively in different academic, professional, and cultural contexts; nihtâ-âcimowin / nihta achimoohk (i.e., being a good storyteller). 	<p>The program offers opportunity for students to develop advanced nursing skills used by entry-level NPs such as advanced assessment, diagnosis, management, leadership, advocacy, program planning and evaluation, and scholarship. In addition to nursing skills, students develop graduate level skills in searching, critically appraising, synthesizing and applying information to</p>	<ul style="list-style-type: none"> Entry-Level NP Competencies Evidence-informed practice Research, program evaluation, and quality improvement skills Knowledge translation and mobilization Effective communication, collaboration, and leadership with intra and interprofessional teams and intersectoral partners

<ul style="list-style-type: none"> • Being able to locate, understand, evaluate and use information effectively, ethically, legally and with cultural appropriateness 	<p>provide patient-centered, evidence-informed care to individuals, groups and populations with respect to cultural preferences and safety.</p>	<p>Program Learning Outcome 3: Analyze, evaluate, and apply advanced nursing knowledge to improve health, health equity and health outcomes. [Promoting Health Outcomes]</p>
<p>Individual and Community</p> <ul style="list-style-type: none"> • Committing to positive growth and change for oneself and for local, national and global communities. • Acting with confidence and strength of purpose for the good of oneself and the different communities represented on our campuses. • Embracing responsibilities to oneself and others in ways that are authentic and meaningful. • Sharing Knowledges and exercising <u>nikânîwin</u> / <u>nihta niikaaniw</u> (i.e., leadership) as acts of individual and community responsibility. 	<p>Development of NP Role Identity (Individual) is a central tenant to development of NP professional attributes and integrated throughout the program. Students are first introduced to NP Role Identity in Theory for Nurse Practitioner Practice, revising this concept in subsequent courses and clinical as they continue to develop and shape their NP role identity. Learning activities provide opportunity for discussion and sharing, as they embrace the new responsibilities of NP practice.</p>	<ul style="list-style-type: none"> • Growth Mindset • Health System Improvement • Knowledge Mobilization • Mentoring and Coaching <p>Program Outcome 5: Demonstrate accountability, autonomy, integrity, and a professional growth mindset in a nurse practitioner role [Professional Attributes].</p>

f. Describe how students can enter this program from other programs (program transferability).

Students cannot transfer into this highly competitive program, they must apply. Transfer credit may be possible as per the Transfer credit policy previously mentioned.

For applicants with a previous MN who are admitted to this program, the requirement to complete NURS 818 and NURS 821 may be waived at the discretion of the Nurse Practitioner Program Admissions subcommittee

g. Specify the criteria that will be used to evaluate whether the program is a success within a specified timeframe.

Program evaluation within the current USask NP program will be applied to evaluate the new MN-NP Program. Evaluation criteria is aligned with the College of Registered Nurses of Saskatchewan (CRNS) program approval criteria and includes:

- A. Structures – effective and adequate structures are in place for program delivery including student numbers (applicant numbers, student enrollment), faculty/instructors, support staff, clinical placements, policies and procedures, technology, and other learning resources
- B. Curriculum – the curriculum supports attainment of program and course learning outcomes, through theory, application and evaluation, student centered learning, and best practices for assessment. Curriculum is evaluated through student course evaluation, instructor course evaluation, course reports, and graduate and alumni survey's with information used for ongoing program improvement.
- C. Outcomes – Successful outcomes for the program include continued low attrition rates, high student success rates in program completion, high NP licensing exam pass rates, high employability of graduates, and positive employer/health agency feedback on graduates.

h. If applicable, is accreditation or certification available, and if so, how will the program meet professional standard criteria? Specify in the budget below any costs that may be associated.

Nurse Practitioner programs receive educational program approval through nurse regulatory bodies, which in Saskatchewan is the College of Registered Nurses of Saskatchewan (CRNS). The program is pursuing approval from CRNS concurrently with University level approvals. Program approval does not have an associated cost outside of the time/workload associated with preparing program approval documents.

The Canadian Association of Schools of Nursing (CASN) is the national accrediting body for nursing education in Canada. Accreditation for Nurse Practitioner programs was first piloted in 2018, then evaluated in 2020. At the present time accreditation is not required and the current accreditation standards are pending update for the 2023 revisions to NP regulation and competencies. There are only three Universities in Canada with NP program accreditation including the University of Alberta, University of Manitoba, and University of Regina and Saskatchewan

Polytechnic Collaborative NP program. <https://accred.casn.ca/our-programs/np-program/>

Consultation:

- a. Describe how the program relates to existing programs in the department, in the college or school, and with other colleges. Establish where students from other programs may benefit from courses in this program. Does the proposed program lead into other programs offered at the university or elsewhere?**

Students who complete the MN-NP program would be eligible to apply for PhD in nursing education programs at the University of Saskatchewan or elsewhere.

- b. List units that were consulted formally and provide a summary of how consultation was conducted and how concerns that were raised in consultations have been addressed. Attach the relevant communication in an appendix.**

College of Nursing MN-Course Based Program (Appendix A): Consultation meetings were held with faculty who teach NURS 821 and NURS 818 which are common courses taken by students in the MN-NP and MN-Professional Practice programs. Discussion revolved around how these courses address the revised NP Entry-Level Competency. In general, faculty felt the current courses supported development of Nurse Practitioner competencies and MN learning outcomes related to research, evidence-based practice and critical inquiry and should continue to be included in the MN-NP program. Question arose on continued inclusion of NURS 818 (graduate statistics) given the MN-NP students are not required to conduct research. However, faculty felt it was integral for students to take this course to promote understanding and interpretation of advanced statistics, ability to discuss and apply evidence-based practice, and take on the leadership roles and knowledge translation activities expected of NPs.

Master of Physician Assistant Studies (MPAS) Program (Appendix B): Several consultations have occurred between the MPAS program and the MN-NP program including formal meetings and informal email correspondence. Discussion has focused on potential for collaboration and interprofessional learning, given the overlapping competencies, roles and graduate level programming.

College of Medicine Continuing Education Department (Appendix C): Recognizing the potential for interprofessional collaboration and enhancing integration of anti-racism, oppression, health equity and Indigenous health competencies, which is consistent with the revisions to the NP entry-level competencies, the program is collaborating with the College of Medicine Continuing Education Department to integrate their [Role of Practitioners in Indigenous Wellness course](#) into the NP curriculum. This online program is currently taken by all 4th year undergraduate medical students and first year post graduate students (Residents) as well as taken electively by practicing health care providers across Canada. Email correspondence related to collaborative efforts to integrate this course into NP curriculum is included in appendix C.

Clinical Learning Resources Center (CLRC) (Appendix F): The MN-NP program utilizes the resources and supports of the CLRC for onsite and remote clinical labs. Consultation has occurred related to the capacity of the CLRC to support the revised lab activities and schedule proposed in the new MN-NP program. The impact is perceived to be minimal, encompassing an additional 2-days of onsite bootcamp that will occur on the weekend and are unlikely to interfere with other CLRC activities. Proposed schedules for both the additional 2- day on site experience as well as the week- long residency has been negotiated with the CLRC and has been added to their schedule starting in September 2026 on a yearly basis.

College of Graduate and Postdoctoral Studies: Regular consultation has occurred with the College of Graduate and Postdoctoral Studies (CGPS) to discuss program revisions, seek advice on process and ensure fit of the revised program with CGPS policy.

- c. Proposals that involve courses or other resources from colleges outside the sponsoring unit should include evidence of consultation and approval. Please give special consideration to pre- and co-requisite requirements when including courses from other colleges.***

Not applicable

- d. List other pertinent consultations and evidence of support, if applicable (e.g., professional associations, accreditation bodies, potential employers, etc.).***

College of Registered Nurses of Saskatchewan (CRNS) (Appendix D):

The *Registered Nurses Act, 1988* authorizes CRNS to approve entry-to-practice nursing programs in Saskatchewan, which includes nurse practitioner programs. This regulation helps ensure entry level RNs and NPs have the knowledge, skills, and judgement (competencies) to practice safely, ethically and competently. Entry-level NP programs in Saskatchewan must receive program approval from CRNS for graduates to be eligible to proceed with registration and licensure as an NP. Consultation through formal meetings and email correspondence has occurred between CRNS and Saskatchewan NP programs regarding requirements and processes to incorporate regulatory changes. See appendix D for example documentation from one of the meetings held between CRNS and NP Educators. MN-NP program approval from CRNS is being sought concurrently with University-level approval to support timely implementation of the revised MN-NP program, and education of NPs to meet the healthcare needs of Canadians.

Saskatchewan Association of Nurse Practitioners (SANP) (Appendix E):

SANP is the professional association for NPs in Saskatchewan, advocating on behalf of NPs and supporting NP professional development. A consultation meeting with SANP provided opportunity to discuss their perceived gaps in current NP education to address the revised ELCs and opportunities for enhancing education of entry-level NPs. See appendix E for consult notes from this meeting.

Budget:

The ***Budgetary and Financial Implications Form*** must be completed to determine the cost impact of the proposed program. **Information about budget and financial implications appears in that form.**

College Statement

Please provide here a statement from the College which contains the following:

- Recommendation from the College regarding the program
- Description of the College process used to arrive at that recommendation.
- Summary of issues that the College discussed and how they were resolved.

Related Documentation

In the submission, please attach any related documentation which is relevant to this proposal, such as:

- Relevant sections of the College's/School's plan
- Accreditation review recommendations
- Letters of support - if courses from colleges outside the sponsoring unit are required, please include letters of support for each.
- Memos of consultation
- External Agreements – if the new program or major revision is dependent upon an external partnership or agreement, this must be completed and included.

Consultation Forms Attach the following forms, as required.Required for all submissions:

- Consultation with the Registrar form (Note: this form will be completed by SIS during the Consultation with the Registrar meeting. Completion is based upon the proposal and the meeting discussion; no preliminary work from the college is required).
- Budget forms, including tuition.

- Complete Catalogue entry, if proposing a new program, or excerpt of existing program with proposed changes **marked in red**
- Please include admission requirements, complete program of study, and all new, deleted or changed courses in the entry.
- Entry for marketing website: admissions.usask.ca/programs/find-a-program OR gradprograms.usask.ca as appropriate.
- Entry for the Tuition website: students.usask.ca/money/tuition

Required for all new courses:

- New Course Proposal Form

Required if resources needed: Please consult the attached checklist below for a list of necessary forms to be completed and included in the application package.

Submission of Form:

Please submit all completed Proposal for Curricular Changes and other required forms to this email address: academic_programs@usask.ca

Academic Programs Approval Process
Checklist of forms and consultations to be completed before submission of a *Proposal for New Programs or Curricular Changes* to Academic Programs Committee of Council

	Required Consultation/Office	Required Form (as applicable)	Date completed (if not required, briefly explain why)	Who did you meet with
1	Consultation with other colleges re: impact or similar programs	N/A		
2	Financial Sustainability/Tuition Review	<i>Budgetary and Financial Implications Worksheet</i>		Mark Tomtene/Con
3	Consultation with Manager, Admissions and Transfer Credit	<i>Admissions Template</i>		CGPS
4	Budget Consultation with Institutional Planning and Assessment	<i>Budgetary and Financial Implications Worksheet</i>		
5	Provost sign-off on Budgetary and Financial Implications Worksheet	<i>Budgetary and Financial Implications Worksheet</i>		
6	Secure College Faculty Council Approval	<ul style="list-style-type: none"> • <i>Proposal for Academic or Curricular Change Form</i> • <i>Completion of Physical Resource and Space Requirement Form</i> • <i>Completion of Library Requirement Form</i> • <i>Completion of ICT Requirement Form</i> • <i>Completion of New Course Creation Form</i> • <i>Completion of Catalogue Entry</i> 	<p>October 7</p> <p>N/A</p> <p>Forthcoming</p> <p>Yes –Appendix G</p> <p>Yes –included</p>	<p>CON Faculty Council</p> <p>Erin Langman</p> <p>Shiv Adapa</p>
7	(For graduate programs) Secure College of Graduate and Postdoctoral Studies Approval	(As above)		
8	Consultation with Registrar	<i>Consultation with the Registrar Form (completed during the consultation)</i>		

Consultation Meeting for Revised NP Program re NURS 821 – Outcomes Based Research

Date: December 12, 2023

Attendees: Janet Luimes (USask NP Program), Wanda Martin (College of Nursing Faculty and NURS 821 Instructor); this course was also discussed with Faculty member Sarah Stahlke who taught NURS 821 in fall 2023 at a separate meeting due to difficulty coordinating a common time

Discussion:

- Both Wanda and Sarah felt the name should be changed to Evidence Informed Practice which would better reflect the course; Outcomes Based Research is a specific type of research and this course focuses on more than that
- Both Wanda and Sarah felt the course was relevant to NP students, with potential to incorporate revised NP ELCs to a higher degree/depth within the current course description and learning outcomes
- Critical Appraisal –addressed currently but could be addressed in more depth (i.e. use of perusal, critical appraisal of articles)
- Indigenous research – addressed within general discussion of research ethics/methods
- Text book: Achieving Evidence-Based Practice (Hamer)
- Dr. Pammla Petrucka is developing a course on applied research i.e. mixed methods, quality improvement, program evaluation, community based research that may have applicability to NP students
- Assignments/Evaluation: Paper (can be a group paper or individual), 2 quizzes (to make the evaluation manageable), Policy Brief Presentation
 - o Paper on something in practice that needs change
 - o Presentation (individual) – consideration of policy implications of the practice change (from paper) and present a 3 minute policy brief
- Discussed focusing course on foundations for evidence-based practice/applying research including:
 - o Foundations of research methodologies (rigour, ethics, design etc.)
 - o Critical appraisal of research
 - o Understanding/interpreting Statistics (vs a whole course in statistics; students likely don't need to be able to run statistical analysis in SPSS and this take a lot of time in 818)
 - o Identification/writing of research question
 - o Literature review
 - o All of these could be addressed within current course with minor revisions
- Discussed dedicated course related to quality improvement/program evaluation which could address some of these things in greater depth

Consultation Meeting for Revised NP Program re NURS 818 – Applied Statistics Course

Date: December 13, 2023

Attendees: Janet Luimes (NP Program Academic Lead), Anne Hyde (Limited Term Lecturer, NP program), Schroder Sattar (818 instructor), Hui Li (818 instructor), Sithokozile Maposa (Graduate Program Chair and 818 instructor)

Discussion

Question 1: How do you see NURS 818 fitting with revised NP ELCs

- Schroder, Hui, and Sithokozile discussed importance of NP student understanding statistics and statistically analysis to appropriately interpret, discuss and apply these concepts in their practice (i.e. explaining absolute risk to patients vs relative risk, interpreting findings of studies/guidelines to apply in practice)
- With expectations for NPs to take on enhanced leadership, statistics necessary to appropriately conduct program evaluation, discuss concepts with other professionals, enhance credibility
- Statistics is important to demonstrate nurses have advanced knowledge – particularly when interacting with other health professionals (i.e. MDs, PA, administrators, etc.)
- Important to help advocate for NP roles/positions – i.e. prove NPs value/worth

Question 2: What revisions, if any, would you propose to help better meet revised ELCs or CASN MN domains/learning outcomes?

- There have been recent changes to the name of the course (applied statistics) and description
- Enhance link across other NP courses to the importance of NPs understanding statistics (i.e. in discussion of diagnostic investigations, relative risk, program evaluation)
- Explicit mapping to program outcomes/ELCs
- Some discussion on whether or not SPSS required/actually running statistics – felt that yes it does help the students to better understand, as well as to be able to pick out appropriate tests if they are doing research (i.e. program evaluation, quality improvement)

Question 3: Do you think USask NP students should be required to take a dedicated graduate level statistics course?

- All felt YES (Schroder Sithokozile, Hui) – discussion on how having this course indicates the level of program being studied as graduate level, and expectations for this level of study
- Also discussion about how statistics is important to other NP competencies like leadership, quality improvement, collaboration/team work, establishing credibility, advanced scope of practice
- Needs to be separate from research course/evidence-based practice which will focus more on application of stats to research methods

Re: letter of support for MPAS

Domes, Trustin <trustin.domes@usask.ca>

Wed 2024-03-06 1:35 PM

To: Maslin, Crystal <crystal.maslin@usask.ca>; Luimes, Janet <janet.luimes@usask.ca>

Cc: Manoharan, Gayathri <gayathri.manoharan@usask.ca>; Pike, Kaitlin <kaitlin.pike@usask.ca>

Janet, it was great meeting with you today. Thanks so much for your support and willingness to collaborate with us so both our programs can prosper in Saskatchewan. We will keep you up to date and will look at having another collaborative meeting with you and any others you think should be invited from the NP program in the near future.

Trustin

Trustin Domes MD, MEd, MCPM, FRCSC

Associate Professor of Surgery

Director of Admissions, Undergraduate Medical Education Program

Academic Director, Master of Physician Assistant Studies (MPAS) Program

College of Medicine

University of Saskatchewan

"Education is not simply helping someone to know something, but it is also helping that person become someone."

Gloria Dall'Alba

"Small wins fuel transformative changes by leveraging tiny advantages into patterns that convince people that bigger achievements are within reach." Charles Huhigg

From: Maslin, Crystal <crystal.maslin@usask.ca>

Sent: March 6, 2024 2:13 PM

To: Luimes, Janet <janet.luimes@usask.ca>

Cc: Domes, Trustin <trustin.domes@usask.ca>; Manoharan, Gayathri <gayathri.manoharan@usask.ca>; Pike, Kaitlin <kaitlin.pike@usask.ca>

Subject: letter of support for MPAS

Hi Janet,

Thank you for meeting with Trustin regarding the MPAS program earlier today. He shared that you two have identified opportunities to collaborate on research projects, re AI in healthcare, procedural skills training, advanced communication, clinical placements, etc. That is exciting to hear!

As Trustin would have mentioned we would appreciate a letter of support from you in your role as Director of the Nurse Practitioner program. **Would a letter by March 18 be possible?** That would allow us to include your letter in the next iteration of the document package when it is presented to Academic Programs Committee of University Council.

Guidance re: letters of support

- Please use your college letterhead
- Address your letter to Dr. Marilyn Baetz as interim dean and cc it to Kaitlin Pike (copied) and Trustin Domes
- You may wish to include the following types of information:
 - Your role and position
 - How you would hope to collaborate with a Physician Assistant program at USask

- o Anything else you would wish to share about Physician Assistants

Kind regards
Crystal

Crystal Maslin, MA, MCPM, Prosci® Certified Change Practitioner
Director, Planning and Projects
Pronouns: she/her

University of Saskatchewan
College of Medicine
Health Sciences Building, suite 4A20 room 13
Ph 306-966-6021



In Canada, we live, learn, and work on traditional Indigenous territories. In Saskatchewan I would like to acknowledge the First Nations (Nêhiyawak (Plains Cree), Nahkawiniwak (Saulteaux), Nakota (Assiniboine), Dakota and Lakota (Sioux), and Denesuline (Dene/Chipewyan), Métis and Inuit peoples and their ancestors; and, affirm my commitment to respectful relationships with one another and this land

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Re: Role of Practitioenrs in Indigenous Wellness course

Usunier, Kendra <kendra.usunier@usask.ca>

Tue 2024-09-10 10:00 AM

To:Luimes, Janet <janet.luimes@usask.ca>

Cc:McDonald, Amanda <a.mcdonald@usask.ca>;Newton, Maxine <maxine.newton@usask.ca>

Hi Janet,

This is wonderful news! We will draft an MOU for you guys to review, and then get the course build ready and talk through the specifics of the course logistics.

Exciting news! Thank you so much for your interest in this course. Talk soon!

Kendra Usunier, BMR(PT), MCISc, FCAMPT

she/her

Program Director, Continuing Education in Rehabilitation Science

University of Saskatchewan

School of Rehabilitation Science, College of Medicine

Ph: 306-966-7473

<https://rehabscience.usask.ca/cers>

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From: Luimes, Janet <janet.luimes@usask.ca>

Date: Monday, September 9, 2024 at 1:18 PM

To: Usunier, Kendra <kendra.usunier@usask.ca>

Cc: McDonald, Amanda <a.mcdonald@usask.ca>, Newton, Maxine <maxine.newton@usask.ca>

Subject: Re: Role of Practitioenrs in Indigenous Wellness course

Hello Kendra,

I have (finally) received approval to have the USask NP Students take the Role of Practitioners in Indigenous Wellness course. The plan would be to integrate this course into the NURS 885: Therapeutics I Individual to Community course which is offered in the winter term (Jan 9 - Apr 3). There will be approximately 40 students enrolled in this course this winter.

I am wondering the next steps to proceed with setting this up for the winter term and look forward to talking with you.

Kind regards,

--Janet Luimes

Janet Luimes, NP, MScN
NP Programs Academic Lead & Associate Professor
USask College of Nursing

From: Usunier, Kendra <kendra.usunier@usask.ca>

Sent: 23 April 2024 9:54 AM

To: Luimes, Janet <janet.luimes@usask.ca>; Barton, James <james.barton@usask.ca>

Subject: Re: Role of Practitioners in Indigenous Wellness course

Hi Janet,

I'm pleased to hear you remain interested in our course. I've cc'd my co-chair in this program, Dr. Jim Barton. Attached is a detailed outline and description of the course. This describes in detail the assignments within the course, and the overall objectives of the course. There are rubrics for all discussions, journals and assignments that learners have access to, and review as part of course introduction.

With regards to remediation processes for our undergraduate medical education (UGME) students and post graduate medical education (PGME) students we default to the policy and procedure of their program and of the course syllabus that our RPIW course is embedded within. If a learner is completely 'off' in a response, they are given that opportunity to resubmit the assignment. As there are several discussions, reflections and assignments within this course we find that most learners do not require remediation. They receive timely feedback on early assignments, which help with redirection as needed. If you elected to have RPIW as part of one of your Nurse Practitioner courses we could meet ahead of time to ensure we can work within your programs policy and procedure and expectations of the course syllabus that RPIW is embedded within. Please see this [example](#) in UGME where they host our RPIW course.

Our course facilitators are Indigenous individuals with health professional education and/or graduate level training. All facilitators have experience in course instruction and evaluation, and are overseen by myself. We are fortunate to have a highly skilled and insightful group of facilitators.

I hope this answers the questions brought forward. Dr. Barton, if there is anything I missed, please feel free to add. Janet, if you have any other questions, please let me know. I would also be happy to meet if that helps.

Take care,

Kendra Usunier, BMR(PT), MCISc, FCAMPT

she/her

Program Director, Continuing Education in Rehabilitation Science

University of Saskatchewan

School of Rehabilitation Science, College of Medicine

Ph: 306-966-7473

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From: Luimes, Janet <janet.luimes@usask.ca>
Date: Monday, April 22, 2024 at 1:22 PM
To: Usunier, Kendra <kendra.usunier@usask.ca>
Subject: Re: Role of Practitioenrs in Indigenous Wellness course

Hello Kendra,

In follow-up to my email in January, I have been advocating for funding for our NP students to take this course. My Associate Dean is requesting additional information I am hoping you may be able to help with.

1. Can you share a course outline and learning outcomes?
2. Is there a remediation option if a learner is not successful? i.e. Do you know what would happen/process if a Medical Student or Resident didn't successfully complete the course?
3. Who are the course facilitators (I think she is wanting to know background/qualifications)?

Thank you,

--Janet

From: Usunier, Kendra <kendra.usunier@usask.ca>
Sent: 12 January 2024 3:22 PM
To: Luimes, Janet <janet.luimes@usask.ca>
Subject: Re: Role of Practitioenrs in Indigenous Wellness course

Hi Janet,

Thank you so much for reaching out and expressing your interest. We are so pleased to hear about your interest in the course. Currently all 4th year under graduate medical student take this course embedded within their "Preparation for Residency" Course and all medical residence (PGME) are required to take this course. We provide those learners with the student rate of \$250/learner. We collect the names and then just JV the funds to the respective CFOPALS.

If you're interested this is certainly something we could arrange for you. Also if there is a specific time of year you think would be better for your learners we can arrange to hire a facilitator just for your group. Or if you'd like to meet to discuss further, just let me know.

Take care, and stay warm!

Kendra Usunier, BMR(PT), MCISc, FCAMPT

she/her

Program Director, Continuing Education in Rehabilitation Science

University of Saskatchewan

School of Rehabilitation Science, College of Medicine

Ph: 306-966-7473

<https://rehabscience.usask.ca/cers>

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From: Luimes, Janet <janet.luimes@usask.ca>

Date: Friday, January 12, 2024 at 12:19 PM

To: Usunier, Kendra <kendra.usunier@usask.ca>

Subject: Role of Practitioners in Indigenous Wellness course

Hello Kendra,

I am the academic lead for the USask Nurse Practitioner (MN-NP) Program. I am interested in the Role of Practitioners in Indigenous Wellness course, as I think it may have excellent applicability to NP competencies related to Indigenous health. Do you offer any group rates for registration for this course (i.e. if we were to enroll a cohort of students)?

Kind regards,

--Janet Luimes, NP

Janet Luimes, NP, MScN

NP Programs Academic Lead & Associate Professor

USask College of Nursing

Meeting with Deans & Educators– Jan. 12, 2023

Implementation of the Revised CRNS Nurse Practitioner (NP) Entry-Level Competencies (ELC) (2023)

Agenda

1. Background
2. Key changes between the 2017 CRNS NP ELCs and the 2023 CRNS NP ELCs
3. Responsibilities of a practicing NP in Saskatchewan with the implementation of revised CRNS NP ELCs
4. Update on NP Exam & Update from CCRNR NP Steering Committee
5. Implications for the Programs & Curriculum Revision
6. Implications for Program Approval

1. Background – Shayna

- The Canadian Council of Registered Nurse Regulators (CCRNR) first published national entry-level competencies for Nurse Practitioners in Canada in 2016 and the 11 provincial/territorial regulatory bodies that regulate the practice of registered nurses and nurse practitioners adopted the 2016 NP ELCs Regulatory documents. ELCs revisions are required periodically to reflect evolving population needs, health system, and NP practice.
- In 2020, CRNS worked with other Canadian nursing regulatory bodies to develop the Nurse Practitioner Regulation Framework Implementation Plan Project (NPR-FIPP). One of the activities of this NP Steering Committee was to revise the 2017 national entry-level competencies for Nurse Practitioners.
- Once the NP Steering Committee work was completed, the ELCs were endorsed, nationally, by Canadian Council of Registered Nurse Regulators Board (CCRNR).
- Each nursing regulatory body followed their jurisdictional process for adopting, approving, modifying, and implementing the ELCs - resulting in a variety of implementation dates.
- The NP ELCs were approved by CRNS Council on Feb. 7, 2023, approved by the Saskatchewan Minister of Health on Aug. 11, 2023, and came into force and effect September 25, 2023.

2. Key changes between the 2017 CRNS NP ELCs and the 2023 CRNS NP ELCs – Donna

- The NP ELCs encompassed and built on the Registered Nurse ELCs, focused on distinct competencies for NPs.

- The 2017 CRNS NP ELCs were focused primarily on the clinical practice of NPs, the competences were enhanced to prepare NPs to practice across the lifespan, and enhance leadership skills in all domains, and practice settings
- The revised NP ELCs prepare NPs to practice in all domains and practice settings across the lifespan.
- The structure of document changed with introduction of a role-based framework to be more consistent with the current national RN ELCs.
- Performance indicators were developed to provide additional direction for each competency.
- Competencies and performance indicators were developed to further support the NP ELCs in the following areas: virtual care, environmental impact, health promotion and disease prevention, self-employment expectations, mental health, resource stewardship and safety expectations.
- The following areas were also enhanced:
 - Promotion of knowledge translation and NP contributions to research initiatives.
 - Leadership skills to support all domains of NP practice.
 - Competencies to address racism and oppression.
 - Competencies to provide culturally safe care for Indigenous people.

3. Responsibilities of a practicing NP in Saskatchewan with the implementation of revised CRNS NP ELCs - Cheryl

- The revised NP ELCs prepare students for general NP practice across the life span of clients in all practice settings.
- Practicing NPs are accountable to practice in accordance with the current CRNS RN ELCs, RN Practice Standards, NP ELCs, NP Practice Standards, and the Canadian Nurses Association's Code of Ethics for Registered Nurses.
- Practicing NPs are expected to review the revised NP ELCs as part of their self-assessment for Continuing Competence Program to determine areas for professional development.

4. Update on NP Exam & Update from CCRNR NP Steering Committee – Donna & Shayna – review when we review the new summary being published through CCRNR. Supposed to be released Dec. 4, 2023.

- The work toward the new model of NP regulation across Canada continues to move forward which includes:
 - Graduate-level education programs that align with revised NP ELCs.
 - A single national NP entry-level exam for all NPs across Canada – exam will be ready for 2026. As of November, 2023, we do not have a set date as to when the current exam will sunset. As such, this may require both exams (a current approved NP exam and the exam being developed) may need to be offered for a period of time.
 - One registration category for NPs.
 - Eventually, regulators will no longer be registering new NPs in specialties.
- The ultimate goal is that across Canada, all NP entry-level education programs will prepare students for general NP practice across the lifespan of clients in all practice settings.
- The majority of jurisdictions have approved the NP ELCs and regulatory bodies are working with educational institutions to implement curriculum changes.
- NP Practice Analysis –Meazure working with the NP Practice Analysis Project Advisory Committee (PAPAC), group Subject Matter Expert NPs, at an in-person meeting planned for Nov. 30–Dec. 2. There will be an NP survey that will be ready to disseminate in early 2024.
- The CCRNR Legacy subcommittee work is underway to provide options to the jurisdictions about how NPs currently practicing in specialties will continue to be regulated.
- National work is underway to determine how NP speciality practice will be managed in the future once jurisdictions are registering NPs in one category.

5. Implications for the Programs & Curriculum Revision – Carole & Terri

6. Implications for Program Approval – Carole & Terri

7. Questions & Wrap Up

Consultation Meeting with Saskatchewan Association of Nurse Practitioners (SANP) re NP Program Revisions

Date: October 26, 2023

Attendees: Michelle O'Keefe (SANP President), Toni Giraudier (SANP Board Member – Education Portfolio), Maxine Newton (USask NP Program Coordinator), Anne Hyde (USask NP Program Faculty), Janet Luimes (USask NP Program Faculty)

Admission and Discharge

- Michelle feels current programs prepare students for admission and discharge for ITC; as well as select conditions (e.g., pneumonia, cellulitis); however feels other acute care roles/specialty should be micro-credentials
- Post-graduate courses for specialty areas; the acute care UofT program for specialty care areas
- Michelle is looking at developing residency program for NPs as part of her PhD
- Discussed that specialty care is not really entry-level – some will need to occur after
- Coming out of entry-level program – you can manage primary care, ITC, CTAS 3
- Employer supported residency programs to help NPs develop skills for specialty areas
- Family All Ages is the base – specialty is added onto this not part of entry-level

Counselling

- All NP programs could benefit from enhanced mental health
- CBT skills; graded exposure; activity scheduling; developmental considerations
- Group vs individual therapy
- Crisis management
- Group intervention
- How to teach people coping skills
- Safety Planning (around Suicidal Ideation)
- Rating scales – objective measures of mental health
- CBT in 10-minutes;
- Clinical – see a counsellor in action
- Bare bones of CBT

Advocacy

- Employer relations
- Political advocacy; It's part of your practice whether you like it or not
- Application – Media consultant; media relations training

- **Michelle commented she feels RNs have the advocacy competencies – they just need time to do it**
- **Professional networking/relationships with other fields i.e. politics, employers, health agencies, unions**
- **How NPs are funded, how your position works/fits within the HC systems, governing hierarchy of nursing/NP role; understanding how NP fits in the HC system**
- **? Course on Health Systems/health system change**
- **Toni voiced she feels that programs are doing a good job of addressing health disparities and cultural competence**
- **Reach out to Indigenous representatives/stakeholders for their stance on knowledge gaps**
- **Understanding of partnering with communities**

Other topics of Discussion:

- **Consider Name of Program from Primary Health Care NP Program to NP Program (general)**
- **Consider transferability of competencies across settings**

Hi,

I have tentatively booked all three weekends for you just in case one of the Licensing Exams is cancelled.

Thank you both for being so understanding.

Helen

From: Newton, Maxine <maxine.newton@usask.ca>
Sent: Wednesday, September 18, 2024 5:40 PM
To: Pocha, Helen <helen.pocha@usask.ca>; Luimes, Janet <janet.luimes@usask.ca>
Cc: Andersen, Corinne <corinne.andersen@usask.ca>
Subject: Re: Nurse Practitioner program future residency week schedule

Hello,

Janet and I have discussed this and the 4th weekend in September starting in 2026 will also work for us.

Kindest regards,

Maxine Newton, RN, BScN
she/her
Nurse Practitioner Programs Coordinator

University of Saskatchewan
College of Nursing
Ph: 306-966-1490

**[Support Be What the World Needs - the Campaign for USask
give.usask.ca](https://give.usask.ca)**

I acknowledge that I live and work on Treaty 6 Territory

and the Homeland of the Métis. We pay our respect to the First Nations and Métis ancestors of this place and reaffirm our relationship with one another.

Confidentiality Notice: This message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure, or distribution is strictly prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

From: Pocha, Helen <helen.pocha@usask.ca>
Sent: Wednesday, September 18, 2024 3:03 PM
To: Luimes, Janet <janet.luimes@usask.ca>; Newton, Maxine <maxine.newton@usask.ca>
Cc: Andersen, Corinne <corinne.andersen@usask.ca>
Subject: RE: Nurse Practitioner program future residency week schedule

Thank you, I will let you know.
Helen

From: Luimes, Janet <janet.luimes@usask.ca>
Sent: Wednesday, September 18, 2024 3:03 PM
To: Pocha, Helen <helen.pocha@usask.ca>; Newton, Maxine <maxine.newton@usask.ca>
Cc: Andersen, Corinne <corinne.andersen@usask.ca>
Subject: Re: Nurse Practitioner program future residency week schedule

Hi Helen,

Thank you for this update. We are flexible on dates, if late August or early October is better, this could work too.

--Janet

From: Pocha, Helen <helen.pocha@usask.ca>
Sent: 18 September 2024 2:33 PM
To: Newton, Maxine <maxine.newton@usask.ca>; Luimes, Janet <janet.luimes@usask.ca>
Cc: Andersen, Corinne <corinne.andersen@usask.ca>
Subject: RE: Nurse Practitioner program future residency week schedule

Good afternoon,

We may need to reevaluate the September weekend dates as we just realized the we have two National Licensing Exams tentatively booked on September 13 and 20, 2026. There is a possibility we will only be holding one of them which will more than likely be on the 20th. We will keep you posted when we receive more information.

Sorry for the miscommunication.

Thank you.

Helen



UNIVERSITY OF
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Information Technology Requirements for New Programs and Major Revisions

This form is to be completed by the faculty member responsible for the program proposal in consultation with Information and Communications Technology. Contact ICT Client Services (phone 4827) for assistance.

Attach the completed form to the program proposal prior to submission to the Academic Programs Committee. Additional comments may also be attached if required.

1. Proposal Identification

Full name of program: **Master of Nursing Nurse Practitioner**

The NP program is in the process of replacing the current MN-NP primary health care and Post-Graduate Specialty certificate programs with a new Generalist Master of Nursing- Nurse Practitioner program. So nothing will change from IT point of view and for the most part the support they need for programs from ICT is no different than the support they are getting right now with the existing courses

2. Distance Education

Does the new/revised program include courses that are delivered by 'distance education'? **Yes** No

- We recommend to reach out to the instructional designers in the Gwenna Moss Centre for Teaching Effectiveness (GMCTE) as they can provide excellent assistance with that

Face-to-face off-campus

Web-based

Televised

Other (specify)

Multi-mode

Synchronous online graduate seminars

Independent Study

3. Network Requirements

3.1 Does the program have any new special network requirements? No

No, network requirements are unchanged from existing program

Yes, the program has the following new network requirements:

Video transmission (specify)

General Web and e-mail usage

Large (10MB or more) file transfers

Other (specify)

3.2 Does the program require any new access to the Internet or the Canadian Research network?

No, existing access and bandwidth (speed) are adequate

Yes, additional network access is required

Describe new requirements (e.g. type of access, room numbers, number of computers, bandwidth required):

3.3 Will students require new access to University IT resources (e.g. library, e-mail, computer labs, etc.) from their homes?

No, home access requirements are unchanged from existing program

Yes, students will require new access to IT resources from home (please clarify the access required and how it should be provided):

4. **Software Requirements** Please list the software that will be required for the program (e.g. e-mail, web pages, SPSS, discipline-specific software, etc.), and indicate where it needs to be available. Include cost estimates for initial purchase and ongoing support/upgrading, if applicable.

n/a

5. **Hardware Requirements**
Please list any special IT hardware required for the program (e.g. high performance workstations, colour printers, scanners, large disk space, etc.) and indicate whether the new hardware will be provided by the college/department or centrally by the University. Include cost estimates for initial purchase and ongoing support/upgrading.

n/a

6. **Computer Lab Access**

Does the program have new computer lab access requirements? **NO**

Computer lab access requirements are unchanged from existing program

General ('walk-in') access is required hours/week/student

Access for classes/tutorials is required hours/week/student

Estimated number of students in program: **40 admits per academic year**

7. **Student IT Support**

Please describe any new requirements for student IT support (e.g. number of hours training per term, training topics, number of hours of user support per week during office hours and evenings/weekends). **None**

8. **Faculty IT Support**

Please describe any new requirements for faculty IT support (e.g. number of hours training per year, training topics, number of hours of one-on-one support per year, support for course development, support for desktop hardware, software and peripherals, other). **None**

9. **Impact on Institutional Systems**

Please describe any changes that may be necessary to institutional systems in order to support the proposed program (e.g. student information system, telephone registration system, financial systems, etc.). Provide an estimate of the cost of systems modifications. Refer to modifications identified in the Office of the Registrar Consultation Form if applicable.

n/a – no changes required, business as usual

Date: September 10, 2024

Information and Communications Technology – Shiv Adapa

Faculty Member (sponsoring college/dept) – Professor Janet Luimes

NURSING

Master of Nursing (M.N.): Nurse Practitioner

The M.N. degree is designed to prepare graduates in a specialized area of nursing practice within the context of a professional graduate education.

The MN Nurse Practitioner (MN-NP) program prepares nurse practitioners who will work in diverse health care settings with all ages. The program will prepare graduates to achieve regulatory standards and competencies, critical inquiry skills, knowledge in health care improvement, and professional attributes required of entry-level nurse practitioners.

Graduates will be prepared to write the CNPE and will be eligible to apply for registration as Nurse Practitioner in Saskatchewan as well as other Canadian jurisdictions.

Admission Requirements

- A bachelor's degree in nursing (BSN), from a recognized college or university
- A cumulative weighted average of at least 75% (U of S grade system equivalent) over final 60 credit units of the BSN or approved post BSN post-secondary courses.
- Current Licensure as a Registered Nurse in a Canadian province or territory
- 3600 hours of clinical practice in Canada as a Registered Nurse within the past five years
- Equivalent of three credit units in each of physical assessment, pharmacology, physiology, statistics, and research methods at the undergraduate level
- [Language Proficiency Requirements](#): Proof of English proficiency may be required for applicants to graduate programs. Proof of English proficiency may be demonstrated through:
 - A minimum of three consecutive years of full-time study or completion of a graduate degree at a recognized post-secondary institution, where the exclusive language of instruction and examination of the program and/or institution is English; or
 - Provision of evidence of English language proficiency, using one of the approved tests listed in the English Language Proficiency Policy. Acceptable test scores are as follows:
 - TOEFL: a combined minimum total score of 94, with a minimum of 24 out of 30 in the writing component, and a minimum of 22 out of 30 in the reading, listening, and speaking components.
 - IELTS: an overall score of 7.0 with no score below 6.5 in each area
- Statement of intent
- Up-to-date CV

Seat Allocation

- Saskatchewan applicants will be prioritized to fill seats funded by the Saskatchewan Ministry of Advanced Education.
 - Proof of Saskatchewan residency will need to be provided
- 16.67% of seats will be reserved for students of Indigenous ancestry annually.

- Admission assessment of applicants begins with those indicating on their application that they wished to be considered for an equity seat.
- Dedicated seats in the program are reserved for persons of Indigenous ancestry. Applicants of Indigenous descent may compete with this category, rather than within the entire applicant pool. Applicants should identify themselves as Indigenous on the supplemental application form and proceed by completing the verification process led by the [deybwewin | taapwaywin | tapewin: Indigenous Truth policy](#) and Standing Committee by the document deadline. Please visit the [Indigenous Membership/Citizenship Verification channel in PAWS](#) and proceed through the verification system.
- Saskatchewan Indigenous applicants will be prioritized for these seats followed by out of province students for any unfilled equity seats. Equity seat allocation will involve a competitive process based on admission criteria evaluation.
- Priority for seats beyond the seats reserved for Saskatchewan students will be given to student from the Yukon, Northwest Territories, and Nunavut where there is currently no NP program offered, as well as rural/remote areas of Western Canada to fit with the Learn where you Live approach of the College of Nursing.

Degree Requirements

NOTE: Several courses in the M.N. Nurse Practitioner program require a passing grade of 70%. These courses are as follows: **NURS 830.3** Theory for Nurse Practitioner Practice, **NURS 832.3** Pathophysiology and Pharmacology for Nurse Practitioner Practice I, **NURS 833.3** Pathophysiology and Pharmacology Nurse Practitioner Practice II, **NURS 834.3** Advanced Health Assessment & Diagnostic Reasoning I, **NURS 835.3** Advanced Health Assessment & Diagnostic Reasoning II, **NURS 836.3** Transition to Nurse Practitioner Practice, **NURS 831.3** Therapeutic Foundations for Nurse Practitioner Practice, **NURS 840.3** Nurse Practitioner Clinical Residency I, **NURS 841.3** Nurse Practitioner Clinical Residency II, **NURS 842.3** Nurse Practitioner Clinical Residency III, **NURS 837.3** Nurse Practitioner Clinical Roles I, **NURS 838.3** Nurse Practitioner Clinical Roles II, and **NURS 839.3** Nurse Practitioner Clinical Roles III.

Students with relevant graduate level course equivalency completed in statistical methods or evidence informed practice may be exempt from completing up to 6 credit units of course work, as determined by the program.

- GPS960.0 Introduction to Ethics and Integrity
- GPS961.0 Ethics and Integrity in Human Research, if research involves human subjects
- GPS962.0 Ethics and Integrity in Animal Research, if research involves animal subjects

A minimum of 45 credit units, including the following:

- NURS 818.3 Applied Statistical Methods in Nursing
- NURS 821.3 Evidence Informed Practice in Nursing
- NURS 990.0 Seminar
- NURS 830.3 Theory for Nurse Practitioner Practice

- NURS 832.3 Pathophysiology and Pharmacology for Nurse Practitioner Practice I
- NURS 833.3 Pathophysiology and Pharmacology Nurse Practitioner Practice II
- NURS 834.3 Advanced Health Assessment & Diagnostic Reasoning I
- NURS 835.3 Advanced Health Assessment & Diagnostic Reasoning II
- NURS 836.3 Transition to Nurse Practitioner Practice
- NURS 831.3 Therapeutic Foundations for Nurse Practitioner Practice
- NURS 840.3 Nurse Practitioner Clinical Residency I
- NURS 841.3 Nurse Practitioner Clinical Residency II
- NURS 842.3 Nurse Practitioner Clinical Residency III
- NURS 837.3 Nurse Practitioner Clinical Roles I
- NURS 838.3 Nurse Practitioner Clinical Roles II
- NURS 839.3 Nurse Practitioner Clinical Roles III

Please note that students who are unsuccessful in completing any two courses within a graduate program in the College of Nursing will be recommended to be required to discontinue.



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**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE & POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 830**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Theory for Nurse Practitioner Practice**
Course Short Title (maximum 30 characters): **Theory for NP Practice**
- 2.4 Total Hours: Lecture **Seminar - 39 hours** Lab Tutorial Other
- 2.5 Weekly Hours: Lecture Seminar **3-4** Lab Tutorial Other
- 2.6 Term in which it will be offered: **T1** T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **Admission to the MN-NP program**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **This course will explore and evaluate theoretical aspects, issues, and roles in nurse practitioner practice.**
- 2.9 Do you allow this course to be repeated for credit? **NO**

3. Please list rationale for introducing this course: This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).

4. Please list the learning objectives for this course:

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a

novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Demonstrate understanding of the roles and responsibilities of nurse practitioners including regulation and legislation related to the expanded scope of practice. (NP Practice Standards, NP ELC 1.15, CASN MN Outcomes 3.2.1 & 4.2.2)
2. Evaluate the historical, philosophical, theoretical, and socio-political foundations of nurse practitioner practice. (CASN MN Outcome 1.2.1)
3. Apply theory and research to examine ethical, legal, socio-political, and professional issues in nurse practitioner practice. (NP ELC 5.1, CASN MN Outcome 1.2.2 & 5.2.5)
4. Analyze and evaluate the role of the nurse practitioner as a leader and advocate to develop strategies that improve health, promote health equity and enhance health outcomes. (NP ELCs 2.1, 3.6, CASN MN Outcomes 1.2.3 & 1.2.4)
5. Demonstrate developing skills as a nurse scholar, including ability to critically evaluate, synthesize, integrate and disseminate ideas in an organized, creative and logical manner. (NP ELCs 5.2, CASN MN Outcomes 2.2.4 & 4.2.3)
6. Initiate development of a professional NP role identify, establishing and implementing a personal professional growth plan to guide nurse practitioner role development. (NP Practice Standards; CASN MN Outcome 5.2.1)
7. Examine and evaluate the impact of colonization, racism, and inter-generational trauma on current health disparities faced by Indigenous peoples. (NP ELCs 3.1 & 3.3)

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**

If so, were these departments consulted? (Include correspondence)

Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)
 - 6.1 Courses to be deleted? **NURS 883: Theory for Advanced Practice Nursing Roles and Primary Health Care**
 - 6.2 Courses for which this course will be a prerequisite **NURS 836: Transition to Nurse Practitioner Clinical Practice**
 - 6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Timelines	Learning Activities
<p>Week 1</p> <p>Introduction to Graduate Studies and the NP Role</p>	<p>Topics</p> <ul style="list-style-type: none"> • Transition to Graduate Studies/Scholarship in Graduate Studies • Advanced Practice Nursing & the NP Role (Guest Panel) • Transition from RN to NP/Intro to NP Role Development <p>Readings/Media:</p> <p>Mariano, C. (2015). No One Left Behind. How Nurse Practitioners are Changing the Canadian Health Care System. Victoria, BC: Friessen Press</p> <p>College of Registered Nurses of Saskatchewan (CRNS). (2023). Nurse Practitioner Entry-Level Competencies.</p> <p>CRNS. (2017). Nurse Practitioner Practice Standards.</p> <p>College of Graduate and Postdoctoral Studies. The Grad Hub. Transitioning to Grad School.</p> <p>Lowe, G. (2017). Nurse practitioners: Framing their professional identity. <i>The Journal for Nurse Practitioners</i>, 13(2), 175. DOI: https://doi.org/10.1016/j.nurpra.2016.12.021</p> <p>Owens, R. & Godfrey, C. (2022). Fostering professional identity in nursing. <i>American Nurse</i></p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapters 1. Historical Overview of Advanced Practice Nursing in Canada</p> <p>Chapter 29. Role Transition</p>
<p>Week 2</p> <p>NP Regulation & Scope of Practice</p>	<p>Topics:</p> <ul style="list-style-type: none"> • NP Regulation • NP Education • NP Competencies

	<p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 3. Advanced Practice Nursing Education in Canada.</p> <p>Chapter 6. Competencies for the Clinical Nurse Specialist and Nurse Practitioner in Canada</p> <p>Chapter 7. Understanding Regulatory, Legislative, and Credentialing Requirements in Canada</p> <p>Chapter 14. Direct Comprehensive Care Competencies. 14B Nurse Practitioner</p> <p>Canadian Nurses Association (2019). Advanced Practice Nursing A Pan-Canadian Framework</p> <p>Canadian Nurses Association (2017). Code of Ethics for Registered Nurses. Ottawa, ON: author https://www.cna-aiic.ca/en/on-the-issues/bestnursing/nursing-ethics</p> <p>CRNS (2023). Understanding Legislated Scope of Practice. https://www.crns.ca/nursing-practice/legislatedscope-of-practice/</p> <p>CRNS (2024). Bylaws https://www.crns.ca/about-us/how-we-govern/act-bylaws/</p> <p><i>*Students from jurisdictions outside of SK are required to review the NP practice standards, guidelines, and regulatory standards in their jurisdiction</i></p>
<p>Week 3</p> <p>Theory and Theorizing in NP Practice</p>	<p>Topics:</p> <ul style="list-style-type: none"> • Nursing Science & Nursing Knowledge • Theories and Frameworks • Application of Theory to Practice <p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 8. Advanced Practice Nursing Frameworks Utilized or Developed in Canada</p> <p>Im, E. (2015). Discussion Paper. The current status of theory evaluation in nursing. <i>Journal of Advanced Nursing</i>, 17(10), 2268-2278.</p>

	McCrae, N. (2012). Whither nursing models? The value of nursing theory in the context of evidence-based practice and multidisciplinary health care. <i>Journal of Advanced Nursing</i> , 68(1), 222-229.
Week 4 Leadership – the NP Role as Leader	Topics <ul style="list-style-type: none"> • What is leadership? • NP Leadership competencies – how is it different from RN leadership • NP Role in Optimizing Health System Readings/Media: Canadian Perspectives on Advanced Practice Nursing (2 nd Ed). Chapter 5. Canadian Research on the Impact and Outcomes of Advanced Practice Nursing Roles Chapter 15. Optimizing Health System Competencies. 15B Nurse Practitioner Chapter 18. Leadership Competencies. 18B Nurse Practitioner Chapter 21. Health Policy and Advanced Practice Nursing in Changing Environments
Week 5 Advocacy – the NP Role in Addressing Social Determinants	Readings/Media: Canadian Perspectives on Advanced Practice Nursing (2 nd Ed). Chapter 9. Indigenous Populations Chapter 10. Inner-City Populations Chapter 11. Rural and Remote Populations Chapter 12. LGBT2SQ Populations Chapter 13. Refugee and Migrant Populations
Week 6	Readings/Media:

<p>Advocacy – the NP Role in Indigenous Health, Anti-Racism & Inclusion</p>	<p>Truth and Reconciliation Commission of Canada (2015). Truth and Reconciliation Commission of Canada: Calls to Action</p> <p>Graham, H. (2024). CPR RACISM: A guide for health care providers to address racism in healthcare. <i>International Journal of Indigenous Health</i>, 19(1). DOI: 10.32799/ijih.v19i1.42574</p> <p>Cancer Care Ontario. Indigenous Relationship and Cultural Awareness Courses. Go to this site and create a free account. https://www.cancercareontario.ca/en/resources-first-nations-inuit-metis/firstnations-inuit-metis-courses Enroll in and complete the following courses:</p> <ul style="list-style-type: none"> • Truth and Reconciliation commission of Canada (TRC) and the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) • Chronic disease prevention in Indigenous People • The Health Landscape of Indigenous People • Health Literacy • Cultural Competence in Health Care
<p>Week 7</p> <p>Education – the NP Role as Educator</p>	<p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 16. Educational Competencies 16B Nurse Practitioner</p> <p>Readings on Educational Theory/Teaching & Learning Theory</p>
<p>Week 8</p> <p>Research – the NP Role as Researcher</p>	<p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 17. Research Competencies 17B Nurse Practitioner</p> <p>Chapter 30. Outcomes Evaluation and Performance Assessment of Advanced Nursing Roles</p>
<p>Week 9</p>	<p>Readings/Media:</p>

Consultation, Collaboration & Interprofessional Competencies	<p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 19. Consultation and Collaboration Competencies 19B Nurse Practitioner</p> <p>Chapter 28. The Advanced Practice Nurse and Interprofessional Collaborative Practice Competence</p> <p>Canadian Interprofessional Health Collaborative (2010). A National Interprofessional Competency Framework.</p>
<p>Week 10</p> <p>Resiliency</p>	<p>Readings/Media:</p> <p>Primary Care the Art & Science of Advanced Practice Nursing Chapter 88: Putting Caring Into Practice: Caring for Self</p> <p>American Psychological Association. (2020). Building your resilience. https://www.apa.org/topics/resilience/building-your-resilience</p> <p>Henshall, C., Davey, Z. & Jackson, D. (2020). Nursing resilience interventions – A way forward in challenging healthcare territories. <i>Journal of Clinical Nursing</i>, 29(19-20), 3597-3599. doi: 10.1111/jocn.15276</p> <p>Meissen, H. (2022). Combating burnout by teaching resilience strategies to new graduate nurse practitioners. Vanderbilt School of Nursing</p>

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**
And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE – DISTANCE LEARNING**

- 10-50
 50-90
 90-130
 130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERIC/PERCENTAGE**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
Developing a Professional NP Role Identity	Week 2-3	20%
Debatable Topics in NP Practice	Variable dates as posted in schedule	20%
NP Leadership to Improve Health Outcomes		
Paper Outline	Week 6	10%
Peer Feedback	Week 7-8	10%
Paper	Week 10	30%
Self-Evaluation	Week 10	10%
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **YES**

10. Required text

Include a bibliography for the course.

Required readings and media for this course are outlined in the course schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

- American Psychological Association (2020). **Publication Manual of the American Psychological Association (7th ed)**. APA.
- Staples, E., Pilon, R. & Hannon, R.A. (eds). (2020). **Canadian Perspectives on Advanced Practice Nursing. Second Edition**. Canadian Scholars Press
- Mariano, C. (2015). **No One Left Behind. How Nurse Practitioners Are Changing the Canadian Health Care System**, Victoria, BC: Freisen Press.

PROVINCIAL DOCUMENTS

- College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>
- CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>
-

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted selection.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites).

- 3.1 Permission Required: **YES, permission is required to audit the course.**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **None**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **None**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **None**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: NURS 883.3

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here: NURS 883.3

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive:

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.**COURSE SYLLABUS**

Course Title:	Theory for Nurse Practitioner Practice		
Course Code:	NURS 830	Term:	TBD
Course Credits:	3	Delivery:	Synchronous Online
Location:	Distance Learning	Website:	https://canvas.usask.ca/

Course Dates & Times:	Weekly 4-hour seminars x 10 weeks (40 hours)
Course Calendar Description:	This course will explore and evaluate theoretical aspects, issues, and roles in nurse practitioner practice.
Pre Requisite:	Admission to the MN-NP
Course Equivalent	NURS 883: Theory for Advanced Practice Nursing Roles and Primary Health Care

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is on *Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Demonstrate understanding of the roles and responsibilities of nurse practitioners including regulation and legislation related to the expanded scope of practice. (NP Practice Standards, NP ELC 1.15, CASN MN Outcomes 3.2.1 & 4.2.2)
2. Evaluate the historical, philosophical, theoretical, and socio-political foundations of nurse practitioner practice. (CASN MN Outcome 1.2.1)
3. Apply theory and research to examine ethical, legal, socio-political, and professional issues in nurse practitioner practice. (NP ELC 5.1, CASN MN Outcome 1.2.2 & 5.2.5)
4. Analyze and evaluate the role of the nurse practitioner as a leader and advocate to develop strategies that improve health, promote health equity and enhance health outcomes. (NP ELCs 2.1, 3.6, CASN MN Outcomes 1.2.3 & 1.2.4)
5. Demonstrate developing skills as a nurse scholar, including ability to critically evaluate, synthesize, integrate and disseminate ideas in an organized, creative and logical manner. (NP ELCs 5.2, CASN MN Outcomes 2.2.4 & 4.2.3)

6. Initiate development of a professional NP role identify, establishing and implementing a personal professional growth plan to guide nurse practitioner role development. (NP Practice Standards; CASN MN Outcome 5.2.1)
7. Examine and evaluate the impact of colonization, racism, and inter-generational trauma on current health disparities faced by Indigenous peoples. (NP ELCs 3.1 & 3.3)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;

- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at: <https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)

- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

*An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

[Insert Course Overview]

COURSE SCHEDULE

Timelines	Learning Activities
<p>Week 1</p> <p>Introduction to Graduate Studies and the NP Role</p>	<p>Topics</p> <ul style="list-style-type: none"> • Transition to Graduate Studies/Scholarship in Graduate Studies • Advanced Practice Nursing & the NP Role (Guest Panel) • Transition from RN to NP/Intro to NP Role Development <p>Readings/Media:</p> <p>Mariano, C. (2015). No One Left Behind. How Nurse Practitioners are Changing the Canadian Health Care System. Victoria, BC: Friessen Press</p> <p>College of Registered Nurses of Saskatchewan (CRNS). (2023). Nurse Practitioner Entry-Level Competencies.</p>

	<p>CRNS. (2017). Nurse Practitioner Practice Standards.</p> <p>College of Graduate and Postdoctoral Studies. The Grad Hub. Transitioning to Grad School.</p> <p>Lowe, G. (2017). Nurse practitioners: Framing their professional identity. <i>The Journal for Nurse Practitioners</i>, 13(2), 175. DOI: https://doi.org/10.1016/j.nurpra.2016.12.021</p> <p>Owens, R. & Godfrey, C. (2022). Fostering professional identity in nursing. American Nurse</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapters 1. Historical Overview of Advanced Practice Nursing in Canada</p> <p>Chapter 29. Role Transition</p>
<p>Week 2</p> <p>NP Regulation & Scope of Practice</p>	<p>Topics:</p> <ul style="list-style-type: none"> • NP Regulation • NP Education • NP Competencies <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 3. Advanced Practice Nursing Education in Canada.</p> <p>Chapter 6. Competencies for the Clinical Nurse Specialist and Nurse Practitioner in Canada</p> <p>Chapter 7. Understanding Regulatory, Legislative, and Credentialing Requirements in Canada</p> <p>Chapter 14. Direct Comprehensive Care Competencies. 14B Nurse Practitioner</p> <p>Canadian Nurses Association (2019). Advanced Practice Nursing A Pan-Canadian Framework</p> <p>Canadian Nurses Association (2017). Code of Ethics for Registered Nurses. Ottawa, ON: author https://www.cna-aic.ca/en/on-the-issues/bestnursing/nursing-ethics</p> <p>CRNS (2023). Understanding Legislated Scope of Practice. https://www.crns.ca/nursing-practice/legislatedscope-of-practice/</p>

	<p>CRNS (2024). Bylaws https://www.crns.ca/about-us/how-we-govern/act-bylaws/</p> <p><i>*Students from jurisdictions outside of SK are required to review the NP practice standards, guidelines, and regulatory standards in their jurisdiction</i></p>
<p>Week 3</p> <p>Theory and Theorizing in NP Practice</p>	<p>Topics:</p> <ul style="list-style-type: none"> • Nursing Science & Nursing Knowledge • Theories and Frameworks • Application of Theory to Practice <p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p style="padding-left: 40px;">Chapter 8. Advanced Practice Nursing Frameworks Utilized or Developed in Canada</p> <p>Im, E. (2015). Discussion Paper. The current status of theory evaluation in nursing. <i>Journal of Advanced Nursing</i>, 17(10), 2268-2278.</p> <p>McCrae, N. (2012). Whither nursing models? The value of nursing theory in the context of evidence-based practice and multidisciplinary health care. <i>Journal of Advanced Nursing</i>, 68(1), 222-229.</p>
<p>Week 4</p> <p>Leadership – the NP Role as Leader</p>	<p>Topics</p> <ul style="list-style-type: none"> • What is leadership? • NP Leadership competencies – how is it different from RN leadership • NP Role in Optimizing Health System <p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p style="padding-left: 40px;">Chapter 5. Canadian Research on the Impact and Outcomes of Advanced Practice Nursing Roles</p> <p style="padding-left: 40px;">Chapter 15. Optimizing Health System Competencies. 15B Nurse Practitioner</p>

	<p>Chapter 18. Leadership Competencies. 18B Nurse Practitioner</p> <p>Chapter 21. Health Policy and Advanced Practice Nursing in Changing Environments</p>
<p>Week 5</p> <p>Advocacy – the NP Role in Addressing Social Determinants</p>	<p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 9. Indigenous Populations</p> <p>Chapter 10. Inner-City Populations</p> <p>Chapter 11. Rural and Remote Populations</p> <p>Chapter 12. LGBT2SQ Populations</p> <p>Chapter 13. Refugee and Migrant Populations</p>
<p>Week 6</p> <p>Advocacy – the NP Role in Indigenous Health, Anti-Racism & Inclusion</p>	<p>Readings/Media:</p> <p>Truth and Reconciliation Commission of Canada (2015). Truth and Reconciliation Commission of Canada: Calls to Action</p> <p>Graham, H. (2024). CPR RACISM: A guide for health care providers to address racism in healthcare. <i>International Journal of Indigenous Health</i>, 19(1). DOI: 10.32799/ijih.v19i1.42574</p> <p>Cancer Care Ontario. Indigenous Relationship and Cultural Awareness Courses. Go to this site and create a free account. https://www.cancercareontario.ca/en/resources-first-nations-inuit-metis/firstnations-inuit-metis-courses Enroll in and complete the following courses:</p> <ul style="list-style-type: none"> • Truth and Reconciliation commission of Canada (TRC) and the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) • Chronic disease prevention in Indigenous People • The Health Landscape of Indigenous People • Health Literacy • Cultural Competence in Health Care

<p>Week 7</p> <p>Education – the NP Role as Educator</p>	<p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 16. Educational Competencies 16B Nurse Practitioner</p> <p>Readings on Educational Theory/Teaching & Learning Theory</p>
<p>Week 8</p> <p>Research – the NP Role as Researcher</p>	<p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 17. Research Competencies 17B Nurse Practitioner</p> <p>Chapter 30. Outcomes Evaluation and Performance Assessment of Advanced Nursing Roles</p>
<p>Week 9</p> <p>Consultation, Collaboration & Interprofessional Competencies</p>	<p>Readings/Media:</p> <p>Canadian Perspectives on Advanced Practice Nursing (2nd Ed).</p> <p>Chapter 19. Consultation and Collaboration Competencies 19B Nurse Practitioner</p> <p>Chapter 28. The Advanced Practice Nurse and Interprofessional Collaborative Practice Competence</p> <p>Canadian Interprofessional Health Collaborative (2010). A National Interprofessional Competency Framework.</p>
<p>Week 10</p> <p>Resiliency</p>	<p>Readings/Media:</p> <p>Primary Care the Art & Science of Advanced Practice Nursing Chapter 88: Putting Caring Into Practice: Caring for Self</p> <p>American Psychological Association. (2020). Building your resilience. https://www.apa.org/topics/resilience/building-your-resilience</p> <p>Henshall, C., Davey, Z. & Jackson, D. (2020). Nursing resilience interventions – A way forward in challenging healthcare territories. <i>Journal of Clinical Nursing</i>, 29(19-20), 3597-3599. doi: 10.1111/jocn.15276</p>

Meissen, H. (2022). Combating burnout by teaching resilience strategies to new graduate nurse practitioners . Vanderbilt School of Nursing
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INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media for this course are outlined in the course schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

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CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Graduate Program Orientation Canvas site – for resources on writing, APA, etc.

Library sources on literature review and referencing

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Developing a Professional NP Role Identity	Week 2-3	20%
Debatable Topics in NP Practice	Variable dates as posted in schedule	20%
NP Leadership to Improve Health Outcomes		
Paper Outline	Week 6	10%
Peer Feedback	Week 7-8	10%
Paper	Week 10	30%
Self-Evaluation	Week 10	10%

Total		100%
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*Essential components. Passing grade of $\geq 70\%$ required

GSR 960 – Introduction to Ethics and Integrity, is a 0 credit unit course that all USask graduate students are required to take. This course must be completed prior to submission of the first assignment.

EVALUATION COMPONENTS

DEVELOPING A PROFESSIONAL NP ROLE IDENTITY

Value: 20% of final grade

Due Date: Week 2-3

Type: This assignment supports students in learning to clearly articulate the NP role and begin developing their role identity as a NP.

Description: The transition from RN to NP involves significant shifts not only in responsibilities but also in autonomy, scope of practice, and decision-making. Understanding and strategically managing this transition promotes effective development of NP role identity and advanced practice competencies. This assignment will help you learn to clearly articulate your new NP role and begin to develop your professional NP role identity, including plans to continue supporting NP role identity development over the course of your program.

Preparation: Begin by researching the key differences between RN and NP roles including scope of practice, autonomy, responsibilities, and competencies. The required course textbook *No One Left Behind* (Mariano, 2015) includes real-life stories of NPs working within the Canadian healthcare system that will help you better understand the breadth and depth of NP roles and responsibilities. You may also consider interviewing or shadowing an NP to provide practical insight into the daily responsibilities and expectations.

Assignment: Using your preparatory research, you will develop a plain-language explanation of what a nurse practitioner is that you can use to describe your role to the general public OR other health care providers. Be sure to identify your target audience clearly when you submit your assignment.

Next, you will develop a plan to support your NP role development over the course of your program. In your plan, consider your strengths, weaknesses, aspirations, and strategies for addressing these factors to support NP role development. While knowledge is important part of role development, other personal attributes or 'soft skills' such as communication, adaptability, problem solving, time management, emotional intelligence, resiliency, and responsiveness to feedback, are intricately linked to knowledge acquisition and are important to address as part of your role development plan.

If you would like to learn more about your personal profile, there are many tools available such as the [Myers-Briggs](#), [CliftonStrengths](#), Tony Robbins DISC Profile, and [the Enneagram](#). [16Personalities](#) has an free online personality test, based somewhat on the Myers-Briggs.

Format: This assignment may be completed in written or recorded video/presentation format. Students are encouraged to utilize a format that fits their preferred learning styles. While this assignment involves personal reflection, it should follow APA style, including referencing 2-4 current and relevant sources. First person when referencing your own thoughts is appropriate and encouraged.

Written format: Maximum 750 words (3 pages double spaced, excluding title page and references)

Video: Maximum 5-7 minutes. References should be submitted in APA format on a separate document (or slide)

Rubric

Criteria	Exceptional 90 – 100%	Very Good – Excellent 80 - 89%	Satisfactory to Good 70 – 79%	Poor < 70%
NP Role Description				
NP Role Development Plan				
Format & Style				

Learning Outcomes: 1 & 6

DEBATABLE TOPICS IN NP PRACTICE: GROUP PRESENTATION

Value: 20% of final grade

Due Date: Weeks 4-6

Type: This assignment provides opportunity to develop and evaluate skills in critical appraisal, synthesis, teamwork/collaboration, and presentation as students work together in groups of 2-3 to apply theory and research to address socio-political, professional, ethical and regulatory issues in NP practice.

Description: In the first of class you will sign up on Canvas for one of the *Debatable Topics in NP Practice*. 2-3 students can sign up for each topic with each topic having an assigned presentation date.

Working in your group, you will research, critically appraise and develop a 10-minute presentation to deliver to your peers on the chosen topic. Presentations should succinctly summarize and organize information into a briefing style presentation, a common format used in political advocacy.

There will be at least two presentations for the same topic area, with each taking a different view or angle. One of your jobs as the presenters, is to convince your audience that your arguments are the strongest and gain their vote. At the end of each presentation block on same topic area there will be an audience vote to determine the group that was the most persuasive.

This presentation provides opportunity to demonstrate skills in teamwork (group collaboration and communication) as well as application of research, theory, ethical, regulatory and practice considerations to address the problem.

Debatable Topics:

- NP Education:
 - Entry-Level NP Education should be at the Master's Level
 - Entry-Level NP Education should be at the DNP
 - Entry-Level NP Education builds on experience and graduate education is not required
 - Experience (minimum 2 years) is not required for NP education
 - More than 2 years experience is required prior to starting NP education
- NP Licensure/Registration
 - NPs should be educated and registered in specialty streams of practice (i.e. Family All Ages, Neonatal, Pediatric, Adult)
 - NPs should be educated and registered with a common generalist focus that applies to all health settings
- Social Determinants – what is the most important social determinant of health and why?
 - Income and Social Status
 - Education and literacy
 - Social supports and coping skills
 - Access to health services
 - Race/Racism & Culture
- NP Scope of Practice
 - NP Scope of Practice in Canada is too large for the training and compensation provided to NPs
 - NP Scope of Practice in Canada is too narrow/restrictive.

- Interprofessional Practice
 - Physician Assistants should not be added as additional healthcare providers in Canada
 - Physician Assistants are important additions to the healthcare workforce
- Practice Environments
 - NPs should be supported to open private practices, billing patients directly for services
 - NP private practice (i.e. billing patients for health care services) should not be permitted

Learning Outcomes: 2, 3

NP LEADERSHIP TO IMPROVE HEALTH OUTCOMES ASSIGNMENT

Value: 50% (10% outline; 10% peer feedback; 30% final paper)

Date: Week 5-10

Type: Scaffolded assignment to support students development and evaluation of skills in critical appraisal, scholarly writing, and analysis of the NP role as leader in improving health outcomes.

Description: You will select a health or healthcare issue you feel NPs play an important leadership role in addressing (example topics included below). You will then explore the literature on this topic, examining theory, research, policy, legislation, regulation and other practice considerations to support the NP leadership role in addressing the issue, compiling information into a scholarly academic paper.

To support paper development, there are three components to this assignment:

1. Development of a paper outline
2. Feedback from instructor and peers on outline
3. Development of full paper

Each of these components is outlined in further detail below.

You are encouraged to discuss your chosen topic for this paper with the course instructor. Possible topics include, but are not limited to:

- Indigenous health
- Racism
- Reducing health inequities, addressing social determinants
- Access to care (specify specific setting such as rural/remote, primary care, etc)
- Preventative health

- Mental health and addictions
- Chronic disease management
- Resource stewardship
- Interprofessional teams

Learning Outcomes: 3, 4, 5

PAPER OUTLINE

Value: 10% of final grade

Date: Week 5-6

Length: Max 1 page (? Posted on Canvas Discussion Board)

Type: Students will develop an outline of their paper, receiving feedback from instructors and peers to help guide successful paper development.

Description: Detailed description of assignment expectations and procedures

Learning Outcomes: 3, 4, 5

PEER FEEDBACK

Value: 10% of final grade

Date: Week 7-8

Length: Max 1 page (? Posted on Canvas Discussion Board)

Type: Students will develop skills providing constructive feedback to peers on their paper outline.

Description: Using the critical friends protocol, you will provide feedback on a peers paper outline. You will be graded on your ability to provide constructive feedback. (not the feedback peer's provide of your outline).

Learning Outcomes: 5

FINAL PAPER

Value: 30% of final grade

Date: Week 10

Length: Maximum 5 pages?

Type: You will develop a scholarly paper (written assignment) demonstrating competencies in critical appraisal, synthesis, application, and scholarly writing.

Description: Using your outline and feedback provided by instructors and peers, you will develop a final paper discussing the NP leadership role in addressing your identified health issue and improve health outcomes. The paper will be written using APA student format and include the following elements:

1. A clear description of the identified health issue
2. Discussion of why NPs are suited to address this issue, integrating relevant regulatory, legislative, ethical, theoretical and research.
3. Barriers and facilitators to NPs address the issue
4. Future directions/recommendations

Learning Outcomes: 3, 4, 5

SELF-EVALUATION OF COURSE LEARNING OUTCOMES

Type: Active engagement in course seminars and self-directed learning activities are integral to student attainment of course learning outcomes. Self-evaluation of attainment of learning outcomes supports development of skills in reflective practice, and continuing professional development.

Description: All students are expected to come to seminars prepared to discuss and apply knowledge from required readings, and self-directed learning activities, in order to support development of course learning outcomes. Students will self-evaluate their attainment of course learning outcomes, providing examples to support their ratings. Student self-evaluation will be reviewed and approved by instructors, with any discrepancies in instructor observation and student self-evaluation brought forward for further discussion between the student and instructor(s) before determining a final grade.

Seminar & Competencies	Excellent (3)	Good (2)	Satisfactory (1)	Poor (0)
Demonstrate Understanding of NP Roles and Responsibilities (Learning Outcome 1)				
Comments to support rating:				

Evaluate the historical, philosophical, theoretical and socio-political foundations of NP practice.				
Comments to support rating:				
Apply theory and research to examine ethical, legal, socio-political, and professional issues in NP practice				
Comments to support rating				
Analyze and evaluate the role of the NP as a leader and advocate to develop strategies that improve health, promote health equity and enhance health outcomes				
Demonstrate developing skills as a nurse scholar including ability				

<p>to critically evaluate, synthesize, integrate and disseminate ideas in an organized, creative and logical manner</p>				
<p>Initiate development of a professional NP role identity, establishing and implementing a personal professional growth plan to guide NP role development.</p>				
<p>Examine and evaluate the impact of colonization, racism and intergenerational trauma on current health disparities faced by Indigenous Peoples</p>				
<p>Comments to support rating:</p>				
<p>Overall Grade:</p>				

Course Outcomes: 2,3,4, 5

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high-speed internet to facilitate participation in online learning activities.

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by [\[insert names\]](#).



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE & POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 831**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Therapeutic Foundations for Nurse Practitioner Practice**
Course Short Title (maximum 30 characters): **Ther. Foundations for NP**
- 2.4 Total Hours: Lecture **Seminar - 32 hours** Lab – **16 hours online over 2 days** Tutorial
Other
- 2.5 Weekly Hours: Lecture Seminar **3-4hrs** Lab 16 hours Tutorial Other
- 2.6 Term in which it will be offered: T1 T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **NURS 830: Theory for Nursing Practice**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **This course focuses on health promotion and other therapeutic approaches in nurse practitioner practice. Students will enhance knowledge and skills applying advanced communication strategies, health promotion, non-pharmacological interventions, and patient education within the scope of nurse practitioner practice. Incorporating a commitment to anti-racist, inclusive, and culturally safe care, students will enhance skills in promoting optimal health outcomes for individuals, groups, and/or populations.**
- 2.9 Do you allow this course to be repeated for credit? **NO**

- 3. Please list rationale for introducing this course: **This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**

4. **Please list the learning objectives for this course:**

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Apply advanced therapeutic communication strategies (i.e. trauma and violence informed care, culturally safe communication, counselling, harm-reduction, shared decision making) to address diverse patient needs and populations while adhering to regulatory and legislative requirements. (NP ELCs 1.10 – 1.12)
2. Synthesize research to develop and implement effective, evidence-informed, culturally appropriate health promotion strategies that address the specific needs of diverse patient populations. (NP ELCs 1.6 and 1.11)
3. Evaluate non-pharmacological therapy to determine evidence-informed, patient-centered options for managing diverse health conditions and populations. (NP ELCs 1.6, 1.7, 1.9)
4. Enhance self-awareness of personal biases, and deepen knowledge of anti-racist, inclusive, and culturally safe care practices, while also analyzing the ongoing effects of colonization, racism, and oppression on Indigenous people's health to deliver equitable healthcare services. (NP ELCs 3.1-3.5).
5. Design, evaluate and revise health education and health promotion materials to promote culturally appropriate, evidence-informed content and strategies for improving health. (NP ELCs 2.3, 4.1, 4.2)
6. Demonstrate scholarship by disseminating critical appraisal and synthesis of information to others, communicating logically and coherently using credible and relevant sources. (NP ELCs 2.1, 5.1, 5.1)
7. Demonstrate a deepened understanding of Indigenous knowledge and traditional healing practices, including how they can be incorporated into patient-centered culturally safe care. (NP ELCs 3.3 & 1.6)
8. Apply the foundational elements of your role identity as a nurse practitioner counselor. (NP ELC 1.10-1.11)

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**
If so, were these departments consulted? (Include correspondence)

Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)
- 6.1 Courses to be deleted? **NURS 885: Nursing Therapeutics I Individual to Community.**
- 6.2 Courses for which this course will be a prerequisite? **NURS 836 Transition to Nurse Practitioner Clinical Practice**
- 6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**
7. **Course outline**
(Weekly outline of lectures or include a draft of the course information sheet.)

Date & Topic	Required Readings/Media
<p>Week 1</p> <p>Intro to therapeutics (patient centered care, rational prescribing, non-pharmacotherapy, stewardship, CAM, SDoH etc)</p>	<ul style="list-style-type: none"> • Primary Care the Art and Science of Advanced Practice Nursing. Review the following chapters: <ul style="list-style-type: none"> ○ Chapter 1: Primary Care in the Twenty-First Century: A Circle of Caring; ○ Chapter 2: Caring and the Advanced Practice Nurse; ○ Chapter 4: The Art of Diagnosis and Treatment; ○ Chapter 5: Evidence-Based Practice • Bates Visual Guide to Physical Examination – Communication and Interpersonal Skills Videos. Review the following videos: <ul style="list-style-type: none"> ○ 1. Technique: Active or Attentive Listening; ○ 3. Technique: Empathetic Responses; ○ 6. Technique: Empowering the Patient; ○ 8. Use of Understandable Language; ○ 9. Use of non-stigmatizing Language; ○ 10. Appropriate non-verbal communication; ○ 13. Patient-Centeredness in Computerized Clinical Settings; ○ 22. Obtaining Informed Consent; ○ 24. Working with Medical Interpreters

	<ul style="list-style-type: none"> • Frameworks for Advanced Nursing Practice and Research. Read the following chapters: <ul style="list-style-type: none"> ○ Chapter 7: Frameworks for Teaching & Learning
Week 2 Health Promotion	<ul style="list-style-type: none"> • Primary Care the Art and Science of Advanced Practice Nursing. Read Chapter 3: Health Promotion • Canadian Task Force for Preventative Health Care Guidelines • Bates Guide to Physical Examination and History Taking. Read Chapter 6: Health Maintenance and Screening • Shen, S & Dubey, C (2019). Addressing vaccine hesitancy. <i>Canadian Family Physician</i>, 65, 175-181. https://www.cfp.ca/content/cfp/65/3/175.full.pdf • Canadian Pediatric Society. (2024). Working with vaccine-hesitant parents: An update. • Cutilli, C. (2020). Excellence in patient education: Evidence-based education that “sticks” and improves patient outcomes. <i>Nurs Clin North Am</i>, 55(2), 267-282. doi: 10.1016/j.cnur.2020.02.007 • Agency for Healthcare Research and Quality. Patient Education and Engagement. https://www.ahrq.gov/health-literacy/patient-education/index.html Review materials on this website to support development of your Patient Education Material assignment
Week 3 Indigenous Health	Role of Practitioners in Indigenous Wellness Course (Self-Directed Online)
Week 4 Counselling Strategies Part 1 (Shared Decision Making, Motivational Interviewing, Behavioural Health, Health Education)	<ul style="list-style-type: none"> • Primary Care the Art & Science of Advanced Practice Nursing. Read Chapter 87: Primary Care Approaches to Behavioural Health • Bates Visual Guide to Physical Examination – Communication and Interpersonal Skills Videos. Review the following videos: <ul style="list-style-type: none"> ○ 14. Teach-Back Method; ○ 27. Motivational Interviewing; Rapport: Newborns and Infants;

	<ul style="list-style-type: none"> ○ 16. Rapport: Young Child; ○ 17. Rapport: Adolescents; ○ 18. Rapport: Older Adults; ● Doppa, M. & Heeyoung, L. (2014). Motivational interviewing. A journey to improve health. <i>Nursing</i>, 44(3), 40-45. doi: 10.1097/01.NURSE.0000443312.58360.82 ● Frameworks for Advanced Nursing Practice and Research. Read the following chapters: <ul style="list-style-type: none"> ○ Chapter 4: Frameworks for Behavioural Change ○ Chapter 6: Human Development Frameworks ○ Chapter 13: Psychological Frameworks ● Stein, D. et al (2022). General and unique communication skills challenges for advanced practice providers: A mixed methods study. <i>Journal of Advanced Practice Oncology</i>, 13(1), 32-43. doi: 10.6004/jadpro.2022.13.1.3
<p>Week 5</p> <p>Counseling Strategies Part 2 (Trauma & Violence Informed Care, Discussing Sensitive Topics, Disclosing Serious News, Harm Reduction, Crises Intervention)</p>	<ul style="list-style-type: none"> ● Bates Visual Guide to Physical Examination – Communication and Interpersonal Skills Videos. Watch the following videos: <ul style="list-style-type: none"> ○ 19. Rapport: Patients with Physical and Sensory Disabilities; ○ 20. Rapport: LGBTQ+ Adults; ○ 21. Broaching Sensitive Topics; Discussing Advanced Directives; ○ 25. Disclosing Serious News; ○ 26. Responding to Emotional Cues; ● Roberts, Chandler, & Kalmakis (2019). A model for trauma-informed primary care. <i>Journal of the American Association of Nurse Practitioners</i>, 31(2), 139-144. doi: 10.1097/JXX.000000000000116. https://pubmed.ncbi.nlm.nih.gov/30550391/ ● Jackson, J. (2024). Harm Reduction Saves Lives series – Canadian Nurse articles and videos aims at taking a non-judgemental approach to care. https://www.canadian-nurse.com/blogs/cn-content/2024/06/06/harm-reduction-saves-lives-series

	<ul style="list-style-type: none"> • Brown, N. (2021). Implementing harm reduction strategies to reduce opioid overdoses. <i>The Journal for Nurse Practitioners</i>, 17(7), 870-873. https://doi.org/10.1016/j.nurpra.2021.02.030 • Rosenzweig, M. (2012). Breaking bad news: A guide for effective and empathetic communication. <i>Nurse Practitioner</i>, 37(2), doi: 10.1097/01.NPR.0000408626.24599.9e • Buckman, R. (2005). Breaking bad news: the S-P-I-K-E-S strategy. Psychosocial Oncology • Schulman, M & Maul, A. (2019). Screening for Adverse Childhood Experiences and Trauma. https://www.chcs.org/media/TA-Tool-Screening-for-ACEs-and-Trauma_020619-1.pdf
Week 6 Indigenous Health	Role of Practitioners in Indigenous Wellness Course (Self-Directed Online)
Week 7 Evidence-Based Approaches to Non-Pharmacotherapy Seminar 1	<p>Student Self-Directed Research on chosen presentation topic. The USask library is an excellent starting point. Some possible resources for non-pharmacotherapy include (however please don't limit your search to only these)</p> <ul style="list-style-type: none"> • The Review of Natural Products: Provides detailed information about natural products • National Center for Complementary and Integrative Health • Natural Medicines • eCPS
Week 8 Evidence-Based Approaches to Non-Pharmacotherapy Seminar 2	<p>Student Self-Directed Research on chosen presentation topic. The USask library is an excellent starting point. Some possible resources for natural products include (however please don't limit your search to only these)</p> <ul style="list-style-type: none"> • The Review of Natural Products: Provides detailed information about natural products • National Center for Complementary and Integrative Health • Natural Medicines • eCPS
Week 9 Advanced Communication Lab 1	<ul style="list-style-type: none"> • Sofer, D. (2018). The value of simulation in nursing education. <i>American Journal of Nursing (AJN)</i>, 118(4), 17-18. doi: 10.1097/01.NAJ.0000532063.79102.19.

(Online): Motivational Interviewing	<ul style="list-style-type: none"> • Eppich, W. & Cheng, A. (2015). Promoting excellent and reflective learning in simulation (PEARLS). Development and rational for a blended approach to health care simulation debriefing. <i>Simulation in Healthcare, 10</i>(2), 106-115. http://www.healthsciences.usask.ca/CLRC/clrc-docs/PEARLS.pdf • INACSL Standards Committee (2021). Healthcare simulation standards of best practice professional integrity. <i>Clinical Simulation in Nursing, 58</i>, 45-48. DOI:https://doi.org/10.1016/j.ecns.2021.08.014 • Review readings on Motivational Interviewing as you will apply these during the lab
Week 10 Advanced Communication Lab 2 (Online): Trauma Informed Care	<ul style="list-style-type: none"> • Review readings on Trauma Informed Care and Harm Reduction as you will apply these during the lab

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE – DISTANCE LEARNING**

10-50

50-90

90-130

130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERIC/PERCENTAGE**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
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Role of Practitioners in Indigenous Wellness Course*	Due by last date of class	Pass/Fail
Health Education Material Assignment*	Week 5	40%
Presentation: Evidence-Informed Non-Pharmacological Therapies	Weeks 7 & 8	30%
Critical Reflection: Advanced Communication Labs	Week 10	30%
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **YES**

10. **Required text**

Include a bibliography for the course.

Required readings and media for this course are outlined in the Course Schedule [pp. 3-7]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. *FREE access through USask library

Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition).** F.A. Davis

Utley, Hughes * & Smith (2018). **Frameworks for Advanced Nursing Practice and Research.** Springer.
[also used in NURS xxx: Theory for Nurse Practitioner Practice]

ONLINE COURSE

University of Saskatchewan Division of Continuing Medical Education, College of Medicine and School of Rehabilitation Sciences. The Role of Practitioners in Indigenous Wellness. This asynchronous, self-paced course was created by Indigenous community members and scholars, some of whom are the on-line instructors. It is designed from an Indigenous world view, delivered through the voices and stories of leaders in Indigenous health care. Upon completion, learners will be equipped with the knowledge and insights to employ an interdisciplinary approach in understanding and supporting Indigenous patients.

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**

- 11.3 Are sufficient library or other research resources available for this course? **YES**
 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted selection.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously

Fee - Graduate Studies

- 2.1 NOAC No Academic Credit
 0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

- 2.2 For the College of Arts and Science only: To which program type does this course belong?

FNAR	Fine Arts
HUM	Humanities
SCIE	Science
SOCS	Social Science
ARNP	No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

ELWR – English Language Writing Requirement
 ILRQ – Indigenous Learning Requirement
 QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites).

- 3.1 Permission Required: **YES, permission is required to audit this course.**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course:
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **NURS 830: Theory for Nurse Practitioner Practice.**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: None
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: **NURS 885**

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here: **NURS 885**

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive:

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS			
Course Title:	Therapeutic Foundations for Nurse Practitioner Practice		
Course Code:	NURS 831	Term:	TBD
Course Credits:	3	Delivery:	Synchronous Online
Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	Weekly 4-hour online seminar x 8 weeks (32 hours); 4-hour online lab x 2 weeks (16 hours)		
Course Calendar Description:	This course focuses on health promotion and other therapeutic approaches in nurse practitioner practice. Students will enhance knowledge and skills applying advanced communication strategies, health promotion, non-pharmacological interventions, and patient education within the scope of nurse practitioner practice. Incorporating a commitment to anti-racist, inclusive, and culturally safe care, students will enhance skills in promoting optimal health outcomes for individuals, groups, and/or populations.		
Pre or Co Requisite:	NURS 830 Theory for Nurse Practitioner Practice(PRE)		

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Apply advanced therapeutic communication strategies (i.e. trauma and violence informed care, culturally safe communication, counselling, harm-reduction, shared decision making) to address

diverse patient needs and populations while adhering to regulatory and legislative requirements. (NP ELCs 1.10 – 1.12)

2. Synthesize research to develop and implement effective, evidence-informed, culturally appropriate health promotion strategies that address the specific needs of diverse patient populations. (NP ELCs 1.6 and 1.11)
3. Evaluate non-pharmacological therapy to determine evidence-informed, patient-centered options for managing diverse health conditions and populations. (NP ELCs 1.6, 1.7, 1.9)
4. Enhance self-awareness of personal biases, and deepen knowledge of anti-racist, inclusive, and culturally safe care practices, while also analyzing the ongoing effects of colonization, racism, and oppression on Indigenous people's health to deliver equitable healthcare services. (NP ELCs 3.1-3.5).
5. Design, evaluate and revise health education and health promotion materials to promote culturally appropriate, evidence-informed content and strategies for improving health. (NP ELCs 2.3, 4.1, 4.2)
6. Demonstrate scholarship by disseminating critical appraisal and synthesis of information to others, communicating logically and coherently using credible and relevant sources. (NP ELCs 2.1, 5.1, 5.1)
7. Demonstrate a deepened understanding of Indigenous knowledge and traditional healing practices, including how they can be incorporated into patient-centered culturally safe care. (NP ELCs 3.3 & 1.6)
8. Apply the foundational elements of your role identity as a nurse practitioner counselor. (NP ELC 1.10-1.11)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;

- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter is defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the

institution. A copy of the Learning Charter can be found at:
http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

*An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

Therapeutic Foundations for Nurse Practitioner Practices focuses on establishing competencies in advanced communication, counselling, health promotion, education, advocacy, leadership and non-pharmacological management. Through interactive seminars, case studies, online simulation, course assignments and self-directed learning you will enhance your knowledge and skills delivering evidence-based, patient-centered, inclusive care that promotes optimal patient and health-system outcomes. Participation in the Role of Providers in Indigenous Wellness course provides opportunity to reflect on personal bias impacting provision of care, deepen understanding of Indigenous knowledge and traditional healing, and develop a personal action plan to enhance provision of anti-racist, culturally safe health care.

COURSE SCHEDULE

Date & Topic	Required Readings/Media
<p>Week 1</p> <p>Intro to therapeutics (patient centered care, rational prescribing, non-pharmacotherapy, stewardship, CAM, SDoH etc)</p>	<ul style="list-style-type: none"> • Primary Care the Art and Science of Advanced Practice Nursing. Review the following chapters: <ul style="list-style-type: none"> ○ Chapter 1: Primary Care in the Twenty-First Century: A Circle of Caring; ○ Chapter 2: Caring and the Advanced Practice Nurse; ○ Chapter 4: The Art of Diagnosis and Treatment; ○ Chapter 5: Evidence-Based Practice • Bates Visual Guide to Physical Examination – Communication and Interpersonal Skills Videos. Review the following videos: <ul style="list-style-type: none"> ○ 1. Technique: Active or Attentive Listening; ○ 3. Technique: Empathetic Responses; ○ 6. Technique: Empowering the Patient; ○ 8. Use of Understandable Language; ○ 9. Use of non-stigmatizing Language; ○ 10. Appropriate non-verbal communication; ○ 13. Patient-Centeredness in Computerized Clinical Settings;

	<ul style="list-style-type: none"> ○ 22. Obtaining Informed Consent; ○ 24. Working with Medical Interpreters • Frameworks for Advanced Nursing Practice and Research. Read the following chapters: <ul style="list-style-type: none"> ○ Chapter 7: Frameworks for Teaching & Learning
<p>Week 2</p> <p>Health Promotion</p>	<ul style="list-style-type: none"> • Primary Care the Art and Science of Advanced Practice Nursing. Read Chapter 3: Health Promotion • Canadian Task Force for Preventative Health Care Guidelines • Bates Guide to Physical Examination and History Taking. Read Chapter 6: Health Maintenance and Screening • Shen, S & Dubey, C (2019). Addressing vaccine hesitancy. <i>Canadian Family Physician</i>, 65, 175-181. https://www.cfp.ca/content/cfp/65/3/175.full.pdf • Canadian Pediatric Society. (2024). Working with vaccine-hesitant parents: An update. • Cutilli, C. (2020). Excellence in patient education: Evidence-based education that “sticks” and improves patient outcomes. <i>Nurs Clin North Am</i>, 55(2), 267-282. doi: 10.1016/j.cnur.2020.02.007 • Agency for Healthcare Research and Quality. Patient Education and Engagement. https://www.ahrq.gov/health-literacy/patient-education/index.html Review materials on this website to support development of your Patient Education Material assignment
<p>Week 3</p> <p>Indigenous Health</p>	<p>Role of Practitioners in Indigenous Wellness Course (Self-Directed Online)</p>
<p>Week 4</p> <p>Counselling Strategies Part 1 (Shared Decision Making, Motivational Interviewing,</p>	<ul style="list-style-type: none"> • Primary Care the Art & Science of Advanced Practice Nursing. Read Chapter 87: Primary Care Approaches to Behavioural Health • Bates Visual Guide to Physical Examination – Communication and Interpersonal Skills Videos. Review the following videos: <ul style="list-style-type: none"> ○ 14. Teach-Back Method;

<p>Behavioural Health, Health Education)</p>	<ul style="list-style-type: none"> ○ 27. Motivational Interviewing; Rapport: Newborns and Infants; ○ 16. Rapport: Young Child; ○ 17. Rapport: Adolescents; ○ 18. Rapport: Older Adults; ● Doppa, M. & Heeyoung, L. (2014). Motivational interviewing. A journey to improve health. <i>Nursing</i>, 44(3), 40-45. doi: 10.1097/01.NURSE.0000443312.58360.82 ● Frameworks for Advanced Nursing Practice and Research. Read the following chapters: <ul style="list-style-type: none"> ○ Chapter 4: Frameworks for Behavioural Change ○ Chapter 6: Human Development Frameworks ○ Chapter 13: Psychological Frameworks ● Stein, D. et al (2022). General and unique communication skills challenges for advanced practice providers: A mixed methods study. <i>Journal of Advanced Practice Oncology</i>, 13(1), 32-43. doi: 10.6004/jadpro.2022.13.1.3
<p>Week 5</p> <p>Counseling Strategies Part 2 (Trauma & Violence Informed Care, Discussing Sensitive Topics, Disclosing Serious News, Harm Reduction, Crises Intervention)</p>	<ul style="list-style-type: none"> ● Bates Visual Guide to Physical Examination – Communication and Interpersonal Skills Videos. Watch the following videos: <ul style="list-style-type: none"> ○ 19. Rapport: Patients with Physical and Sensory Disabilities; ○ 20. Rapport: LGBTQ+ Adults; ○ 21. Broaching Sensitive Topics; Discussing Advanced Directives; ○ 25. Disclosing Serious News; ○ 26. Responding to Emotional Cues; ● Roberts, Chandler, & Kalmakis (2019). A model for trauma-informed primary care. <i>Journal of the American Association of Nurse Practitioners</i>, 31(2), 139-144. doi: 10.1097/JXX.000000000000116. https://pubmed.ncbi.nlm.nih.gov/30550391/ ● Jackson, J. (2024). Harm Reduction Saves Lives series – Canadian Nurse articles and videos aims at taking a non-judgemental approach to care.

	<p>https://www.canadian-nurse.com/blogs/cn-content/2024/06/06/harm-reduction-saves-lives-series</p> <ul style="list-style-type: none"> • Brown, N. (2021). Implementing harm reduction strategies to reduce opioid overdoses. <i>The Journal for Nurse Practitioners</i>, 17(7), 870-873. https://doi.org/10.1016/j.nurpra.2021.02.030 • Rosenzweig, M. (2012). Breaking bad news: A guide for effective and empathetic communication. <i>Nurse Practitioner</i>, 37(2), doi: 10.1097/01.NPR.0000408626.24599.9e • Buckman, R. (2005). Breaking bad news: the S-P-I-K-E-S strategy. Psychosocial Oncology • Schulman, M & Maul, A. (2019). Screening for Adverse Childhood Experiences and Trauma. https://www.chcs.org/media/TA-Tool-Screening-for-ACEs-and-Trauma_020619-1.pdf
<p>Week 6</p> <p>Indigenous Health</p>	<p>Role of Practitioners in Indigenous Wellness Course (Self-Directed Online)</p>
<p>Week 7</p> <p>Evidence-Based Approaches to Non-Pharmacotherapy Seminar 1</p>	<p>Student Self-Directed Research on chosen presentation topic. The USask library is an excellent starting point. Some possible resources for non-pharmacotherapy include (however please don't limit your search to only these)</p> <ul style="list-style-type: none"> • The Review of Natural Products: Provides detailed information about natural products • National Center for Complementary and Integrative Health • Natural Medicines • eCPS
<p>Week 8</p> <p>Evidence-Based Approaches to Non-Pharmacotherapy Seminar 2</p>	<p>Student Self-Directed Research on chosen presentation topic. The USask library is an excellent starting point. Some possible resources for natural products include (however please don't limit your search to only these)</p> <ul style="list-style-type: none"> • The Review of Natural Products: Provides detailed information about natural products • National Center for Complementary and Integrative Health • Natural Medicines • eCPS

<p>Week 9</p> <p>Advanced Communication Lab 1 (Online): Motivational Interviewing</p>	<ul style="list-style-type: none"> • Sofer, D. (2018). The value of simulation in nursing education. <i>American Journal of Nursing (AJN)</i>, 118(4), 17-18. doi: 10.1097/01.NAJ.0000532063.79102.19. • Eppich, W. & Cheng, A. (2015). Promoting excellent and reflective learning in simulation (PEARLS). Development and rational for a blended approach to health care simulation debriefing. <i>Simulation in Healthcare</i>, 10(2), 106-115. http://www.healthsciences.usask.ca/CLRC/clrc-docs/PEARLS.pdf • INACSL Standards Committee (2021). Healthcare simulation standards of best practice professional integrity. <i>Clinical Simulation in Nursing</i>, 58, 45-48. DOI:https://doi.org/10.1016/j.ecns.2021.08.014 • Review readings on Motivational Interviewing as you will apply these during the lab
<p>Week 10</p> <p>Advanced Communication Lab 2 (Online): Trauma Informed Care</p>	<ul style="list-style-type: none"> • Review readings on Trauma Informed Care and Harm Reduction as you will apply these during the lab

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media for this course are outlined in the Course Schedule [pp. 17-20]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

- Bickley, L.S., Szilagy, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.
- Bates' Visual Guide to Physical Examination.** Wolters Kluwer. **FREE access through USask library*
- Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6th edition).** F.A. Davis
- Utey, Hughes * & Smith (2018). **Frameworks for Advanced Nursing Practice and Research.** Springer. [also used in NURS xxx: Theory for Nurse Practitioner Practice]

ONLINE COURSE

University of Saskatchewan Division of Continuing Medical Education, College of Medicine and School of Rehabilitation Sciences. The Role of Practitioners in Indigenous Wellness. This asynchronous, self-paced course was created by Indigenous community members and scholars, some of whom are the on-line instructors. It is designed from an Indigenous world view, delivered through the voices and stories of leaders in Indigenous health care. Upon completion, learners will be equipped with the knowledge and insights to employ an interdisciplinary approach in understanding and supporting Indigenous patients.

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- CRNS NP Entry-level Competencies (ELC)s** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS NP Practice Standards** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS Nurse Practitioner Practice Guidelines** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

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USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Role of Practitioners in Indigenous Wellness Course*	Due by last date of class	Pass/Fail
Health Education Material Assignment*	Week 5	40%
Presentation: Evidence-Informed Non-Pharmacological Therapies	Weeks 7 & 8	30%
Critical Reflection: Advanced Communication Labs	Week 10	30%
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

ROLE OF PRACTITIONERS IN INDIGENOUS WELLNESS COURSE

Value: Pass/Fail (Overall grade of 70% required for a Pass)

Due Date: By end of the course

Learning Outcomes: Completion of this course supports achievement of learning outcomes 4. Enhance self-awareness of personal biases, and deepen knowledge of anti-racist, inclusive, and culturally safe care practices, while also analyzing the ongoing effects of colonization, racism and oppression on Indigenous people's health to deliver equitable health care services; and 7. Demonstrate deepened understanding of Indigenous knowledge and traditional healing practices, including how they can be incorporated into patient-centered culturally safe care.

Description: You will complete this online course and associated learning activities/assignments to enhance your competencies providing culturally safe care. The course is delivered asynchronously (self-paced) and must be completed within the course dates. It will take an estimated 25 hours to complete. Some class time has been set aside to work on the course, however you will also need to spend time outside of class to complete the course and associated assignments.

Through your participation in this course you will be able to:

1. Identify how your background and culture influences both your health care experiences and the care you provide.
2. Explore how cultural genocide led to intergenerational trauma that impacts the health and wellness of Indigenous peoples.
3. Identify how the current health disparities and institutional experiences including racism faced by Indigenous peoples have their roots in historical colonialism and policy. (Module 2)
4. Explain how reclaiming Indigenous culture and beliefs may allow for healing (Module 2)
5. Identify ways you can enhance your practice to ensure culturally responsive, anti-oppressive and antiracist care for Indigenous Peoples. (Module 3)
6. Develop communication strategies that promote culturally responsive health care for Indigenous Peoples in your area of practice. (Module 3)

Learning Outcomes Addressed: 4, 7

HEALTH EDUCATION MATERIAL ASSIGNMENT

Value: 30%

Due Date: **Week 5**

Type: Completion of this assignment supports achievement of learning outcomes 2. Synthesize research to develop and implement effective, evidence-informed, culturally appropriate health promotion strategies that address the specific needs of diverse patient populations; 5. Design, evaluate and revise health education and health promotion materials to promote culturally appropriate, evidence-informed content and strategies for improving health; and 6. Demonstrate scholarship by disseminating critical appraisal and synthesis of information to others, communicating logically and coherently using credible and relevant sources.

Description: Applying relevant teaching and learning theory, you will design an evidence-informed health education product (e.g., patient handout, video, infographic, webpage, etc.) to enhance knowledge of individuals, groups, communities, and/or organizations on a selected health topic.

1. Begin by selecting a health education topic relevant to nurse practitioner practice. When selecting a topic, you are encouraged to reflect on knowledge gaps in patient education you have identified through your nursing practice. For example, pediatric fever management, prevention/management of occupational injury, STBBI prevention, promotion of positive mental health, antimicrobial stewardship, etc.
2. Select a target audience for the material you will develop. Research best practices and cultural considerations for educating your identified target audience and integrate these principles into your product design.
3. Research your identified topic area and design an evidence-informed health education product for your identified target audience.
4. Consider how you will evaluate the effectiveness of your developed product. Write a summary of your evaluation plan (500 words maximum).
5. Submit your final product and evaluation plan for peer review and instructor grading.

Assignments will be graded using the [College of Graduate and Postdoctoral Studies Literal Descriptors](#) based on the following content areas:

Format - e.g., visually appealing, delivery, Title page: Including student name, course, topic, target audience, and date	5 pts
Evidence-Informed Content (should include reference list as project attachment with proper APA citations)	10 pts
Application of appropriate teaching & learning theory (e.g., health literacy, cultural considerations)	5 pts
Evaluation Plan	5 pts
Peer Feedback	5 pts
Total	30 pts

Learning Outcomes Addressed: 2, 5, 6

EVIDENCE-BASED NON-PHARMACOLOGICAL THERAPY PRESENTATION

Value: 30%

Date: Assigned Seminar Week 7 or 8

Length: 15-minutes

Type: Completion of this assignment supports achievement of learning outcomes 3. Evaluate non-pharmacological therapy to determine evidence-informed, patient centered options for managing

diverse health conditions and populations; 6. Demonstrate scholarship by disseminating critical appraisal and synthesis of information to others, communicating logically and coherently using credible and relevant sources.

Description: Working in groups of 2-3, you will select a health condition from the sign-up list provided by your instructor, and research evidence-based non-pharmacological therapy for that condition. You will present a critical appraisal of the research evidence for non-pharmacological management of the condition during a 10-minute class presentation.

Presentations will be graded using the following criteria:

Critical appraisal of evidence	10 pts
Recommendations for evidence-informed, patient centered management of condition, based on research evidence	10 pts
Scholarship – APA formatting and communication/presentation skills	10 pts
Total	30 pts

Learning Outcomes Addressed: 3, 6

CRITICAL REFLECTION ADVANCED COMMUNICATION LABS

Value: 30%

Date: **Week 10**

Length: 500 words

Type: Reflective practice on competency and professional NP role identity development

Description: You will participate in advanced communication labs as outlined in the course scheduling, applying your developing skills in advanced therapeutic communication during mock patient scenarios. After these labs, you will reflect on your developing competencies and submit a reflective journal. This journal may be done in a format of your choosing (i.e. written, recorded presentation, or other artistic outlet which illustrates your reflection on the learning experience, strengths, ongoing learning needs, and opportunities for growth, ability to receive and incorporate peer/instructor feedback.

Grading of reflective practice assignments is guided by the [CGPS literal descriptors](#) with a specific rubric posted in Canvas.

Learning Outcomes Addressed: 1, 2, 8

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

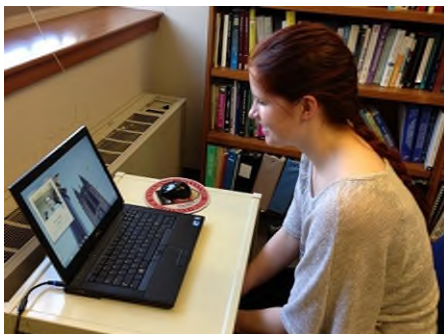
ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

EXAM POLICIES, PROCEDURES AND GUIDELINES

The midterm and final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are

required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.
7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.

12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette: <https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be

contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by [insert names]



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE & POSTDOCTORAL STUDIES NURSING**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 832**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Pathophysiology-Pharmacology for Nurse Practitioner Practice I**
Course Short Title (maximum 30 characters): **Patho-Pharm NP Practice I**
- 2.4 Total Hours: Lecture **Seminar - 39 hours** Lab Tutorial Other
- 2.5 Weekly Hours: Lecture Seminar **3-4 hrs** Lab Tutorial Other
- 2.6 Term in which it will be offered: **T1** T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **Admission to the MN-NP**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **This course provides students with advanced understanding of pathophysiology and pharmacotherapeutics essential for nurse practitioner practice. Students will enhance their knowledge of the etiology, pathogenesis, clinical manifestations, and systematic effects of disease as well as key principles of drug therapy including mechanism of action, side effects, drug interactions, and other prescribing considerations for population across the lifespan. Special attention will be given to evidence-based prescribing, regulatory and legal standards, resource stewardship, patient safety, and strategies for optimizing patient outcomes while minimizing risks.**
- 2.9 Do you allow this course to be repeated for credit? **NO**

3. Please list rationale for introducing this course:

This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).

4. Please list the learning objectives for this course:

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Analyze the etiology, pathogenesis, clinical manifestations and systemic effects of common illnesses and conditions across the lifespan including unique considerations for specific population groups (i.e. pregnancy, lactation, pediatrics, older adults, renal impairment, co-morbid conditions). (NP ELC 1.3)
2. Evaluate pharmacokinetics, pharmacodynamics, pharmacogenetics, and other prescribing considerations (i.e. indications, side effects, interactions, contraindications, patient preferences, alternative treatment options, efficacy, costs, social determinants of health, medication reconciliation), ensuring effective and safe treatment plans for diverse patient populations. (NP ELCs 1.6, 1.7)
3. Develop and implement strategies for evidence-based patient centered prescribing that adhere to regulatory and legal standards. (NP ELC 1.6, 1.7)
4. Apply knowledge of pathophysiology and pharmacotherapeutics to enhance patient safety and outcomes through informed clinical decision making and patient monitoring. (NP ELCs 1.5, 1.6, 1.7)
5. Counsel and educate patients and their caregivers on pharmacological interventions applying relevant teaching and learning theory, evidence-informed content, principles of informed consent and health literacy. (NP ELCs 1.2, 1.7, 1.9)
6. Apply comprehensive knowledge of over-the-counter medications, vitamins, minerals, and alternative medicine to inform therapeutic care plans. (NP ELCs 1.6, 1.7)
7. Demonstrate ability to correctly write a prescription. (NP ELC 1.7)
8. Reflect on the ethical, legal, regulatory, and practice considerations related to the expanded nurse practitioner role and navigating barriers to pharmaceutical access. (NP ELC 3.4 & Practice Standards)

5. Impact of this course

Are the programs of other departments or Colleges affected by this course? **NO**

If so, were these departments consulted? (Include correspondence)
Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)
- 6.1 Courses to be deleted? **NURS 881: Pathophysiology-Pharmacology for Advanced Nursing Practice I and NURS 886: Pathophysiology-Pharmacology for Advanced Nursing Practice II.**
- 6.2 Courses for which this course will be a prerequisite: **NURS 833.3 Pathophysiology-Pharmacology for Nurse Practitioner Practice II**
- 6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**
7. **Course outline**
(Weekly outline of lectures or include a draft of the course information sheet.)

Timelines	Learning Activities
<p>Week 1</p> <p>Intro to Advanced Pathophysiology</p>	<p>McCance – Unit 1: The Cell (Chapters 1. Cellular Biology; 2. Genes and Genetic Diseases; 3. Epigenetics and Disease; 4. Altered Cellular and Tissue Biology; 5. Fluids and Electrolytes, Acids and Bases); Unit 2: Mechanisms of Defense (Chapters 6. Innate Immunity: Inflammation and Wound Healing; 7. Adaptive Immunity; 8. Infection and Defects in Mechanisms of Defense; 9. Stress and Disease</p> <p>Osmosis.org by Elsevier. www.osmosis.org This website contains numerous videos to help illustrate pathophysiological and pharmacological processes. Example topics include Cellular Biology, Cellular Injury, and physiology for different body systems. There is a free-trial available, but then an associated fee for use.</p>
<p>Week 2</p> <p>Intro to Advanced Pharmacology</p>	<p>Lehne’s - Unit I: Introduction (Chapters 1. Prescriptive Authority; 2. Rational Drug Selection and Prescription Writing; 3. Promoting Positive Outcomes of Drug Therapy); Unit II: Basic Principles of Pharmacology (Chapters 4. Pharmacokinetics, Pharmacodynamics, and Drug Interactions; 5. Adverse Drug Reactions and Medication Errors; 6. Individual Variation in Drug Responses; 7. Genetic and Genomic Considerations in Pharmacotherapeutics); Unit III: Drug Therapy Across the Lifespan (Chapters 8. Drug Therapy During Pregnancy and Breast-Feeding; 9. Drug Therapy in the Pediatric Patients; 10. Drug Therapy in Geriatric Patients)</p> <p>College of Registered Nurses Saskatchewan (CRNS). Bylaws. Review SECTION 3. NURSE PRACTITIONER CATEGORY on expanded scope of practice for prescribing (pp. 27-30) and SECTION 4. THE PRESCRIPTION REVIEW PROGRAM (pp 32-37)</p> <p>CRNS. (2020). Guideline for Prescribing Medication.</p>

	<p>Saskatchewan College of Pharmacy Professionals. (2023). Drug Distribution by Prescription. Reference Manual A synopsis of federal and provincial acts and regulations governing prescriptions in SK</p> <p>Government of Canada. Non-insured health benefits for First Nations and Inuit: https://sacisc.gc.ca/eng/1572888328565/1572888420703</p> <p>Government of Saskatchewan. Saskatchewan Drug Plan. https://formulary.drugplan.ehealthsask.ca/About Includes general information about the Saskatchewan Drug Formulary, Exception Drug Status (EDS), and Over-the-Counter Products.</p> <p>*Students from outside SK are required to review prescribing standards and familiarize themselves with drug benefits for the jurisdiction in which they are practicing.</p> <p>Maxwell, S. (2016). Rational prescribing: the principles of drug selection. <i>Clinical Medicine Journal</i>, 16(5), 459-464. https://doi.org/10.7861/clinmedicine</p> <p>Safe and Effective e-Prescribing across the Healthcare System – Complete Unit 1: Introduction to e-Prescribing and Medication management (9-12 min) and Unit 2: Current State: Prescribing (12-15 min). Register for free at: https://elearnhcp.ca/ (See modules for Health Professional Students)</p>
<p>Week 3 Respiratory</p>	<p>McCance – Unit 8: The Pulmonary System (Chapter 26. Structure and Function of the Pulmonary System; Chapter 27. Alterations in Pulmonary Function; Chapter 28. Alterations in Pulmonary Function in Children)</p> <p>Lehne’s - Chapters 62. Drugs for Asthma and Chronic Obstructive Pulmonary Disease</p> <p>Rx Files – Review the following topics: Asthma, COPD, Inhalation Devices, Inhaler Technique, Smoking Cessation, Community Acquired Pneumonia</p> <p>Global Initiative for Asthma (GINA). 2024 Global Strategy for Asthma Management and Prevention. Review with a focus on pathophysiology and pharmacotherapy.</p> <p>Global Initiative for Chronic Obstructive Lung Disease (GOLD). Pocket Guide to COPD Diagnosis, Management and Prevention: 2024 Report. Review with a focus on pathophysiology and pharmacotherapy.</p>
<p>Week 4 CVS & PVS I</p>	<p>McCance – Unit 7: The Cardiovascular and Lymphatic Systems (Chapter 23. Structure and Function of the Cardiovascular and Lymphatic System; Chapter 24.</p>

	<p>Alterations in Cardiovascular Function; Chapter 25. Alterations in Cardiovascular Function in Children)</p> <p>Lehne's - Chapters 37. Diuretics; 38. Drugs Acting on the Renin-Angiotensin-Aldosterone System; 39. Calcium Channel Blockers; 40. Vasodilators; 41. Drugs for Hypertension; 42. Drugs for Heart Failure; 43. Antidysrhythmic Drugs; 44. Prophylaxis of Atherosclerotic Cardiovascular Disease: Drugs that Help Normalize Cholesterol and Triglyceride Levels; 45. Drugs for Angina Pectoris; 46. Anticoagulant, Antiplatelet, and Thrombolytic Drugs</p> <p>Canadian Cardiovascular Society Guidelines https://ccs.ca/guidelines-and-clinical-practice-update-library/ Review the following guidelines with a focus on pathophysiology and pharmacotherapy:</p> <p style="padding-left: 40px;">2022 CCS Guidelines for Use of GLP-1 Receptor Agonists and SGLT2 Inhibitors for Cardiorenal Risk Reduction in Adults</p> <p style="padding-left: 40px;">2021 CCS Guidelines for Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult</p> <p style="padding-left: 40px;">2020 CCS/CHRS Comprehensive Guidelines for the Management of Atrial Fibrillation</p> <p>Rabi et al and the Hypertension Canada Working Group. (2020). Guidelines for Prevention and Management of Hypertension.</p>
<p>Week 5 CVS & PVS II</p>	<p>Lehne's - Unit IV: Peripheral Nervous System Drugs (Chapters 11. Basic Principles of Neuropharmacology; 12. Physiology of the Peripheral Nervous System; 13. Muscarinic Agonists; 14. Muscarinic Antagonists; 15. Adrenergic Agonists; 16. Adrenergic Antagonist; 17. Indirect-Acting Antiadrenergic Agents)</p> <p>RxFiles – Review the following topics: Angina, ACEIs & ARBs, Beta Blockers, Calcium Channel Blockers, Diuretics & Miscellaneous Antihypertensives, HTN Summary, Warfarin Overview, Antithrombotic Summary Chart, Atrial Fibrillation, Anticoagulation Colour Comparison Chart, Heart Failure, Lipid Lowering Agents, Post-MI, QI-Prolongation</p> <p>Thrombosis Canada. https://thrombosiscanada.ca/hcp/practice/clinical_guides Review the following Guidelines:</p> <p style="padding-left: 40px;">Acetylsalicylic Acid (ASA)</p> <p style="padding-left: 40px;">Anticoagulation in Patients Requiring Antiplatelet Therapy</p>

	<p>DOACS: Coagulation Test, Comparison and Frequently Asked Questions, Perioperative Management</p> <p>Duration of dual Antiplatelet therapy in Patients with CAD</p> <p>Ischemic Stroke or TIA: Secondary Prevention</p> <p>Perioperative Management of Antiplatelet Therapy</p> <p>Peripheral Arterial Disease</p> <p>Stroke Prevention in Atrial Fibrillation</p> <p>Warfarin: Management of Out-of-Range INRs and Perioperative Management</p>
<p>Week 6</p> <p>Midterm and Nutrition & Complementary Therapies</p>	<p>Midterm (First 1.5 hours of class)</p> <p>Lehne's Unit XVII – Nutrition and Complementary Therapies (Chapters 67. Vitamins; 69. Complementary and Alternative Therapies)</p> <p>RxFiles - Review the following topics: Probiotics, Herbal Drug Interactions, OTC Products</p> <p>Government of Canada. Regulation of Non-Prescription Drugs.</p> <p>Applying Canada's Dietary Guidelines. Advice on Vitamin and mineral Supplementation.</p> <p>Martini et al. (2020). Appropriate and inappropriate vitamin supplementation in Children. <i>Journal of Nutritional Science</i>, 9, e20. doi: 10.1017/jns.2020.12</p> <p>Canadian Pediatric Society. Review the following Position Statements:</p> <ul style="list-style-type: none"> Using Probiotics in Paediatric Populations (2022) Dietary Intake of Sodium in Children: Why it Matters (2020) Energy and Sports Drinks in Children and Adolescents (2023) The Role of Dietary Fibre and Prebiotics in Paediatric Diet (2020) Iron Requirements in the First 2 years of Life (2019)
<p>Week 7</p> <p>Renal & Urinary</p>	<p>McCance – Unit 9: The Renal and Urologic Systems (Chapter 29. Structure and Function of the Renal and Urologic Systems; Chapter 30. Alterations of Renal and Urinary Tract Function; Chapter 31. Alterations in Renal and Urinary Tract Function in Children)</p>

	<p>RxFiles – Review the following topics: Urinary Tract Infections, Cystitis, Urinary Incontinence</p> <p>Canadian Urological Association (CUA). Review the following guidelines with a focus on pathophysiology and pharmacotherapy:</p> <p style="padding-left: 40px;">Evaluation and Medical Management of Kidney Stones (2022)</p> <p style="padding-left: 40px;">Diagnosis and Management of Nocturia (2022)</p> <p style="padding-left: 40px;">Erectile Dysfunction (2021)</p> <p>BC Guidelines (2023). Chronic Kidney Disease – Identification, Evaluation, and Management of Adult Patients.</p>
<p>Week 8</p> <p>GI</p>	<p>McCance – Unit 11: The Digestive System (Chapter 35. Structure and Function of the Digestive System; Chapter 36. Alterations of Digestive Function; Chapter 37. Alterations in Digestive Function in Children)</p> <p>Lehne’s - Unit XVI: Gastrointestinal Drugs (Chapters 64. Drugs for Peptic Ulcer Disease; 65. Laxatives; 66. Other Gastrointestinal Drugs)</p> <p>RxFiles – Review the following topics: Bowel Prep for Colonoscopy, Constipation, IBD, GERD and PUD, H. Pylori, IBS, Nausea & Vomiting</p> <p>Katz et al and the American College of Gastroenterology. (2022). ACG Clinical Guidelines for the Diagnosis and Management of Gastroesophageal Reflux Disease. <i>The American Journal of Gastroenterology</i>, 117(1), 27-56. DOI: 10.14309/ajg.0000000000001538</p>
<p>Week 9</p> <p>Reproductive</p>	<p>McCance – Unit 10: The Reproductive Systems (Chapter 32. Structure and Function of the Reproductive Systems; Chapter 33. Alterations of the Female Reproductive System; Chapter 34. Alterations of the Male Reproductive System)</p> <p>Lehne’s - Unit XI – Women’s Health (Chapters 50. Estrogens and Progestins: Basic Pharmacology and Noncontraceptive Applications; 51. Birth Control); Unity XII – Men’s Health (Chapters 52. Androgens; 53. Drugs for Erectile Dysfunction and Benign Prostatic Hyperplasia); Chapter 82. Drug Therapy of Sexually Transmitted Diseases</p> <p>RxFiles – Review the following topics: Andropause, Hirsutism, Erectile Dysfunction, Sexual Dysfunction, Oral Contraceptives, Birth Control Options, Menopause, Peri-Pregnancy</p>

<p>Week 10 HENT & Derm</p>	<p>McCance – Chapter 41. Structure, Function, and Disorders of the Integument; Chapter 42. Alterations of the Integument in Children</p> <p>Lehne’s - Chapters 56. Antihistamines; 63. Drugs for Allergic Rhinitis, Cough and Colds; 79. Anti-Fungal Agents; 87. Drugs for the Eye; 88. Drugs for the Skin; 89. Drugs for the Ear</p> <p>RxFiles – Review the following topics: Acne, Topical Corticosteroids, Head Lice & Scabies, Warts, Glaucoma, Intranasal Corticosteroids, Dry Eye, Acute Otitis Media, Bronchitis, Pharyngitis, Sinusitis, Skin & Soft Tissue Infections</p> <p>Kerri, J. (2024). Principles of Topical Dermatologic Therapy. Merck Manual Professional Version.</p> <p>Smith et al. (2023). The treatment of mild upper respiratory tract infections – a position paper with recommendations for best practice. <i>Drugs in Context</i>, 12, 4-2. doi: 10.7573/dic.2023-4-2</p> <p>Thomas, M. & Bomar, P. (2023). Upper Respiratory Tract Infection. StatPearls [Internet]. National Library of Medicine (NIH)</p>
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8. **Enrolment**

8.1 What is the maximum enrolment number for this course? **35**
And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **Not Applicable – Distance Learning**

- 10-50
- 50-90
- 90-130
- 130+

9. **Student evaluation**

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERIC/PERCENTAGE**
C – Completed Requirements
(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage
(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
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Case Presentation	Various Dates Throughout Term	25%
Midterm	Week 6	25%
Final Exam	Exam Period	50%
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **NO**

10. **Required text**

Include a bibliography for the course.

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

Jensen, B., Regier, L.D., Kosar, L. (Eds). (2023). **RxFiles: Drug Comparison Charts (14th edition)**. Saskatoon City Hospital. **Available online for FREE through USask library*

Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition**. Elsevier.

Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition**. Elsevier.

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Saskatchewan Drug Plan.

<https://formulary.drugplan.ehealthsask.ca/About> **Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction*

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted selection.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites).

- 3.1 Permission Required: **YES, permission is required to audit this course**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **None**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course:
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **None**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: NURS 881.3

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here: NURS 881.3

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive:

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.**COURSE SYLLABUS**

Course Title:	Pathophysiology-Pharmacology for Nurse Practitioner Practice I		
Course Code:	NURS 832	Term:	TBD
Course Credits:	3	Delivery:	Synchronous online
Location:	Distance Learning	Website:	https://canvas.usask.ca/

Course Dates & Times:	Weekly 4-hour seminar x 10 weeks (40 hours)
Course Calendar Description:	This course provides students with advanced understanding of pathophysiology and pharmacotherapeutics essential for nurse practitioner practice. Students will enhance their knowledge of the etiology, pathogenesis, clinical manifestations, and systematic effects of disease as well as key principles of drug therapy including mechanism of action, side effects, drug interactions, and other prescribing considerations for population across the lifespan. Special attention will be given to evidence-based prescribing, regulatory and legal standards, resource stewardship, patient safety, and strategies for optimizing patient outcomes while minimizing risks.
Pre or Co-Requisite:	Admission to the MN-NP
Course Equivalent	Completion of both NURS 881: Pathophysiology-Pharmacology for Advanced Nursing Practice I and NURS 886: Pathophysiology-Pharmacology for Advanced Nursing Practice II

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Analyze the etiology, pathogenesis, clinical manifestations and systemic effects of common illnesses and conditions across the lifespan including unique considerations for specific population groups (i.e. pregnancy, lactation, pediatrics, older adults, renal impairment, co-morbid conditions). (NP ELC 1.3)
2. Evaluate pharmacokinetics, pharmacodynamics, pharmacogenetics, and other prescribing considerations (i.e. indications, side effects, interactions, contraindications, patient preferences, alternative treatment options, efficacy, costs, social determinants of health, medication

reconciliation), ensuring effective and safe treatment plans for diverse patient populations. (NP ELCs 1.6, 1.7)

3. Develop and implement strategies for evidence-based patient centered prescribing that adhere to regulatory and legal standards. (NP ELC 1.6, 1.7)
4. Apply knowledge of pathophysiology and pharmacotherapeutics to enhance patient safety and outcomes through informed clinical decision making and patient monitoring. (NP ELCs 1.5, 1.6, 1.7)
5. Counsel and educate patients and their caregivers on pharmacological interventions applying relevant teaching and learning theory, evidence-informed content, principles of informed consent and health literacy. (NP ELCs 1.2, 1.7, 1.9)
6. Apply comprehensive knowledge of over-the-counter medications, vitamins, minerals, and alternative medicine to inform therapeutic care plans. (NP ELCs 1.6, 1.7)
7. Demonstrate ability to correctly write a prescription. (NP ELC 1.7)
8. Reflect on the ethical, legal, regulatory, and practice considerations related to the expanded nurse practitioner role and navigating barriers to pharmaceutical access. (NP ELC 3.4 & Practice Standards)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at: <https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter is defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-direct learning. Course design is based on a professional, self-directed

learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

*An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

This course aims to deepen the understanding and application of pathophysiology and pharmacotherapeutics for nurse practitioner (NP) practice, fostering advanced clinical decision-making skills to support safe and effective care of diverse populations throughout the lifespan. Through a variety of learning activities including self-directed learning, seminar discussion and case studies, students will examine the physiological processes underlying disease states with a focus on interpreting clinical manifestations and applying pharmacological interventions. Students will explore the etiology, pathogenesis, and clinical manifestations of diseases, alongside a critical analysis of pharmacotherapeutic principles such as drug actions, side effects, interactions, and compliance

complexities. Emphasis will be on evidence-based practices, patient-centred care, adherence to regulatory and legal standards, and effective strategies for resource stewardship, patient safety, and risk management. Special focus will be placed on inclusive healthcare practices to ensure equitable patient care regardless of cultural, social, or economic differences.

COURSE SCHEDULE

Timelines	Learning Activities
<p>Week 1</p> <p>Intro to Advanced Pathophysiology</p>	<p>McCance – Unit 1: The Cell (Chapters 1. Cellular Biology; 2. Genes and Genetic Diseases; 3. Epigenetics and Disease; 4. Altered Cellular and Tissue Biology; 5. Fluids and Electrolytes, Acids and Bases); Unit 2: Mechanisms of Defense (Chapters 6. Innate Immunity: Inflammation and Wound Healing; 7. Adaptive Immunity; 8. Infection and Defects in Mechanisms of Defense; 9. Stress and Disease</p> <p>Osmosis.org by Elsevier. www.osmosis.org This website contains numerous videos to help illustrate pathophysiological and pharmacological processes. Example topics include Cellular Biology, Cellular Injury, and physiology for different body systems. There is a free-trial available, but then an associated fee for use.</p>
<p>Week 2</p> <p>Intro to Advanced Pharmacology</p>	<p>Lehne’s - Unit I: Introduction (Chapters 1. Prescriptive Authority; 2. Rational Drug Selection and Prescription Writing; 3. Promoting Positive Outcomes of Drug Therapy); Unit II: Basic Principles of Pharmacology (Chapters 4. Pharmacokinetics, Pharmacodynamics, and Drug Interactions; 5. Adverse Drug Reactions and Medication Errors; 6. Individual Variation in Drug Responses; 7. Genetic and Genomic Considerations in Pharmacotherapeutics); Unit III: Drug Therapy Across the Lifespan (Chapters 8. Drug Therapy During Pregnancy and Breast-Feeding; 9. Drug Therapy in the Pediatric Patients; 10. Drug Therapy in Geriatric Patients)</p> <p>College of Registered Nurses Saskatchewan (CRNS). Bylaws. Review SECTION 3. NURSE PRACTITIONER CATEGORY on expanded scope of practice for prescribing (pp. 27-30) and SECTION 4. THE PRESCRIPTION REVIEW PROGRAM (pp 32-37)</p> <p>CRNS. (2020). Guideline for Prescribing Medication.</p> <p>Saskatchewan College of Pharmacy Professionals. (2023). Drug Distribution by Prescription. Reference Manual A synopsis of federal and provincial acts and regulations governing prescriptions in SK</p> <p>Government of Canada. Non-insured health benefits for First Nations and Inuit: https://sacisc.gc.ca/eng/1572888328565/1572888420703</p>

	<p>Government of Saskatchewan. Saskatchewan Drug Plan. https://formulary.drugplan.ehealthsask.ca/About Includes general information about the Saskatchewan Drug Formulary, Exception Drug Status (EDS), and Over-the-Counter Products.</p> <p>*Students from outside SK are required to review prescribing standards and familiarize themselves with drug benefits for the jurisdiction in which they are practicing.</p> <p>Maxwell, S. (2016). Rational prescribing: the principles of drug selection. <i>Clinical Medicine Journal</i>, 16(5), 459-464. https://doi.org/10.7861/clinmedicine</p> <p>Safe and Effective e-Prescribing across the Healthcare System – Complete Unit 1: Introduction to e-Prescribing and Medication management (9-12 min) and Unit 2: Current State: Prescribing (12-15 min). Register for free at: https://elearnhcp.ca/ (See modules for Health Professional Students)</p>
<p>Week 3 Respiratory</p>	<p>McCance – Unit 8: The Pulmonary System (Chapter 26. Structure and Function of the Pulmonary System; Chapter 27. Alterations in Pulmonary Function; Chapter 28. Alterations in Pulmonary Function in Children)</p> <p>Lehne’s - Chapters 62. Drugs for Asthma and Chronic Obstructive Pulmonary Disease</p> <p>Rx Files – Review the following topics: Asthma, COPD, Inhalation Devices, Inhaler Technique, Smoking Cessation, Community Acquired Pneumonia</p> <p>Global Initiative for Asthma (GINA). 2024 Global Strategy for Asthma Management and Prevention. Review with a focus on pathophysiology and pharmacotherapy.</p> <p>Global Initiative for Chronic Obstructive Lung Disease (GOLD). Pocket Guide to COPD Diagnosis, Management and Prevention: 2024 Report. Review with a focus on pathophysiology and pharmacotherapy.</p>
<p>Week 4 CVS & PVS I</p>	<p>McCance – Unit 7: The Cardiovascular and Lymphatic Systems (Chapter 23. Structure and Function of the Cardiovascular and Lymphatic System; Chapter 24. Alterations in Cardiovascular Function; Chapter 25. Alterations in Cardiovascular Function in Children)</p> <p>Lehne’s - Chapters 37. Diuretics; 38. Drugs Acting on the Renin-Angiotensin-Aldosterone System; 39. Calcium Channel Blockers; 40. Vasodilators; 41. Drugs for Hypertension; 42. Drugs for Heart Failure; 43. Antidysrhythmic Drugs; 44. Prophylaxis of Atherosclerotic Cardiovascular Disease: Drugs that Help Normalize</p>

	<p>Cholesterol and Triglyceride Levels; 45. Drugs for Angina Pectoris; 46. Anticoagulant, Antiplatelet, and Thrombolytic Drugs</p> <p>Canadian Cardiovascular Society Guidelines https://ccs.ca/guidelines-and-clinical-practice-update-library/ Review the following guidelines with a focus on pathophysiology and pharmacotherapy:</p> <p style="padding-left: 40px;">2022 CCS Guidelines for Use of GLP-1 Receptor Agonists and SGLT2 Inhibitors for Cardiorenal Risk Reduction in Adults</p> <p style="padding-left: 40px;">2021 CCS Guidelines for Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult</p> <p style="padding-left: 40px;">2020 CCS/CHRS Comprehensive Guidelines for the Management of Atrial Fibrillation</p> <p>Rabi et al and the Hypertension Canada Working Group. (2020). Guidelines for Prevention and Management of Hypertension.</p>
<p>Week 5 CVS & PVS II</p>	<p>Lehne's - Unit IV: Peripheral Nervous System Drugs (Chapters 11. Basic Principles of Neuropharmacology; 12. Physiology of the Peripheral Nervous System; 13. Muscarinic Agonists; 14. Muscarinic Antagonists; 15. Adrenergic Agonists; 16. Adrenergic Antagonist; 17. Indirect-Acting Antiadrenergic Agents)</p> <p>RxFiles – Review the following topics: Angina, ACEIs & ARBs, Beta Blockers, Calcium Channel Blockers, Diuretics & Miscellaneous Antihypertensives, HTN Summary, Warfarin Overview, Antithrombotic Summary Chart, Atrial Fibrillation, Anticoagulation Colour Comparison Chart, Heart Failure, Lipid Lowering Agents, Post-MI, QI-Prolongation</p> <p>Thrombosis Canada. https://thrombosiscanada.ca/hcp/practice/clinical_guides Review the following Guidelines:</p> <p style="padding-left: 40px;">Acetylsalicylic Acid (ASA)</p> <p style="padding-left: 40px;">Anticoagulation in Patients Requiring Antiplatelet Therapy</p> <p style="padding-left: 40px;">DOACS: Coagulation Test, Comparison and Frequently Asked Questions, Perioperative Management</p> <p style="padding-left: 40px;">Duration of dual Antiplatelet therapy in Patients with CAD</p> <p style="padding-left: 40px;">Ischemic Stroke or TIA: Secondary Prevention</p> <p style="padding-left: 40px;">Perioperative Management of Antiplatelet Therapy</p> <p style="padding-left: 40px;">Peripheral Arterial Disease</p>

	<p>Stroke Prevention in Atrial Fibrillation</p> <p>Warfarin: Management of Out-of-Range INRs and Perioperative Management</p>
<p>Week 6</p> <p>Midterm and Nutrition & Complementary Therapies</p>	<p>Midterm (First 1.5 hours of class)</p> <p>Lehne's Unit XVII – Nutrition and Complementary Therapies (Chapters 67. Vitamins; 69. Complementary and Alternative Therapies)</p> <p>RxFiles - Review the following topics: Probiotics, Herbal Drug Interactions, OTC Products</p> <p>Government of Canada. Regulation of Non-Prescription Drugs.</p> <p>Applying Canada's Dietary Guidelines. Advice on Vitamin and mineral Supplementation.</p> <p>Martini et al. (2020). Appropriate and inappropriate vitamin supplementation in Children. <i>Journal of Nutritional Science</i>, 9, e20. doi: 10.1017/jns.2020.12</p> <p>Canadian Pediatric Society. Review the following Position Statements:</p> <ul style="list-style-type: none"> Using Probiotics in Paediatric Populations (2022) Dietary Intake of Sodium in Children: Why it Matters (2020) Energy and Sports Drinks in Children and Adolescents (2023) The Role of Dietary Fibre and Prebiotics in Paediatric Diet (2020) Iron Requirements in the First 2 years of Life (2019)
<p>Week 7</p> <p>Renal & Urinary</p>	<p>McCance – Unit 9: The Renal and Urologic Systems (Chapter 29. Structure and Function of the Renal and Urologic Systems; Chapter 30. Alterations of Renal and Urinary Tract Function; Chapter 31. Alterations in Renal and Urinary Tract Function in Children)</p> <p>RxFiles – Review the following topics: Urinary Tract Infections, Cystitis, Urinary Incontinence</p> <p>Canadian Urological Association (CUA). Review the following guidelines with a focus on pathophysiology and pharmacotherapy:</p> <ul style="list-style-type: none"> Evaluation and Medical Management of Kidney Stones (2022) Diagnosis and Management of Nocturia (2022)

	<p>Erectile Dysfunction (2021)</p> <p>BC Guidelines (2023). Chronic Kidney Disease – Identification, Evaluation, and Management of Adult Patients.</p>
<p>Week 8</p> <p>GI</p>	<p>McCance – Unit 11: The Digestive System (Chapter 35. Structure and Function of the Digestive System; Chapter 36. Alterations of Digestive Function; Chapter 37. Alterations in Digestive Function in Children)</p> <p>Lehne’s - Unit XVI: Gastrointestinal Drugs (Chapters 64. Drugs for Peptic Ulcer Disease; 65. Laxatives; 66. Other Gastrointestinal Drugs)</p> <p>RxFiles – Review the following topics: Bowel Prep for Colonoscopy, Constipation, IBD, GERD and PUD, H. Pylori, IBS, Nausea & Vomiting</p> <p>Katz et al and the American College of Gastroenterology. (2022). ACG Clinical Guidelines for the Diagnosis and Management of Gastroesophageal Reflux Disease. <i>The American Journal of Gastroenterology</i>, 117(1), 27-56. DOI: 10.14309/ajg.0000000000001538</p>
<p>Week 9</p> <p>Reproductive</p>	<p>McCance – Unit 10: The Reproductive Systems (Chapter 32. Structure and Function of the Reproductive Systems; Chapter 33. Alterations of the Female Reproductive System; Chapter 34. Alterations of the Male Reproductive System)</p> <p>Lehne’s - Unit XI – Women’s Health (Chapters 50. Estrogens and Progestins: Basic Pharmacology and Noncontraceptive Applications; 51. Birth Control); Unity XII – Men’s Health (Chapters 52. Androgens; 53. Drugs for Erectile Dysfunction and Benign Prostatic Hyperplasia); Chapter 82. Drug Therapy of Sexually Transmitted Diseases</p> <p>RxFiles – Review the following topics: Andropause, Hirsutism, Erectile Dysfunction, Sexual Dysfunction, Oral Contraceptives, Birth Control Options, Menopause, Peri-Pregnancy</p>
<p>Week 10</p> <p>HENT & Derm</p>	<p>McCance – Chapter 41. Structure, Function, and Disorders of the Integument; Chapter 42. Alterations of the Integument in Children</p> <p>Lehne’s - Chapters 56. Antihistamines; 63. Drugs for Allergic Rhinitis, Cough and Colds; 79. Anti-Fungal Agents; 87. Drugs for the Eye; 88. Drugs for the Skin; 89. Drugs for the Ear</p>

RxFiles – Review the following topics: Acne, Topical Corticosteroids, Head Lice & Scabies, Warts, Glaucoma, Intranasal Corticosteroids, Dry Eye, Acute Otitis Media, Bronchitis, Pharyngitis, Sinusitis, Skin & Soft Tissue Infections

Kerri, J. (2024). [Principles of Topical Dermatologic Therapy](#). Merck Manual Professional Version.

Smith et al. (2023). The treatment of mild upper respiratory tract infections – a position paper with recommendations for best practice. *Drugs in Context*, 12, 4-2. doi: [10.7573/dic.2023-4-2](https://doi.org/10.7573/dic.2023-4-2)

Thomas, M. & Bomar, P. (2023). [Upper Respiratory Tract Infection](#). StatPearls [Internet]. National Library of Medicine (NIH)

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term

to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

- Jensen, B., Regier, L.D., Kosar, L. (Eds). (2023). **RxFiles: Drug Comparison Charts (14th edition)**. Saskatoon City Hospital. **Available online for FREE through USask library*
- Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition**. Elsevier.
- Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition**. Elsevier.

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Saskatchewan Drug Plan. <https://formulary.drugplan.ehealthsask.ca/About> **Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction*

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Case Presentation	Various Dates Throughout Term	25%
Midterm	Week 6	25%
Final Exam	Exam Period	50%
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

CASE PRESENTATION

Value: 25% of final grade

Due Date: Assigned date throughout the term

Type: This assignment evaluates competencies in analyzing and applying pathophysiological and pharmacological principles to develop an evidence-based, patient centered management plan

Description: Working in groups of 2-3 you will sign up for a case presentation in Canvas. Each group will be provided a case scenario. You will analyze the case applying knowledge of etiology, pathogenesis, clinical manifestations, and pharmacology then develop a 15-minute presentation for your peers providing an overview of the pathophysiology behind symptom/disease manifestations and evidence-informed pharmacotherapeutics. When discussing pharmacotherapeutics include an overview of relevant pharmacokinetic, pharmacodynamic, pharmacogenetics and rational prescribing principles. When you submit your presentation, each group member will separately submit one properly written prescription you would prescribe for the case, including all legal elements, to be graded as part of the overall mark for this assignment.

Case Presentation Rubric

	Exceptional	Very Good to Excellent	Satisfactory to Good	Poor (< 70%)
Pathophysiology (10 marks)	Demonstrates exceptional ability to critically evaluate underlying	Demonstrates good ability critical evaluate underlying	Demonstrates satisfactory ability to critically evaluate	Demonstrates limited or inaccurate understanding of

	pathophysiological processes to explain patient symptoms and disease processes. Comprehensive and incisive grasp of pathophysiological processes involved.	pathophysiological processes to explain patient symptoms and disease processes. Accurate grasp of pathophysiological processes involved.	underlying pathophysiological processes to explain patient symptoms and disease processes. Satisfactory grasp of pathophysiological processes involved.	pathophysiological processes to explain patient symptoms and/or disease processes.
Pharmacotherapy (10 marks)	Exceptional evaluation and application of pharmacokinetic, pharmacodynamic, pharmacogenetic and rational prescribing to identify evidence-informed pharmacotherapy appropriate for the case scenario.	Very good evaluation and application of pharmacokinetic, pharmacodynamic, pharmacogenetic and rational prescribing to identify evidence-informed pharmacotherapy appropriate for the case scenario.	Satisfactory evaluation and application of pharmacokinetic, pharmacodynamic, pharmacogenetic and rational prescribing to identify evidence-informed pharmacotherapy appropriate for the case scenario.	Basic, limited and/or inaccurate evaluation and application of pharmacokinetic, pharmacodynamic, pharmacogenetic and/or rational prescribing to identify evidence-informed pharmacotherapy appropriate for the case scenario.
Prescription (5 marks)	Properly written prescription including all legal components and appropriate for patient presentation	One minor area for improvement (i.e. further consideration of social determinants, side effects, costs; mitte; date; etc.)	Two minor areas for improvement.	Inappropriate drug, dosing, and/or several minor errors to prescription.
Total Marks				

Learning Outcomes Evaluated: 1, 2, 3, 4, 7.

MIDTERM EXAM

Value: 25 % of final grade

Due Date: **Week 6**

Type: The midterm exam evaluates course learning outcomes and entry-level NP competencies related to pathophysiology and pharmacology of content from weeks 1-5 inclusive.

Length: 1 hour

Description: The midterm exam is a closed-book online exam consisting of 40-50 multiple choice and short-answer (i.e. prescription writing) questions on content inclusive of weeks 1 – 5. Testable materials include required readings and seminar discussion/content. The NP Program Exam Polices, Procedures and Guidelines outlined in section of the syllabus (pp. 14-16) apply to this exam.

FINAL EXAM

Value: 50% of final grade

Date: Exam period

Length: 2 hours

Type: The final exam evaluates course learning outcomes and entry-level NP competencies related to pathophysiology and pharmacology of content from weeks 1 – 10 inclusive.

Description: The final exam is a closed-book online exam consisting of 100-120 multiple choice and short-answer questions on content inclusive of all weeks of the course. Testable materials include required readings and seminar discussion/content. The NP Program Exam Policies, Procedures and Guidelines outlined in section of the syllabus (pp. 14-16) apply to this exam.

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

EXAM POLICIES, PROCEDURES AND GUIDELINES

The midterm and final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.

5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.
7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by [insert name]



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE & POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 833**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Pathophysiology-Pharmacology for Nurse Practitioner Practice II.**
Course Short Title (maximum 30 characters): **PathoPharm NP Practice II**
- 2.4 Total Hours: Lecture **Seminar- 40 hours over 10 weeks** Lab Tutorial Other
- 2.5 Weekly Hours: Lecture Seminar Lab Tutorial Other
- 2.6 Term in which it will be offered: T1 **T2** T1 or T2 T1 and T2
- 2.7 Prerequisite: **NURS 832: Pathophysiology-Pharmacology for Nurse Practitioner Practice I;**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **Building on knowledge from Pathophysiology-Pharmacology for Nurse Practitioner Practice I, this course further develops advanced understanding of pathophysiology and pharmacotherapeutics essential for NP practice. Students will enhance their knowledge of the etiology, pathogenesis, clinical manifestations, and systematic effects of disease as well as key principles of drug therapy including mechanism of action, side effects, drug interactions, and other prescribing considerations for population across the lifespan. Special attention will be given to evidence-based prescribing, regulatory and legal standards, resource stewardship, patient safety, and strategies for optimizing patient outcomes while minimizing risks.**
- 2.9 Do you allow this course to be repeated for credit? **NO**

3. Please list rationale for introducing this course:

This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).

4. Please list the learning objectives for this course:

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Analyze the etiology, pathogenesis, clinical manifestations and systemic effects of common illnesses and conditions across the lifespan including unique considerations for specific population groups (i.e. pregnancy, lactation, pediatrics, older adults, renal impairment, co-morbid conditions). (NP ELC 1.3)
2. Evaluate pharmacokinetics, pharmacodynamics, pharmacogenetics, and other prescribing considerations (i.e. indications, side effects, interactions, contraindications, patient preferences, alternative treatment options, efficacy, costs, social determinants of health, medication reconciliation), ensuring effective and safe treatment plans for diverse patient populations. (NP ELCs 1.6, 1.7)
3. Develop and implement strategies for evidence-based patient centered prescribing that adhere to regulatory and legal standards. (NP ELC 1.6, 1.7)
4. Apply knowledge of pathophysiology and pharmacotherapeutics to enhance patient safety and outcomes through informed clinical decision making and patient monitoring. (NP ELCs 1.5, 1.6, 1.7)
5. Counsel and educate patients and their caregivers on pharmacological interventions applying relevant teaching and learning theory, evidence-informed content, principles of informed consent and health literacy. (NP ELCs 1.2, 1.7, 1.9)
6. Apply comprehensive knowledge of over-the-counter medications, vitamins, minerals, and alternative medicine to inform therapeutic care plans. (NP ELCs 1.6, 1.7)
7. Demonstrate ability to correctly write a prescription. (NP ELC 1.7)
8. Reflect on the ethical, legal, regulatory, and practice considerations related to the expanded nurse practitioner role and navigating barriers to pharmaceutical access. (NP ELC 3.4 & Practice Standards)
9. Integrate harm reduction strategies and evidence-informed practice into the care of clients with substance use disorder, while complying with legal and regulatory requirements for prescribing controlled drugs and substances (NP ELC 1.12)

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**
 If so, were these departments consulted? (Include correspondence)
 Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)

6.1 Courses to be deleted? **NURS 881: Pathophysiology-Pharmacology for Advanced Nursing Practice I and NURS 886: Pathophysiology-Pharmacology for Advanced Nursing Practice II**

6.2 Courses for which this course will be a prerequisite: **NURS 836: Transition to Nurse Practitioner Clinical Practice**

6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Timelines	Learning Activities
Week 1 Infectious Disease	Lehne's - Chapters 54. Review of the Immune System; 55. Childhood Immunization; Unit XIII – Therapy of Infectious and Parasitic Diseases (Chapters 70. Basic Principles of Antimicrobial Therapy; 71. Drugs that Weaken the Bacterial Cell Wall I: Penicillin; 72. Drugs that Weaken the Bacterial Cell Wall II: Other Drugs; 73. Bacteriostatic Inhibitors of Protein Synthesis; 74. Aminoglycosides: Bactericidal Inhibitors of Protein Synthesis; 75. Sulfonamides and Trimethoprim; 76. Drug Therapy of Urinary Tract Infections; 77. Drug Therapy for Tuberculosis; 78. Miscellaneous Antibacterial Drugs; 80. Antiviral Agents I: Drugs for Non-HIV Viral Infections; 81. Antiviral Agents II: Drugs for HIV Infection and Related Opportunistic Infections; 83. Anthelmintics, Antiprotozoal Drugs and Ectoparasiticides RxFiles – Review the following topics: Antifungals, Antibiotic comparison chart, Antibiotics for common infections, COVID-19 Treatment & Prevention, Influenza Antivirals Bugs & Drugs – http://bugsanddrugs.org/ Familiarize yourself with how/where to find information about treatment recommendations for common infectious disease Case Study (Practice): Pharyngitis and/or AOM in Child
Week 2 Pain	McCance – Chapters 13. Structure and Function of the Neurologic System; 14. Pain, Temperature, Sleep, and Sensory Function

	<p>Lehne's - Chapters 23. Local Anesthetics; 24. Opioid Analgesics, Opioid Antagonists, and Nonopioid Centrally Acting Analgesics; 25. Drugs for Headache</p> <p>RxFiles – Review the following topics: Other common analgesics & co-analgesics, Pain colour comparison chart, Pain treatment by condition, NSAIDs, Opioids, Prescribing Opioids Safely, Tapering Opioids, Pediatric Pain, Methadone and Bup-Nal Colour Comparison, Take Home Naloxone</p> <p>Anekar, Hdnrex & Cascella. (2023). WHO Analgesic Ladder. StatPearls [Internet]. National Library of Medicine (NIH)</p> <p>College of Registered Nurses Saskatchewan (CRNS). (2019). Guidelines for NP Prescribing Controlled Drugs and Substances.</p> <p>Centre for Addictions and Mental Health (2021). Opioid Agonist Therapy: A Synthesis of Canadian Guidelines for Treating Opioid Use Disorder.</p> <p>Michael G. DeGroot National Pain Centre. Guidelines for Pain Management. https://npc.healthsci.mcmaster.ca/guidelines/ Familiarize yourself with guidelines for management of different types of pain including the Canadian Guideline for Opioids for Chronic Non-Cancer Pain (2024), Medical Cannabis or Cannabinoids for Chronic Pain (2021) and the Opioid Manager tool available on this site.</p> <p>Case Study (Practice): Post-Op Pain</p>
<p>Week 3 MSK</p>	<p>McCance – Chapters 38. Structure and Function of the Musculoskeletal System; 39. Alterations in Musculoskeletal Function; 40. Alterations in Musculoskeletal Function in Children.</p> <p>Lehne's - Chapter 22. Drugs for Muscle Spasm and Spasticity; 57. Cyclooxygenase Inhibitors: Nonsteroidal Anti-inflammatory Drugs and Acetaminophen; 58. Glucocorticoids in Nonendocrine Disorders; 59. Drug Therapy of Rheumatoid Arthritis; 60. Drug Therapy of Gout; 61. Drugs Affecting Calcium Levels and Bone Mineralization</p> <p>RxFiles – Review the following topics: Low Back Pain, Gout, Osteoporosis, Rheumatoid Arthritis</p> <p>Case Study: Back Pain or Swollen/sore toe</p>
<p>Week 4 Neurology</p>	<p>McCance – Chapters 15. Alterations in Cognitive Systems, Cerebral Hemodynamics and Motor Function; 16. Disorders of the Central and Peripheral Nervous Systems and Neuromuscular Junction; 17. Alterations of Neurologic Function in Children</p>

	<p>Lehne's - Chapters 18. Induction to Central Nervous System Pharmacology; 19. Drugs for Parkinson Disease; 20. Drugs for Alzheimer Disease; 21. Drugs for Seizure Disorder</p> <p>RxFiles – Review the following topics: Alzheimer's/Dementia, Anticholinergics, Essential Tremore & RLS, Multiple Sclerosis, Migraines, Parkinson's, Seizures</p> <p>Case Study: Headache</p>
<p>Week 5 Mental Health</p>	<p>Lehne's - Unit VII: Psychotherapeutic drugs (Chapters 26. Antipsychotic Agents and Their Use in Schizophrenia; 27. Antidepressants; 28. Drugs for Bipolar Disorder; 29. Sedative-Hypnotic Drugs; 30. Management of Anxiety Disorders; 31. Central Nervous System Stimulants and ADHD)</p> <p>RxFiles – Review the following topics: ADHD, Anxiety Agents, Benzodiazepines, Bipolar Disease, Depression, Anti-Depressant Drug Interactions, Antipsychotics, Insomnia, Pediatric Depression, Treatment-Resistant Depression</p> <p>Case Study: Low Mood/Anxiety</p>
<p>Week 6 Addictions</p>	<p>Lehne's - Unit VIII: Substance Use Disorders (Chapters 32. Substance Use Disorders I: Basic Considerations; 33. Substance Use Disorder II: Alcohol; 34. Substance Use Disorders III: Nicotine and Smoking; 35. Substance Use Disorders IV: Major Drugs of Abuse Other Than Alcohol and Nicotine)</p> <p>RxFiles – Review the following topics: Cannabinoids, Substance Use Disorder, Stimulant Use Disorder, Opioid Use Disorder, Alcohol Use Disorder</p> <p>UBC Continuing Professional Development (CPD). eLearning Addictions Care and Treatment Online Course. Register for FREE at https://ubccpd.ca/learn/learning-activities/course?eventtemplate=6 Submitting a certificate of completion for this course is a required component of this course</p>
<p>Week 7 Hematology</p>	<p>McCance – Unit 6: The Hematologic System (Chapters 20. Structure and Function of the Hematologic System; 21. Alterations in Hematologic Function; 22. Alterations of Hematologic Function in Children)</p> <p>Lehne's - Chapters 36. Review of Hemodynamics; 47. Drugs for Deficiency Anemias</p> <p>RxFiles – Review the following topics: Iron Replacement</p> <p>Case Study: Low energy/fatigue</p>

<p>Week 8</p> <p>Endocrine</p>	<p>McCance – Unit 5: The Endocrine System (Chapters 18. Mechanisms of Hormonal Regulation; 19. Alternations in Hormonal Regulation)</p> <p>Lehne’s - Chapters 48. Drugs for Diabetes Mellitus; 49. Drugs for Thyroid Disorders; 68. Drugs for Weight Loss</p> <p>RxFiles – Review the following topics: Diabetes Colour Comparison Chart, Hypoglycemics, Insulin, Weight Loss Drugs, Diabetes & Pregnancy, Thyroid,</p> <p>Lipscombe et al. (2020). Pharmacologic Glycemic Management of Type 2 Diabetes in Adults: 2020 Update. Diabetes Canada Clinical Practice Guideline.</p> <p>Diabetes Canada Quick Reference Guide for Blood Glucose-Lowering Therapies (type 2 diabetes)</p> <p>Diabetes Canada Keeping Patient Safe when they are at Risk of Dehydration quick reference guide.</p> <p>Diabetes Canada. Which Cardiovascular Protection medications are Indicated for My Patient quick reference guide.</p> <p>Case Study: Endocrine</p>
<p>Week 9</p> <p>Cancer</p>	<p>McCance – Unit 3: Cellular Proliferation: Cancer (Chapters 10. Biology of Cancer, 11. Cancer Epidemiology; 12. Cancer in Children and Adolescents)</p> <p>Lehne’s - Unit XIX: Cancer Therapy (Chapters 84. Introduction to Immunomodulators; 85. Supportive Care of Patients Receiving Anticancer Drugs; 86. Drugs for Cancer Pain)</p> <p>RxFiles – Review the following topic: Palliative Care</p>
<p>Week 10</p> <p>Acute Care & Deprescribing</p>	<p>McCance – Chapter 43. Co-morbidity and Multi-morbidities</p> <p>Lehne’s - Unit XXI: Drugs therapy in Acute Care (Chapters 90. Agents Affecting the Volume and Ion Content of Body Fluids; 91. Management of ST-Elevation Myocardial Infarction; 92. Additional Acute Care Drugs)</p> <p>RxFiles – Review the following topics: Approach to Tapering</p>

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE – DISTANCE LEARNING**

- 10-50
 50-90
 90-130
 130+

9. **Student evaluation**

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERIC/PERCENTAGE**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
Case Studies	Week 1 (Infectious Disease) – Practice Case Week 2 (Pain) – Practice Case Week 3 (MSK) Week 4 (Neurology) Week 5 (Mental Health) Week 7 (Hematology) Week 8 (Endocrine)	10% with lowest mark dropped for 40% total
Addictions Care & Treatment Online Course	By final day of course	Complete/Incomplete
Final Exam		60%
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **NO**

10. **Required text**

Include a bibliography for the course.

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

- Jensen, B., Regier, L.D., Kosar, L. (Eds). (2023). **RxFiles: Drug Comparison Charts (14th edition)**. Saskatoon City Hospital. **Available online for FREE through USask library*
- Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition**. Elsevier.
- Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition**. Elsevier.

PROVINCIAL DOCUMENTS

- College of Registered Nurses of Saskatchewan (CRNS) Bylaws.** <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>
- CRNS NP Entry-level Competencies (ELC)s** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS NP Practice Standards** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS Nurse Practitioner Practice Guidelines** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Saskatchewan Drug Plan.

<https://formulary.drugplan.ehealthsask.ca/About> **Students outside Saskatchewan should*

familiarize themselves with the drug benefits in their jurisdiction

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course:
See highlighted selection.

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class

PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites).

- 3.1 Permission Required: **YES, permission is required to audit this course**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 832: Pathophysiology-Pharmacology for Nurse Practitioner Practice I;**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course:
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course:
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: NURS 881 and NURS 886

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive:

***Please note:** SIRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS			
Course Title:	Pathophysiology-Pharmacology for Nurse Practitioner Practice II		
Course Code:	NURS 833	Term:	TBD
Course Credits:	3	Delivery:	Synchronous online
Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	Weekly 4-hour seminar/lab x 10 weeks (40 hrs)		
Course Calendar Description:	Building on knowledge from Pathophysiology-Pharmacology for Nurse Practitioner Practice I, this course further develops advanced understanding of pathophysiology and pharmacotherapeutics essential for NP practice. Students will enhance their knowledge of the etiology, pathogenesis, clinical manifestations, and systematic effects of disease as well as key principles of drug therapy including mechanism of action, side effects, drug interactions, and other prescribing considerations for population across the lifespan. Special attention will be given to evidence-based prescribing, regulatory and legal standards, resource stewardship, patient safety, and strategies for optimizing patient outcomes while minimizing risks.		
Pre or Co-Requisite:	Pathophysiology-Pharmacology I NURS 832(Pre)		
Course Equivalent	Completion of both NURS 881: Pathophysiology-Pharmacology for Advanced Nursing Practice I and NURS 886: Pathophysiology-Pharmacology for Advanced Nursing Practice II		

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Analyze the etiology, pathogenesis, clinical manifestations and systemic effects of common illnesses and conditions across the lifespan including unique considerations for specific population groups (i.e. pregnancy, lactation, pediatrics, older adults, renal impairment, co-morbid conditions). (NP ELC 1.3)
2. Evaluate pharmacokinetics, pharmacodynamics, pharmacogenetics, and other prescribing considerations (i.e. indications, side effects, interactions, contraindications, patient preferences, alternative treatment options, efficacy, costs, social determinants of health, medication reconciliation), ensuring effective and safe treatment plans for diverse patient populations. (NP ELCs 1.6, 1.7)
3. Develop and implement strategies for evidence-based patient centered prescribing that adhere to regulatory and legal standards. (NP ELC 1.6, 1.7)
4. Apply knowledge of pathophysiology and pharmacotherapeutics to enhance patient safety and outcomes through informed clinical decision making and patient monitoring. (NP ELCs 1.5, 1.6, 1.7)
5. Counsel and educate patients and their caregivers on pharmacological interventions applying relevant teaching and learning theory, evidence-informed content, principles of informed consent and health literacy. (NP ELCs 1.2, 1.7, 1.9)
6. Apply comprehensive knowledge of over-the-counter medications, vitamins, minerals, and alternative medicine to inform therapeutic care plans. (NP ELCs 1.6, 1.7)
7. Demonstrate ability to correctly write a prescription. (NP ELC 1.7)

8. Reflect on the ethical, legal, regulatory, and practice considerations related to the expanded nurse practitioner role and navigating barriers to pharmaceutical access. (NP ELC 3.4 & Practice Standards)
9. Integrate harm reduction strategies and evidence-informed practice into the care of clients with substance use disorder, while complying with legal and regulatory requirements for prescribing controlled drugs and substances (NP ELC 1.12)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;

- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at: <https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)

- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

*An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

This course aims to deepen the understanding and application of pathophysiology and pharmacotherapeutics for nurse practitioner (NP) practice, fostering advanced clinical decision-making skills to support safe and effective care of diverse populations throughout the lifespan. Building on foundational knowledge from Pathophysiology-Pharmacology for NP Practice I, students will examine the physiological processes underlying disease states with a focus on interpreting clinical manifestations and applying pharmacological interventions. Through course learning activities including self-directed readings/media, in-class case studies and discussions, students will explore the etiology, pathogenesis, and clinical manifestations of diseases, alongside a critical analysis of pharmacotherapeutic principles such as drug actions, side effects, interactions, and compliance complexities. Emphasis will be on evidence-based practices, patient-centred care, adherence to regulatory and legal standards, and effective strategies for resource stewardship, patient safety, and risk management. Special focus will be placed on inclusive healthcare practices to ensure equitable patient care regardless of cultural, social, or economic differences.

COURSE SCHEDULE

Timelines	Learning Activities
Week 1 Infectious Disease	Lehne's - Chapters 54. Review of the Immune System; 55. Childhood Immunization; Unit XIII – Therapy of Infectious and Parasitic Diseases (Chapters 70. Basic Principles of Antimicrobial Therapy; 71. Drugs that Weaken the Bacterial Cell Wall I: Penicillin; 72. Drugs that Weaken the Bacterial Cell Wall II: Other

	<p>Drugs; 73. Bacteriostatic Inhibitors of Protein Synthesis; 74. Aminoglycosides: Bactericidal Inhibitors of Protein Synthesis; 75. Sulfonamides and Trimethoprim; 76. Drug Therapy of Urinary Tract Infections; 77. Drug Therapy for Tuberculosis; 78. Miscellaneous Antibacterial Drugs; 80. Antiviral Agents I: Drugs for Non-HIV Viral Infections; 81. Antiviral Agents II: Drugs for HIV Infection and Related Opportunistic Infections; 83. Anthelmintics, Antiprotozoal Drugs and Ectoparasiticides</p> <p>RxFiles – Review the following topics: Antifungals, Antibiotic comparison chart, Antibiotics for common infections, COVID-19 Treatment & Prevention, Influenza Antivirals</p> <p>Bugs & Drugs – http://bugsanddrugs.org/ Familiarize yourself with how/where to find information about treatment recommendations for common infectious disease</p> <p>Case Study (Practice): Pharyngitis and/or AOM in Child</p>
<p>Week 2</p> <p>Pain</p>	<p>McCance – Chapters 13. Structure and Function of the Neurologic System; 14. Pain, Temperature, Sleep, and Sensory Function</p> <p>Lehne’s - Chapters 23. Local Anesthetics; 24. Opioid Analgesics, Opioid Antagonists, and Nonopioid Centrally Acting Analgesics; 25. Drugs for Headache</p> <p>RxFiles – Review the following topics: Other common analgesics & co-analgesics, Pain colour comparison chart, Pain treatment by condition, NSAIDS, Opioids, Prescribing Opioids Safely, Tapering Opioids, Pediatric Pain, Methadone and Bup-Nal Colour Comparison, Take Home Naloxone</p> <p>Anekar, Hdnrex & Cascella. (2023). WHO Analgesic Ladder. StatPearls [Internet]. National Library of Medicine (NIH)</p> <p>College of Registered Nurses Saskatchewan (CRNS). (2019). Guidelines for NP Prescribing Controlled Drugs and Substances.</p> <p>Centre for Addictions and Mental Health (2021). Opioid Agonist Therapy: A Synthesis of Canadian Guidelines for Treating Opioid Use Disorder.</p> <p>Michael G. DeGroote National Pain Centre. Guidelines for Pain Management. https://npc.healthsci.mcmaster.ca/guidelines/ Familiarize yourself with guidelines for management of different types of pain including the Canadian Guideline for Opioids for Chronic Non-Cancer Pain (2024), Medical Cannabis or Cannabinoids for Chronic Pain (2021) and the Opioid Manager tool available on this site.</p>

	Case Study (Practice): Post-Op Pain
Week 3 MSK	<p>McCance – Chapters 38. Structure and Function of the Musculoskeletal System; 39. Alterations in Musculoskeletal Function; 40. Alterations in Musculoskeletal Function in Children.</p> <p>Lehne’s - Chapter 22. Drugs for Muscle Spasm and Spasticity; 57. Cyclooxygenase Inhibitors: Nonsteroidal Anti-inflammatory Drugs and Acetaminophen; 58. Glucocorticoids in Nonendocrine Disorders; 59. Drug Therapy of Rheumatoid Arthritis; 60. Drug Therapy of Gout; 61. Drugs Affecting Calcium Levels and Bone Mineralization</p> <p>RxFiles – Review the following topics: Low Back Pain, Gout, Osteoporosis, Rheumatoid Arthritis</p> <p>Case Study: Back Pain or Swollen/sore toe</p>
Week 4 Neurology	<p>McCance – Chapters 15. Alterations in Cognitive Systems, Cerebral Hemodynamics and Motor Function; 16. Disorders of the Central and Peripheral Nervous Systems and Neuromuscular Junction; 17. Alterations of Neurologic Function in Children</p> <p>Lehne’s - Chapters 18. Induction to Central Nervous System Pharmacology; 19. Drugs for Parkinson Disease; 20. Drugs for Alzheimer Disease; 21. Drugs for Seizure Disorder</p> <p>RxFiles – Review the following topics: Alzheimer’s/Dementia, Anticholinergics, Essential Tremore & RLS, Multiple Sclerosis, Migraines, Parkinson’s, Seizures</p> <p>Case Study: Headache</p>
Week 5 Mental Health	<p>Lehne’s - Unit VII: Psychotherapeutic drugs (Chapters 26. Antipsychotic Agents and Their Use in Schizophrenia; 27. Antidepressants; 28. Drugs for Bipolar Disorder; 29. Sedative-Hypnotic Drugs; 30. Management of Anxiety Disorders; 31. Central Nervous System Stimulants and ADHD)</p> <p>RxFiles – Review the following topics: ADHD, Anxiety Agents, Benzodiazepines, Bipolar Disease, Depression, Anti-Depressant Drug Interactions, Antipsychotics, Insomnia, Pediatric Depression, Treatment-Resistant Depression</p> <p>Case Study: Low Mood/Anxiety</p>
Week 6 Addictions	<p>Lehne’s - Unit VIII: Substance Use Disorders (Chapters 32. Substance Use Disorders I: Basic Considerations; 33. Substance Use Disorder II: Alcohol; 34.</p>

	<p>Substance Use Disorders III: Nicotine and Smoking; 35. Substance Use Disorders IV: Major Drugs of Abuse Other Than Alcohol and Nicotine)</p> <p>RxFiles – Review the following topics: Cannabinoids, Substance Use Disorder, Stimulant Use Disorder, Opioid Use Disorder, Alcohol Use Disorder</p> <p>UBC Continuing Professional Development (CPD). eLearning Addictions Care and Treatment Online Course. Register for FREE at https://ubccpd.ca/learn/learning-activities/course?eventtemplate=6 Submitting a certificate of completion for this course is a required component of this course</p>
<p>Week 7 Hematology</p>	<p>McCance – Unit 6: The Hematologic System (Chapters 20. Structure and Function of the Hematologic System; 21. Alterations in Hematologic Function; 22. Alterations of Hematologic Function in Children)</p> <p>Lehne’s - Chapters 36. Review of Hemodynamics; 47. Drugs for Deficiency Anemias</p> <p>RxFiles – Review the following topics: Iron Replacement</p> <p>Case Study: Low energy/fatigue</p>
<p>Week 8 Endocrine</p>	<p>McCance – Unit 5: The Endocrine System (Chapters 18. Mechanisms of Hormonal Regulation; 19. Alternations in Hormonal Regulation)</p> <p>Lehne’s - Chapters 48. Drugs for Diabetes Mellitus; 49. Drugs for Thyroid Disorders; 68. Drugs for Weight Loss</p> <p>RxFiles – Review the following topics: Diabetes Colour Comparison Chart, Hypoglycemics, Insulin, Weight Loss Drugs, Diabetes & Pregnancy, Thyroid,</p> <p>Lipscombe et al. (2020). Pharmacologic Glycemic Management of Type 2 Diabetes in Adults: 2020 Update. Diabetes Canada Clinical Practice Guideline.</p> <p>Diabetes Canada Quick Reference Guide for Blood Glucose-Lowering Therapies (type 2 diabetes)</p> <p>Diabetes Canada Keeping Patient Safe when they are at Risk of Dehydration quick reference guide.</p> <p>Diabetes Canada. Which Cardiovascular Protection medications are Indicated for My Patient quick reference guide.</p> <p>Case Study: Endocrine</p>

Week 9 Cancer	McCance – Unit 3: Cellular Proliferation: Cancer (Chapters 10. Biology of Cancer, 11. Cancer Epidemiology; 12. Cancer in Children and Adolescents) Lehne’s - Unit XIX: Cancer Therapy (Chapters 84. Introduction to Immunomodulators; 85. Supportive Care of Patients Receiving Anticancer Drugs; 86. Drugs for Cancer Pain) RxFiles – Review the following topic: Palliative Care
Week 10 Acute Care & Deprescribing	McCance – Chapter 43. Co-morbidity and Multi-morbidities Lehne’s - Unit XXI: Drugs therapy in Acute Care (Chapters 90. Agents Affecting the Volume and Ion Content of Body Fluids; 91. Management of ST-Elevation Myocardial Infarction; 92. Additional Acute Care Drugs) RxFiles – Review the following topics: Approach to Tapering

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory,

political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

- Jensen, B., Regier, L.D., Kosar, L. (Eds). (2023). **RxFiles: Drug Comparison Charts (14th edition)**. Saskatoon City Hospital. **Available online for FREE through USask library*
- Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition**. Elsevier.
- Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition**. Elsevier.

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Saskatchewan Drug Plan.

<https://formulary.drugplan.ehealthsask.ca/About> **Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction*

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

[e-CPS](#) Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Case Studies	Week 1 (Infectious Disease) – Practice Case Week 2 (Pain) – Practice Case Week 3 (MSK) Week 4 (Neurology) Week 5 (Mental Health) Week 7 (Hematology) Week 8 (Endocrine)	10% with lowest mark dropped for 40% total
Addictions Care & Treatment Online Course	By final day of course	Complete/Incomplete
Final Exam		60%
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

CASE STUDIES

Value: 40% of overall grade (10% each with lowest mark dropped)

Due Date: Various dates through out the term (see course schedule)

Type: This assignment evaluates competencies in establishing an evidence-based management plan, including prescription writing.

Description: During class you will be presented with a case study. Based on information presented, you will develop and evidence-based patient-centred management plan for the case, including one properly written prescription relevant to the patient's presenting concern. The management plan should include:

1. Relevant diagnostic investigations (if any) that you would order with rational for ordering
2. Relevant pharmacotherapy with rational including a properly written prescription
3. Relevant non-pharmacotherapy with rational
4. Relevant follow-up and monitoring

This is an open-book, individual assignment, meaning you can access your textbooks to complete the assignment but cannot consult or collaborate with other individuals. The assignment must be your own work and completed during class. To promote assignment integrity, cases should not be discussed outside of class.

Practice case studies will be done in class weeks 1 and 2 to help you get familiar with expectations. Formal (graded) case studies will be done in weeks 3 (musculoskeletal), 4 (neurology), 5 (mental health), 7 (hematology) and 8 (endocrine) with your best 4 grades on these counted towards your final grade. If you are absent for one of the case study classes, please contact your instructor as soon as possible. Missed assignments will be addressed on a case-by-case basis. Student missing more than one case may be at risk for not meeting course requirements.

ADDICTIONS CARE AND TREATMENT ONLINE COURSE

Value: Complete/incomplete

Due Date: By final day of class

Type: Online, asynchronous course to promote development of competencies in diagnosing and managing patient with substance use disorders using evidence-based treatments along the continuum of care.

Description: You will complete the [Addictions Care and Treatment Online course](#) (ACTOC) through the UBC CPD. The FREE course includes 22 online modules addressing diagnosis and management of substance use disorders (alcohol, tobacco, opioid, stimulant, cannabis, co-occurring disorders), safe prescribing, harm reduction, safe drug consumption and overdose prevention, substance use in special populations (pregnancy, older adult, LGBTQ+) and legal, policy and ethical implications. The course is self-paced, meaning you can complete it on your own schedule but must be completed by the final day of the course. The course takes an estimated 15-20 hours to complete, with those with more experience in substance use typically taking less time. By the end of taking this course you will be able to:

- Incorporate screening, diagnosis, and brief intervention and referral to treatment for substance use disorders in clinical practice
- Select the appropriate pharmacological and psychosocial treatment interventions based on the best evidence as well as individual patient needs, circumstances, and preferences
- Provide safe and effective treatment to patients and their families throughout the induction, maintenance, and/or discontinuation process across the continuum of care for substance use disorders
- Set treatment goals, monitoring and evaluating progress, and providing patient-centred support across the continuum of care for substance use disorders
- Appreciate the complexity of substance use disorders, diversity of care, and providing informed referrals to evidence-based support services
- Promote recovery, safety, wellness, and harm reduction to improve patient care and support for those with substance use disorders
- Implement strategies for safer prescribing practices for medications with abuse/diversion potential (i.e., opioids for analgesia, benzodiazepines)

After completing all 22 learning modules, and receiving a minimum 70% on course quizzes, you will receive a certificate of course completion. Submit a copy of this certificate to Canvas to receive credit for this course component. Save a copy of the certificate of completion for your personal records as well as some regulatory bodies will request proof of completion when you register as an NP.

FINAL EXAM

Value: 50% of final grade

Date: Exam period

Length: 2 hours

Type: The final exam evaluates course learning outcomes and entry-level NP competencies related to pathophysiology and pharmacology of content from weeks 1 – 10 inclusive.

Description: The final exam is a closed-book online exam consisting of 100-120 multiple choice and short-answer questions on content inclusive of all weeks of the course. Testable materials include required readings and seminar discussion/content. The NP Program Exam Polices, Procedures and Guidelines outlined in section of the syllabus apply to this exam.

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

EXAM POLICIES, PROCEDURES AND GUIDELINES

The midterm and final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.

5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.
7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by [insert names]



**UNIVERSITY OF
SASKATCHEWAN**

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **COLLEGE of GRADUATE AND POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 834**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Advanced Health Assessment & Diagnostic Reasoning I**
Course Short Title (maximum 30 characters): **AHAD I**
- 2.4 Total Hours: **Seminar – 36 hours ; Lab – 16 hours**
- 2.5 Weekly Hours: Seminar **3-4hrs** **Lab 16 hours over 2 days in term**
- 2.6 Term in which it will be offered: T1 **T2** T1 or T2 T1 and T2
- 2.7 Prerequisite: **NURS 832: Pathophysiology-Pharmacology for Nurse Practitioner Practice I;**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable**

- D – Instructor/Dept Approval
- H – Department Approval
- I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **Building on foundational Registered Nurse clinical competencies, students will develop advanced competencies in health assessment and diagnostic reasoning essential for nurse practitioner clinical practice. Focus will be on evidence-informed practice, culturally safe care, and critical inquiry as it applies to assessment and diagnosis of common health concerns in diverse clients and settings.**

- 2.9 Do you allow this course to be repeated for credit? **NO**

3. Please list rationale for introducing this course:

This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).

4. Please list the learning objectives for this course:

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Implement appropriate comprehensive and focused health assessments for diverse patient populations including: chart review, initial observations, reason for encounter, health history, physical exam, and consideration of individual patient factors (i.e. social determinants of health, cultural safety, developmental life stage) (NP ELCs, 1.1, 1.3, 1.4, 1.10)
2. Select appropriate diagnostic investigations and accurately interpret results. (NP ELCs 1.4, 1.5)
3. Analyze, synthesize, and interpret data from multiple sources (i.e. history, physical exam, diagnostic investigations, evidence-informed practice) to establish differential, must-not-miss, and most likely diagnosis. (NP ELC 1.5)
4. Apply communication skills to accurately relay client information including history, physical assessment findings, and diagnosis with other members of the health care team and the client. (NP ELCs 1.5, 1.9, 1.14)
5. Apply evidence-informed virtual care strategies to assess and diagnose health concerns. (NP ELC 1.5, 1.16)
6. Begin establishing a professional NP role identity as a clinician by engaging in learning activities that develop advanced competencies in assessment and diagnosis. (NP Practice Standards).
7. Apply strategies to create and enhance culturally safe care and respectful health care. (NP ELCs 1.3, 1.4, 1.10., 3.2)

5. Impact of this course

Are the programs of other departments or Colleges affected by this course? **NO**

If so, were these departments consulted? (Include correspondence)

Were any other departments asked to review or comment on the proposal?

6. Other courses or program affected (please list course titles as well as numbers)

6.1 Courses to be deleted? **NURS 884: Advanced Health Assessment & Diagnostic Reasoning I: NURS 879: Advanced Health Assessment and & Diagnostic Reasoning II**

6.2 Courses for which this course will be a prerequisite? **Advanced Health Assessment & Diagnostic Reasoning II (NURS 835)**

6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Date & Topic	Required Readings/Media & Evaluation
<p>Weeks 1-2</p> <p>Foundations of Health Assessment & Diagnosis Bootcamp (? 2-days onsite)</p> <ul style="list-style-type: none"> • Course Orientation • Approach to the Client Encounter • Health Assessment • Diagnostic Reasoning 	<p>Assessment Text (Bates’): Read Chapter 1. Approach to the Clinical Encounter, 2. Interviewing, Communication and Interpersonal Skills, 3. Health History, 4. Physical Exam, 8. General Survey, Vital Signs and Pain</p> <p>Assessment Videos (Bates’): Review 1. Head-to-Toe Assessment: Adult; 2. Head-to-Toe Assessment: Infant; 3. Head-to-Toe Assessment: Child; 5. General Survey and Vital Signs</p> <p>The Patient Hx: Read Chapter 1. History and Physical Examination: Art and Science; 2. Subtleties of Medical History Taking</p> <p>S2D: Read Part 1. Patient with a Problem</p> <p>i-Human Patient Virtual Simulation orientation Videos</p> <p>Harvey Learning Modules: https://wwwapps.usask.ca/harvey/ These online modules will teach you more about cardiopulmonary assessment, including abnormal heart sounds</p> <p>CANSim. (2021). Sexual Orientation and Gender Identity in Nursing (SOGI) Toolkit https://soginursing.ca/index.php/modules/students/ - Submit certificate of completion to Canvas by the last day of course</p> <p>Quiz #1 – Foundations of Health Assessment & Diagnosis</p>
<p>Week 3</p> <p>HENT Assessment & Diagnosis</p>	<p>Assessment Text (Bates’): Review Chapter 11: Head and Neck, 12. Eyes, 13. Ears and Nose, 14. Throat and Oral Cavity</p> <p>Health Assessment Videos (Bates’): Review 7. Head, Eyes, and Ears; 8. Nose, Mouth, and Neck</p> <p>The Patient Hx: Read Section III. Head, Eyes, Ears, Nose, and Throat</p> <p>S2D: Read Part 30. Sore Throat</p>
<p>Week 4</p> <p>Respiratory Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 15. Thorax and Lungs</p>

	<p>Health Assessment Videos (Bates’): Review 9. Thorax and Lungs; OSCE Clinical Skills Video 5: Cough, 10. Shortness of Breath, and 12. Child and Adolescent Asthma</p> <p>The Patient Hx: Read Section V. Respiratory System</p> <p>S2D: Read Part 10. Cough and Congestion; Part 15. Dyspnea; Part 33. Wheezing or Stridor</p> <p>Quiz #2 – HENT and Respiratory Assessment and Diagnosis</p>
<p>Week 5</p> <p>CVS Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 16. Cardiovascular System</p> <p>Health Assessment Videos (Bates’): Review 10. Cardiovascular System</p> <p>The Patient Hx: Read Section VI: Cardiovascular System</p> <p>Diagnostics Text: In Chapter 3. Lab Tests, read about the following tests: B-Type Natriuretic Peptide (BNP), Cholesterol, Creatine Kinase, D-Dimer, Lipoprotein(a), Potassium (K+), Triglycerides, Troponin I, Cardiac</p> <p>S2D: Read Part 9. Chest Pain</p> <p>Canadian Cardiovascular Society Update on the Assessment and Management of Syncope https://ccs.ca/guidelines-and-position-statement-library/</p> <p>Canadian Cardiovascular Position Statement on Familial hypercholesterolemia: Update 2018 https://ccs.ca/guidelines-and-position-statement-library/</p> <p>CCS Calculators and Forms. https://ccs.ca/calculators-and-forms/</p> <p>Familiarize yourself with:</p> <ul style="list-style-type: none"> • Cardiovascular Age + FRS Calculator (My Health Checkup), • Framingham Risk Score (FRS) <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 6</p> <p>ECG Interpretation</p>	<p>Garcia, T. B. (2014). <i>12-Lead ECG The Art of Interpretation, (2nd ed)</i>. Burlington, MA: Jones & Bartlett Learning. *If you own an ECG interpretation text from past experiences/courses this may suffice</p> <p>Quiz #3 – CVS Assessment & Diagnosis, ECG Interpretation</p>

<p>Week 7</p> <p>PVS Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 17. Peripheral Vascular System</p> <p>Health Assessment Videos (Bates’): Review 11. Peripheral Vascular System</p> <p>S2D: Read Part 17. Edema</p> <p>Canadian Cardiovascular Society 2022 Guidelines for Peripheral Arterial Disease (Section on Diagnosis and Screening) https://ccs.ca/guidelines-and-position-statement-library/</p> <p>Thrombosis Canada. https://thrombosiscanada.ca/clinicalguides/</p> <p>Review the following Guidelines and Risk Calculators:</p> <ul style="list-style-type: none"> • Deep Vein Thrombosis (DVT): Diagnosis • Superficial Thrombophlebitis (SVT), Superficial Vein Thrombosis • CHADS2 Score & CHA2DS2-VASc Score for a-fib Stroke Risk • HAS-BLED Score for Major Bleeding Risk • Wells’ Criteria for DVT <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 8</p> <p>Dermatology Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 10. Skin, Hair, and Nails</p> <p>Health Assessment Videos (Bates’): Review 6. Skin</p> <p>The Patient Hx: Read Section IV: Dermatology</p> <p>S2D: Read Part 29. Rash</p> <p>American Academy of Dermatology. Basic Dermatology Curriculum. https://www.aad.org/member/education/residents/bdc</p> <p>Quiz #4 – PVS and Dermatology Assessment & Diagnosis</p> <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 9</p> <p>GI Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 19. Abdomen</p> <p>Health Assessment Videos (Bates’): Review 13. Abdomen</p> <p>The Patient Hx: Read Section VII: Gastrointestinal System</p>

	<p>Diagnostics Text: In Chapter 3. Lab Tests review the following tests. You do not need to memorize reference ranges or lab collection. Focus on understanding why you would order the test, and what abnormal results may indicate.</p> <p>Alanine Aminotransferase (ALT), Albumin, Alkaline Phosphatase (ALP), Amylase, Aspartate Aminotransferase (AST), Bilirubin, Celiac disease, Clostridium difficile toxins, Fecal Occult Blood Tests, Gamma-glutamyl transpeptidase (GGT), Helicobacter Pylori Tests, Hepatitis A virus antibody, Hepatitis B surface antigen, Hepatitis B surface antibody, Hepatitis B Core antibody, Hepatitis C virus antibody, Hepatitis C virus genotyping, Hepatitis C virus RNA, lipase</p> <p>Abnormal Liver Chemistry – Evaluation and Interpretation https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/abnormal-liver-chemistry</p> <p>Infectious Diarrhea - Guideline for Ordering Stool Specimens https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/infectious-diarrhea</p> <p>Hepatitis B Serology Results and Interpretation https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/bc-guidelines/viralhepatitistesting-appendix3.pdf</p> <p>S2D: Read Part 3. Abdominal Pain, Part 13. Diarrhea; Part 19. GI Bleeding</p> <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 10</p> <p>Pediatric Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 25. Children: Infancy through Adolescence</p> <p>Canadian Pediatric Society. Promoting optimal monitoring of child growth in Canada: Using the WHO growth charts. http://www.cps.ca/tools-outils/who-growth-charts</p> <p>Rourke Record: https://www.rourkebabyrecord.ca/downloads</p> <p>WHO Canadian Growth Charts: https://www.rourkebabyrecord.ca/growth_charts.asp</p> <p>Canadian Pediatrics Society. (2016). Greig Health Record: Available at: https://cps.ca/en/tools-outils/greig-health-record</p> <p>Canadian Pediatric Society (2018). Guidelines for detection, management, and prevention of hyperbilirubinemia in term and late preterm newborn infants. Available at: https://cps.ca/en/documents/position/hyperbilirubinemia-newborn</p>

	Zwaigenbaum, L., Brian, J.A., Ip, A., Canadian Pediatric Society, Autism Spectrum Disorders Guidelines Task Force. (2019). Early detection for autism spectrum disorder in young children. <i>Pediatric Child Health</i> , 24(7), 424-432. Found at: https://cps.ca/en/documents/position/asd-early-detection Quiz #5 – GI and Pediatric Assessment & Diagnosis
Final Exam	Virtual OSCE: Health History Taking

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course:

10-50 – FOR 2 DAY SKILLS LAB ONLY/USE CLRC IN HEALTH SCIENCES

50-90

90-130

130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERIC/PERCENTAGE**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
Foundations of Health Assessment Bootcamp	Weeks 1-2 (2-3 days)	Complete/Incomplete
CAN-Sim SOGI Certificate	Due by last day of course	Complete/Incomplete
Computer-Based Simulation Cases	Week 5, 7, 8, 9	30%
Quizzes	Weeks 2, 4, 6, 8, 10	40%
Virtual OSCE Station	Week 11	30%

Total		100%
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P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **NO**

10. **Required text**

Include a bibliography for the course.

Health Assessment	
Assessment Text	Bickley, et al. (2021). <i>Bates' Guide to Physical Examination and History Taking</i> (13th ed). Wolters Kluwer.
Assessment Videos	<i>Bates' Visual Guide to Physical Examination</i> . (2022). Wolters Kluwer. *
Diagnostic Investigations	
Diagnostics Text	Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). <i>Guide to Diagnostic Tests, 7th ed</i> . McGraw Hill Education. *eBook available for FREE through USask library AccessMedicine database
ECG Text	Garcia, T. B. (2014). <i>12-Lead ECG The Art of Interpretation</i> , (2 nd ed). Burlington, MA: Jones & Bartlett Learning.
Diagnostic Reasoning & Differential Diagnosis	
The Patient Hx	Henderson et al. (2012). <i>The Patient History: An Evidence-based Approach to Differential Diagnosis</i> . McGraw Hill. * This text focuses on health history taking to arrive at evidence based differential diagnosis. Read it prior to S2D which addresses a more advanced approach to differential diagnosis
S2D	Stern, et al. (2020). <i>Symptom to Diagnosis. An Evidence-Based Guide, (4th ed)</i> . McGraw-Hill Education. *

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory,

political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

Bickley, L.S., Szilagy, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed).** Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*

i-Human Patient by Kaplan – instructions for purchasing access to this online simulation program will be posted on the course Canvas website

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*

Sexual Orientation and Gender Identity in Nursing (SOGI) Toolkit

<https://soginursing.ca/index.php/modules/students/> * Save your certificates of completion and submit these to Canvas.

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed).** McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care

professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

SHIRP: The Saskatchewan Health Information Resources Partnership ([SHIRP](#)) provides access to a comprehensive suite of online health information resources for all health practitioners in Saskatchewan. Practice areas include medicine, nursing, pharmacy, psychology, and therapy. The SHIRP digital library includes health databases, full-text journals, and books, and two clinical decision-support tools.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **SEE HIGHLIGHTED SELECTIONS.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio

IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites).

- 3.1 Permission Required: **YES, permission is required to audit this course.**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 832: Pathophysiology-Pharmacology for Nurse Practitioner Practice I;**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **NURS 831: Therapeutic Foundations for Nurse Practitioner Practice; NURS 833: Pathophysiology-Pharmacology for NP Practice II**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course:
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: NURS 884 and NURS 879

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive:

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS			
Course Title:	Advanced Health Assessment & Diagnostic Reasoning I		
Course Code:	NURS 834	Term:	TBD
Course Credits:	3	Delivery:	Blended: Self-directed, synchronous online seminars, onsite skills lab (16 hrs)
Location:	Distance Learning + onsite skills lab in Saskatoon	Website:	https://canvas.usask.ca/
Course Dates & Times:	Weekly 4-hour seminar x 9 weeks (36 hrs) + 2-day onsite skills lab (16 hrs)		
Course Calendar Description:	Building on foundational Registered Nurse clinical competencies, students will develop advanced competencies in health assessment and diagnostic reasoning essential for nurse practitioner clinical practice. Focus will be on evidence-informed practice, culturally safe care, and critical inquiry as it applies to assessment and diagnosis of common health concerns in diverse clients and settings.		

Pre or Co-Requisite:	Pathophysiology-Pharmacology for Nurse Practitioner Practice II(Pre/co); Therapeutic Foundations for Nurse Practitioner Practice (Pre/Co)
Course Equivalent	Completion of both NURS 884: Advanced Health Assessment & Diagnostic Reasoning I and NURS 879: Advanced Health Assessment & Diagnostic Reasoning II

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Implement appropriate comprehensive and focused health assessments for diverse patient populations including: chart review, initial observations, reason for encounter, health history, physical exam, and consideration of individual patient factors (i.e. social determinants of health, cultural safety, developmental life stage) (NP ELCs, 1.1, 1.3, 1.4, 1.10)
2. Select appropriate diagnostic investigations and accurately interpret results. (NP ELCs 1.4, 1.5)
3. Analyze, synthesize, and interpret data from multiple sources (i.e. history, physical exam, diagnostic investigations, evidence-informed practice) to establish differential, must-not-miss, and most likely diagnosis. (NP ELC 1.5)
4. Apply communication skills to accurately relay client information including history, physical assessment findings, and diagnosis with other members of the health care team and the client. (NP ELCs 1.5, 1.9, 1.14)
5. Apply evidence-informed virtual care strategies to assess and diagnose health concerns. (NP ELC 1.5, 1.16)
6. Begin establishing a professional NP role identity as a clinician by engaging in learning activities that develop advanced competencies in assessment and diagnosis. (NP Practice Standards).

7. Apply strategies to create and enhance culturally safe care and respectful health care. (NP ELCs 1.3, 1.4, 1.10., 3.2)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;

- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at: <https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter is defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at: http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

* An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

Building upon foundational RN health assessment competencies, this course supports development of advanced skills in history taking, physical examination, interpretation of diagnostic investigations and diagnostic reasoning. Applying culturally and patient centered communication strategies, students will learn to complete comprehensive and focused health histories for a variety of health concerns in patients across the lifespan. Skills development includes the selection and interpretation of appropriate assessment tools and techniques (e.g., physical exam, diagnostic investigations, screening tools, etc.) based on evidence-based practice and individual patient factors such as culture, developmental stage, and patient preferences. Through critical appraisal of health assessment data, physical exam findings and diagnostic test results, students will gain competency in applying the diagnostic process to formulate differential diagnosis, including prioritizing likely and critical diagnosis.

Learning strategies for this course align with [Bloom's Taxonomy](#) for learning, progressing beyond mere knowledge acquisition to encompass understanding, applying, analyzing, evaluating, and creating. Course activities include self-directed learning through required readings/media, virtual simulations, seminar discussion, case studies and clinical skills labs, providing a variety of different learning opportunities to develop, apply and evaluate competencies in health assessment and diagnosis.

COURSE SCHEDULE

The focus of the Advanced Health Assessment and Diagnostic Reasoning (AHAD) courses can be divided into three key areas:

1. **Health Assessment:** History and Physical Exam
2. **Diagnostic Investigations:** Selection and Interpretation
3. **Diagnostic Reasoning:** Critical appraisal of data to determine differential diagnosis

These components build on each other and are founded in patient-centered, culturally sensitive communication. Required readings/media are grouped into these three areas in an order that guides progressive knowledge acquisition. Therefore, you are encouraged to do the readings in the chronological order presented. It is important to complete pre-seminar readings/media **prior** to seminar, as seminar activities will focus on application of knowledge from these to clinical cases, and clarification of areas of uncertainty.

Course Resource Key

Health Assessment	
Assessment Text	Bickley, et al. (2021). <i>Bates' Guide to Physical Examination and History Taking</i> (13th ed). Wolters Kluwer.
Assessment Videos	<i>Bates' Visual Guide to Physical Examination</i> . (2022). Wolters Kluwer. *
Diagnostic Investigations	
Diagnostics Text	Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). <i>Guide to Diagnostic Tests, 7th ed</i> . McGraw Hill Education. *eBook available for FREE through USask library AccessMedicine database
ECG Text	Garcia, T. B. (2014). <i>12-Lead ECG The Art of Interpretation, (2nd ed)</i> . Burlington, MA: Jones & Bartlett Learning.
Diagnostic Reasoning & Differential Diagnosis	
The Patient Hx	Henderson et al. (2012). <i>The Patient History: An Evidence-based Approach to Differential Diagnosis</i> . McGraw Hill. * This text focuses on health history taking to arrive at evidence based differential diagnosis. Read it prior to S2D which addresses a more advanced approach to differential diagnosis
S2D	Stern, et al. (2020). <i>Symptom to Diagnosis. An Evidence-Based Guide, (4th ed)</i> . McGraw-Hill Education. *

* Available online for FREE through USask library

Date & Topic	Required Readings/Media & Evaluation
Weeks 1-2 Foundations of Health Assessment & Diagnosis Bootcamp (? 2-days onsite)	Assessment Text (Bates') : Read Chapter 1. Approach to the Clinical Encounter, 2. Interviewing, Communication and Interpersonal Skills, 3. Health History, 4. Physical Exam, 8. General Survey, Vital Signs and Pain Assessment Videos (Bates') : Review 1. Head-to-Toe Assessment: Adult; 2. Head-to-Toe Assessment: Infant; 3. Head-to-Toe Assessment: Child; 5. General Survey and Vital Signs

<ul style="list-style-type: none"> • Course Orientation • Approach to the Client Encounter • Health Assessment • Diagnostic Reasoning 	<p>The Patient Hx: Read Chapter 1. History and Physical Examination: Art and Science; 2. Subtleties of Medical History Taking</p> <p>S2D: Read Part 1. Patient with a Problem</p> <p>i-Human Patient Virtual Simulation orientation Videos</p> <p>Harvey Learning Modules: https://wwwapps.usask.ca/harvey/ These online modules will teach you more about cardiopulmonary assessment, including abnormal heart sounds</p> <p>CANSim. (2021). Sexual Orientation and Gender Identity in Nursing (SOGI) Toolkit https://soginursing.ca/index.php/modules/students/ - Submit certificate of completion to Canvas by the last day of course</p> <p>Quiz #1 – Foundations of Health Assessment & Diagnosis</p>
<p>Week 3</p> <p>HENT Assessment & Diagnosis</p>	<p>Assessment Text (Bates’): Review Chapter 11: Head and Neck, 12. Eyes, 13. Ears and Nose, 14. Throat and Oral Cavity</p> <p>Health Assessment Videos (Bates’): Review 7. Head, Eyes, and Ears; 8. Nose, Mouth, and Neck</p> <p>The Patient Hx: Read Section III. Head, Eyes, Ears, Nose, and Throat</p> <p>S2D: Read Part 30. Sore Throat</p>
<p>Week 4</p> <p>Respiratory Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 15. Thorax and Lungs</p> <p>Health Assessment Videos (Bates’): Review 9. Thorax and Lungs; OSCE Clinical Skills Video 5: Cough, 10. Shortness of Breath, and 12. Child and Adolescent Asthma</p> <p>The Patient Hx: Read Section V. Respiratory System</p> <p>S2D: Read Part 10. Cough and Congestion; Part 15. Dyspnea; Part 33. Wheezing or Stridor</p> <p>Quiz #2 – HENT and Respiratory Assessment and Diagnosis</p>
<p>Week 5</p> <p>CVS Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 16. Cardiovascular System</p> <p>Health Assessment Videos (Bates’): Review 10. Cardiovascular System</p> <p>The Patient Hx: Read Section VI: Cardiovascular System</p> <p>Diagnostics Text: In Chapter 3. Lab Tests, read about the following tests: B-Type Natriuretic Peptide (BNP), Cholesterol, Creatine Kinase, D-Dimer, Lipoprotein(a), Potassium (K+), Triglycerides, Troponin I, Cardiac</p>

	<p>S2D: Read Part 9. Chest Pain</p> <p>Canadian Cardiovascular Society Update on the Assessment and Management of Syncope https://ccs.ca/guidelines-and-position-statement-library/</p> <p>Canadian Cardiovascular Position Statement on Familial hypercholesterolemia: Update 2018 https://ccs.ca/guidelines-and-position-statement-library/</p> <p>CCS Calculators and Forms. https://ccs.ca/calculators-and-forms/</p> <p>Familiarize yourself with:</p> <ul style="list-style-type: none"> • Cardiovascular Age + FRS Calculator (My Health Checkup), • Framingham Risk Score (FRS) <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 6</p> <p>ECG Interpretation</p>	<p>Garcia, T. B. (2014). <i>12-Lead ECG The Art of Interpretation, (2nd ed)</i>. Burlington, MA: Jones & Bartlett Learning. *If you own an ECG interpretation text from past experiences/courses this may suffice</p> <p>Quiz #3 – CVS Assessment & Diagnosis, ECG Interpretation</p>
<p>Week 7</p> <p>PVS Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 17. Peripheral Vascular System</p> <p>Health Assessment Videos (Bates’): Review 11. Peripheral Vascular System</p> <p>S2D: Read Part 17. Edema</p> <p>Canadian Cardiovascular Society 2022 Guidelines for Peripheral Arterial Disease (Section on Diagnosis and Screening) https://ccs.ca/guidelines-and-position-statement-library/</p> <p>Thrombosis Canada. https://thrombosiscanada.ca/clinicalguides/</p> <p>Review the following Guidelines and Risk Calculators:</p> <ul style="list-style-type: none"> • Deep Vein Thrombosis (DVT): Diagnosis • Superficial Thrombophlebitis (SVT), Superficial Vein Thrombosis • CHADS2 Score & CHA2DS2-VASc Score for a-fib Stroke Risk

	<ul style="list-style-type: none"> • HAS-BLED Score for Major Bleeding Risk • Wells' Criteria for DVT <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 8</p> <p>Dermatology Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 10. Skin, Hair, and Nails</p> <p>Health Assessment Videos (Bates’): Review 6. Skin</p> <p>The Patient Hx: Read Section IV: Dermatology</p> <p>S2D: Read Part 29. Rash</p> <p>American Academy of Dermatology. Basic Dermatology Curriculum. https://www.aad.org/member/education/residents/bdc</p> <p>Quiz #4 – PVS and Dermatology Assessment & Diagnosis</p> <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 9</p> <p>GI Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 19. Abdomen</p> <p>Health Assessment Videos (Bates’): Review 13. Abdomen</p> <p>The Patient Hx: Read Section VII: Gastrointestinal System</p> <p>Diagnostics Text: In Chapter 3. Lab Tests review the following tests. You do not need to memorize reference ranges or lab collection. Focus on understanding why you would order the test, and what abnormal results may indicate.</p> <p>Alanine Aminotransferase (ALT), Albumin, Alkaline Phosphatase (ALP), Amylase, Aspartate Aminotransferase (AST), Bilirubin, Celiac disease, Clostridium difficile toxins, Fecal Occult Blood Tests, Gamma-glutamyl transpeptidase (GGT), Helicobacter Pylori Tests, Hepatitis A virus antibody, Hepatitis B surface antigen, Hepatitis B surface antibody, Hepatitis B Core antibody, Hepatitis C virus antibody, Hepatitis C virus genotyping, Hepatitis C virus RNA, lipase</p> <p>Abnormal Liver Chemistry – Evaluation and Interpretation https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/abnormal-liver-chemistry</p> <p>Infectious Diarrhea - Guideline for Ordering Stool Specimens https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/infectious-diarrhea</p>

	<p>Hepatitis B Serology Results and Interpretation https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/bc-guidelines/viralhepatitistesting-appendix3.pdf</p> <p>S2D: Read Part 3. Abdominal Pain, Part 13. Diarrhea; Part 19. GI Bleeding</p> <p>Computer-Based Simulation Case #1 – Due within 72 hours of class</p>
<p>Week 10</p> <p>Pediatric Assessment & Diagnosis</p>	<p>Health Assessment (Bates’): Read Chapter 25. Children: Infancy through Adolescence</p> <p>Canadian Pediatric Society. Promoting optimal monitoring of child growth in Canada: Using the WHO growth charts. http://www.cps.ca/tools-outils/who-growth-charts</p> <p>Rourke Record: https://www.rourkebabyrecord.ca/downloads</p> <p>WHO Canadian Growth Charts: https://www.rourkebabyrecord.ca/growth_charts.asp</p> <p>Canadian Pediatrics Society. (2016). Greig Health Record: Available at: https://cps.ca/en/tools-outils/greig-health-record</p> <p>Canadian Pediatric Society (2018). Guidelines for detection, management, and prevention of hyperbilirubinemia in term and late preterm newborn infants. Available at: https://cps.ca/en/documents/position/hyperbilirubinemia-newborn</p> <p>Zwaigenbaum, L., Brian, J.A., Ip, A., Canadian Pediatric Society, Autism Spectrum Disorders Guidelines Task Force. (2019). Early detection for autism spectrum disorder in young children. <i>Pediatric Child Health</i>, 24(7), 424-432. Found at: https://cps.ca/en/documents/position/asd-early-detection</p> <p>Quiz #5 – GI and Pediatric Assessment & Diagnosis</p>
Final Exam	Virtual OSCE: Health History Taking

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:**Email:****Office Phone:****Mobile:** (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed).** Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*

i-Human Patient by Kaplan – instructions for purchasing access to this online simulation program will be posted on the course Canvas website

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*

Sexual Orientation and Gender Identity in Nursing (SOGI) Toolkit

<https://soginursing.ca/index.php/modules/students/> * Save your certificates of completion and submit these to Canvas.

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed)**. McGraw-Hill Education. *eBook available for FREE through USask library AccessMedicine database

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

SHIRP: The Saskatchewan Health Information Resources Partnership ([SHIRP](#)) provides access to a comprehensive suite of online health information resources for all health practitioners in Saskatchewan. Practice areas include medicine, nursing, pharmacy, psychology, and therapy. The SHIRP digital library includes health databases, full-text journals, and books, and two clinical decision-support tools.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Foundations of Health Assessment Bootcamp	Weeks 1-2 (2-3 days)	Complete/Incomplete
CAN-Sim SOGI Certificate	Due by last day of course	Complete/Incomplete
Computer-Based Simulation Cases	Week 5, 7, 8, 9	30%

Quizzes	Weeks 2, 4, 6, 8, 10	40%
Virtual OSCE Station	Week 11	30%
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

FOUNDATIONS OF HEALTH ASSESSMENT BOOTCAMP

Value: Complete/Incomplete

Due Date: Weeks 1-2 (Exact Dates TBD)

Type: The onsite bootcamp provides opportunity to begin developing foundational skills in advanced health assessment, including history taking, physical exam and diagnostic reasoning, through intensive hands-on-practice with instructor and peer feedback.

Description: You will attend a 2-day onsite skills lab in Saskatoon, participating in learning activities to develop your skills in advanced health assessment and diagnostic reasoning. This skills lab also facilitates development of peer networking and support, which many students find beneficial given the online nature of the NP program. Specific skills addressed during this week include comprehensive and focused health history taking, the head-to-toe exam (review of RN competencies), basic pediatric assessment, and diagnostic reasoning. You will also be introduced to the computer-based-simulation program that will be used in this course, and have opportunity to further develop skills in advanced communication through practice in mock patient encounters.

Learning Outcomes Addressed: 1, 3, 4, 6, 7

CAN-SIM SEXUAL ORIENTATION AND GENDER IDENTITY (SOGI) IN NURSING CERTIFICATE

Value: Complete/Incomplete

Due Date: By last day of class

Type: Online Learning Modules with Virtual Simulation to advance knowledge and ability to apply principles of equity, diversity and inclusion to client interactions.

Description: You will complete the CAN-Sim Sexual Orientation and Gender Identify in Nursing (SOGI) toolkit (<https://soginursing.ca/>) to advance your competency providing safe, respectful and inclusive care to patients, considering sexual orientation and gender identity. This toolkit consists of five lessons including four Virtual Simulation Games. It will take approximately 3 hours to complete. **Upon completion of all learning activities save and submit your course completion certificate to the NURS 884 Canvas site.**

Learning Outcomes Addressed: 1, 4, 7

COMPUTER-BASED SIMULATION CASES

Value: 30%

Due Date: Week 5, 7, 8, and 9

Type: Computer-Based simulation is used to support development of advanced health assessment and diagnostic reasoning skills.

Description: Throughout the term you will participate in several computer-based simulations using the program i-Human Patient. Prior to submitting a case for evaluation, you will have opportunity to work through a case in class, obtaining feedback from your instructor(s), as well as to do practice cases (self-directed). You will be graded on four (4) assigned cases, with your top three (3) grades included in the calculation of your grade for this component. Assigned evaluation and practice cases will be posted on the course Canvas site.

Use of computer-based simulations provide hands-on opportunity to develop skills in obtaining essential information from the health history, selecting appropriate physical exam, determining necessary diagnostic investigations, and interpreting data to arrive at differential diagnosis. Pre-briefing and post-briefing with instructors, as well as feedback provided by the computer-program, further enhance learning through ongoing formative feedback that can be applied to refine skills development. Please note the purpose of these simulations is not to develop and evaluate therapeutic communication skills, as these skills are better assessed and evaluated through authentic real-person interactions, which you will have the opportunity to participate in in other learning activities integrated throughout your program.

Learning Outcomes Addressed: 1, 2, 3, 6

QUIZZES

Value: 40% - 10% each with lowest grade dropped

Date: Weeks 2, 4, 6, 8, 10 at the end of class

Length: 30 minutes each

Type: Bi-weekly quizzes to evaluate knowledge of health assessment, diagnostic investigations, and diagnostic reasoning related to course content.

Description: Every other week at the end of class there will be a 20-minute quiz, evaluating competencies in health assessment and diagnostic reasoning from weekly readings, seminars and learning activities. Each quiz will consist of 20 questions, which may be a mixture of multiple choice, short-answer, True/False and matching questions. Topics covered in quizzes and scheduling is outlined below. Only the highest four (4) grades on quizzes will be counted towards the final grade, giving students the opportunity to drop their lowest quiz grade.

Quiz & Date	Topics Covered
Quiz #1 – Week 2	Foundations of Health Assessment & Diagnosis and Bootcamp
Quiz #2 – Week 4	HENT & Respiratory Assessment & Diagnosis
Quiz #3 – Week 6	CVS Assessment & Diagnosis, ECG Interpretation
Quiz #4 – Week 8	PVS & Dermatology Assessment & Diagnosis
Quiz #5 – Week 10	GI and Pediatric Assessment & Diagnosis

Learning Outcomes Addressed: 1, 2, 3

VIRTUAL OSCE STATION

Value: 30%

Date: Week 11

Length: 30 minutes

Type: The Objective Structured Clinical Exam (OSCE) is a practical exam that evaluates your developing competencies in health history taking and diagnostic reasoning through a virtual simulated patient encounter.

Description: You will complete a 30-minute virtual OSCE, demonstrating your competencies collecting and interpreting health assessment data in a simulated patient encounter. During the simulated encounter, an actor will take on the role of patient, presenting with a health concern covered in the course. You will collect a health history related to their presenting concern over Zoom and answer three post-encounter questions related to the case (i.e. naming diagnostic investigations you would order, differential diagnosis with rational, physical examinations relevant to the encounter). You will be evaluated by an NP examiner using a standardized checklist to identify what competencies in assessment and diagnosis you complete accurately. Please see the OSCE manual for further details on OSCE.

Learning Outcomes Addressed: 1, 2, 3, 4, 5, 6, 7

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

EXAM POLICIES, PROCEDURES AND GUIDELINES

The midterm and final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam

should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.
7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.

13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education ([CASN, 2022](#)). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be


contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by **[insert names]**.

 UNIVERSITY OF SASKATCHEWAN	New Course Proposal & Creation Form
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1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **COLLEGE of GRADUATE AND POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 835**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Advanced Health Assessment & Diagnostic Reasoning II**
Course Short Title (maximum 30 characters): **AHAD II**
- 2.4 Total Hours: Lecture **Seminar – 36 hours Lab – 16 hours**
Tutorial Other
- 2.5 Weekly Hours: Seminar **3-4 hrs Lab 16 hours over 2 days**
- 2.6 Term in which it will be offered: **T3** T1 T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **Advanced Health Assessment & Diagnostic Reasoning I (NURS 834)**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **This course builds on students' knowledge and skills from Advanced Health Assessment and Diagnostic Reasoning I, to further develop advanced competencies in health assessment and diagnostic reasoning essential to nurse practitioner clinical practice. Focus will be on evidence-informed practice, culturally safe care, and critical inquiry as it applies to assessment and diagnosis of common health concerns in diverse clients and settings.**

- 2.9 Do you allow this course to be repeated for credit? **NO**

3. Please list rationale for introducing this course:

This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).

4. Please list the learning objectives for this course:

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS](#)

[Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Implement appropriate comprehensive and focused health assessments for diverse patient populations including: chart review, initial observations, reason for encounter, health history, physical exam, and consideration of individual patient factors (i.e. social determinants of health, cultural safety, developmental life stage) (NP ELCs, 1.1, 1.3, 1.4, 1.10)
 2. Select appropriate diagnostic investigations and accurately interpret results. (NP ELCs 1.4, 1.5)
 3. Analyze, synthesize, and interpret data from multiple sources (i.e. history, physical exam, diagnostic investigations, evidence-informed practice) to establish differential, must-not-miss, and most likely diagnosis. (NP ELC 1.5)
 4. Apply communication skills to accurately relay client information including history, physical assessment findings, and diagnosis with other members of the health care team and the client. (NP ELCs 1.5, 1.9, 1.14)
 5. Apply evidence-informed virtual care strategies to assess and diagnose health concerns. (NP ELC 1.5, 1.16)
 6. Begin establishing a professional NP role identity as a clinician by engaging in learning activities that develop advanced competencies in assessment and diagnosis. (NP Practice Standards).
 7. Apply strategies to create and enhance culturally safe care and respectful health care. (NP ELCs 1.3, 1.4, 1.10., 3.2)
5. **Impact of this course**
 Are the programs of other departments or Colleges affected by this course? **NO**
 If so, were these departments consulted? (Include correspondence)
 Were any other departments asked to review or comment on the proposal?
6. **Other courses or program affected** (please list course titles as well as numbers)
- 6.1 Courses to be deleted? **NURS 879: Advanced Health Assessment and Diagnostic Reasoning II**
 - 6.2 Courses for which this course will be a prerequisite? **NURS 837: Nurse Practitioner Role Development I and NURS 840: Nurse Practitioner Clinical Residency I**
 - 6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**
7. **Course outline**
 (Weekly outline of lectures or include a draft of the course information sheet.)

Dates & Topics	Required Readings/Media & Evaluation
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<p>Week 1</p> <p>Course Orientation</p> <p>Diagnostic Reasoning (Review)</p> <p>Mental Health</p>	<p>Rajkomar, A., & Dhaliwal, G. (2011). Improving diagnostic reasoning to improve patient safety. <i>The Permanente Journal</i>, 15(3), 68-73. 10.7812/tpp/11-098.</p> <p>Sackett, D.L. (1992). A Primer on the precision and accuracy of the clinical examination. <i>JAMAevidence</i>. * Free access through USask Library. While this article is dated, it remains relevant.</p> <p>Shreffler, J., & Huecker, M.R. (2022). Diagnostic Testing Accuracy: Sensitivity, Specificity, Predictive Values and Likelihood Ratios. <i>StatPearls [Internet]</i>. https://www.ncbi.nlm.nih.gov/books/NBK557491/</p> <p>Assessment Text (Bates'): Read Chapter 9. Cognition, Behaviour, and Mental Status</p> <p>Patient Hx: Read Section XII. Psychiatry</p> <p>Mental Health Screening Tools – Familiarize yourself with the following more common mental health screening tools:</p> <ul style="list-style-type: none"> • Adverse Childhood Experiences (ACES) • Eating Attitudes Test (EAT-26) • Patient Health Questionnaire (PHQ-9) • Generalized Anxiety Disorder (GAD-7) • ADHD screening tools (SNAP-26, ASRS) • AUDIT-C for Alcohol Use Disorders • CAGE Questionnaire for Alcohol Use • Pediatric Symptom Score (PSC-17) <p>Levis, B., Benedetti, A., Thombs, B.D. (2019). Accuracy of the patient health questionnaire-9 (PHQ-9) for screening to detect major depression: individual participant meta-analysis. <i>British Medical Journal</i>, 365, 1-11. 10.1136/bmj11476. Retrieved from: https://www.bmj.com/content/365/bmj.11476</p>
<p>Week 2</p>	<p>Assessment Text (Bates'): Read Chapter 24. Nervous System</p> <p>Assessment Videos (Bates'): Review 17. Nervous System: Cranial Nerves and Motor System</p>

Neurological Assessment & Diagnosis	<p>The Patient Hx: Review Section XI: Neurology</p> <p>S2D: Read Part 14. Dizziness, 20. Headache</p> <p><i>Concussion Awareness Training Tool for Medical Professionals</i> https://rise.articulate.com/share/WkREEc3yPBwBPLyP92r-7NfqKU_0qLv#/lessons/5Fm3NMJtas2FwA12k14IkV3dkZP4aLD6</p> <p>Computer-Based Simulation Evaluation #1</p>
<p>Week 3</p> <p>Musculoskeletal Assessment & Diagnosis</p>	<p>Assessment Text (Bates): Read Chapter 23. Musculoskeletal System</p> <p>Assessment Videos (Bates): Review 16. Musculoskeletal System</p> <p>The Patient Hx: Review Section X. Musculoskeletal</p> <p>S2D: Read Part 7. Low Back Pain, 27. Joint Pain</p> <p>Centre for Effective Practice (CEP). CORE Back Tool. https://cep.health/clinical-products/low-back-pain/</p> <p>Saskatchewan Spine Pathway's Assessment and Management of Low Back Pain online course. Registration is FREE for both SHA and non-SHA employees. Click HERE to register.</p> <p>Computer-Based Simulation Evaluation #2</p>
<p>Week 4</p> <p>Radiology</p>	<p>Undergraduate Diagnostic Imaging Fundamentals: Review Chapter 1: Introduction, 2: Principles of Radiation Biology and Radiation Protection. 3. Principles of Imaging Techniques, 5. Approach to Reviewing X-ray Imaging, 9. Chest, 14. Musculoskeletal, 17. Normal Reference Images, Unlabelled and Labelled</p> <p>Ottawa Ankle Rules http://www.ohri.ca/emerg/cdr/ankle.html</p> <p>Ottawa Knee Rules http://www.ohri.ca/emerg/cdr/knee.html</p> <p>Critical Analysis of Diagnostic Tool Presentations</p>
<p>Week 5</p> <p>GU Assessment & Diagnosis</p>	<p>Assessment Text (Bates): Read Chapters 18. Breasts and Axillae, 20. Male Genitalia, 21. Female Genitalia, 22. Anus, Rectum, and Prostate</p>

	<p>Assessment Videos (Bates): Review 12. Breasts and Axillae, 14. Male Genitalia, Rectum, Anus, and Prostate, 15. Female Genitalia, Anus, and Rectum</p> <p>Diagnostics Text: In Chapter 3. Lab Tests read about the following tests: Albumin – urine, Blood urea nitrogen (BUN), BRCA1 and BRC2 Genotyping, Creatinine, serum or plasma, Creatinine clearance, Estradiol, Follicle-Stimulating Hormone (FSH), Glomerular Filtration Rate, estimated (eGFR), Luteinizing hormone (LH), Prolactin, Prostate Specific Antigen (PSA), Syphilis – serologic testing, Testosterone</p> <p>The Patient Hx: Review Section VII. Genitourinary System, IX. Women’s Health</p> <p>S2D: Read Part 16. Dysuria, 21. Hematuria</p> <p>Robinson, J.L., Lang, M.E., Bortolussi, R. & the Canadian Paediatric Society (2020). <i>Urinary tract infections in infants and children: Diagnosis and management.</i> https://www.cps.ca/en/documents/position/urinary-tract-infections-in-children https://www.canada.ca/en/publichealth/services/infectious-diseases/sexual-health-sexually-transmitted-infections/canadian-guidelines/sexually-transmitted-infections.html Review the sexually transmitted and blood-borne infection (STBBI) guides with a focus on assessment, diagnosis and prevention</p> <p>Computer-Based Simulation Evaluation #3</p>
<p>Week 6</p> <p>Antenatal Assessment & Diagnosis</p>	<p>Assessment Text (Bates): Read Chapter 26. Pregnant Woman</p> <p>Jarvis Physical Examination and Health Assessment – Head-to-Toe Examination of the Pregnant Woman (available through CON Virtual Lab https://nursing.usask.ca/virtual-lab/all-videos.php</p> <p>Diagnostics Text: In Chapter 3. Lab Tests read about the following tests: ABO Typing, Anti-body Screen, Beta-hCG</p> <p>Public Health Agency of Canada (2021). Family-centred maternity and newborn care: National guidelines. https://www.canada.ca/en/public-health/services/maternity-newborn-care-guidelines.html Read: Chapter 2: Preconception care, 3: Care during pregnancy, 5. Postpartum care</p> <p>Look up and review your provincial prenatal record. For example: Saskatchewan Prenatal Record</p> <p>Perinatal Services BC. Early Prenatal Care Summary and Checklist for Primary Care Providers</p> <p>Postpartum and Newborn Care Summary Checklist for Primary Care Providers</p>

	<p>Prenatal Screening Ontario (website). Provider Resources. https://www.prenatalscreeningontario.ca/en/psa/requisitions-and-provider-tools/provider-resources.aspx</p> <p>Review Leaflet on Prenatal Genetic Screening, Non-invasive Prenatal Testing, How to Get Enhanced First Trimester Screening, Prevalence of Chromosome Differences, Prenatal Screening Pathway, Prenatal Testing Timeline.</p> <p>Society of Obstetricians and Gynecologists of Canada (SOGC) guidelines. Accessible from U of S library through the <i>Journal of Obstetrics and Gynecology Canada (JOGC)</i>. Review the following with a focus on prevention, assessment, and diagnostics relevant to primary care providers:</p> <ul style="list-style-type: none"> • Committee Opinion No. 418: The Complete 11-14 Week Prenatal Sonographic Examination (2021) • Guideline No. 410: Prevention, Screening, Diagnosis, and Pregnancy Management for Fetal neural Tube Defects (2021) • Guideline No. 393: Diabetes in Pregnancy (2019) • Guideline No. 375: Clinical Practice Guideline on the Use of First Trimester Ultrasound (2019) • Guideline No. 405: Screening and Counselling for Alcohol Consumption During Pregnancy (2019) <p>Computer-Based Simulation Evaluation #4</p>
<p>Week 7</p> <p>Older Adult Assessment & Diagnosis</p>	<p>Assessment Text (Bates’): Read Chapter 27. Older Adult</p> <p>Assessment Videos (Bates’): Review 4. Head-to-Toe Assessment: Older Adult</p> <p>The Patient Hx: Review Chapter 58. Confusion, 59. Memory Loss</p> <p>S2D: Read Part 11. Delirium or Dementia</p> <p>Falk, N., Cole, A., & Meredith, T.J. (2018). Evaluation of suspected dementia. <i>American Family Physician</i>, 15(97): 398-405. Retrieved from: https://www.aafp.org/afp/2018/0315/p398.html</p> <p>Comprehensive Geriatric Assessment Toolkit Plus. Read the following pages:</p> <ul style="list-style-type: none"> ➤ https://www.cgakit.com/m3--nutrition-assessment ➤ https://www.cgakit.com/m-3-nutrition---more

	<p style="color: red; text-align: center;">Critical Analysis of Diagnostic Tool Presentations</p>
<p>Week 8</p> <p>Systemic and Endocrine Assessment & Diagnosis</p>	<p>The Patient Hx: Review Section</p> <p>Diagnostics Text: Review the following diagnostics in Chapter 3: Glucose, Glucose Tolerance Test, Hemoglobin A1C, parathyroid hormone, thyroglobulin, thyroglobulin antibody, thyroid peroxidase antibody, thyroid stimulating hormone, thyroid stimulating immunoglobulin, thyroxine (T4), triiodothyronine (T3) and in Chapter 6: thyroid ultrasound, thyroid uptake scan, parathyroid scan</p> <p>The Patient Hx: Read Chapter 7. Fatigue, 10. Insomnia, 12. Night Sweats, 14. Weight Gain, 15. Weight Loss</p> <p>S2D: Read Part 6. Anemia, 12. Diabetes, 18. Fatigue, 32. Unintentional Weight Loss</p> <p>Asymptomatic Thyroid Dysfunction (2019) found at: https://canadiantaskforce.ca/guidelines/published-guidelines/asymptomatic-thyroid-dysfunction/s</p> <p>Thyroid Function Testing in the Diagnosis and Monitoring of Thyroid Function Disorder found at: https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/thyroid-testing</p> <p>Moubayed, S.P., & Urken, M.L. (2016). Thyroid nodules. <i>Canadian Medical Association Journal</i>, 188(17-18), 1259. https://doi.org/10.1503/cmaj.160300</p> <p>Choosing Wisely Canada (2020). Endocrinology and Metabolism: Five tests and treatments to question. Found at: https://choosingwiselycanada.org/recommendation/endocrinology-and-metabolism/</p> <p style="color: red; text-align: center;">Computer-Based Simulation Evaluation #5</p>
<p>Week 9</p> <p>Onsite Residency (2-days) –</p>	<ul style="list-style-type: none"> • GU Assessment + SETA/MUTA(?) • Advanced MSK Assessments (knee, ankles, hips, shoulders, back) • Prenatal/Postnatal assessment

combine with NURS 875 onsite	<ul style="list-style-type: none"> • Simulated Patient Case
Week 10 Approach to the Hospitalized Patient	<p>Assessment Text (Bates'): Read Chapter 4. Physical Examination section on Adapting the Physical Examination: Specific Patient Conditions (pp129-132)</p> <p>Papadakis, McPhee, Rabow, & McQuaid (2024). Current Medical Diagnosis & Treatment. (*Available for FREE through USask Library AccessMedicine Database). Read Part 3: Preoperative Evaluation & Perioperative Management</p> <p>Stone & Humphries (2024). Current Diagnosis & Treatment: Emergency Medicine. (*Available for FREE through USask Library AccessMedicine Database). Read Chapter 1: Approach to the Emergency Department Patient</p> <p>Emergency Medicine Clerkship Primer – Chapter 5. Differences between the Emergency Department, the Office, and the Inpatient Setting.</p>
Week 11-12	Final Exam

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course:

10-50 – LAB ROOM FOR SKILLS LAB FOR 35 STUDENTS/USE CLRC IN HEALTH SCIENCES

50-90

90-130

130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERIC/PERCENTAGE**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
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Computer-Based Simulation Cases	Weeks 2, 3, 5, 6, 8	40%
Critical Analysis of Diagnostic Tool Seminar Presentation	Various seminar dates throughout term – Signup on Canvas	10%
Onsite Skills Labs	Week 9-10	Complete/Incomplete
Final Exam	Week 11-12	50%
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **NO**

10. Required text

Include a bibliography for the course.

Health Assessment	
Assessment Text	Bickley, et al. (2021). <i>Bates' Guide to Physical Examination and History Taking</i> (13th ed). Wolters Kluwer.
Assessment Videos	<i>Bates' Visual Guide to Physical Examination</i> . (2022). Wolters Kluwer. *
Diagnostic Investigations	
Diagnostics Text	Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). <i>Guide to Diagnostic Tests, 7th ed</i> . McGraw Hill Education. *eBook available for FREE through USask library AccessMedicine database
Radiology Text	Burbridge, B. (2017). <i>Undergraduate Diagnostic Imaging Fundamentals</i> . University of Saskatchewan Distance Education Unit. *FREE ebook available at: https://openpress.usask.ca/undergradimaging/
Diagnostic Reasoning & Differential Diagnosis	
The Patient Hx	Henderson et al. (2012). <i>The Patient History: An Evidence-based Approach to Differential Diagnosis</i> . McGraw Hill. * This text focuses on health history taking to arrive at evidence based differential diagnosis. Read it prior to S2D

	which addresses a more advanced approach to differential diagnosis
S2D	Stern, et al. (2020). <i>Symptom to Diagnosis. An Evidence-Based Guide, (4th ed)</i> . McGraw-Hill Education. *

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. *FREE access through USask library

Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. *FREE ebook available at:
<https://openpress.usask.ca/undergradimaging/>

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. *eBook available for FREE through USask library AccessMedicine database

i-Human Patient by Kaplan – instructions for purchasing access to this online simulation program will be posted on the course Canvas website

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. *eBook available for FREE through USask library AccessMedicine database

Simel, D.L., & Rennie, D. (2009). **The Rational Clinical Examination: Evidence-Based Clinical Diagnosis.** JAMAevidence. *FREE access through USask library

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed).** McGraw-Hill Education. *eBook available for FREE through USask library AccessMedicine database

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted selections.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites).

- 3.1 Permission Required: **YES, permission is required to audit this course**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 834: Advanced Health Assessment & Diagnostic Reasoning I.**

- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course:
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **NURS 836: Transition to Nurse Practitioner Clinical Practice**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: **NURS 879.3**

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here: **NURS 879.3**

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive:

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: **Syllabus attached.**

COURSE SYLLABUS			
Course Title:	Advanced Health Assessment & Diagnostic Reasoning II		
Course Code:	NURS 835	Term:	TBD
Course Credits:	3	Delivery:	Blended: Self-directed, synchronous online seminars, onsite skills lab
Location:	Distance Learning + onsite skills lab in Saskatoon	Website:	https://canvas.usask.ca/

Course Dates & Times:	Weekly 4-hour seminar/lab x 9 weeks (36 hrs) + 2-day onsite skills lab (16 hrs)
Course Calendar Description:	This course builds on students' knowledge and skills from Advanced Health Assessment and Diagnostic Reasoning I, to further develop advanced competencies in health assessment and diagnostic reasoning essential to nurse practitioner clinical practice. Focus will be on evidence-informed practice, culturally safe care, and critical inquiry as it applies to assessment and diagnosis of common health concerns in diverse clients and settings.
Pre or Co-Requisite:	NURS 834: Advanced Health Assessment & Diagnostic Reasoning I (Pre);
Course Equivalent	NURS 879: Advanced Health Assessment & Diagnostic Reasoning II

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Implement appropriate comprehensive and focused health assessments for diverse patient populations including: chart review, initial observations, reason for encounter, health history, physical exam, and consideration of individual patient factors (i.e. social determinants of health, cultural safety, developmental life stage) (NP ELCs, 1.1, 1.3, 1.4, 1.10)
2. Select appropriate diagnostic investigations and accurately interpret results. (NP ELCs 1.4, 1.5)
3. Analyze, synthesize, and interpret data from multiple sources (i.e. history, physical exam, diagnostic investigations, evidence-informed practice) to establish differential, must-not-miss, and most likely diagnosis. (NP ELC 1.5)
4. Apply communication skills to accurately relay client information including history, physical assessment findings, and diagnosis with other members of the health care team and the client. (NP ELCs 1.5, 1.9, 1.14)

5. Apply evidence-informed virtual care strategies to assess and diagnose health concerns. (NP ELC 1.5, 1.16)
6. Begin establishing a professional NP role identity as a clinician by engaging in learning activities that develop advanced competencies in assessment and diagnosis. (NP Practice Standards).
7. Apply strategies to create and enhance culturally safe care and respectful health care. (NP ELCs 1.3, 1.4, 1.10., 3.2)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components

- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

* An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

This course builds on competencies established in Advanced Health Assessment and Diagnostic Reasoning I, to address increasing complex systems and presentations. Students will advance competencies in advanced health assessment, selection and interpretation of assessment tools and techniques (e.g., physical exam, diagnostic investigations, screening tools, etc.) and diagnostic reasoning. Through critical appraisal of health assessment data, physical exam findings and diagnostic test results, students will increase competency applying the diagnostic process to formulate differential diagnosis, including prioritizing likely and critical diagnosis.

Learning strategies in this course align with [Bloom's Taxonomy](#) for learning, progressing beyond mere knowledge acquisition to encompass understanding, applying, analyzing, evaluating, and creating. Course activities include self-directed learning through required readings/media, virtual simulations, seminar discussion, case studies and an on-site residency experience, providing a variety of different learning opportunities to develop, apply and evaluate competencies in health assessment and diagnosis.

COURSE SCHEDULE

The focus of the Advanced Health Assessment and Diagnostic Reasoning (AHAD) courses can be divided into three key areas:

1. **Health Assessment:** History and Physical Exam
2. **Diagnostic Investigations:** Selection and Interpretation
3. **Diagnostic Reasoning:** Critical appraisal of data to determine differential diagnosis

These components build on each other and are founded in patient-centered, culturally sensitive communication. Required readings/media are grouped into these three areas in an order that guides progressive knowledge acquisition. Therefore, you are encouraged to do the readings in the chronological order presented. It is important to complete pre-seminar readings/media PRIOR to seminar, as seminar activities will focus on application of knowledge from these to clinical cases, and clarification of areas of uncertainty.

Course Resource Key *

Health Assessment	
Assessment Text	Bickley, et al. (2021). <i>Bates' Guide to Physical Examination and History Taking</i> (13th ed). Wolters Kluwer.
Assessment Videos	<i>Bates' Visual Guide to Physical Examination</i> . (2022). Wolters Kluwer. *
Diagnostic Investigations	
Diagnostics Text	Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). <i>Guide to Diagnostic Tests, 7th ed</i> . McGraw Hill Education. *eBook available for FREE through USask library AccessMedicine database
Radiology Text	Burbridge, B. (2017). <i>Undergraduate Diagnostic Imaging Fundamentals</i> . University of Saskatchewan Distance Education Unit. *FREE ebook available at: https://openpress.usask.ca/undergradimaging/
Diagnostic Reasoning & Differential Diagnosis	
The Patient Hx	Henderson et al. (2012). <i>The Patient History: An Evidence-based Approach to Differential Diagnosis</i> . McGraw Hill. * This text focuses on health history taking to arrive at evidence based differential diagnosis. Read it prior to S2D which addresses a more advanced approach to differential diagnosis
S2D	Stern, et al. (2020). <i>Symptom to Diagnosis. An Evidence-Based Guide, (4th ed)</i> . McGraw-Hill Education. *

* Available online for FREE through USask library

Dates & Topics	Required Readings/Media & Evaluation

<p>Week 1</p> <p>Course Orientation</p> <p>Diagnostic Reasoning (Review)</p> <p>Mental Health</p>	<p>Rajkomar, A., & Dhaliwal, G. (2011). Improving diagnostic reasoning to improve patient safety. <i>The Permanente Journal</i>, 15(3), 68-73. 10.7812/tpp/11-098.</p> <p>Sackett, D.L. (1992). A Primer on the precision and accuracy of the clinical examination. <i>JAMAevidence</i>. * Free access through USask Library. While this article is dated, it remains relevant.</p> <p>Shreffler, J., & Huecker, M.R. (2022). Diagnostic Testing Accuracy: Sensitivity, Specificity, Predictive Values and Likelihood Ratios. <i>StatPearls [Internet]</i>. https://www.ncbi.nlm.nih.gov/books/NBK557491/</p> <p>Assessment Text (Bates'): Read Chapter 9. Cognition, Behaviour, and Mental Status</p> <p>Patient Hx: Read Section XII. Psychiatry</p> <p>Mental Health Screening Tools – Familiarize yourself with the following more common mental health screening tools:</p> <ul style="list-style-type: none"> • Adverse Childhood Experiences (ACES) • Eating Attitudes Test (EAT-26) • Patient Health Questionnaire (PHQ-9) • Generalized Anxiety Disorder (GAD-7) • ADHD screening tools (SNAP-26, ASRS) • AUDIT-C for Alcohol Use Disorders • CAGE Questionnaire for Alcohol Use • Pediatric Symptom Score (PSC-17) <p>Levis, B., Benedetti, A., Thombs, B.D. (2019). Accuracy of the patient health questionnaire-9 (PHQ-9) for screening to detect major depression: individual participant meta-analysis. <i>British Medical Journal</i>, 365, 1-11. 10.1136/bmj11476. Retrieved from: https://www.bmj.com/content/365/bmj.11476</p>
<p>Week 2</p>	<p>Assessment Text (Bates'): Read Chapter 24. Nervous System</p> <p>Assessment Videos (Bates'): Review 17. Nervous System: Cranial Nerves and Motor System</p>

Neurological Assessment & Diagnosis	<p>The Patient Hx: Review Section XI: Neurology</p> <p>S2D: Read Part 14. Dizziness, 20. Headache</p> <p><i>Concussion Awareness Training Tool for Medical Professionals</i> https://rise.articulate.com/share/WkREEc3yPBwBPLyP92r-7NfqKU_0qLv#/lessons/5Fm3NMJtas2FwA12k14IkV3dkZP4aLD6</p> <p>Computer-Based Simulation Evaluation #1</p>
<p>Week 3</p> <p>Musculoskeletal Assessment & Diagnosis</p>	<p>Assessment Text (Bates): Read Chapter 23. Musculoskeletal System</p> <p>Assessment Videos (Bates): Review 16. Musculoskeletal System</p> <p>The Patient Hx: Review Section X. Musculoskeletal</p> <p>S2D: Read Part 7. Low Back Pain, 27. Joint Pain</p> <p>Centre for Effective Practice (CEP). CORE Back Tool. https://cep.health/clinical-products/low-back-pain/</p> <p>Saskatchewan Spine Pathway's Assessment and Management of Low Back Pain online course. Registration is FREE for both SHA and non-SHA employees. Click HERE to register.</p> <p>Computer-Based Simulation Evaluation #2</p>
<p>Week 4</p> <p>Radiology</p>	<p>Undergraduate Diagnostic Imaging Fundamentals: Review Chapter 1: Introduction, 2: Principles of Radiation Biology and Radiation Protection. 3. Principles of Imaging Techniques, 5. Approach to Reviewing X-ray Imaging, 9. Chest, 14. Musculoskeletal, 17. Normal Reference Images, Unlabelled and Labelled</p> <p>Ottawa Ankle Rules http://www.ohri.ca/emerg/cdr/ankle.html</p> <p>Ottawa Knee Rules http://www.ohri.ca/emerg/cdr/knee.html</p> <p>Critical Analysis of Diagnostic Tool Presentations</p>
<p>Week 5</p> <p>GU Assessment & Diagnosis</p>	<p>Assessment Text (Bates): Read Chapters 18. Breasts and Axillae, 20. Male Genitalia, 21. Female Genitalia, 22. Anus, Rectum, and Prostate</p>

	<p>Assessment Videos (Bates): Review 12. Breasts and Axillae, 14. Male Genitalia, Rectum, Anus, and Prostate, 15. Female Genitalia, Anus, and Rectum</p> <p>Diagnostics Text: In Chapter 3. Lab Tests read about the following tests: Albumin – urine, Blood urea nitrogen (BUN), BRCA1 and BRC2 Genotyping, Creatinine, serum or plasma, Creatinine clearance, Estradiol, Follicle-Stimulating Hormone (FSH), Glomerular Filtration Rate, estimated (eGFR), Luteinizing hormone (LH), Prolactin, Prostate Specific Antigen (PSA), Syphilis – serologic testing, Testosterone</p> <p>The Patient Hx: Review Section VII. Genitourinary System, IX. Women’s Health</p> <p>S2D: Read Part 16. Dysuria, 21. Hematuria</p> <p>Robinson, J.L., Lang, M.E., Bortolussi, R. & the Canadian Paediatric Society (2020). <i>Urinary tract infections in infants and children: Diagnosis and management.</i> https://www.cps.ca/en/documents/position/urinary-tract-infections-in-children https://www.canada.ca/en/publichealth/services/infectious-diseases/sexual-health-sexually-transmitted-infections/canadian-guidelines/sexually-transmitted-infections.html Review the sexually transmitted and blood-borne infection (STBBI) guides with a focus on assessment, diagnosis and prevention</p> <p>Computer-Based Simulation Evaluation #3</p>
<p>Week 6</p> <p>Antenatal Assessment & Diagnosis</p>	<p>Assessment Text (Bates): Read Chapter 26. Pregnant Woman</p> <p>Jarvis Physical Examination and Health Assessment – Head-to-Toe Examination of the Pregnant Woman (available through CON Virtual Lab https://nursing.usask.ca/virtual-lab/all-videos.php</p> <p>Diagnostics Text: In Chapter 3. Lab Tests read about the following tests: ABO Typing, Anti-body Screen, Beta-hCG</p> <p>Public Health Agency of Canada (2021). Family-centred maternity and newborn care: National guidelines. https://www.canada.ca/en/public-health/services/maternity-newborn-care-guidelines.html Read: Chapter 2: Preconception care, 3: Care during pregnancy, 5. Postpartum care</p> <p>Look up and review your provincial prenatal record. For example: Saskatchewan Prenatal Record</p> <p>Perinatal Services BC. Early Prenatal Care Summary and Checklist for Primary Care Providers</p> <p>Postpartum and Newborn Care Summary Checklist for Primary Care Providers</p>

	<p>Prenatal Screening Ontario (website). Provider Resources. https://www.prenatalscreeningontario.ca/en/psa/requisitions-and-provider-tools/provider-resources.aspx</p> <p>Review Leaflet on Prenatal Genetic Screening, Non-invasive Prenatal Testing, How to Get Enhanced First Trimester Screening, Prevalence of Chromosome Differences, Prenatal Screening Pathway, Prenatal Testing Timeline.</p> <p>Society of Obstetricians and Gynecologists of Canada (SOGC) guidelines. Accessible from U of S library through the <i>Journal of Obstetrics and Gynecology Canada (JOGC)</i>. Review the following with a focus on prevention, assessment, and diagnostics relevant to primary care providers:</p> <ul style="list-style-type: none"> • Committee Opinion No. 418: The Complete 11-14 Week Prenatal Sonographic Examination (2021) • Guideline No. 410: Prevention, Screening, Diagnosis, and Pregnancy Management for Fetal neural Tube Defects (2021) • Guideline No. 393: Diabetes in Pregnancy (2019) • Guideline No. 375: Clinical Practice Guideline on the Use of First Trimester Ultrasound (2019) • Guideline No. 405: Screening and Counselling for Alcohol Consumption During Pregnancy (2019) <p>Computer-Based Simulation Evaluation #4</p>
<p>Week 7</p> <p>Older Adult Assessment & Diagnosis</p>	<p>Assessment Text (Bates’): Read Chapter 27. Older Adult</p> <p>Assessment Videos (Bates’): Review 4. Head-to-Toe Assessment: Older Adult</p> <p>The Patient Hx: Review Chapter 58. Confusion, 59. Memory Loss</p> <p>S2D: Read Part 11. Delirium or Dementia</p> <p>Falk, N., Cole, A., & Meredith, T.J. (2018). Evaluation of suspected dementia. <i>American Family Physician</i>, 15(97): 398-405. Retrieved from: https://www.aafp.org/afp/2018/0315/p398.html</p> <p>Comprehensive Geriatric Assessment Toolkit Plus. Read the following pages:</p> <ul style="list-style-type: none"> ➤ https://www.cgakit.com/m3--nutrition-assessment ➤ https://www.cgakit.com/m-3-nutrition---more

	Critical Analysis of Diagnostic Tool Presentations
<p>Week 8</p> <p>Systemic and Endocrine Assessment & Diagnosis</p>	<p>The Patient Hx: Review Section</p> <p>Diagnostics Text: Review the following diagnostics in Chapter 3: Glucose, Glucose Tolerance Test, Hemoglobin A1C, parathyroid hormone, thyroglobulin, thyroglobulin antibody, thyroid peroxidase antibody, thyroid stimulating hormone, thyroid stimulating immunoglobulin, thyroxine (T4), triiodothyronine (T3) and in Chapter 6: thyroid ultrasound, thyroid uptake scan, parathyroid scan</p> <p>The Patient Hx: Read Chapter 7. Fatigue, 10. Insomnia, 12. Night Sweats, 14. Weight Gain, 15. Weight Loss</p> <p>S2D: Read Part 6. Anemia, 12. Diabetes, 18. Fatigue, 32. Unintentional Weight Loss</p> <p>Asymptomatic Thyroid Dysfunction (2019) found at: https://canadiantaskforce.ca/guidelines/published-guidelines/asymptomatic-thyroid-dysfunction/s</p> <p>Thyroid Function Testing in the Diagnosis and Monitoring of Thyroid Function Disorder found at: https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/thyroid-testing</p> <p>Moubayed, S.P., & Urken, M.L. (2016). Thyroid nodules. <i>Canadian Medical Association Journal</i>, 188(17-18), 1259. https://doi.org/10.1503/cmaj.160300</p> <p>Choosing Wisely Canada (2020). Endocrinology and Metabolism: Five tests and treatments to question. Found at: https://choosingwiselycanada.org/recommendation/endocrinology-and-metabolism/</p> <p>Computer-Based Simulation Evaluation #5</p>
<p>Week 9</p> <p>Onsite Residency (2-days) –</p>	<ul style="list-style-type: none"> • GU Assessment + SETA/MUTA(?) • Advanced MSK Assessments (knee, ankles, hips, shoulders, back) • Prenatal/Postnatal assessment

combine with NURS 875 onsite	<ul style="list-style-type: none"> • Simulated Patient Case(s)?
Week 10 Approach to the Hospitalized Patient	<p>Assessment Text (Bates'): Read Chapter 4. Physical Examination section on Adapting the Physical Examination: Specific Patient Conditions (pp129-132)</p> <p>Papadakis, McPhee, Rabow, & McQuaid (2024). Current Medical Diagnosis & Treatment. (*Available for FREE through USask Library AccessMedicine Database). Read Part 3: Preoperative Evaluation & Perioperative Management</p> <p>Stone & Humphries (2024). Current Diagnosis & Treatment: Emergency Medicine. (*Available for FREE through USask Library AccessMedicine Database). Read Chapter 1: Approach to the Emergency Department Patient</p> <p>Emergency Medicine Clerkship Primer – Chapter 5. Differences between the Emergency Department, the Office, and the Inpatient Setting.</p>
Week 11-12	Final Exam

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media for this course are outlined in the Class Schedule. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. **FREE ebook available at:*

<https://openpress.usask.ca/undergradimaging/>

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*

i-Human Patient by Kaplan – instructions for purchasing access to this online simulation program will be posted on the course Canvas website

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*

Simel, D.L., & Rennie, D. (2009). **The Rational Clinical Examination: Evidence-Based Clinical Diagnosis.** JAMAevidence. **FREE access through USask library*

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed).** McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Computer-Based Simulation Cases	Weeks 2, 3, 5, 6, 8	40%
Critical Analysis of Diagnostic Tool Seminar Presentation	Various seminar dates throughout term – Signup on Canvas	10%
Onsite Skills Labs	Week 9-10	Complete/Incomplete
Final Exam	Week 11-12	50%
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

COMPUTER-BASED SIMULATION CASES

Value: 40%

Due Date: Weeks 2, 3, 5, 6, 8

Type: Computer-Based simulation is used to support development of advanced health assessment and diagnostic reasoning skills.

Description: Throughout the term you will participate in several computer-based simulations using the program i-Human Patient. Prior to submitting a case for evaluation, you will have opportunity to work through a case in class, obtaining feedback from your instructor(s), as well as to do practice cases (self-directed). You will be graded on five (5) assigned cases, with your top four (4) grades included in the calculation of your grade for this component. Assigned evaluation and practice cases will be posted on the course Canvas site.

Use of computer-based simulations provide hands-on opportunity to develop skills in obtaining essential information from the health history, selecting appropriate physical exam, determining necessary diagnostic investigations, and interpreting data to arrive at differential diagnosis. Pre-briefing and post-briefing with instructors, as well as feedback provided by the computer-program, further enhance learning through ongoing formative feedback that can be applied to refine skills development. Please note the purpose of these simulations is not to develop and evaluate therapeutic communication skills, as these skills are better assessed and evaluated through authentic real-person interactions, which you will have the opportunity to participate in in other learning activities integrated throughout your program.

Learning Outcomes Addressed: 1, 2, 3, 6

CRITICAL ANALYSIS OF DIAGNOSTIC TOOL SEMINAR PRESENTATION

Value: 10%

Due Date: Various seminar dates throughout the term – signup for a date on Canvas

Type: This assignment evaluates skills in critical appraisal of common diagnostic tools used by nurse practitioners, as well as competencies in teamwork (group work) and providing education to peers.

Description: Working in groups of 2-3, you will sign-up for a presentation topic and presentation date on Canvas. You will research your selected diagnostic tool/test, critically appraising available evidence on indications, accuracy (i.e. sensitivity, specificity), clinical utility (i.e. NNT, likelihood ratios, practicalities of using), costs, and other considerations for providers and patients when ordering/interpreting the test/tool. You will present your findings to your seminar group in a 10-minute presentation that includes the above mentioned information, as well as a summary of pearls and pitfalls of using the test/tool.

Presentations will be graded using the following rubric.

	Exceptional	Very Good	Satisfactory	Poor
Content				
Team-Work (Graded by group members)				

Presentation/Education Skills				
Total				

Learning Outcomes Addressed: 2, 4, 6

ONSITE SKILLS LABS

Value: Complete/Incomplete

Due Date: Weeks 9-10 (Exact Dates TBD)

Type: The onsite skills labs provide opportunity to further develop competencies in musculoskeletal, genitourinary, neurological, and other advanced health assessment through intensive hands-on-practice with instructor and peer feedback.

Description: You will attend a 2-day onsite skills lab in Saskatoon, participating in learning activities to develop your competencies performing neurological, musculoskeletal, antenatal, genitourinary and other advanced health assessment skills learned through this class. Hands-on practice, with instructor feedback, will help you refine skills and prepare you for the clinical environment.

The onsite skills days are consecutive with the onsite skills days for Transition to Nurse Practitioner to decrease travel requirements for students attending from outside Saskatoon, as well as support consolidation of clinical skills required to successfully begin clinical residency courses.

Learning Outcomes Addressed: 1, 3, 4, 6, 7

FINAL EXAM

Value: 50%

Date: Week 11

Length: 2 hours

Type: The final exam evaluates competencies in health assessment and diagnosis cumulative of the entire course.

Description: This 2-hour online exam will consist of 80-100 questions assessing required readings, seminars and learning activities comprehensive of the entire course. Questions may be a mixture of multiple choice, true-false, matching, and short answer. Please see section on Exam Policies, Procedures and Guidelines (pp 16-17) for further information on exam policies, procedures and guidelines.

Learning Outcomes Addressed: 1-7

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

EXAM POLICIES, PROCEDURES AND GUIDELINES

The midterm and final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examsoft to facilitate any necessary note taking.

7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette: <https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by [\[insert names\]](#).

Updated 2022



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE & POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 836**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Transition to Nurse Practitioner Clinical Practice**
Course Short Title (maximum 30 characters): **Transition to NP Clinical Practice**
- 2.4 Total Hours: Lecture **Web-based Seminar(synchronous and asynchronous components) – 4 hours** Lab – **40 hours** Tutorial Other
- 2.5 Weekly Hours: Lecture Seminar Lab Tutorial Other
- 2.6 Term in which it will be offered: **T3** T1 T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **NURS 833: Pathophysiology-Pharmacology for Nurse Practitioner Practice II; NURS 830: Theory for NP Practice**
If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**
D – Instructor/Dept Approval
H – Department Approval
I – Instructor Approval
- 2.8 Catalogue description (150 words or less): **This course blends theory and practical lab experiences to prepare nurse practitioner students for their clinical residency. Students will integrate and apply NP clinical competencies in simulated lab environments, be introduced to procedural skills, enhance knowledge of emergency management and continue developing a professional NP role identity.**
- 2.9 Do you allow this course to be repeated for credit? **NO**

3. Please list rationale for introducing this course: **This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**

4. **Please list the learning objectives for this course:**

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Apply NP competencies and standards within a controlled setting to demonstrate developing proficiency assessing, diagnosing, and managing a variety of patient presentations across the lifespan. (NP ELCs 1.1-1.7, 1.9-1.12, 1.16)
2. Perform invasive and non-invasive procedures accurately in a simulated environment, applying principles of patient centered evidence informed care and regulatory requirements, in preparation for real-world clinical applications. (NP ELCs 1.2, 1.8)
3. Demonstrate evidence-informed virtual care, applying regulatory, legal, privacy, and patient considerations, determining when care can safely be managed virtually versus in-person, and adapting assessment techniques appropriately to the virtual setting. (NP ELC 1.16)
4. Describe basic techniques and legal requirements of record keeping activities used in clinical settings. (NP ELC 1.14)
5. Evaluate urgent and emergent health situations, assessing patient status and initiating appropriate interventions within NP scope of practice. (NP ELCs 1.1, 1.3, 1.4, 1.6, 1.9)
6. Demonstrate effective advanced practice communication skills including patient-centred assessment, communicating diagnosis, breaking bad news, developing and maintaining professional, therapeutic, and culturally sensitive relationships, and patient education. (NP ELCs 1.10, 1.11, 1.14, 2.1, 3.2, 3.3, 4.1)
7. Demonstrate the development of a professional NP identity through reflective practice including a professional growth plan. (NP Practice Standards).

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**

If so, were these departments consulted? (Include correspondence)

Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)

6.1 Courses to be deleted? **NURS 875: Transition to Advanced Nursing Practice**

6.2 Courses for which this course will be a prerequisite? **NURS 837: Nurse Practitioner Role Development I and NURS 840: Nurse Practitioner Clinical Residency I**

6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Date & Topic	Required Readings/Media
<p>Week 1</p> <p>Seminar 1:</p> <ul style="list-style-type: none"> • Course Introduction • NP as Clinician – integrating assessment, diagnosis, and management 	<p>NP as Clinician</p> <ul style="list-style-type: none"> • College of Registered Nurses of Saskatchewan (CRNS). NP Entry-Level Competencies (2023) and NP Practice Standards (2024). *Students from other jurisdictions should review the competencies and standards in the location where they practice. • Bates' Guide to Physical Examination and History Taking (13th ed). Review chapter 5. Clinical Reasoning, Assessment, and Plan <p>Simulation</p> <ul style="list-style-type: none"> • Eppich, W. & Cheng, A. (2015). Promoting excellent and reflective learning in simulation (PEARLS). Development and rational for a blended approach to health care simulation debriefing. <i>Simulation in Healthcare, 10</i>(2), 106-115. http://www.healthsciences.usask.ca/CLRC/clrc-docs/PEARLS.pdf • INACSL Standards Committee (2021). Healthcare simulation standards of best practice professional integrity. <i>Clinical Simulation in Nursing, 58</i>, 45-48. DOI: https://doi.org/10.1016/j.ecns.2021.08.014 <p>OSCE</p> <ul style="list-style-type: none"> • USask OSCE Manual • Bates' Visual Guide to Physical Examination. Review the OSCE Clinical Skills Videos. *Available through USask Library • The Edmonton Manual Video Tutorials: https://www.youtube.com/channel/UCaN9tvT-jhSwcAWQMJpusbw • The Edmonton Manual (8th ed) - Begin reviewing patient presentations that have been covered in your NP courses (i.e. Chapter 2 Physical Exam and Chapter 3. Family Medicine)
<p>Week 2-3</p> <p>Self-Directed Learning:</p>	<p>Virtual Care</p>

<ul style="list-style-type: none"> • Virtual Care • Reporting: Case Presentation & Documentation • OSCE Preparation 	<p>Review the following resources to prepare yourself for the expectations and skills to perform virtual health visits. You will apply these during the evolving case simulation (seminar 2) and virtual practice OSCE (seminar 3)</p> <p>Canadian Nurse Protective Society (CNPS). InfoLAW: Telepractice. https://cnps.ca/article/telepractice/</p> <p>CNPS. Template Form: Consent to use electronic communications. https://cnps.ca/article/consent-to-use-electronic-communications/</p> <ul style="list-style-type: none"> • Videos: Telehealth Etiquette Video Series. (South Central Telehealth Resource Center) • Video: How to Administer a Virtual Physical Exam. (Stanford Medicine) <p>Look up and review the telehealth guidelines in the jurisdiction in which you are practicing</p> <p>Reporting: Case Presentation & Documentation</p> <p>Review the following resources to support your development of competencies in reporting for nurse practitioners. You will begin applying these skills during the evolving case simulation (seminar 2) and virtual practice OSCE (seminar 3). Keep in mind that there may be standards or guidelines specific to your jurisdiction and/or agency that should also be followed related to documentation.</p> <p>NHS Institute. SBAR - Situation, Background, Assessment, Recommendation – Toolkit. http://www.ihl.org/resources/Pages/Tools/sbartoolkit.aspx</p> <ul style="list-style-type: none"> • SNAPPS: A Six-Step Learner-Centered Approach to Clinical Education (2017). https://paeaonline.org/wp-content/uploads/2017/02/SNAPPS.pdf • How to Present a Patient Case: The SNAPPS Method. University of Calgary. https://www.youtube.com/watch?v=zWavIV7zPFY • Bates Guide to Physical Examination and History Taking. Review Chapter 3. Health History section on Recording your Findings (pp 103-106); Chapter 4. Physical Examination section on Recording your Findings (pp. 132-134) and Chapter 5. Clinical Reasoning, Assessment, and Plan section on Documentation and Progress Note and Patient Problem List in the EHR (pp. 146-154) and Oral Presentation (pp 154 – 159). Regional Examination Chapters also include example documentation as part of each chapter that may
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	<p>be helpful to review for specific examples of documentation related to each body system.</p> <ul style="list-style-type: none"> • SOAP note template & SOAP note example. • Nishikawa, J. (2015). SOAP NOTES. (video) – 6 min introduction to SOAP notes <p>OSCE Preparation</p> <ul style="list-style-type: none"> • Continue review of The Edmonton Manual and watching the recommended OSCE videos as outlined in Week 1 required readings/media • Find a friend/peer to practice OSCE scenario's with (use scenarios from the Edmonton Manual or search online for options)
<p>Week 4</p> <p>Seminar 2: Evolving Case Simulation</p>	<p>Review the following resources PRIOR to the evolving case simulation to ensure you are prepared to actively participate, and optimize your learning:</p> <ul style="list-style-type: none"> • 2021 CCS Guidelines for the Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult. https://www.onlinecjc.ca/article/S0828-282X(21)00165-3/fulltext • PEER Simplified Lipid Guideline 2023 Summary • Diabetes Canada Clinical Practice Guidelines Quick Reference Guide. • Diabetes Canada Clinical Practice Guidelines. Chapter 32. Foot Care. https://www.diabetes.ca/health-care-providers/clinical-practice-guidelines/chapter-32#panel-tab_FullText • Alberta Health Services. How to Perform a Diabetes Foot Screen. https://www.youtube.com/watch?v=AtaQKs2jTTI • Hypertension Canada Guidelines. https://guidelines.hypertension.ca/ • Saskatchewan Chronic Disease Management Quality Improvement Program (CDM-QIP) Indicators of Best Practice – 2024 update. • RxFiles (14th Edition). Review the following sections: Cardiovascular Risk Assessments & Targets; Antihypertensives; Lipid Lowering Agents; Diabetes; Obesity and Weight Loss
<p>Week 5-6</p> <p>Self-Directed Learning:</p>	<p>Procedures</p> <p>Review the following resources to support your competency development in common procedures performed by entry-level NP's. You will have</p>

<ul style="list-style-type: none"> • Procedures (including consent for treatment) • OSCE Preparation 	<p>opportunity to apply some of this learning (i.e. suturing, phlebotomy, nasal packing) during to onsite residency.</p> <ul style="list-style-type: none"> • CNPS InfoLAW: Consent to Treatment: The role of the nurse. https://cnps.ca/article/consent-to-treatment/ • Canadian Medical Protective Association (CMPA). (2022). Informed Consent (12-min read) https://www.cmpa-acpm.ca/en/education-events/good-practices/physician-patient/informed-consent • University of Saskatchewan. (2018). A Student Guide to Wound Closure for Nurse Practitioners. • ClinicalKey Database. Watch the following procedure videos and review associated posted information: Punch Biopsy, Wart treatment, Cryosurgery, Local anesthesia, Basics of wound management, Incision and drainage of cutaneous abscesses, Laceration repair: Simple interrupted sutures, Excisional Biopsy, Shave Biopsy, General Splinting Techniques; Thumb Spica Splint; Long Arm Splint; Short Arm Splint; Long Leg Splint; Short Leg Splint; Sugar Tong Splint; Ulnar Gutter Splint; Phlebotomy; Cerumen Removal; Irrigation of the Eye; Epistaxis Management; Pap Smear, Colposcopy, Endometrial biopsy, Intrauterine Contraceptive Device Insertion, Intrauterine Contraceptive Device Removal • Clebak, K., Mendez-Miller, M., & Croad, J. (2020). Cutaneous cryosurgery for common skin conditions. <i>American Family Physician</i>, 101(7), 399-406. • Latham, J. & Martin, S. (2014). Infiltrative anesthesia in office practice. <i>American Family Physician</i>, 89(12), 956-962. • Nomandin, P., A., & Benotti, S. A. (2018). Pediatric Phlebotomy: Taking the bite out of Dracula. <i>Journal of Emergency Nursing</i>, 44(4), 427 – 9. • Pfenninger and Fowler’s Procedures for Primary Care, Fourth Edition. *Available online through USask Library. <p>OSCE Preparation</p> <ul style="list-style-type: none"> • Continue preparing for your OSCE through review of the OSCE resources (from week 1) and practice with colleagues. You will have the opportunity in seminar 3 to apply these skills in a practice (mock) virtual OSCE.
<p>Week 7</p>	<ul style="list-style-type: none"> • No new readings/media

Seminar 3: Virtual OSCE Practice	
Week 8 Self-Directed Learning: Emergencies in Primary Care	<p>Review the following resources to support your competency development in emergency management. You will have opportunity to apply, and further develop these competencies during your onsite skills labs.</p> <ul style="list-style-type: none"> • CNPS InfoLAW: Consent for CPR. https://cnps.ca/article/consent-for-cpr/ • ACLS Training Center (2021). <i>Acute Coronary Syndromes Algorithm</i>. https://www.acls.net/images/algo-acgs.pdf • 2019 Canadian Cardiovascular Society/Canadian Association of Interventional Cardiology guidelines on the acute management of ST-elevation myocardial infarction: Focused update on regionalization and reprofusion. <i>Canadian Journal of Cardiology</i>, 35, 107-132. https://www.onlinecjc.ca/article/S0828-282X(18)31321-7/pdf • Canadian Paediatric Society. (2018). <i>Position statement: Emergency treatment of anaphylaxis in infants and children</i>. https://www.cps.ca/en/documents/position/emergency-treatment-anaphylaxis • Dunphy, L., Winland-Brown, J.E., Porter, B.O., & Thomas, D.J. (Eds.). (2023). Primary care: The art and science of advanced practice nursing. Read Chapter 76. Toxic and Environmental Exposures (pp 1375-1390) • LeBlanc, C., Murray, J., Staple, L., & Chan, D. (2019). Review of emergency preparedness in the office setting. How best to prepare based on your practice and patient demographic characteristics. <i>Canadian Family Physician</i>, 65(4), 253-259. https://www.cfp.ca/content/65/4/253 • Thomsett, R. & Cullen, L. (2018). The assessment and management of chest pain in primary care: A focus on acute coronary syndrome. <i>Australian Journal of General Practice</i>, 47(5), 246-251. doi: 10.31128/AFP-08-17-4304. • Spain, K.M., Clements, P.Q., DeRanieri, J.T., & Holt, K. (2012). When disaster happens: Emergency preparedness for nurse practitioners. <i>The Journal for Nurse Practitioner</i>, 8(1), 38-44. DOI: https://doi.org/10.1016/j.nurpra.2011.07.024
Week 9	Day 1

<p>Onsite Clinical Skills Labs & OSCE (4 days + 2 days for AHAD II labs)</p>	<ul style="list-style-type: none"> • AHAD Skills Lab: MSK & Neuro Assessment • AHAD Skills Lab: GU Model Practice, Prenatal/Post-Natal <p>Day 2</p> <ul style="list-style-type: none"> • Supervised OSCE Practice session • Procedures Skills Lab: Splinting, Casting, HENT procedures, Emergencies in Primary Care <p>Day 3</p> <ul style="list-style-type: none"> • Advanced Communication Scenarios • Suture Lab <p>Day 4</p> <ul style="list-style-type: none"> • OSCE <p>Day 5</p> <ul style="list-style-type: none"> • SETA/MUTA for out of province students <p>Day 6</p> <ul style="list-style-type: none"> • OSCE-R • SETA/MUTA for in province students (or can later)
<p>Week 10</p> <p>Seminar 4: Clinical Residency Preparation</p>	<ul style="list-style-type: none"> • Burke, M. (2016). RN to NP role transition: Facing the challenges and improving the outcomes. https://www.elitelearning.com/resource-center/nursing/rn-to-np-role-transition/ • USask NP Program Clinical Site Orientation Checklist • AHQR Patient Safety Network. (2022). Patient safety in primary care. https://psnet.ahrq.gov/perspective/patient-safety-primary-care • Hardavella, G., Aamli-Gagnat, A., Saad, N., Rousalova, I., & Sreter, K. (2017). How to give and receive feedback effectively. <i>Breathe</i>, 13(4), 327-333. doi: 10.1183/20734735.009917 • USask College of Nursing NP Program Preceptor Manual • USask Library – Mobile Apps for Health Sciences Home. https://libguides.usask.ca/c.php?g=696313&p=4938658 Review and download relevant medical apps for use in labs and clinical practicum

8. **Enrolment**8.1 What is the maximum enrolment number for this course? **35**And from which colleges? **NURSING**8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE – DISTANCE LEARNING** 10-50 – ONSITE LAB HOURS WILL BE HELD AT CLRC, HEALTH SCIENCES 50-90 90-130 130+9. **Student evaluation**

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **PASS/FAIL**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

*(Grade options for instructor: grade of 0% to 100%, IP in Progress)***P – Pass/Fail***(Grade options for instructor: Pass, Fail, In Progress)*

Evaluation Component	Date	Grade Weight
Lab Activities	Various dates as outlined in schedule	Complete/Incomplete
Reflective Practice	Week 10	Pass/Fail
OSCE	Week 9	Pass/Fail
Total		Pass/Fail

S – Special

*(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:*9.2 Is the course exempt from the final examination? **YES**10. **Required text**

Include a bibliography for the course.

Required readings and media for this course are outlined [insert location students can find list of required readings e.g., course schedule or end of syllabus]. Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

NEW TEXTBOOKS

Fowler, G. (2020). **Pfenninger and Fowler's Procedures for Primary Care, Fourth Edition**. Elsevier.

*text available for FREE through USask Library ClinicalKey database

Wong, S. (2024) **The Edmonton Manual: Approach to the OSCE (8th ed.)**. Edmonton, AB: University of Alberta Medical Students Association.

TEXTBOOKS FROM PREVIOUS COURSES

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals**. University of Saskatchewan Distance Education Unit. **FREE ebook available at:*

<https://openpress.usask.ca/undergradimaging/>

Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition)**. F.A. Davis

Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed)**. Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis**. McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*

Jensen, B., Regier, L.D., Kosar, L. (Eds). (2023). **RxFiles: Drug Comparison Charts (14th edition)**. Saskatoon City Hospital. **Available online for FREE through USask library*

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed**. McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*

Power-Kean, K., Zettel, S., El-Husseini, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition**. Elsevier.

Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition**. Elsevier.

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed)**. McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**

- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>
-

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **see highlighted selection.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites).

- 3.1 Permission Required: **YES, permission is required to audit this course**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 833: Pathophysiology-Pharmacology for Nurse Practitioner Practice II; NURS 830: Theory for NP Practice**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course:
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **NURS 835: Advanced Health Assessment and Diagnostic Reasoning II.**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: NURS 875.3

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here: NURS 875.3

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive:

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS

Course Title:	Transition to Nurse Practitioner Clinical Practice		
Course Code:	NURS 836	Term:	TBD
Course Credits:	3	Delivery:	Blended: Self-directed, synchronous online seminars, onsite skills labs
Location:	Distance Learning + onsite skills labs in Saskatoon	Website:	https://canvas.usask.ca/
Course Dates & Times:	10 weeks with 40 hours of lab (mix of online and onsite) + 2 x 2hr online seminars		
Course Calendar Description:	This course blends theory and practical lab experiences to prepare nurse practitioner students for their clinical residency. Students will integrate and apply NP clinical competencies in simulated lab environments, be introduced to procedural skills, enhance knowledge of emergency management and continue developing a professional NP role identity.		
Pre or Co-Requisite:	NURS 835 Advanced Health Assessment & Diagnostic Reasoning II (COREQ); NURS 833 Pathophysiology-Pharmacology for Nurse Practitioner Practice II(PRE);NURS 830: Theory for NP Practice (Pre)		
Course Equivalent:	NURS 875: Transition to Advanced Nursing Practice		

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Apply NP competencies and standards within a controlled setting to demonstrate developing proficiency assessing, diagnosing, and managing a variety of patient presentations across the lifespan. (NP ELCs 1.1-1.7, 1.9-1.12, 1.16)
2. Perform invasive and non-invasive procedures accurately in a simulated environment, applying principles of patient centered evidence informed care and regulatory requirements, in preparation for real-world clinical applications. (NP ELCs 1.2, 1.8)
3. Demonstrate evidence-informed virtual care, applying regulatory, legal, privacy, and patient considerations, determining when care can safely be managed virtually versus in-person, and adapting assessment techniques appropriately to the virtual setting. (NP ELC 1.16)
4. Describe basic techniques and legal requirements of record keeping activities used in clinical settings. (NP ELC 1.14)
5. Evaluate urgent and emergent health situations, assessing patient status and initiating appropriate interventions within NP scope of practice. (NP ELCs 1.1, 1.3, 1.4, 1.6, 1.9)
6. Demonstrate effective advanced practice communication skills including patient-centred assessment, communicating diagnosis, breaking bad news, developing and maintaining professional, therapeutic, and culturally sensitive relationships, and patient education. (NP ELCs 1.10, 1.11, 1.14, 2.1, 3.2, 3.3, 4.1)
7. Demonstrate the development of a professional NP identity through reflective practice including a professional growth plan. (NP Practice Standards).

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;

- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the

institution. A copy of the Learning Charter can be found at:
http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

* An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:
<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

Transition to Nurse Practitioner Practice blends theory and practical lab experiences to help prepare you for your first clinical residency and continue developing your professional NP role identity. You will integrate NP Clinician competencies in simulated patient encounters, as well as enhance knowledge of common procedures performed by NPs, with opportunity to practice in the lab setting. After practising these competencies, with feedback from instructors, you will be evaluated on your developing clinician competencies and readiness to safely begin clinical courses, through the objective structure clinical examination (OSCE).

COURSE SCHEDULE

Date & Topic	Required Readings/Media
<p>Week 1</p> <p>Seminar 1:</p> <ul style="list-style-type: none"> • Course Introduction • NP as Clinician – integrating assessment, diagnosis, and management 	<p>NP as Clinician</p> <ul style="list-style-type: none"> • College of Registered Nurses of Saskatchewan (CRNS). NP Entry-Level Competencies (2023) and NP Practice Standards (2024). *Students from other jurisdictions should review the competencies and standards in the location where they practice. • Bates' Guide to Physical Examination and History Taking (13th ed). Review chapter 5. Clinical Reasoning, Assessment, and Plan <p>Simulation</p> <ul style="list-style-type: none"> • Eppich, W. & Cheng, A. (2015). Promoting excellent and reflective learning in simulation (PEARLS). Development and rational for a blended approach to health care simulation debriefing. <i>Simulation in Healthcare, 10</i>(2), 106-115. http://www.healthsciences.usask.ca/CLRC/clrc-docs/PEARLS.pdf • INACSL Standards Committee (2021). Healthcare simulation standards of best practice professional integrity. <i>Clinical Simulation in Nursing, 58</i>, 45-48. DOI: https://doi.org/10.1016/j.ecns.2021.08.014 <p>OSCE</p> <ul style="list-style-type: none"> • USask OSCE Manual • Bates' Visual Guide to Physical Examination. Review the OSCE Clinical Skills Videos. *Available through USask Library • The Edmonton Manual Video Tutorials: https://www.youtube.com/channel/UCaN9tvT-jhSwcAWQMJpusbw

	<ul style="list-style-type: none"> The Edmonton Manual (8th ed) - Begin reviewing patient presentations that have been covered in your NP courses (i.e. Chapter 2 Physical Exam and Chapter 3. Family Medicine)
<p>Week 2-3</p> <p>Self-Directed Learning:</p> <ul style="list-style-type: none"> Virtual Care Reporting: Case Presentation & Documentation OSCE Preparation 	<p>Virtual Care</p> <p>Review the following resources to prepare yourself for the expectations and skills to perform virtual health visits. You will apply these during the evolving case simulation (seminar 2) and virtual practice OSCE (seminar 3)</p> <p>Canadian Nurse Protective Society (CNPS). InfoLAW: Telepractice. https://cnps.ca/article/telepractice/</p> <p>CNPS. Template Form: Consent to use electronic communications. https://cnps.ca/article/consent-to-use-electronic-communications/</p> <ul style="list-style-type: none"> Videos: Telehealth Etiquette Video Series. (South Central Telehealth Resource Center) Video: How to Administer a Virtual Physical Exam. (Stanford Medicine) <p>Look up and review the telehealth guidelines in the jurisdiction in which you are practicing</p> <p>Reporting: Case Presentation & Documentation</p> <p>Review the following resources to support your development of competencies in reporting for nurse practitioners. You will begin applying these skills during the evolving case simulation (seminar 2) and virtual practice OSCE (seminar 3). Keep in mind that there may be standards or guidelines specific to your jurisdiction and/or agency that should also be followed related to documentation.</p> <p>NHS Institute. SBAR - Situation, Background, Assessment, Recommendation – Toolkit. http://www.ihl.org/resources/Pages/Tools/sbartoolkit.aspx</p> <ul style="list-style-type: none"> SNAPPS: A Six-Step Learner-Centered Approach to Clinical Education (2017). https://paeaonline.org/wp-content/uploads/2017/02/SNAPPS.pdf How to Present a Patient Case: The SNAPPS Method. University of Calgary. https://www.youtube.com/watch?v=zWavIV7zPFY Bates Guide to Physical Examination and History Taking. Review Chapter 3. Health History section on Recording your Findings (pp 103-106); Chapter 4. Physical Examination section on Recording your Findings (pp. 132-134) and Chapter 5. Clinical Reasoning, Assessment, and Plan section on Documentation and Progress Note

	<p>and Patient Problem List in the EHR (pp. 146-154) and Oral Presentation (pp 154 – 159). Regional Examination Chapters also include example documentation as part of each chapter that may be helpful to review for specific examples of documentation related to each body system.</p> <ul style="list-style-type: none"> • SOAP note template & SOAP note example. • Nishikawa, J. (2015). SOAP NOTES. (video) – 6 min introduction to SOAP notes <p>OSCE Preparation</p> <ul style="list-style-type: none"> • Continue review of The Edmonton Manual and watching the recommended OSCE videos as outlined in Week 1 required readings/media • Find a friend/peer to practice OSCE scenario's with (use scenarios from the Edmonton Manual or search online for options)
<p>Week 4 Seminar 2: Evolving Case Simulation</p>	<p>Review the following resources PRIOR to the evolving case simulation to ensure you are prepared to actively participate, and optimize your learning:</p> <ul style="list-style-type: none"> • 2021 CCS Guidelines for the Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult. https://www.onlinecjc.ca/article/S0828-282X(21)00165-3/fulltext • PEER Simplified Lipid Guideline 2023 Summary • Diabetes Canada Clinical Practice Guidelines Quick Reference Guide. • Diabetes Canada Clinical Practice Guidelines. Chapter 32. Foot Care. https://www.diabetes.ca/health-care-providers/clinical-practice-guidelines/chapter-32#panel-tab_FullText • Alberta Health Services. How to Perform a Diabetes Foot Screen. https://www.youtube.com/watch?v=AtaOKs2jTTI • Hypertension Canada Guidelines. https://guidelines.hypertension.ca/ • Saskatchewan Chronic Disease Management Quality Improvement Program (CDM-QIP) Indicators of Best Practice – 2024 update. • RxFiles (14th Edition). Review the following sections: Cardiovascular Risk Assessments & Targets; Antihypertensives; Lipid Lowering Agents; Diabetes; Obesity and Weight Loss
<p>Week 5-6</p>	<p>Procedures</p>

<p>Self-Directed Learning:</p> <ul style="list-style-type: none"> • Procedures (including consent for treatment) • OSCE Preparation 	<p>Review the following resources to support your competency development in common procedures performed by entry-level NP's. You will have opportunity to apply some of this learning (i.e. suturing, phlebotomy, nasal packing) during to onsite residency.</p> <ul style="list-style-type: none"> • CNPS InfoLAW: Consent to Treatment: The role of the nurse. https://cnps.ca/article/consent-to-treatment/ • Canadian Medical Protective Association (CMPA). (2022). Informed Consent (12-min read) https://www.cmpa-acpm.ca/en/education-events/good-practices/physician-patient/informed-consent • University of Saskatchewan. (2018). A Student Guide to Wound Closure for Nurse Practitioners. • ClinicalKey Database. Watch the following procedure videos and review associated posted information: Punch Biopsy, Wart treatment, Cryosurgery, Local anesthesia, Basics of wound management, Incision and drainage of cutaneous abscesses, Laceration repair: Simple interrupted sutures, Excisional Biopsy, Shave Biopsy, General Splinting Techniques; Thumb Spica Splint; Long Arm Splint; Short Arm Splint; Long Leg Splint; Short Leg Splint; Sugar Tong Splint; Ulnar Gutter Splint; Phlebotomy; Cerumen Removal; Irrigation of the Eye; Epistaxis Management; Pap Smear, Colposcopy, Endometrial biopsy, Intrauterine Contraceptive Device Insertion, Intrauterine Contraceptive Device Removal • Clebak, K., Mendez-Miller, M., & Croad, J. (2020). Cutaneous cryosurgery for common skin conditions. <i>American Family Physician</i>, 101(7), 399-406. • Latham, J. & Martin, S. (2014). Infiltrative anesthesia in office practice. <i>American Family Physician</i>, 89(12), 956-962. • Nomandin, P., A., & Benotti, S. A. (2018). Pediatric Phlebotomy: Taking the bite out of Dracula. <i>Journal of Emergency Nursing</i>, 44(4), 427 – 9. • Pfenninger and Fowler's Procedures for Primary Care, Fourth Edition. *Available online through USask Library. <p>OSCE Preparation</p> <ul style="list-style-type: none"> • Continue preparing for your OSCE through review of the OSCE resources (from week 1) and practice with colleagues. You will have the opportunity in seminar 3 to apply these skills in a practice (mock) virtual OSCE.
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<p>Week 7</p> <p>Seminar 3: Virtual OSCE Practice</p>	<ul style="list-style-type: none"> No new readings/media
<p>Week 8</p> <p>Self-Directed Learning: Emergencies in Primary Care</p>	<p>Review the following resources to support your competency development in emergency management. You will have opportunity to apply, and further develop these competencies during your onsite skills labs.</p> <ul style="list-style-type: none"> CNPS InfoLAW: Consent for CPR. https://cnps.ca/article/consent-for-cpr/ ACLS Training Center (2021). <i>Acute Coronary Syndromes Algorithm</i>. https://www.acls.net/images/algo-acps.pdf 2019 Canadian Cardiovascular Society/Canadian Association of Interventional Cardiology guidelines on the acute management of ST-elevation myocardial infarction: Focused update on regionalization and reprofusion. <i>Canadian Journal of Cardiology</i>, 35, 107-132. https://www.onlinecjc.ca/article/S0828-282X(18)31321-7/pdf Canadian Paediatric Society. (2018). <i>Position statement: Emergency treatment of anaphylaxis in infants and children</i>. https://www.cps.ca/en/documents/position/emergency-treatment-anaphylaxis Dunphy, L., Winland-Brown, J.E., Porter, B.O., & Thomas, D.J. (Eds.). (2023). Primary care: The art and science of advanced practice nursing. Read Chapter 76. Toxic and Environmental Exposures (pp 1375-1390) LeBlanc, C., Murray, J., Staple, L., & Chan, D. (2019). Review of emergency preparedness in the office setting. How best to prepare based on your practice and patient demographic characteristics. <i>Canadian Family Physician</i>, 65(4), 253-259. https://www.cfp.ca/content/65/4/253 Thomsett, R. & Cullen, L. (2018). The assessment and management of chest pain in primary care: A focus on acute coronary syndrome. <i>Australian Journal of General Practice</i>, 47(5), 246-251. doi: 10.31128/AFP-08-17-4304. Spain, K.M., Clements, P.Q., DeRanieri, J.T., & Holt, K. (2012). When disaster happens: Emergency preparedness for nurse practitioners. <i>The Journal for Nurse Practitioner</i>, 8(1), 38-44. DOI: https://doi.org/10.1016/j.nurpra.2011.07.024

<p>Week 9</p> <p>Onsite Clinical Skills Labs & OSCE (4 days + 2 days for AHAD II labs)</p>	<p>Day 1</p> <ul style="list-style-type: none"> • AHAD Skills Lab: MSK & Neuro Assessment • AHAD Skills Lab: GU Model Practice, Prenatal/Post-Natal <p>Day 2</p> <ul style="list-style-type: none"> • Supervised OSCE Practice session • Procedures Skills Lab: Splinting, Casting, HENT procedures, Emergencies in Primary Care <p>Day 3</p> <ul style="list-style-type: none"> • Advanced Communication Scenarios • Suture Lab <p>Day 4</p> <ul style="list-style-type: none"> • OSCE <p>Day 5</p> <ul style="list-style-type: none"> • SETA/MUTA for out of province students <p>Day 6</p> <ul style="list-style-type: none"> • OSCE-R • SETA/MUTA for in province students (or can later)
<p>Week 10</p> <p>Seminar 4: Clinical Residency Preparation</p>	<ul style="list-style-type: none"> • Burke, M. (2016). RN to NP role transition: Facing the challenges and improving the outcomes. https://www.elitelearning.com/resource-center/nursing/rn-to-np-role-transition/ • USask NP Program Clinical Site Orientation Checklist • AHQR Patient Safety Network. (2022). Patient safety in primary care. https://psnet.ahrq.gov/perspective/patient-safety-primary-care • Hardavella, G., Aamli-Gagnat, A., Saad, N., Rousalova, I., & Sreter, K. (2017). How to give and receive feedback effectively. <i>Breathe</i>, 13(4), 327-333. doi: 10.1183/20734735.009917 • USask College of Nursing NP Program Preceptor Manual • USask Library – Mobile Apps for Health Sciences Home. https://libguides.usask.ca/c.php?g=696313&p=4938658 Review and download relevant medical apps for use in labs and clinical practicum

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INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media for this course are outlined in the course schedule (pp 18-24). Readings come from program textbooks, peer-reviewed evidence based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

NEW TEXTBOOKS

Fowler, G. (2020). **Pfenninger and Fowler's Procedures for Primary Care, Fourth Edition**. Elsevier.

*e-text available for FREE through USask Library ClinicalKey database

Wong, S. (2024) **The Edmonton Manual: Approach to the OSCE (8th ed.)**. Edmonton, AB: University of Alberta Medical Students Association.

TEXTBOOKS FROM PREVIOUS COURSES

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. **FREE ebook available at:*
<https://openpress.usask.ca/undergradimaging/>

Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition).** F.A. Davis

Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed).** Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*

Jensen, B., Regier, L.D., Kosar, L. (Eds). (2023). **RxFiles: Drug Comparison Charts (14th edition).** Saskatoon City Hospital. **Available online for FREE through USask library*

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*

Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition.** Elsevier.

Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition.** Elsevier.

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed).** McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Lab Activities	Various dates as outlined in schedule	Complete/Incomplete
Reflective Practice	Week 10	Pass/Fail
OSCE	Week 9	Pass/Fail
Total		Pass/Fail

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

Evaluation in this course is pass/fail. Students are required to actively participate in course learning activities, including onsite skills labs, to meet course requirements. The OSCE at the completion of the course is graded as pass/fail, with an 70% required for a passing grade.

PARTICIPATION IN COURSE LEARNING ACTIVITIES AND LABS

Value: Complete/Incomplete

Due Date: Throughout the term as outlined in course schedule

Type: Learning activities and labs will support development of NP clinician competencies.

Description: Throughout this course you will participate in various learning activities and labs (online and in-person) to support development of NP competencies in health assessment, diagnosis, therapeutic management, virtual care, procedures, advanced communication/counseling, and emergency management in preparation for entering your first clinical course. Course lab activities are outlined in the course schedule.

Learning Outcomes Addressed: 1, 2, 3, 4, 5, 6

REFLECTIVE PRACTICE

Value: Pass/Fail with 70% required for a pass

Due Date: Last day of course

Length: 500 words

Type: This reflective practice exercise supports development of a professional growth plan to identify priority opportunities for competency growth in your first clinical course.

Description: Reflect on the NP Entry-Level Competencies and Practice Standards in your jurisdiction, considering how you are progressing towards meeting them, as well as your development of an NP role identity. Consider the feedback received from peers and instructors during course learning activities, as well as your self-assessment, to identify your strengths, and learning priorities as you enter the first clinical practicum. Write a reflective practice statement (maximum 500 words) summarizing your development of a professional NP identity, and professional growth plan for addressing learning priorities and continuing to shape your role identity as you enter the first clinical course. This reflective practice should be written in first person, with APA formatting applied to references. After submitting your reflective practice to Canvas, save a copy to refer back to in your first clinical course.

Grading of reflective practice assignments is guided by the [CGPS literal descriptors](#) with a minimum 70% (pass) required for a "pass".

Learning Outcome Addressed: 7

OSCE

Value: Pass/Fail with 70% required for a pass

Due Date: Week 9 during scheduled onsite skills days

Length: Approximately 1.5 hours (4 stations)

Type: The Objective Structure Clinical Exam (OSCE) is a practical exam in which you are evaluated on your developing NP Clinician Competencies in a simulated clinical encounter.

Description: You will be evaluated on foundational development of NP clinician competencies essential to safely begin clinical, and engage in clinical learning through four OSCE stations addressing common

patient presentations seen by nurse practitioners. Please see the OSCE manual for further information related to the OSCE, including structure and format. An OSCE schedule will be posted on Canvas.

Learning Outcome Addressed: 1, 3, 5, 6

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high-speed internet to facilitate participation in online learning activities.

EXAM POLICIES, PROCEDURES AND GUIDELINES

The midterm and final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.

7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education ([CASN, 2022](#)). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the

Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by USask NP program faculty and instructors.



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE AND POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 837**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Nurse Practitioner Role Development I**
Course Short Title (maximum 30 characters): **NP Roles I**
- 2.4 Total Hours: Lecture **Web-based Seminar(synchronous and asynchronous components)** **39**
hours Lab Tutorial
- 2.5 Weekly Hours: Lecture Seminar **3-4** Lab Tutorial Other
- 2.6 Term in which it will be offered: T1 T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: NURS 836: **Transition to Nurse Practitioner Practice** and NURS 835: **Advanced Health Assessment & Diagnostic Reasoning II** or NURS 875: **Transition to Advanced Nursing Practice**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **This course supports development of student professional identity as an NP, further refining and expanding NP competencies as a leader, scholar, educator, and clinician. Through integration of theory, practice and critical inquiry students will develop skills to contribute to positive changes in the health care system.**
- 2.9 Do you allow this course to be repeated for credit? **NO**

- 3. Please list rationale for introducing this course: **This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**

4. **Please list the learning objectives for this course:**

1. Critically evaluate personal biases, stereotypes, attitudes and behaviours, seeking feedback from others and developing strategies to promote inclusive, equitable, and culturally safe care. (NP ELCs 3.1-3.3)
2. Identify and design evidence-informed strategies nurse practitioners can apply to contribute to healthcare improvement, including participation in quality improvement initiatives, design and evaluation of health promotion and disease prevention programs, health education, and policy advocacy. (NP ELCs 2.1-2.3, 3.4, 4.1-4.2)
3. Critically appraise and apply research and clinical experience to identify opportunities to improve health, health equity, safety, and promote healthcare excellence. (NP ELCs 2.2, 2.3, 3.4, 5.1)
4. Integrate research, clinical experience, and patient considerations to enhance NP practice, sharing knowledge with peers. (NP ELCs 2.1, 5.2, 1.0)
5. Understand and apply ethical, legal, and regulatory principles related to privacy, confidentiality, communication, malpractice, and telepractice (NP ELCs 1.2, 1.15, 1.14, 1.16).
6. Identify and implement strategies to support professional role development. (NP Practice Standards).

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**
 If so, were these departments consulted? (Include correspondence)
 Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)

- 6.1 Courses to be deleted? **NURS 880.3: Practicum I Advanced Nursing Practice in Primary Health Care**
- 6.2 Courses for which this course will be a prerequisite? **NURS 838: Nurse Practitioner Role Development II**
- 6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Date & Topic	Learning Activities, Assignments & Evaluation
Module 1 (Week 1)	Required Readings/Media:

<p>SEMINAR 1: Course Introduction</p> <ul style="list-style-type: none"> • Course Overview • Professional NP Role Identity • Capstone Project 	<ul style="list-style-type: none"> • Canadian Nurses Association (2019). Advanced practice nursing: A pan-Canadian framework. • Goodolf & Godfrey (2021). A think tank in action: Building new knowledge about professional identity in nursing. <i>Journal of Professional Nursing</i>, 37(2), 493-499. https://doi.org/10.1016/j.profnurs.2020.10.007 • Lowe, G. (2017). Nurse practitioners: Framing their professional identity. <i>The Journal for Nurse Practitioners</i>, 13(2), 175. DOI: https://doi.org/10.1016/j.nurpra.2016.12.021 • Bonnell, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects (2022). Read the following Chapters: <ul style="list-style-type: none"> ○ 1. Introduction: Why Scholarly Proposal for the Clinical Project. ○ 2. Using the Writing Plan a Developmental Tool for the Advanced Clinical Project • Guide to the USask NP Program Capstone Project (Appendix A) <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Attend & Participate in Seminar 1 • Seminar 1 NP Professional Identity Development Small Group Activity: Reflect on your developing professional identity as a NP. What strategies have helped you developing this role. Which have not been helpful. Identify strategies you will implement to continue supporting your role development. Course Learning Outcome(s) Addressed: 6 • Completed Required Readings/Media (self-directed)
<p>Module 2 (Week 2)</p> <p>SEMINAR 2: NP Role in Healthcare Improvement</p> <ul style="list-style-type: none"> • Overview Approaches for Healthcare Improvement (i.e. program design, 	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Staples et al. (2020). Canadian Perspectives on Advanced Practice Nursing. Read the following chapters: <ul style="list-style-type: none"> ○ 15. Optimizing Health System Competencies; ○ 31. Health Policy and Advanced Practice Nursing in Changing Environments

<p>evaluation, quality improvement, policy, etc.)</p> <ul style="list-style-type: none"> NP Competencies and Roles in healthcare improvement 	<ul style="list-style-type: none"> Swartwout, K.D. (2016). Primary care NPs - leaders in population health. <i>The Nurse Practitioner</i>, 41(8), 46-50. doi: 10.1097/01.NPR.0000471365.94863.4d Schwartz, C. with Saskatchewan Health Quality Council. (2021). What is Quality Improvement Anyway? Adams, J. & Neville, S. (2020). Program evaluation for health professionals: What it is, What it isn't and How to do it. <i>International Journal for Qualitative Methods</i>, University of Alberta. https://doi.org/10.1177/16094069209643 O'Kane, M et al. (2021). An equity agenda for the field of health care quality improvement. <i>NAM Perspect</i>, doi: 10.31478/202109b Public Health Ontario. At a Glance: The six steps for planning a health promotion program https://www.publichealthontario.ca/-/media/documents/S/2015/six-steps-planning-hp-programs.pdf *Public Health Ontario has many other resources to support effective program planning and evaluation if you choose this format for your Capstone Project <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Complete Self-Directed Readings/Media Attend and Participate in Seminar 2: NP Role in Healthcare Improvement <ul style="list-style-type: none"> Overview of Healthcare improvement (QI, program planning/evaluation, policy, etc.) Identifying Opportunities/Problems: Needs Assessment, fit with organizational priorities, background literature review, etc. Framing within relevant framework/theory
<p>Module 3 (Week 3)</p> <p>SELF-DIRECTED: Healthcare Improvement: Identifying the Opportunity (Problem)</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters: <ul style="list-style-type: none"> 3. Writing a Good Clinical Problem Statement and Placing the Clinical Problem in Context; 4. Clinical Projects and Quality Improvement: Thinking Big Picture;

	<ul style="list-style-type: none"> ○ 7. Framing the Advanced Clinical Project with Relevant Clinical Frameworks ● Utley, R., Henry, K. & Smith, L. (2018). Frameworks for Advanced Nursing Practice and Research. Read the following chapters: <ul style="list-style-type: none"> ○ 16: Community and Population Health Frameworks; ○ 19: Frameworks for Evaluation. <i>Other chapters from this core textbook used in NURS xxx: Theory for NP practice may also be useful as you select a theoretical framework for your Capstone Project</i> ● Rovito, C. & Fagan, K. (2022). A quality improvement initiative: A nurse practitioner-led interdisciplinary approach to reducing readmissions in the subacute population. <i>Journal of Doctoral Nursing Practice</i>, 15(1), 32-38. doi: 10.1891/JDNP-D-20-00072. ● Government of Canada (2019). Report on Key Health Inequalities in Canada. <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> ● Complete Self-Directed Reading/Media
<p>Module 4 (Week 4)</p> <p>SELF-DIRECTED: Healthcare Improvement: Literature Review</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> ● Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters: <ul style="list-style-type: none"> ○ 5. Into the Literature: Gaining Best Evidence and Relevant Literature; ○ 6. Synthesizing Best Evidence and Literature Review; ○ 8. Addressing Outcomes Evaluation in the Advanced Clinical Project Proposal; ○ 9. Guiding the Advanced Clinical Project: The Purpose of a Purpose Statement ● University Library Research Guides. Graduate Writing: Writing Literature Reviews https://libguides.usask.ca/c.php?g=723607&p=5180792 <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> ● Complete Self-Directed Readings/Media

	<ul style="list-style-type: none"> • Participate in Canvas Discussion Board: Problem Statement to support development of an effective problem statement for your capstone project
<p>Module 5 (Week 5)</p> <p>SEMINAR 3: Evidence-Based Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Clarke, V., Lehane, E. & Mulcahy, H. (2021). Nurse practitioners' implementation of evidence-based practice into routine care: A scoping review. <i>Worldviews on Evidence-Based Nursing</i>, 18(3), 180-189. https://doi.org/10.1111/wvn.12510. • Saskatchewan Health Authority (2024). Evidence-Based Practice. https://saskhealthauthority.libguides.com/home/ebp • Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022). <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Attend and Participate in Seminar 3: Evidence-Based Practice; this seminar is also an opportunity to check-in with your instructor on your capstone project progress • Provide feedback on your peer's Problem Statement through the Canvas discussion board • Complete Self-Directed Reading/Media
<p>Module 6 (Week 6)</p> <p>SELF-DIRECTED: Healthcare Improvement: From Problem to Plan</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters: <ul style="list-style-type: none"> ○ 10. Mapping it Out: From Problem to Advanced Clinical Project Plan; ○ 11. Writing the Methods Section: Organizing the Advanced Clinical Project Proposal; ○ 12. Gaining Credible Clinical Project Data: Being Systematic and Objective

	<ul style="list-style-type: none"> University of Kansas. (2020). Community tool box - A Model for getting started. https://ctb.ku.edu/en/get-started. <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Complete elf-Directed Readings/Media Participate in the Canvas Discussion Board: Evidence-based Solutions to support development of an evidence-based solution for your capstone project
<p>Module 7 (Week7)</p> <p>SEMINAR 4: Ethical Cases in NP Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Canadian Nurses Association (CNA). (2017). Code of ethics for Registered Nurses https://www.nscn.ca/sites/default/files/documents/resources/code-of-ethics-for-registered-nurses.pdf. Utley, R., Henry, K., & Smith, L. (2018). Frameworks for Advanced Nursing Practice & Research. Read chapter 8: Moral and Ethical Perspectives which provides an overview of frameworks for ethical decision making. Zwitter, M. (2021). Medical Ethics in Clinical Practice. Read the following sections: <ul style="list-style-type: none"> Ethics and Law (pp 1-5) Ethical Codes and Declarations (pp 7-13) Professional Malpractice (pp 57-62) Canadian Nurse Protective Society (CNPS). Review the following articles: <ul style="list-style-type: none"> InfoLAW: Confidentiality of Health Information InfoLAW: Legal Risks of Email InfoLAW: Privacy InfoLAW: Privacy and Electronic Medical Records InfoLAW: Malpractice Lawsuits Balestra, M.L. (2017). Electronic Health Records: Patient Care and Ethical and Legal Implications for Nurse Practitioners. <i>The Journal for Nurse Practitioners</i>, 13(2), 105-111. https://doi.org/10.1016/j.nurpra.2016.09.010 Canadian Public Health Association. Are you familiar with the laws and organizational policies surrounding disclosure and

	<p>confidentiality? https://www.cpha.ca/are-you-familiar-laws-and-organizational-policies-surrounding-disclosure-and-confidentiality</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Attend and Participate in Seminar 4: Ethical case discussion & debate; this seminar is also an opportunity to check-in on your project proposal development • Provide feedback to your peers on their Evidence-Based Solutions Discussion Board • Complete Self-Directed Reading/Media
<p>Module 8 (Week 8)</p> <p>SELF-DIRECTED: Health Equity and Healthcare Outcomes</p>	<p>Required Readings/Media:</p> <p>Horrill, T. (2020). Cultural safety: Are we on the same page? <i>Canadian Nurse</i>. https://canadian-nurse.com/en/articles/issues/2020/february-2020/cultural-safety-are-we-on-the-same-page</p> <p>Poghosyan, L. & Brooks Carthon, J.M. (2017). The untapped potential of the nurse practitioner workforce in reducing disparities. <i>Policy, Politics & Nursing Practice</i>, 18(2), ePub. https://doi.org/10.1177/1527154417721189</p> <p>Graham, H. (2021). Anti-Racism in Health Care - Keynote from the Canadian Federation of Mental Health Nurses Conference 2021. https://www.youtube.com/watch?v=dwKvfG1zxxs</p> <p>Turpel-Lafond, M. E. (2020, November). In plain sight: addressing Indigenous-specific racism and discrimination in B.C. Health Care Summary Report.</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed reading/media • Participate in the Canvas Discussion Board: Health Equity & Health Outcomes
<p>Module 9 (Weeks 9)</p> <p>SELF-DIRECTED: Project Work</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following Chapters: <ul style="list-style-type: none"> ○ 13. Writing the Data-Analysis Plans for advanced Clinical Projects;

	<ul style="list-style-type: none"> ○ 14. Keeping Clinical Projects Ethical and Dependable; ○ 15. Finalizing the Proposal as a Professional Document: Reviewing, Editing, and Revising <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed readings/media • Work on your Capstone project proposal assignment
<p>Module 10 (Week 10)</p> <p>SEMINAR 5: Evidence-Based Practice II</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022).] <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed Reading/Media • Attend and Participate in Seminar 5: Evidence-Based Practice II; this seminar is also an opportunity to check-in with your instructor on your project proposal development
NP Capstone Project Proposal Due	

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE – DISTANCE LEARNING**

10-50

50-90

90-130

130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERICAL PERCENTAGE**

C – Completed Requirements

*(Grade options for instructor: Completed Requirements, Fail, IP In Progress)***N – Numeric/Percentage***(Grade options for instructor: grade of 0% to 100%, IP in Progress)*

Evaluation Component	Date	Grade Weight
Discussion Boards	Problem Statement: Due Week 4	30% (5% each)
	Problem Statement Feedback: Due Week 5	
	Evidence-Based Strategies: Due Week 6	
	Evidence-Based Strategies Feedback: Due Week 7	
	Health Equity and Outcomes: Due Week 8	
	Health Equity and Outcomes Feedback: Due Week 9	
Demonstration of Competencies through Seminar Participation	Weeks 1, 2, 5, 7, 10	10%
Capstone Project Proposal	Due Week 10	60%
Seminar Attendance	Weeks 1, 2, 5, 7, 10	Complete/ Incomplete
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

*(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:*9.2 Is the course exempt from the final examination? **YES**10. **Required text**

Include a bibliography for the course.

Required readings and media were carefully selected to address course learning outcomes and are outlined in the Course Schedule [pp 3-10]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other reputable sources. Given the evolving landscape of policy, regulation

and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

American Psychological Association (2020). **Publication Manual of the American Psychological Association (7th ed)**. APA.

Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Springer Publishing. [NEW textbook]

Staples, E., Pilon, R., Hannon, R. (2020). Canadian Perspectives on Advanced Practice Nursing. Second Edition. Canadian Scholars Press. [Core textbook from NURS xxx: Theory for NP Practice]

Utley, R., Henry, K., Smith, L. (2018). Frameworks for Advanced Nursing Practice and Research. Springer Publishing. [Core textbook from NURS xxx: Theory for NP Practice]

Zwitter, M. (2019). [Medical Ethics for Clinical Practice](#). Springer Publishing. Electronic version available for FREE online through the USask Library.

The Foundation for Medical Practice Education (FMPE) Residency Learning Modules [\[specific modules will be assigned as new modules are released quarterly\]](#)

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted option.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously/asynchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess “deemed” CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites)

- 3.1 Permission Required: **YES, permission is required to audit the course.**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 836: Transition to Nurse Practitioner Practice and NURS 835: Advanced Health Assessment & Diagnostic Reasoning II or NURS 875: Transition to Advanced Nursing Practice**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **None**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **None.**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here: **None**

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent:

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive: **NONE for this course.**

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached

COURSE SYLLABUS			
Course Title:	Nurse Practitioner Role Development I		
Course Code:	NURS 837	Term:	TBD
Course Credits:	3 credit units	Delivery:	Synchronous & asynchronous online
Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	10 Weeks with synchronous online seminars (20 hrs) and self-directed learning		
Course Calendar Description:	This course supports development of student professional identity as an NP, further refining and expanding NP competencies as a leader, scholar, educator, and clinician. Through integration of theory, practice and critical inquiry students will develop skills to contribute to positive changes in the health care system.		
Pre-Requisite:	NURS 836: Transition to Nurse Practitioner Practice and NURS 835: Advanced Health Assessment & Diagnostic Reasoning II or NURS 875: Transition to Advanced Nursing Practice		

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a

novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Critically evaluate personal biases, stereotypes, attitudes and behaviours, seeking feedback from others and developing strategies to promote inclusive, equitable, and culturally safe care. (NP ELCs 3.1-3.3)
2. Identify and design evidence-informed strategies nurse practitioners can apply to contribute to healthcare improvement, including participation in quality improvement initiatives, design and evaluation of health promotion and disease prevention programs, health education, and policy advocacy. (NP ELCs 2.1-2.3, 3.4, 4.1-4.2)
3. Critically appraise and apply research and clinical experience to identify opportunities to improve health, health equity, safety, and promote healthcare excellence. (NP ELCs 2.2, 2.3, 3.4, 5.1)
4. Integrate research, clinical experience, and patient considerations to enhance NP practice, sharing knowledge with peers. (NP ELCs 2.1, 5.2, 1.0)
5. Understand and apply ethical, legal, and regulatory principles related to privacy, confidentiality, communication, malpractice, and telepractice (NP ELCs 1.2, 1.15, 1.14, 1.16).
6. Identify and implement strategies to support professional role development. (NP Practice Standards).

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;

- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter is defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the

institution. A copy of the Learning Charter can be found at:
http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

*An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:
<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

This course supports further development of learners' professional NP role identity and competencies, building on knowledge from previous theory courses and clinical practice. Through a combination of live online seminars, self-directed learning, and course assignments you will increase competency as an NP leader, advocate, educator and scholar, who can effectively contribute to health system improvements. A key component of this course is development of the NP Capstone project proposal, with scaffolded assignments integrated to help support success on the final project proposal submission. Other learning activities address issues related to health equity, culture and diversity, ethical and legal issues in NP practice, and evidence-informed practice. Emphasizing the integration of theoretical knowledge with practical application, this course helps prepare you to take on pivotal roles in shaping the future of healthcare.

COURSE SCHEDULE

Date & Topic	Learning Activities, Assignments & Evaluation
<p>Module 1 (Week 1)</p> <p>SEMINAR 1: Course Introduction</p> <ul style="list-style-type: none"> • Course Overview • Professional NP Role Identity • Capstone Project 	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Canadian Nurses Association (2019). Advanced practice nursing: A pan-Canadian framework. • Goodolf & Godfrey (2021). A think tank in action: Building new knowledge about professional identity in nursing. <i>Journal of Professional Nursing</i>, 37(2), 493-499. https://doi.org/10.1016/j.profnurs.2020.10.007 • Lowe, G. (2017). Nurse practitioners: Framing their professional identity. <i>The Journal for Nurse Practitioners</i>, 13(2), 175. DOI: https://doi.org/10.1016/j.nurpra.2016.12.021 • Bonnell, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects (2022). Read the following Chapters: <ul style="list-style-type: none"> ○ 1. Introduction: Why Scholarly Proposal for the Clinical Project. ○ 2. Using the Writing Plan a Developmental Tool for the Advanced Clinical Project • Guide to the USask NP Program Capstone Project (Appendix A) <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Attend & Participate in Seminar 1

	<ul style="list-style-type: none"> • Seminar 1 NP Professional Identity Development Small Group Activity: Reflect on your developing professional identity as a NP. What strategies have helped you developing this role. Which have not been helpful. Identify strategies you will implement to continue supporting your role development. Course Learning Outcome(s) Addressed: 6 • Completed Required Readings/Media (self-directed)
<p>Module 2 (Week 2)</p> <p>SEMINAR 2: NP Role in Healthcare Improvement</p> <ul style="list-style-type: none"> • Overview Approaches for Healthcare Improvement (i.e. program design, evaluation, quality improvement, policy, etc.) • NP Competencies and Roles in healthcare improvement 	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Staples et al. (2020). Canadian Perspectives on Advanced Practice Nursing. Read the following chapters: <ul style="list-style-type: none"> ○ 15. Optimizing Health System Competencies; ○ 31. Health Policy and Advanced Practice Nursing in Changing Environments • Swartwout, K.D. (2016). Primary care NPs - leaders in population health. <i>The Nurse Practitioner</i>, 41(8), 46-50. doi: 10.1097/01.NPR.0000471365.94863.4d • Schwartz, C. with Saskatchewan Health Quality Council. (2021). What is Quality Improvement Anyway? • Adams, J. & Neville, S. (2020). Program evaluation for health professionals: What it is, What it isn't and How to do it. <i>International Journal for Qualitative Methods</i>, University of Alberta. https://doi.org/10.1177/16094069209643 • O'Kane, M et al. (2021). An equity agenda for the field of health care quality improvement. <i>NAM Perspect</i>, doi: 10.31478/202109b • Public Health Ontario. At a Glance: The six steps for planning a health promotion program https://www.publichealthontario.ca/-/media/documents/S/2015/six-steps-planning-hp-programs.pdf *Public Health Ontario has many other resources to support effective program planning and evaluation if you choose this format for your Capstone Project <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed Readings/Media

	<ul style="list-style-type: none"> • Attend and Participate in Seminar 2: NP Role in Healthcare Improvement <ul style="list-style-type: none"> ○ Overview of Healthcare improvement (QI, program planning/evaluation, policy, etc.) ○ Identifying Opportunities/Problems: Needs Assessment, fit with organizational priorities, background literature review, etc. ○ Framing within relevant framework/theory
<p>Module 3 (Week 3)</p> <p>SELF-DIRECTED: Healthcare Improvement: Identifying the Opportunity (Problem)</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters: <ul style="list-style-type: none"> ○ 3. Writing a Good Clinical Problem Statement and Placing the Clinical Problem in Context; ○ 4. Clinical Projects and Quality Improvement: Thinking Big Picture; ○ 7. Framing the Advanced Clinical Project with Relevant Clinical Frameworks • Utley, R., Henry, K. & Smith, L. (2018). Frameworks for Advanced Nursing Practice and Research. Read the following chapters: <ul style="list-style-type: none"> ○ 16: Community and Population Health Frameworks; ○ 19: Frameworks for Evaluation. <i>Other chapters from this core textbook used in NURS xxx: Theory for NP practice may also be useful as you select a theoretical framework for your Capstone Project</i> • Rovito, C. & Fagan, K. (2022). A quality improvement initiative: A nurse practitioner-led interdisciplinary approach to reducing readmissions in the subacute population. <i>Journal of Doctoral Nursing Practice</i>, 15(1), 32-38. doi: 10.1891/JDNP-D-20-00072. • Government of Canada (2019). Report on Key Health Inequalities in Canada. <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed Reading/Media
<p>Module 4 (Week 4)</p> <p>SELF-DIRECTED: Healthcare</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters:

<p>Improvement: Literature Review</p>	<ul style="list-style-type: none"> ○ 5. Into the Literature: Gaining Best Evidence and Relevant Literature; ○ 6. Synthesizing Best Evidence and Literature Review; ○ 8. Addressing Outcomes Evaluation in the Advanced Clinical Project Proposal; ○ 9. Guiding the Advanced Clinical Project: The Purpose of a Purpose Statement <ul style="list-style-type: none"> ● University Library Research Guides. Graduate Writing: Writing Literature Reviews https://libguides.usask.ca/c.php?g=723607&p=5180792 <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> ● Complete Self-Directed Readings/Media ● Participate in Canvas Discussion Board: Problem Statement to support development of an effective problem statement for your capstone project
<p>Module 5 (Week 5)</p> <p>SEMINAR 3: Evidence-Based Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> ● Clarke, V., Lehane, E. & Mulcahy, H. (2021). Nurse practitioners' implementation of evidence-based practice into routine care: A scoping review. <i>Worldviews on Evidence-Based Nursing</i>, 18(3), 180-189. https://doi.org/10.1111/wvn.12510. ● Saskatchewan Health Authority (2024). Evidence-Based Practice. https://saskhealthauthority.libguides.com/home/ebp ● Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022). <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> ● Attend and Participate in Seminar 3: Evidence-Based Practice; this seminar is also an opportunity to check-in with your instructor on your capstone project progress

	<ul style="list-style-type: none"> • Provide feedback on your peer’s Problem Statement through the Canvas discussion board • Complete Self-Directed Reading/Media
<p>Module 6 (Week 6)</p> <p>SELF-DIRECTED: Healthcare Improvement: From Problem to Plan</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters: <ul style="list-style-type: none"> ○ 10. Mapping it Out: From Problem to Advanced Clinical Project Plan; ○ 11. Writing the Methods Section: Organizing the Advanced Clinical Project Proposal; ○ 12. Gaining Credible Clinical Project Data: Being Systematic and Objective • University of Kansas. (2020). Community tool box - A Model for getting started. https://ctb.ku.edu/en/get-started. <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete elf-Directed Readings/Media • Participate in the Canvas Discussion Board: Evidence-based Solutions to support development of an evidence-based solution for your capstone project
<p>Module 7 (Week7)</p> <p>SEMINAR 4: Ethical Cases in NP Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Canadian Nurses Association (CNA). (2017). Code of ethics for Registered Nurses https://www.nscn.ca/sites/default/files/documents/resources/code-of-ethics-for-registered-nurses.pdf. • Utley, R., Henry, K., & Smith, L. (2018). Frameworks for Advanced Nursing Practice & Research. Read chapter 8: Moral and Ethical Perspectives which provides an overview of frameworks for ethical decision making. • Zwitter, M. (2021). Medical Ethics in Clinical Practice. Read the following sections: <ul style="list-style-type: none"> ○ Ethics and Law (pp 1-5) ○ Ethical Codes and Declarations (pp 7-13)

	<ul style="list-style-type: none"> ○ Professional Malpractice (pp 57-62) ● Canadian Nurse Protective Society (CNPS). Review the following articles: <ul style="list-style-type: none"> ○ InfoLAW: Confidentiality of Health Information ○ InfoLAW: Legal Risks of Email ○ InfoLAW: Privacy ○ InfoLAW: Privacy and Electronic Medical Records ○ InfoLAW: Malpractice Lawsuits ● Balestra, M.L. (2017). Electronic Health Records: Patient Care and Ethical and Legal Implications for Nurse Practitioners. <i>The Journal for Nurse Practitioners</i>, 13(2), 105-111. https://doi.org/10.1016/j.nurpra.2016.09.010 ● Canadian Public Health Association. Are you familiar with the laws and organizational policies surrounding disclosure and confidentiality? https://www.cpha.ca/are-you-familiar-laws-and-organizational-policies-surrounding-disclosure-and-confidentiality <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> ● Attend and Participate in Seminar 4: Ethical case discussion & debate; this seminar is also an opportunity to check-in on your project proposal development ● Provide feedback to your peers on their Evidence-Based Solutions Discussion Board ● Complete Self-Directed Reading/Media
<p>Module 8 (Week 8)</p> <p>SELF-DIRECTED: Health Equity and Healthcare Outcomes</p>	<p>Required Readings/Media:</p> <p>Horrill, T. (2020). Cultural safety: Are we on the same page? <i>Canadian Nurse</i>. https://canadian-nurse.com/en/articles/issues/2020/february-2020/cultural-safety-are-we-on-the-same-page</p> <p>Poghosyan, L. & Brooks Carthon, J.M. (2017). The untapped potential of the nurse practitioner workforce in reducing disparities. <i>Policy, Politics & Nursing Practice</i>, 18(2), ePub. https://doi.org/10.1177/1527154417721189</p> <p>Graham, H. (2021). Anti-Racism in Health Care - Keynote from the Canadian Federation of Mental Health Nurses Conference 2021. https://www.youtube.com/watch?v=dwKvfG1zxxs</p>

	<p>Turpel-Lafond, M. E. (2020, November). In plain sight: addressing Indigenous-specific racism and discrimination in B.C. Health Care Summary Report.</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed reading/media • Participate in the Canvas Discussion Board: Health Equity & Health Outcomes
<p>Module 9 (Weeks 9)</p> <p>SELF-DIRECTED: Project Work</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following Chapters: <ul style="list-style-type: none"> ○ 13. Writing the Data-Analysis Plans for advanced Clinical Projects; ○ 14. Keeping Clinical Projects Ethical and Dependable; ○ 15. Finalizing the Proposal as a Professional Document: Reviewing, Editing, and Revising <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed readings/media • Work on your Capstone project proposal assignment
<p>Module 10 (Week 10)</p> <p>SEMINAR 5: Evidence-Based Practice II</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022).] <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed Reading/Media

	<ul style="list-style-type: none"> Attend and Participate in Seminar 5: Evidence-Based Practice II; this seminar is also an opportunity to check-in with your instructor on your project proposal development
NP Capstone Project Proposal Due	

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media were carefully selected to address course learning outcomes and are outlined in the Course Schedule [pp x-x]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other reputable sources. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

American Psychological Association (2020). **Publication Manual of the American Psychological Association (7th ed)**. APA.

Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Springer Publishing. [NEW textbook]

Staples, E., Pilon, R., Hannon, R. (2020). Canadian Perspectives on Advanced Practice Nursing. Second Edition. Canadian Scholars Press. [Core textbook from NURS xxx: Theory for NP Practice]

Utley, R., Henry, K., Smith, L. (2018). Frameworks for Advanced Nursing Practice and Research. Springer Publishing. [Core textbook from NURS xxx: Theory for NP Practice]

Zwitter, M. (2019). [Medical Ethics for Clinical Practice](#). Springer Publishing. Electronic version available for FREE online through the USask Library.

The Foundation for Medical Practice Education (FMPE) Residency Learning Modules [\[specific modules will be assigned as new modules are released quarterly\]](#)

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Discussion Boards	Problem Statement: Due Week 4	30% (5% each)
	Problem Statement Feedback: Due Week 5	
	Evidence-Based Strategies: Due Week 6	
	Evidence-Based Strategies Feedback: Due Week 7	

	Health Equity and Outcomes: Due Week 8 Health Equity and Outcomes Feedback: Due Week 9	
Demonstration of Competencies through Seminar Participation	Weeks 1, 2, 5, 7, 10	10%
Capstone Project Proposal	Due Week 10	60%
Seminar Attendance	Weeks 1, 2, 5, 7, 10	Complete/Incomplete
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

DISCUSSION BOARDS

Value: 5 % each for total 35% of final grade

Due Date: As outlined below

Type: Discussion boards provide opportunity for students to demonstrate, further develop competencies, share ideas with their peers and classmates, and receive feedback to further refine competencies.

Description: The overall intent of discussion boards is to develop and demonstrate NP ELC's, support success on the capstone project proposal assignment and provide a forum for feedback and evaluation. Throughout the course you will participate in three online discussion board forums as outlined below. Postings are to synthesize, critically analyze and apply relevant literature using APA formatting. Responses should demonstrate critical thinking and contribute new information and/or thoughtful consideration of the topic. Rubrics for evaluation of discussion boards can be viewed in Canvas.

Discussion Board 1: Problem Statement

Due Date: Original Post due Week 4; Feedback Post due Week 5

Description: After reviewing the Guide to the USask NP Program Capstone Project and relevant course materials, identify a healthcare problem that you will focus your capstone project on. The identified topic must be relevant to NP practice, and focus on improving health, health equity, and/or health outcomes. Apply strategies as outlined in the Proposal Writing for Clinical Nursing and DNP Projects textbook (Bonnel & Smith, 2021) to research the problem and then write a problem statement. Post this problem statement in the discussion board for feedback from your peers and instructor(s). This discussion board is intended to support success on the project proposal assignment, providing opportunity for feedback and refinement of problem statements prior to further project development and the full project proposal.

Problem Statement Feedback: Respond to at least one peer's posting, providing feedback using the Critical Friends Protocol:

1. I like (share what you like about the ideas/strengths of the problem statement)
2. I wonder(share areas that lack clarity, you see as needing further development, or as weaknesses)
3. A possibility to consider might be(share ideas and resources for strengthening the problem statement and/or project)

Learning Outcomes Addressed: 1, 3 & 4

Discussion Board 2: Evidence-Based Strategies

Due: Original Post due Week 6; Feedback (response) Post Due Week 7

Description: This discussion board will further support your development of the Capstone Project Proposal. Building on the problem statement you identified in week 4, you will write a discussion board summarizing evidence-based strategies for addressing the problem. Your posting should demonstrate critical appraisal and synthesis of evidence, including at least one clinical framework/theory that you are considering applying to your project design.

Evidence-Based Strategies Feedback: Respond to at least one peer's posting, providing feedback using the Critical Friends Protocol:

1. I like (share what you like about the ideas/strengths of the evidence synthesis)
2. I wonder(share areas that lack clarity, you see as needing further development, or as weaknesses)
3. A possibility to consider might be(share ideas and resources for additional evidence-based solutions and/or project design)

Learning Outcome(s) Addressed: 2 & 4

Discussion Board 3: Health Equity & Health Outcomes**Due:** Original Post due Week 8; Response Post due Week 9

Description: Reflect on your own biases, stereotypes, social position, and power and its impact on health service delivery and health outcomes. Describe a health care encounter you have been part of that illustrates the impacts of these things on patient experiences and health outcomes. How did you respond? Is there anything you would do differently moving forward to promote inclusive, equitable and culturally safe care? Consider how your developing competencies in providing culturally safe, anti-racist care are evolving as you transition from RN to an NP practice.

Health Equity & Health Outcomes Feedback: Respond to at least one peer's posting, providing feedback to them on strengths and opportunities and/or strategies to support their ongoing competency development related to provision of inclusive, equitable and culturally safe care.

Learning Outcome(s) Addressed: 1**NP CAPSTONE PROJECT PROPOSAL****Value:** 60% of final grade**Due Date:** Week 11

Type: The NP capstone project supports development and evaluation of competencies designing, implementing, and evaluating, a clinical project to address a healthcare issue relevant to NP practice. In NP Role Development I, you will focus on developing the proposal for your project, including identifying the clinical problem, conducting a literature review, framing the project within a relevant framework/theory, developing a purpose statement, and developing a project plan (methods).

Description: As outlined in the Guide to the USask NP Program Capstone Project (see Appendix A), you will develop a capstone project proposal. The proposal should incorporate feedback from discussion board 1 and 2, apply recommended course resources (i.e. Proposal Writing for Clinical Nursing and DNP Projects, Guide to the USask NP Program Capstone Project), and integrate appropriate evidence-based literature. Please see the Guide to the USask NP Program Capstone Project (Appendix A) for further information on requirements of the project proposal.

Learning Outcome(s) Addressed: 1-4 & 6**DEMONSTRATION OF COMPETENCIES THROUGH SEMINAR PARTICIPATION****Value:** 10 % of final grade**Date:** Weeks 1, 2, 5, 7, 10

Type: Self-evaluation of NP competencies in leadership, advocacy, education, scholarship, critical appraisal, and application of NP practice standards in course seminars.

Description: All students are expected to come to seminars prepared to discuss and apply knowledge from required readings and clinical practice, providing opportunity to further develop, demonstrate and evaluate NP ELCs, practice standards and course learning outcomes. Students will self-evaluate their competency development in the following areas, providing examples to support their ratings. Student self-evaluation will be reviewed and approved by instructors, with any discrepancies in instructor observation and student self-evaluation brought forward for further discussion before determining a final grade.

Seminar & Competencies	Excellent (3)	Good (2)	Satisfactory (1)	Poor (0)
NP Role in Healthcare Improvement Seminar: Ability to identify and apply strategies NPs can utilize to contribute to healthcare improvement	Actively participated throughout seminar demonstrating consistent and correct ability to identify and apply appropriate strategies for improving healthcare.	Participated in majority of seminar demonstrating ability to correctly identify and apply appropriate strategies for improving healthcare.	Sometimes participated in seminar demonstrating ability to identify and apply appropriate strategies for improving healthcare	Did not participate in seminar and/or demonstrate ability to appropriately apply strategies for improving healthcare.
Comments to support rating:				
Evidence-Based Practice Seminars: Ability to critically appraise and apply research, clinical experience and patient considerations to enhance patient care	Actively participated in discussion, consistently demonstrating exceptional ability to critically appraise and apply research, clinical experience and patient considerations to enhance patient care	Participated in discussion, demonstrating ability to critically appraise and apply research, clinical experience and patient considerations appropriately to most areas discussed	Sometimes participated in discussion, demonstrating ability to critically appraise and apply research, clinical experience and patient considerations appropriately	Did not participate in discussion and/or demonstrate ability to critically appraise and apply research, clinical experience and/or patient considerations within seminar

Comments to support rating:				
Ethical and Legal Seminar: Ability to apply ethical, legal and regulatory principles in NP practice, ensuring adherence to standards of practice	Actively participated throughout seminar demonstrating consistent and correct ability to apply ethical, legal and regulatory considerations to NP practice.	Participated in majority of seminar demonstrating ability to correctly apply ethical, legal and regulatory considerations to NP practice	Sometimes participated in seminar demonstrating ability to correctly apply ethical, legal and regulatory considerations to NP practice	Did not participate in seminar and/or demonstrate ability to appropriately apply ethical, legal and/or regulatory considerations to NP practice
Comments to support rating				
All Seminars - Communication: Professional communication, ability to provide and receive constructive feedback and positively contribute to the learning of others	Consistently contributes positively to the learning community, through positive communication, provision of constructive feedback, and ability to receive and incorporate feedback.	Contributes positively to the learning community most of the time, through positive communication, provision of constructive feedback, and ability to receive and incorporate feedback.	Sometimes contributes positively to the learning community through positive communication, provision of constructive feedback, and ability to receive feedback.	Does not actively participate in seminars and/or contribute to the positive learning community through supportive communication. Defensive and unresponsive to constructive feedback.
Comments to support rating:				
Overall Grade: /12				

Learning Outcomes Addressed: 2,3,4, 5

EVIDENCE-BASED PRACTICE SEMINAR

Value: Incorporated into Seminar Participation Grades

Due Date: Week 5 and 10

Type: Evidence-Based Practice seminars provide opportunity to apply skills in critical appraisal, group work, and patient-centred care as you discuss application of research and guidelines to clinical cases.

Description: You will participate in evidence-based practice seminars twice during the term. During these seminars you will discuss modules from the Foundation of Medical Practice Education with your peers, critically appraising and applying evidence-based research, clinical expertise, and regulatory considerations to address common concerns presenting to NP practice. Your evaluation for this component is based on demonstration of critical appraisal skills.

Learning Outcomes Addressed: 2, 3, 4, 5

ATTENDANCE AND PARTICIPATION IN SEMINARS

Value: Complete/Incomplete

Due Date: Week 1, 2, 5, 7, 10

Type: Seminars provide opportunity to develop and apply knowledge, with feedback from peers and instructors, forming an important component of NP role development

Description: Regular, punctual attendance and active participation at scheduled seminars is a required course component. Absenteeism may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology (i.e. web-cam, microphone, reliable internet connection) to facilitate participation in online learning activities.

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations).

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by USask NP Program Faculty & Instructors.

APPENDIX A: GUIDE TO THE USASK NP PROGRAM CAPSTONE PROJECT

Updated 2022



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE AND POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 838**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Nurse Practitioner Role Development II**
Course Short Title (maximum 30 characters): **NP Roles II**
- 2.4 Total Hours: Lecture **Web-based Seminar(synchronous and asynchronous components)**
39 hours Lab Tutorial Other
- 2.5 Weekly Hours: Lecture Seminar **3-4** Lab Tutorial Other
- 2.6 Term in which it will be offered: T1 **T2** T1 or T2 T1 and T2
- 2.7 Prerequisite: NURS 837: **Nurse Practitioner Role Development I**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

- 2.8 Catalogue description (150 words or less): **Building on knowledge from Nurse Practitioner Role Development I, this course supports further growth of student professional identity as a NP. Through integration of theory, practice and critical inquiry students will expand NP competencies as leaders, scholars, educators, and clinicians to contribute to equitable, high quality health care.**
- 2.9 Do you allow this course to be repeated for credit? **NO**
- 3. Please list rationale for introducing this course: **This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**
- 4. **Please list the learning objectives for this course:**

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Identify and challenge systems of inequity, racism, discrimination, and unequal distribution of power and resources, employing strategies within own sphere of influence to promote equitable health outcomes. (NP ELCs 3.1, 3.2, 3.4, 3.5)
2. Implement and evaluate evidence-informed strategies to improve health of groups and/or populations such as quality improvement initiatives, health promotion/disease prevention programs, and policy advocacy. (NP ELCs, 3.6, 2.2, 2.3, 4.1, 4.2)
3. Critically appraise and apply research, experience, and patient considerations to inform NP practice with vulnerable populations, sharing knowledge with members of the interprofessional team. (NP ELCs 2.1, 5.1, 5.2)
4. Analyze strategies to enhance health of vulnerable populations such as trauma and violence informed care, harm reduction, and safe prescribing of controlled drugs and substances. (NP ELC 1.12)
5. Demonstrate understanding of ethical, legal, and regulatory considerations in NP practice related to informed consent, patient autonomy, conscientious objection, and maternal/child health (NP ELC 1.15)
6. Evaluate and apply feedback from multiple sources to create a comprehensive understanding and action plan for personal strengths, weaknesses, and areas for further development related to your professional NP role identity. (NP ELC 3.1 and NP Practice Standards)

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**

If so, were these departments consulted? (Include correspondence)

Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)

6.1 Courses to be deleted? **NURS 888.3: Practicum II Nursing Therapeutics and Advanced Management will be deleted.**

6.2 Courses for which this course will be a prerequisite? **NURS 839: Nurse Practitioner Role Development III,**

6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Date & Topic	Learning Activities, Assignments & Evaluation
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<p>Week 1-2</p> <p>Introduction to Project Implementation</p> <p>NP Role Development</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Proposal Writing for Clinical Nursing and DNP Projects (2022). Chapter 16. Moving the Proposal to the Completed Project; Chapter 17. Moving the Proposal to the Final Written Report. • Review feedback provided on NP Capstone Project Proposal, making adjustments as needed prior to implementation • Canadian Perspectives on Advanced Practice Nursing. Chapter 29. Role Transition • Cornett, M., Palemo, C., & Ash, S. (2023). Professional identity research in the health professions – a scoping review. <i>Adv Health Scie Educ Theory Pract</i> 28(2), 589-642. doi: 10.1007/s10459-022-10171-1 • Review the licensing exam and registration requirements in the jurisdiction in which you intend to practice <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Seminar 1 <ul style="list-style-type: none"> ○ Course Introduction ○ NP Capstone Project Implementation • Self-Directed Reading/Media • Discussion Board: Analysis of Developing NP Role Identity
<p>Week 3</p> <p>Evidence-Based Practice</p>	<p>Required Readings/Media</p> <p>Carper, B.A. (1978). Fundamental patterns of knowing in nursing. <i>ANS</i>, 1(1), 13-24. Jones & Bartlett Learning, LCC. http://samples.jbpub.com/9780763765705/65705_CH03_V1xx.pdf</p> <p>Peart, J. & MacKinnon, K. (2018). Cultivating praxis through Chinn and Kramer’s emancipatory knowing. <i>Advances in Nursing Science</i>, 41(4), 351-358. doi 10.1097/ANS.0000000000000232 https://primo-pmtna02.hosted.exlibrisgroup.com/permalink/f/fbi72i/TN_medline30383563</p> <p>Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov</p>

	<p>2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022).</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-Directed Reading/Media • Seminar 2: Journal Club 1
<p>Week 4</p> <p>Caring for Vulnerable Populations</p>	<p>Required Readings/Media:</p> <p>Roberts, S., Chandler, G., & Kalmakis, K. (2019). A model for trauma-informed primary care. <i>Journal of the American Association of Nurse Practitioners</i>, 31(2), 139-144. doi: 10.1097/JXX.000000000000116.</p> <p>Aisner, A.J., Zappas, M., & Marks, A. (2020). Primary care for lesbian, Gay, Bisexual, Transgender, and Queer/Questioning (LGBTQ) patients. <i>The Journal for Nurse Practitioners</i>, 16(4), 281-285. https://doi.org/10.1016/j.nurpra.2019.12.011.</p> <p>Marrocco, A., Krouse, H. (2017). Obstacles to preventative care for individuals with disability: Implications for nurse practitioners. <i>Journal of the American Association of Nurse Practitioners</i>, 29(5), 282-293. https://doi.org/10.1002/2327-6924.12449</p> <p>Mabrouk, A. (2020). Trauma- informed care for survivors of human trafficking: An NP-led initiative. <i>Canadian Nurse</i>. https://canadian-nurse.com/en/articles/issues/2020/june-2020/trauma-informed-care-for-survivors-of-human-trafficking-an-np-led-initiative</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-Directed readings/media • Discussion Board: Vulnerable Populations
<p>Week 5</p> <p>Challenging Health Inequities</p>	<p>Required Readings/Media:</p> <p>Danda, M., Key, J., & Pitcher, C. (2022). Hearing our voices (part 1): Facilitating nurses' reflection on taking anti-racist action. https://www.canadian-nurse.com/blogs/cn-content/2022/05/16/hearing-our-voices-part-1-facilitating-nurses-refl</p> <p>Danda, M., Pitcher, C. & Key, J. (2022). Hearing our voices (part 2): Empowering nurses to take anti-racist action in health care. https://www.canadian-nurse.com/blogs/cn-content/2022/05/16/hearing-our-voices-part-2-empowering-nurses-to-take-anti-racist-action-in-health-care</p>

	<p>nurse.com/blogs/cn-content/2022/05/24/hearing-our-voices-part-2-empowering-nurses-to-tak</p> <p>Jones, C.P. (2000). Levels of racism: A theoretic framework and a gardener's tale. <i>American Journal of Public Health</i>, 90(8), 1212-1215.</p> <p>Reid, A., Brandes, R., Butler-MacKay, D., Ortiz, A., Kramer, S., Sivashanker, K.m & Mate, K. (2022). Getting grounded: Building a foundation for health equity and racial justice work in health care teams. <i>NEJM Catalyst</i>, 3(1), DOI: 10.1056/CAT.21.0320</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-Directed readings/media • Seminar 2: Challenging Health Inequities and Caring for Vulnerable Populations • Discussion Board: Vulnerable Populations Response
<p>Week 6-7</p> <p>Ethical, Legal and Practice Considerations in Maternal Child Health</p>	<p>Required Readings/Media:</p> <p>Bancsi, A. & Grindrod, K. (2020). Update on medical abortion. <i>Canadian Family Physician</i>, 66(1), 42-44.</p> <p>Borg, E. (2018). The Legal Status of the Fetus: A brief analysis of the status of the fetus in relation to its pregnant mother. <i>Canadian Nurse Protective Society (CNPS)</i>. https://cnps.ca/article/the-legal-status-of-the-fetus/</p> <p>Canadian Nurses Association (2017). Code of Ethics for Registered Nurses. Available at: https://www.srna.org/wp-content/uploads/2018/11/Code-of-Ethics-2017-Edition.pdf</p> <p>Canadian Nurses Protective Society (CNPS). Ask a Lawyer: Mature Minor. https://cnps.ca/article/mature-minor/</p> <p>Canadian Nurses Protective Society (CNPS). Ask a Lawyer: Parent's Request for Minor's Health Records. https://cnps.ca/article/parents-request-for-minors-health-records/</p> <p>Centre for Practical Bioethics. (2022). Review the following case studies for the Ethical and Legal Considerations in Maternal Child Health Discussion Board:</p> <ul style="list-style-type: none"> • Case Study - Abortion Rights and-or Wrongs https://www.practicalbioethics.org/procreation-and-reproduction/case-study-abortion-rights-and-or-wrongs/

	<ul style="list-style-type: none"> • Case Study - A Sister for Joshua https://www.practicalbioethics.org/procreation-and-reproduction/case-study-a-sister-for-joshua/ • Case Study - The Case of a 20-Month-Old Boy https://www.practicalbioethics.org/patient-physician-relationship/the-case-of-a-20-month-old-boy/ • Case Study - Our Pregnant Daughter Didn't Want This https://www.practicalbioethics.org/advance-care-planning/case-study-our-pregnant-daughter-didnt-want-this/ • Case Study - Clinical Research Involving Children https://www.practicalbioethics.org/research-ethics/case-study-clinical-research-involving-children/ • Case Study - Baby K - Futile Treatment https://www.practicalbioethics.org/end-of-life-ethics/case-study-baby-k/ • Case Study - Maternal Fetal Issues https://www.practicalbioethics.org/advance-care-planning/case-study-angela-c-maternal-fetal-issues/ <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-directed readings/media • Seminar 3: Ethical and Legal Issues in Maternal Child Health • Discussion Board: Ethical and Legal Issues
Week 8	Project Work
Week 9 Evidence-Based Practice II	<p>Required Readings/Media</p> <p>Waldrop, J. (2016). What is clinical scholarship and how can you contribute? <i>The Journal for Nurse Practitioners</i>, 12(4), PA15-A16. DOI: https://doi.org/10.1016/j.nurpra.2016.03.006</p> <p>Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022).</p> <p>Learning Activities & Assignments:</p>

	<ul style="list-style-type: none"> • Seminar 3: Journal Club II • Self-directed readings/media
Week 10	Capstone Project Final Report Due

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE, DISTANCE LEARNING**

10-50

50-90

90-130

130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **NUMERIC/PERCENTAGE**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
Discussion Boards	Personal SWOT Analysis: Due Week 2 Vulnerable Populations: Due Week 4 Vulnerable Populations Response: Due Week 5	15% (5% each)
Demonstration of Competencies through Seminar Participation	Weeks 1, 3, 5, 7, 10	15%
Capstone Project Final Report	Week 11	70%

Seminar Attendance	Week 1, 3, 5, 7, 10	Complete/Incomplete
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **YES**

10. Required text

Include a bibliography for the course.

Required readings and media were carefully selected to address course learning outcomes and are outlined in the Course Schedule [pp x-x]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other reputable sources. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

American Psychological Association (2020). **Publication Manual of the American Psychological Association (7th ed)**. APA.

Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Springer Publishing.

Staples, E., Pilon, R., Hannon, R. (2020). Canadian Perspectives on Advanced Practice Nursing. Second Edition. Canadian Scholars Press. [Core textbook from NURS xxx: Theory for NP Practice]

Utley, R., Henry, K., Smith, L. (2018). Frameworks for Advanced Nursing Practice and Research. Springer Publishing. [Core textbook from NURS xxx: Theory for NP Practice]

Zwitter, M. (2019). [Medical Ethics for Clinical Practice](#). Springer Publishing. Electronic version available for FREE online through the USask Library.

The Foundation for Medical Practice Education (FMPE) Residency Learning Modules [\[specific modules will be assigned as new modules are released quarterly\]](#)

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information**1. Schedule Types**

Please choose the Schedule Types that can be used for sections that fall under this course:

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously and asynchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

FNAR Fine Arts
 HUM Humanities
 SCIE Science
 SOCS Social Science
 ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

ELWR – English Language Writing Requirement

ILRO – Indigenous Learning Requirement

QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites)

- 3.1 **Permission Required: Yes, Permission required to audit the course.**
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 837: Nurse Practitioner Role Development I**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **Not applicable.**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **None**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here:

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent: **None for this course.**

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive: **None for this course.**

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

NP ROLE COURSE SYLLABUS			
Course Title:	Nurse Practitioner Role Development II		
Course Code:	NURS 838	Term:	TBD
Course Credits:	3 credit units	Delivery:	Synchronous & asynchronous online
Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	10 weeks with synchronous online seminars (20hrs) and self-directed learning		
Course Calendar Description:	Building on knowledge from Nurse Practitioner Role Development I, this course supports further growth of student professional identity as a NP. Through integration of theory, practice and critical inquiry students will expand NP competencies as leaders, scholars, educators, and clinicians to contribute to equitable, high quality health care.		
Pre or Co Requisite:	NURS 837 NP Role Development I		

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is on *Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Identify and challenge systems of inequity, racism, discrimination, and unequal distribution of power and resources, employing strategies within own sphere of influence to promote equitable health outcomes. (NP ELCs 3.1, 3.2, 3.4, 3.5)
2. Implement and evaluate evidence-informed strategies to improve health of groups and/or populations such as quality improvement initiatives, health promotion/disease prevention programs, and policy advocacy. (NP ELCs, 3.6, 2.2, 2.3, 4.1, 4.2)
3. Critically appraise and apply research, experience, and patient considerations to inform NP practice with vulnerable populations, sharing knowledge with members of the interprofessional team. (NP ELCs 2.1, 5.1, 5.2)
4. Analyze strategies to enhance health of vulnerable populations such as trauma and violence informed care, harm reduction, and safe prescribing of controlled drugs and substances. (NP ELC 1.12)
5. Demonstrate understanding of ethical, legal, and regulatory considerations in NP practice related to informed consent, patient autonomy, conscientious objection, and maternal/child health (NP ELC 1.15)
6. Evaluate and apply feedback from multiple sources to create a comprehensive understanding and action plan for personal strengths, weaknesses, and areas for further development related to your professional NP role identity. (NP ELC 3.1 and NP Practice Standards)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components*
- Overall final grade of 70% or higher in the course

*An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy

- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

Building on knowledge from Nurse Practitioner Role Development I, this course supports further growth of student professional identity as a NP. Through integration of theory, practice and critical inquiry you will expand NP competencies as leaders, scholars, educators, and clinicians to contribute to equitable, high quality health care. A key focus of this course is on implementation of the NP Capstone project, analysis of results, and writing the Final Project Report. Other learning activities address ongoing NP role development, evidence-informed practice, caring for vulnerable populations, challenging health inequities, as well as ethical and legal issues in NP practice, with a focus on maternal-child health.

COURSE SCHEDULE

Date & Topic	Learning Activities, Assignments & Evaluation
<p>Week 1-2</p> <p>Introduction to Project Implementation</p> <p>NP Role Development</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Proposal Writing for Clinical Nursing and DNP Projects (2022). Chapter 16. Moving the Proposal to the Completed Project; Chapter 17. Moving the Proposal to the Final Written Report. • Review feedback provided on NP Capstone Project Proposal, making adjustments as needed prior to implementation • Canadian Perspectives on Advanced Practice Nursing. Chapter 29. Role Transition • Cornett, M., Palemo, C., & Ash, S. (2023). Professional identity research in the health professions – a scoping review. <i>Adv Health Scie Educ Theory Pract</i> 28(2), 589-642. doi: 10.1007/s10459-022-10171-1 • Review the licensing exam and registration requirements in the jurisdiction in which you intend to practice <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Seminar 1 <ul style="list-style-type: none"> ○ Course Introduction ○ NP Capstone Project Implementation • Self-Directed Reading/Media

	<ul style="list-style-type: none"> • Discussion Board: Analysis of Developing NP Role Identity
<p>Week 3</p> <p>Evidence-Based Practice</p>	<p>Required Readings/Media</p> <p>Carper, B.A. (1978). Fundamental patterns of knowing in nursing. <i>ANS</i>, 1(1), 13-24. Jones & Bartlett Learning, LCC. http://samples.jbpub.com/9780763765705/65705_CH03_V1xx.pdf</p> <p>Peart, J. & MacKinnon, K. (2018). Cultivating praxis through Chinn and Kramer’s emancipatory knowing. <i>Advances in Nursing Science</i>, 41(4), 351-358. doi 10.1097/ANS.0000000000000232 https://primo-pmtna02.hosted.exlibrisgroup.com/permalink/f/fbi72i/TN_medline30383563</p> <p>Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022).</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-Directed Reading/Media • Seminar 2: Journal Club 1
<p>Week 4</p> <p>Caring for Vulnerable Populations</p>	<p>Required Readings/Media:</p> <p>Roberts, S., Chandler, G., & Kalmakis, K. (2019). A model for trauma-informed primary care. <i>Journal of the American Association of Nurse Practitioners</i>, 31(2), 139-144. doi: 10.1097/JXX.0000000000000116.</p> <p>Aisner, A.J., Zappas, M., & Marks, A. (2020). Primary care for lesbian, Gay, Bisexual, Transgender, and Queer/Questioning (LGBTQ) patients. <i>The Journal for Nurse Practitioners</i>, 16(4), 281-285. https://doi.org/10.1016/j.nurpra.2019.12.011.</p> <p>Marrocco, A., Krouse, H. (2017). Obstacles to preventative care for individuals with disability: Implications for nurse practitioners. <i>Journal of the American Association of Nurse Practitioners</i>, 29(5), 282-293. https://doi.org/10.1002/2327-6924.12449</p> <p>Mabrouk, A. (2020). Trauma- informed care for survivors of human trafficking: An NP-led initiative. <i>Canadian Nurse</i>. https://canadian-nurse.com/en/articles/issues/2020/june-2020/trauma-informed-care-for-survivors-of-human-trafficking-an-np-led-initiative</p>

	<p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-Directed readings/media • Discussion Board: Vulnerable Populations
<p>Week 5</p> <p>Challenging Health Inequities</p>	<p>Required Readings/Media:</p> <p>Danda, M., Key, J., & Pitcher, C. (2022). Hearing our voices (part 1): Facilitating nurses' reflection on taking anti-racist action. https://www.canadian-nurse.com/blogs/cn-content/2022/05/16/hearing-our-voices-part-1-facilitating-nurses-refl</p> <p>Danda, M., Pitcher, C. & Key, J. (2022). Hearing our voices (part 2): Empowering nurses to take anti-racist action in health care. https://www.canadian-nurse.com/blogs/cn-content/2022/05/24/hearing-our-voices-part-2-empowering-nurses-to-tak</p> <p>Jones, C.P. (2000). Levels of racism: A theoretic framework and a gardener's tale. <i>American Journal of Public Health</i>, 90(8), 1212-1215.</p> <p>Reid, A., Brandes, R., Butler-MacKay, D., Ortiz, A., Kramer, S., Sivashanker, K.m & Mate, K. (2022). Getting grounded: Building a foundation for health equity and racial justice work in health care teams. <i>NEJM Catalyst</i>, 3(1), DOI: 10.1056/CAT.21.0320</p> <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-Directed readings/media • Seminar 2: Challenging Health Inequities and Caring for Vulnerable Populations • Discussion Board: Vulnerable Populations Response
<p>Week 6-7</p> <p>Ethical, Legal and Practice Considerations in Maternal Child Health</p>	<p>Required Readings/Media:</p> <p>Bancsi, A. & Grindrod, K. (2020). Update on medical abortion. <i>Canadian Family Physician</i>, 66(1), 42-44.</p> <p>Borg, E. (2018). The Legal Status of the Fetus: A brief analysis of the status of the fetus in relation to its pregnant mother. Canadian Nurse Protective Society (CNPS). https://cnps.ca/article/the-legal-status-of-the-fetus/</p>

	<p>Canadian Nurses Association (2017). Code of Ethics for Registered Nurses. Available at: https://www.srna.org/wp-content/uploads/2018/11/Code-of-Ethics-2017-Edition.pdf</p> <p>Canadian Nurses Protective Society (CNPS). Ask a Lawyer: Mature Minor. https://cnps.ca/article/mature-minor/</p> <p>Canadian Nurses Protective Society (CNPS). Ask a Lawyer: Parent's Request for Minor's Health Records. https://cnps.ca/article/parents-request-for-minors-health-records/</p> <p>Centre for Practical Bioethics. (2022). Review the following case studies for the Ethical and Legal Considerations in Maternal Child Health Discussion Board:</p> <ul style="list-style-type: none"> • Case Study - Abortion Rights and-or Wrongs https://www.practicalbioethics.org/procreation-and-reproduction/case-study-abortion-rights-and-or-wrongs/ • Case Study - A Sister for Joshua https://www.practicalbioethics.org/procreation-and-reproduction/case-study-a-sister-for-joshua/ • Case Study - The Case of a 20-Month-Old Boy https://www.practicalbioethics.org/patient-physician-relationship/the-case-of-a-20-month-old-boy/ • Case Study - Our Pregnant Daughter Didn't Want This https://www.practicalbioethics.org/advance-care-planning/case-study-our-pregnant-daughter-didnt-want-this/ • Case Study - Clinical Research Involving Children https://www.practicalbioethics.org/research-ethics/case-study-clinical-research-involving-children/ • Case Study - Baby K - Futile Treatment https://www.practicalbioethics.org/end-of-life-ethics/case-study-baby-k/ • Case Study - Maternal Fetal Issues https://www.practicalbioethics.org/advance-care-planning/case-study-angela-c-maternal-fetal-issues/ <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Self-directed readings/media • Seminar 3: Ethical and Legal Issues in Maternal Child Health
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	<ul style="list-style-type: none"> • Discussion Board: Ethical and Legal Issues
Week 8	Project Work
Week 9 Evidence-Based Practice II	Required Readings/Media Waldrop, J. (2016). What is clinical scholarship and how can you contribute? <i>The Journal for Nurse Practitioners</i> , 12(4), PA15-A16. DOI: https://doi.org/10.1016/j.nurpra.2016.03.006 Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022). Learning Activities & Assignments: <ul style="list-style-type: none"> • Seminar 3: Journal Club II • Self-directed readings/media
Week 10	Capstone Project Final Report Due

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media were carefully selected to address course learning outcomes and are outlined in the Course Schedule [pp x-x]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other reputable sources. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

American Psychological Association (2020). **Publication Manual of the American Psychological Association (7th ed)**. APA.

Bonnel, W. & Smith, K. (2021). *Proposal Writing for Clinical Nursing and DNP Projects*. Springer Publishing.

Staples, E., Pilon, R., Hannon, R. (2020). *Canadian Perspectives on Advanced Practice Nursing*. Second Edition. Canadian Scholars Press. [Core textbook from NURS xxx: Theory for NP Practice]

Utley, R., Henry, K., Smith, L. (2018). *Frameworks for Advanced Nursing Practice and Research*. Springer Publishing. [Core textbook from NURS xxx: Theory for NP Practice]

Zwitter, M. (2019). [Medical Ethics for Clinical Practice](#). Springer Publishing. Electronic version available for FREE online through the USask Library.

The Foundation for Medical Practice Education (FMPE) Residency Learning Modules [[specific modules will be assigned as new modules are released quarterly](#)]

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence,

scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
Discussion Boards	Personal SWOT Analysis: Due Week 2 Vulnerable Populations: Due Week 4 Vulnerable Populations Response: Due Week 5	15% (5% each)
Demonstration of Competencies through Seminar Participation	Weeks 1, 3, 5, 7, 10	15%
Capstone Project Final Report	Week 11	70%
Seminar Attendance	Week 1, 3, 5, 7, 10	Complete/Incomplete
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

DISCUSSION BOARDS

Value: 15% of final grade (5% each)

Due Date: As outlined below

Type: Discussion boards provide opportunity for students to demonstrate, further develop competencies, share ideas with their peers and classmates, and receive feedback to further refine competencies.

Description: The overall intent of discussion boards is to develop and demonstrate NP ELC's and provide a forum for feedback and evaluation. Throughout the course you will participate in two discussion boards as outlined below. Postings are to synthesize, critically analyze and apply relevant literature

using APA formatting. Responses should demonstrate critical thinking and contribute new information and/or thoughtful consideration of the topic. Rubric for evaluation of discussion boards can be viewed in Canvas.

Discussion Board 1: Personal SWOT (or SOAR) Analysis

Due Date: **Week 2**

Description: Reflect on your developing professional identity as a NP. How has this shifted since beginning your NP program? Consider your personal strengths, weakness, opportunities and threats ([SWOT analysis](#)) [or consider a [SOAR](#) – Strengths, Opportunities, Actions, Responsibilities] as well as feedback from others (i.e. peer, instructor, preceptor feedback) to create a comprehensive understanding and action plan that will support your ongoing professional NP role development.

Learning Outcome Addressed: 6

Discussion Board 2: Strategies to Enhance Care of Vulnerable Populations

Due Date: **Week 4, Response Due Week 5**

Description: Applying knowledge gained from the required readings on caring for vulnerable populations describe a clinical situation in which you applied one or more evidence-based strategies to enhance care for vulnerable populations (i.e. providing trauma informed care to a patient with history of adverse childhood experiences, supporting harm reduction management in a client with opioid addiction). Discuss the evidence related to the strategy(ies) applied, critically appraising quality of evidence but also considering your personal experience applying these strategies in practice.

Response Posting: Respond to at least 1 peer's posting, considering barriers related to systems of inequity, racism, discrimination and/or unequal distribution of power and resources that you see impacting care. How can you influence these factors within your own influence of power to promote equitable health outcomes. (Readings from week 5-6 on Challenging Health Inequities may be useful to support this response posting)

Learning Outcomes Addressed: 1, 3 & 4

DEMONSTRATION OF COMPETENCIES THROUGH SEMINAR PARTICIPATION

Value: 15 % of final grade

Date: Weeks 1, 3, 5, 7, 10

Type: Self-evaluation of NP competencies in leadership, advocacy, education, scholarship, critical appraisal, and application of NP practice standards in course seminars.

Description: All students are expected to come to seminars prepared to discuss and apply knowledge from required readings and clinical practice, providing opportunity to further develop, demonstrate and evaluate NP ELCs, practice standards and course learning outcomes. Students will self-evaluate their competency development in the following areas, providing examples to support their ratings. Student self-evaluation will be reviewed and approved by instructors, with any discrepancies in instructor observation and student self-evaluation brought forward for further discussion before determining a final grade.

Seminar & Competencies	Excellent (3)	Good (2)	Satisfactory (1)	Poor (0)
<p>Challenging Health Inequities: Ability to identify and apply strategies to enhance health of vulnerable populations, challenge systems of inequity, racism, discrimination and unequal distribution of power and resources to promote equitable health outcomes.</p>	Actively participated throughout seminar demonstrating consistent, insightful, and effective strategies to challenge health inequities to promote equitable health outcomes.	Participated in majority of seminar demonstrating ability to correctly identify and apply appropriate strategies to challenge health inequities to promote equitable health outcomes.	Sometimes participated in seminar demonstrating ability to identify and apply appropriate strategies to challenge health inequities and promote equitable health outcomes.	Did not participate in seminar and/or demonstrate ability to appropriately apply strategies to challenge health inequities and promote health equitable health outcomes.
Comments to support rating:				
<p>Evidence-Based Practice Seminars: Ability to critically appraise and apply research,</p>	Actively participated in discussion, consistently demonstrating exceptional ability	Participated in discussion, demonstrating ability to critically appraise and apply research,	Sometimes participated in discussion, demonstrating ability to critically appraise and	Did not participate in discussion and/or demonstrate ability to critically appraise and

clinical experience and patient considerations to enhance patient care	to critically appraise and apply research, clinical experience and patient considerations to enhance patient care	clinical experience and patient considerations appropriately to most areas discussed	apply research, clinical experience and patient considerations appropriately	apply research, clinical experience and/or patient considerations within seminar
Comments to support rating:				
Evidence-Based Practice Seminar Leadership: Ability to effectively facilitate and lead group discussion.	Demonstrated exceptional leadership through effective organization, time-management, facilitation and moderation of group discussion, inclusion of all participants, self-directedness, and positive regard.	Demonstrated good leadership in ability to facilitate and moderate group discussion. Enhanced attention to participant inclusion, self-directedness, organization or attitude will further enhance.	Demonstrated developing leadership skills in ability to facilitate and moderate some group discussion. Enhanced attention to two or more areas of: participant inclusion, self-directedness, organization or attitude will further enhance.	Unable to facilitate group discussion, requiring other peers/instructors to take on this role.
Comments to support rating				
Ethical and Legal Seminar: Ability to apply ethical, legal and regulatory principles in NP practice, ensuring adherence to standards of practice	Actively participated throughout seminar demonstrating consistent and correct ability to apply ethical, legal and regulatory considerations to NP practice.	Participated in majority of seminar demonstrating ability to correctly apply ethical, legal and regulatory considerations to NP practice	Sometimes participated in seminar demonstrating ability to correctly apply ethical, legal and regulatory considerations to NP practice	Did not participate in seminar and/or demonstrate ability to appropriately apply ethical, legal and/or regulatory considerations to NP practice

Comments to support rating				
All Seminars - Communication: Professional communication, ability to provide and receive constructive feedback and positively contribute to the learning of others	Consistently contributes positively to the learning community, through positive communication, provision of constructive feedback, and ability to receive and incorporate feedback.	Contributes positively to the learning community most of the time, through positive communication, provision of constructive feedback, and ability to receive and incorporate feedback.	Sometimes contributes positively to the learning community through positive communication, provision of constructive feedback, and ability to receive feedback.	Does not actively participate in seminars and/or contribute to the positive learning community through supportive communication. Defensive and unresponsive to constructive feedback.
Comments to support rating:				
Overall Grade: /12				

Course Outcomes Addressed: 1, 3, 4, 5

EVIDENCE-BASED PRACTICE SEMINAR LEADERSHIP

Value: Included in Demonstration of Clinical Competencies through Seminar Presentation Grade

Due Date: Seminar 2 or 5 (you will assigned a group to lead in seminar 2 or 5)

Type: Your leadership of an evidence-based practice small group provides opportunity to demonstrate skills in leadership, education, peer mentorship, and group facilitation.

Description: You will be assigned an evidence-based practice seminar and module to be the group leader. During your assigned session, you will lead your seminar group in discussion of the assigned FMPE, integrating critical appraisal of research, clinical expertise and knowledge of regulatory/practice considerations, as well as leadership skills in group facilitation. Formative feedback on leadership skills will be provided from group members and instructors using the critical friends protocol.

1. I like . . . (share one thing you liked about their leadership skills)
2. A possibility to consider might be . . . (share one thing that could be considered to enhance leadership/facilitation skills)

Summative (graded) evaluation for seminar leadership is included as part of the final grade for Demonstrating Clinical Competencies through Seminar Participation (see marking rubric in previous

section). You are encouraged to incorporate formative peer feedback in addition to your own personal reflection when completing the self-assessment rubric related to your leadership skills.

Learning Outcome Addressed: 3

CAPSTONE PROJECT FINAL REPORT

Value: 70 %

Due Date: Week 11

Type: The NP capstone project supports development and evaluation of competencies designing, implementing, and evaluating, a clinical project to address a healthcare issue relevant to NP practice. In NP Role Development II, you will implement, evaluate and write your final project report summarizing key findings and recommendations from your project.

Description: As outlined in the Guide to the USask NP Program Capstone Project (see appendix A), you will implement your capstone project proposal and write a final project proposal summarizing findings and recommendations. The final report should incorporate feedback from the evaluation of your NP Project proposal, apply recommended course resources (i.e. Proposal Writing for Clinical Nursing and DNP Projects, Guide to the USask NP Program Capstone Project), and integrate appropriate evidence-based literature. Please see the Guide to the USask NP Program Capstone Project (Appendix A) for further information on requirements of the project proposal.

Learning Outcome Addressed: 2

ATTENDANCE AND PARTICIPATION IN SEMINARS

Value: Complete/Incomplete

Due Date: Seminar dates are outlined in the course schedule

Type: Seminars provide opportunity to develop and apply knowledge, with feedback from peers and instructors, forming an important component of NP role development

Description: Regular, punctual attendance and active participation at scheduled seminars is a required course component. Absenteeism may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology (i.e. web-cam, microphone, reliable internet connection) to facilitate participation in online learning activities.

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be

contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by **[insert names]**.



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE AND POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 839**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Nurse Practitioner Role Development III**
Course Short Title (maximum 30 characters): **NP Roles III**
- 2.4 Total Hours: Lecture **Web-based Seminar(synchronous and asynchronous components)**
39 hours Lab Tutorial
- 2.5 Weekly Hours: Lecture Seminar **3-4** Lab Tutorial Other
- 2.6 Term in which it will be offered: T1 T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **NURS 838: Nurse Practitioner Role Development II, NURS 841: Nurse Practitioner Clinical Residency II**

If there is a prerequisite waiver, who is responsible for signing it? **NOT APPLICABLE**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

2.8 Catalogue description (150 words or less): **Building on knowledge from Nurse Practitioner Role Development II, this course supports students to consolidate their professional identity to that of an entry-level nurse practitioner. By the end of the course, students will emerge as adept leaders, advocates, clinicians, educators, and scholars equipped to address the challenges and opportunities in today's complex healthcare landscape.**

2.9 Do you allow this course to be repeated for credit? **No**

- 3. Please list rationale for introducing this course: **This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**

4. **Please list the learning objectives for this course:**

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Participate in and lead initiatives to foster inclusive and culturally competent healthcare. (NP ELCs 2.1, 2.2, 3.2)
2. Effectively disseminate knowledge from your healthcare improvement project to improve health care and system outcomes. (NP ELCs 2.2, 2.3, 5.2)
3. Critically appraise and apply research, experience, and patient considerations to inform NP practice with a variety of client presentations and acuity levels, engaging in scholarly dissemination of knowledge. (NP ELCs 1.0, 5.1, 5.2)
4. Integrate and apply knowledge of advanced care planning, palliative, and end of life care strategies, to support patient and family centered care to clients. (NP ELC 1.6)
5. Demonstrate understanding of ethical, legal, and regulatory considerations in nurse practitioner practice related to end-of-life care, capacity, disclosure of adverse events, employment, conflict of interest and resource allocation. (NP ELCs 1.15, 1.13, Practice Standards)
6. Identify and implement strategies to support transition from student to independent NP. (NP Practice Standards)
7. Demonstrate entry-level NP competencies through successful completion of the program comprehensive examination. (All ELCs)

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**

If so, were these departments consulted? (Include correspondence)

Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)

6.1 Courses to be deleted? **NURS 878.3: Practicum III Advanced Nursing Practice with Vulnerable Populations**

6.2 Courses for which this course will be a prerequisite? **NONE**

6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Date & Topic	Learning Activities, Assignments & Evaluation
<p>Module 1 (Week 1-2)</p> <p>SEMINAR 1: Course Introduction, Project Dissemination , NP Role Transition</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters: <ul style="list-style-type: none"> ○ 16. Moving the Proposal to the Completed Project; ○ 18. Moving your Completed Project to Dissemination and Further Scholarship • Review feedback provided on Final NP Capstone Project Report to respond to feedback and develop your dissemination presentation • Davis, L., Colella, C. & Mullins, K. Transition to practice for the new graduate NP: A checklist and guide to understanding next steps. <i>Journal of Nursing Education and Practice</i>, 11(8), https://doi.org/10.5430/jnep.v11n8p88 • Pleshkan, C. & Hussey, L. (2020). Nurse practitioners' experiences with role transition: Supporting the learning curve through preceptorship. <i>Nurse Education in Practice</i>, 42, 102655. https://doi.org/10.1016/j.nepr.2019.102655 <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Attend and Participate in Seminar 1 • Complete Self-Directed reading/media • Begin work on project dissemination presentation
<p>Module 2 (Week 3)</p> <p>SELF-DIRECTED: End-of-Life Care</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2023). Primary care: Art and science of advanced practice nursing (6th edition). Chapter 81 – Primary Care of the Patient with Cancer; Chapter 84 - Palliative and End-of-Life Care • Pallium Canada. https://www.pallium.ca/taking-ownership/. * complete the free, interactive Taking Ownership Module and browse other resources available on this website. The Pallium Palliative Pocketbook and LEAP courses are excellent resources for those wanting to further their knowledge of palliative care.

	<ul style="list-style-type: none"> • RxFiles (2021 or 2023). Palliative care: Symptom management considerations. (pp. 214-215 for 13th edition (2021) or pp. 227 - 228 of 14th edition (2023)). • Wheeler, M. (2016). Primary palliative care for every nurse practitioner. <i>The Journal of Nurse Practitioners</i>, 10(12) • Government of Canada Department of Justice. Canada's new medical assistance in dying (MAID) law. *Review information on this page and Infographic • Canadian Nurses Protective Society. Medical assistance in dying: What every nurse should know. http://cnps.ca/index.php?page=348. • Criminal Code of Canada, R.S.C., 1985, C. C-46. Section 241: Suicide and Medical assistance in dying. Scroll to bottom of the page to beginning of Section 241: Suicide. After reading this section, proceed to next page which continues Section 241 to discuss more details related to medical assistance in dying • Review your jurisdictional and regional resources related to MAID <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed readings/media • Participate in the Canvas Discussion Board: End of Life Care
<p>Module 3 (Week 4)</p> <p>SEMINAR 2: Project Dissemination Seminar</p>	<p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Work-on Project Dissemination Presentation • Participate in Seminar 2: Project Dissemination Seminar
<p>Module 4 (Week 5)</p> <p>SELF-DIRECTED: Ethical, Legal and Practice Considerations in Self-Employed Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Canadian Nurses Association (CNA). (2017). Code of ethics for Registered Nurses • College of Registered Nurses of Saskatchewan (2021). Self-employed practice guideline. *Students from outside of Saskatchewan should review self-employment practice guidelines from the jurisdiction in which they plan to practice, including relevant privacy legislation. • Canadian Nurse Protective Society (CNPS). Review the following articles:

	<ul style="list-style-type: none"> • InfoLAW: Nurses in independent practice: An overview • Ask a lawyer: Independent practice considerations • Ask a lawyer: Employer-provided professional liability protection • Ask a lawyer: Nurse practitioner billing. • Ask a lawyer: Ending a NP-client relationship • Collaborative practice: Are nurses employees or self-employed? • CMPA/CNPS joint statement on liability protection for NPs and physicians in collaborative practice <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed reading/media • Participate in the Canvas Discussion Board: Self-Employed Practice
<p>Module 5 (Week 6)</p> <p>SEMINAR 3: Evidence-Based Practice I</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022). <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed reading/media • Participate in Seminar 3: Evidence-Based Practice I
<p>Module 6 (Week 7)</p> <p>SELF-DIRECTED: Leading Inclusive, Culturally Safe Healthcare</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Graham, H. (2024). CPR RACISM: A guide for health care providers to safely address racism in a health care setting. <i>International Journal of Indigenous Health</i>, 19(1). https://doi.org/10.32799/ijih.v19i1.42574 • Canadian Institute for Health Information. (2021). Measuring Cultural Safety in Health Systems.

	<p>https://www.cihi.ca/sites/default/files/document/measuring-cultural-safety-in-health-systems-report-en.pdf</p> <ul style="list-style-type: none"> Greenwood, M., Lindsay, N., Loewen, D. (2017). Ethical spaces and places: Indigenous cultural safety in British Columbia health care. <i>An International Journal of Indigenous Peoples</i>, 13(3), https://doi.org/10.1177/117718011771441 Health Quality BC. Culturally Safe Engagement: What Matters to Indigenous Patient Partners Companion Guide. kā-wīci-pimohtēmāt Professional Practice Group <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Complete Self-Directed readings/media Participate in the Canvas Discussion Board: Leading Culturally Responsive, Inclusive Healthcare
<p>Module 7 (Week 8)</p> <p>SEMINAR 4: Evidence-Based Practice II</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022).] <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Complete Self-Directed readings/media Participate in Seminar 4: Evidence-Based Practice II
<p>Module 8 (Weeks 9)</p> <p>SELF-DIRECTED: Study for Comprehensive Exam</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Program textbooks and evidence-based guidelines <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Study for Comprehensive Exam
<p>Module 9 (Week 10)</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> May, M. (2020). The First Year of NP Practice: A Roller Coaster Ride! Nurse Practitioner Association of Alberta.

SEMINAR 5: Launching to Practice	<p>https://albertanps.com/the-first-year-of-np-practice-a-roller-coaster-ride/</p> <ul style="list-style-type: none"> American Association of Nurse Practitioners. Starting your Nurse Practitioner (NP) Career. https://www.aanp.org/student-resources-2/starting-your-np-career <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Participate in Seminar 5: Final Seminar – Launching to Practice Complete Self-Directed reading/media Study
Week 11-12	Comprehensive Exam

8. **Enrolment**

8.1 What is the maximum enrolment number for this course? **35**
And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE, DISTANCE LEARNING**

- 10-50
 50-90
 90-130
 130+

9. **Student evaluation**

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

- 9.1 How should this course be graded? **NUMERIC/PERCENTAGE**
C – Completed Requirements
(Grade options for instructor: Completed Requirements, Fail, IP In Progress)
N – Numeric/Percentage
(Grade options for instructor: grade of 0% to 100%, IP in Progress)

Evaluation Component	Date	Grade Weight
Capstone Project Dissemination	Week 4	25%
Discussion Boards	End of Life Care: Week 3	15% (5% each)

	Self-Employed Practice: Week 5 Leading culturally safe, inclusive care: Week 7	
Seminar Attendance	Week 1, 4, 6, 8, 10	Complete/Incomplete
Comprehensive Exam*	Week 11-12	60%
Total		100%

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **NO**

10. **Required text**

Include a bibliography for the course.

Required readings and media were carefully selected to address course learning outcomes and are outlined in the Course Schedule [pp x-x]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other reputable sources. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

American Psychological Association (2020). **Publication Manual of the American Psychological Association (7th ed)**. APA.

Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Springer Publishing. [NEW textbook]

Staples, E., Pilon, R., Hannon, R. (2020). Canadian Perspectives on Advanced Practice Nursing. Second Edition. Canadian Scholars Press. [Core textbook from NURS xxx: Theory for NP Practice]

Utley, R., Henry, K., Smith, L. (2018). Frameworks for Advanced Nursing Practice and Research. Springer Publishing. [Core textbook from NURS xxx: Theory for NP Practice]

Zwitter, M. (2019). [Medical Ethics for Clinical Practice](#). Springer Publishing. Electronic version available for FREE online through the USask Library.

The Foundation for Medical Practice Education (FMPE) Residency Learning Modules [[specific modules will be assigned as new modules are released quarterly](#)]

Other core NP Program textbooks and clinical practice guidelines to prepare for the comprehensive Exam

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted choice.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Web Class taught synchronously and asynchronously

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites)

3.1 Permission Required: **YES, permission is required to audit this course**

- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 838: Nurse Practitioner Role Development II, NURS 841: Nurse Practitioner Clinical Residency II.**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **NURS 842: Nurse Practitioner Role Development III,**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **NONE**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information**

4. List Equivalent Course(s) here:

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent: **NONE for this course.**

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive: **NONE for this course.**

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS			
Course Title:	Nurse Practitioner Role Development III		
Course Code:	NURS 839	Term:	TBD
Course Credits:	3 credit units	Delivery:	Synchronous & asynchronous online

Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	10 weeks with synchronous online seminars (20 hrs) and self-directed learning		
Course Calendar Description:	Building on knowledge from Nurse Practitioner Role Development II, this course supports students to consolidate their professional identity to that of an entry-level nurse practitioner. By the end of the course, students will emerge as adept leaders, advocates, clinicians, educators, and scholars equipped to address the challenges and opportunities in today's complex healthcare landscape.		
Pre Requisites:	NURS 838 NP Role Development II, NURS 841 NP Clinical Residency II		

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is on *Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Participate in and lead initiatives to foster inclusive and culturally competent healthcare. (NP ELCs 2.1, 2.2, 3.2)
2. Effectively disseminate knowledge from your healthcare improvement project to improve health care and system outcomes. (NP ELCs 2.2, 2.3, 5.2)
3. Critically appraise and apply research, experience, and patient considerations to inform NP practice with a variety of client presentations and acuity levels, engaging in scholarly dissemination of knowledge. (NP ELCs 1.0, 5.1, 5.2)
4. Integrate and apply knowledge of advanced care planning, palliative, and end of life care strategies, to support patient and family centered care to clients. (NP ELC 1.6)

5. Demonstrate understanding of ethical, legal, and regulatory considerations in nurse practitioner practice related to end-of-life care, capacity, disclosure of adverse events, employment, conflict of interest and resource allocation. (NP ELCs 1.15, 1.13, Practice Standards)
6. Identify and implement strategies to support transition from student to independent NP. (NP Practice Standards)
7. Demonstrate entry-level NP competencies through successful completion of the program comprehensive examination. (All ELCs)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- Completion of all course evaluation components
- Attendance at all mandatory seminars and/or labs (if applicable)
- Minimum 70% (pass) on essential course components
- Overall final grade of 70% or higher in the course

*An essential component of a course must be passed in order to pass the course. Essential components for USask NP courses have been identified through curriculum mapping and are considered necessary for students to demonstrate attainment of course learning outcomes and/or foundational competencies necessary to progress within the program. All final exams, the comprehensive exam, major assignments, OSCEs and clinical evaluations are essential components. Additional essential components are course specific and identified in the course syllabus.

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

As one of the final courses in your NP program, this course supports consolidation of your professional identity to that of an entry-level nurse practitioner and prepares you for the transition to independent NP practice. Learning activities focus on disseminating knowledge from your capstone project, exploring considerations for NPs providing end-of-life care, examining ethical and legal considerations in NP practice such as disclosure of patient safety incidents, conflict of interest, resource allocation, and employment considerations, leading culturally safe healthcare, evidence-based practice, and launching to practice. By the end of the course, you will emerge as an adept NP leader, advocate, clinician, educator, and scholar equipped to address the challenges and opportunities in today's complex healthcare landscape.

COURSE SCHEDULE

Date & Topic	Learning Activities, Assignments & Evaluation
Module 1 (Week 1-2) SEMINAR 1: Course Introduction, Project	Required Readings/Media:

<p>Dissemination , NP Role Transition</p>	<ul style="list-style-type: none"> • Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Read the following chapters: <ul style="list-style-type: none"> ○ 16. Moving the Proposal to the Completed Project; ○ 18. Moving your Completed Project to Dissemination and Further Scholarship • Review feedback provided on Final NP Capstone Project Report to respond to feedback and develop your dissemination presentation • Davis, L., Colella, C. & Mullins, K. Transition to practice for the new graduate NP: A checklist and guide to understanding next steps. <i>Journal of Nursing Education and Practice</i>, 11(8), https://doi.org/10.5430/jnep.v11n8p88 • Pleshkan, C. & Hussey, L. (2020). Nurse practitioners' experiences with role transition: Supporting the learning curve through preceptorship. <i>Nurse Education in Practice</i>, 42, 102655. https://doi.org/10.1016/j.nepr.2019.102655 <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Attend and Participate in Seminar 1 • Complete Self-Directed reading/media • Begin work on project dissemination presentation
<p>Module 2 (Week 3)</p> <p>SELF-DIRECTED: End-of-Life Care</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2023). Primary care: Art and science of advanced practice nursing (6th edition). Chapter 81 – Primary Care of the Patient with Cancer; Chapter 84 - Palliative and End-of-Life Care • Pallium Canada. https://www.pallium.ca/taking-ownership/. * complete the free, interactive Taking Ownership Module and browse other resources available on this website. The Pallium Palliative Pocketbook and LEAP courses are excellent resources for those wanting to further their knowledge of palliative care. • RxFiles (2021 or 2023). Palliative care: Symptom management considerations. (pp. 214-215 for 13th edition (2021) or pp. 227 - 228 of 14th edition (2023)).

	<ul style="list-style-type: none"> • Wheeler, M. (2016). Primary palliative care for every nurse practitioner. <i>The Journal of Nurse Practitioners</i>, 10(12) • Government of Canada Department of Justice. Canada's new medical assistance in dying (MAID) law. *Review information on this page and Infographic • Canadian Nurses Protective Society. Medical assistance in dying: What every nurse should know. http://cnps.ca/index.php?page=348. • Criminal Code of Canada, R.S.C., 1985, C. C-46. Section 241: Suicide and Medical assistance in dying. Scroll to bottom of the page to beginning of Section 241: Suicide. After reading this section, proceed to next page which continues Section 241 to discuss more details related to medical assistance in dying • Review your jurisdictional and regional resources related to MAID <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed readings/media • Participate in the Canvas Discussion Board: End of Life Care
<p>Module 3 (Week 4)</p> <p>SEMINAR 2: Project Dissemination Seminar</p>	<p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Work-on Project Dissemination Presentation • Participate in Seminar 2: Project Dissemination Seminar
<p>Module 4 (Week 5)</p> <p>SELF-DIRECTED: Ethical, Legal and Practice Considerations in Self-Employed Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Canadian Nurses Association (CNA). (2017). Code of ethics for Registered Nurses • College of Registered Nurses of Saskatchewan (2021). Self-employed practice guideline. *Students from outside of Saskatchewan should review self-employment practice guidelines from the jurisdiction in which they plan to practice, including relevant privacy legislation. • Canadian Nurse Protective Society (CNPS). Review the following articles: <ul style="list-style-type: none"> • InfoLAW: Nurses in independent practice: An overview • Ask a lawyer: Independent practice considerations

	<ul style="list-style-type: none"> • Ask a lawyer: Employer-provided professional liability protection • Ask a lawyer: Nurse practitioner billing. • Ask a lawyer: Ending a NP-client relationship • Collaborative practice: Are nurses employees or self-employed? • CMPA/CNPS joint statement on liability protection for NPs and physicians in collaborative practice <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed reading/media • Participate in the Canvas Discussion Board: Self-Employed Practice
<p>Module 5 (Week 6)</p> <p>SEMINAR 3: Evidence-Based Practice I</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022). <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> • Complete Self-Directed reading/media • Participate in Seminar 3: Evidence-Based Practice I
<p>Module 6 (Week 7)</p> <p>SELF-DIRECTED: Leading Inclusive, Culturally Safe Healthcare</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Graham, H. (2024). CPR RACISM: A guide for health care providers to safely address racism in a health care setting. <i>International Journal of Indigenous Health</i>, 19(1). https://doi.org/10.32799/ijih.v19i1.42574 • Canadian Institute for Health Information. (2021). Measuring Cultural Safety in Health Systems. https://www.cihi.ca/sites/default/files/document/measuring-cultural-safety-in-health-systems-report-en.pdf

	<ul style="list-style-type: none"> Greenwood, M., Lindsay, N., Loewen, D. (2017). Ethical spaces and places: Indigenous cultural safety in British Columbia health care. <i>An International Journal of Indigenous Peoples</i>, 13(3), https://doi.org/10.1177/117718011771441 Health Quality BC. Culturally Safe Engagement: What Matters to Indigenous Patient Partners Companion Guide. kā-wīci-pimohtēmāt Professional Practice Group <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Complete Self-Directed readings/media Participate in the Canvas Discussion Board: Leading Culturally Responsive, Inclusive Healthcare
<p>Module 7 (Week 8)</p> <p>SEMINAR 4: Evidence-Based Practice II</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Complete the assigned Foundation for Medical Practice Education Practice-Based Learning Module(s) [New modules are released each quarter so it is not possible to assign in advance; examples of modules include: Cancer Screening in Adults – Updates and controversies (May 2023), Headaches in Adults (Nov 2022), Leg Edema (Nov 2023), Osteoporosis (Feb 2024), Rashes not to Miss: A Primary Care Approach (Nov. 2022).] <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Complete Self-Directed readings/media Participate in Seminar 4: Evidence-Based Practice II
<p>Module 8 (Weeks 9)</p> <p>SELF-DIRECTED: Study for Comprehensive Exam</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Program textbooks and evidence-based guidelines <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Study for Comprehensive Exam
<p>Module 9 (Week 10)</p> <p>SEMINAR 5: Launching to Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> May, M. (2020). The First Year of NP Practice: A Roller Coaster Ride! Nurse Practitioner Association of Alberta. https://albertanps.com/the-first-year-of-np-practice-a-roller-coaster-ride/

	<ul style="list-style-type: none"> American Association of Nurse Practitioners. Starting your Nurse Practitioner (NP) Career. https://www.aanp.org/student-resources-2/starting-your-np-career <p>Learning Activities & Assignments:</p> <ul style="list-style-type: none"> Participate in Seminar 5: Final Seminar – Launching to Practice Complete Self-Directed reading/media Study
Week 11-12	Comprehensive Exam

INSTRUCTOR INFORMATION:

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Title

Name:

Email:

Office Phone:

Mobile: (urgent matters only)

Office Hours: As posted on Canvas Zoom meetings. Students are encouraged to attend office hours to clarify questions about course materials. If you would prefer a private meeting, please send a Canvas message outlining the reason for the meeting and two days/times you are available to meet.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message

REQUIRED RESOURCES

Required readings and media were carefully selected to address course learning outcomes and are outlined in the Course Schedule [pp x-x]. Readings come from program textbooks, peer-reviewed evidence-based articles, and other reputable sources. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

American Psychological Association (2020). **Publication Manual of the American Psychological Association (7th ed)**. APA.

Bonnel, W. & Smith, K. (2021). Proposal Writing for Clinical Nursing and DNP Projects. Springer Publishing. [NEW textbook]

Staples, E., Pilon, R., Hannon, R. (2020). Canadian Perspectives on Advanced Practice Nursing. Second Edition. Canadian Scholars Press. [Core textbook from NURS xxx: Theory for NP Practice]

Utley, R., Henry, K., Smith, L. (2018). Frameworks for Advanced Nursing Practice and Research. Springer Publishing. [Core textbook from NURS xxx: Theory for NP Practice]

Zwitter, M. (2019). [Medical Ethics for Clinical Practice](#). Springer Publishing. Electronic version available for FREE online through the USask Library.

The Foundation for Medical Practice Education (FMPE) Residency Learning Modules [\[specific modules will be assigned as new modules are released quarterly\]](#)

Other core NP Program textbooks and clinical practice guidelines to prepare for the comprehensive Exam

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crnsc.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crnsc.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crnsc.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crnsc.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

GRADING SCHEME

Evaluation Component	Date	Grade Weight
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Capstone Project Dissemination	Week 4	25%
Discussion Boards	End of Life Care: Week 3 Self-Employed Practice: Week 5 Leading culturally safe, inclusive care: Week 7	15% (5% each)
Seminar Attendance	Week 1, 4, 6, 8, 10	Complete/Incomplete
Comprehensive Exam*	Week 11-12	60%
Total		100%

*Essential components. Passing grade of $\geq 70\%$ required

EVALUATION COMPONENTS

DISCUSSION BOARDS

Value: 15 % of final grade (5% each)

Date: As outlined below

Type: Discussion boards provide opportunity for students to demonstrate, further develop competencies, share ideas with their peers and classmates, and receive feedback to further refine competencies.

Description: The overall intent of discussion boards is to develop and demonstrate NP ELC's and provide a forum for feedback and evaluation. Throughout the course you will participate in two discussion boards as outlined below. Postings are to synthesize, critically analyze and apply relevant literature using APA formatting. Responses should demonstrate critical thinking and contribute new information and/or thoughtful consideration of the topic. Rubric for evaluation of discussion boards can be viewed in Canvas.

Discussion Board 1: End of Life Care

Due Date: Week 3

Description: Applying knowledge from the week 3 readings on end-of-life care, you will demonstrate your competency providing patient-and-family centered, evidence-based end-of-life care that applies ethical, legal and regulatory standards. Describe a clinical case that involved palliative, end-of-life and/or

advanced care planning. Discuss your approach to the case and how you provided patient-and-family centered evidence-based end of life care. Reflect on your personal values, any ethical or moral dilemma's encountered, and how you applied relevant ethical, legal and regulatory considerations to resolve these.

Learning Outcome Addressed: 4

Discussion Board 2: Self-Employed Practice

Due Date: **Week 5**

Description: As an NP, you may work as an employee, or as a self-employed practitioner. In this discussion board, you will explore some of the unique ethical, regulatory, and legal considerations related to being a self-employed practitioner and demonstrate [NP ELC 1.15](#).

Imagine you are considering working as a self-employed NP (i.e. setting up a private practice or contracting). Discuss some of the ethical, regulatory and/or legal considerations related to being a self-employed practitioner in your jurisdiction. Consider factors such as legal and regulatory requirements, billing, patient data handling, conflict of interest, insurance, or other factors that need to be considered.

Learning Outcome Addressed: 5

Discussion Board 3: Leading Culturally Safe, Inclusive Healthcare

Due Date: **Week 7**

Description: After completing week 6 required readings on leading inclusive healthcare, you will reflect on your leadership abilities and the unique opportunity you have to make change in the profession and for the patient to lead culturally safe, inclusive healthcare environments. You are the future activities. Consider how you will do this, identifying barriers to action and how they can be overcome, what leadership skills you will employ, and how you can apply critical social justice approach to challenge neoliberal policies and address issues such as equity vs inequality, health as a human right, attention to racialization and discrimination, and general prioritization of collective rather than individual health.

Learning Outcome Addressed: 1

CAPSTONE PROJECT DISSEMINATION

Value: 25% of final grade

Due Date: **Week 4**

Type: The NP capstone project supports development and evaluation of competencies designing, implementing, and disseminating findings for a clinical project addressing a healthcare issue relevant to

NP practice. In NP Role Development III, you will disseminate the findings from your capstone project to your peers.

Description: As outlined in the Guide to the USask NP Program Capstone Project (see appendix A), you will disseminate knowledge from your capstone project to your peers in a 15 minute presentation during seminar. The presentation should incorporate feedback from the evaluation of your Final Project Report, apply recommended course resources (i.e. Proposal Writing for Clinical Nursing and DNP Projects, Guide to the USask NP Program Capstone Project), and integrate appropriate evidence-based literature. Please see the Guide to the USask NP Program Capstone Project (Appendix A) for further information on requirements of the project proposal.

Learning Outcome Addressed: 2

ATTENDANCE, PARTICIPATION & LEADERSHIP IN SEMINARS

Value: Complete/Incomplete

Due Date: Seminar dates are outlined in the course schedule

Type: Seminars provide opportunity to develop and apply knowledge, with feedback from peers and instructors, forming an important component of NP role development

Description: Regular, punctual attendance and active participation at scheduled seminars is a required course component. Absenteeism may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology (i.e. web-cam, microphone, reliable internet connection) to facilitate participation in online learning activities.

Similar to NP Role Development II, you will be assigned an evidence-based practice seminar and module to be the group leader. During your assigned session you will lead your seminar group in discussion of the assigned FMPE, integrating critical appraisal of research, clinical expertise and knowledge of regulatory/practice considerations, as well as leadership skills in group facilitation. Formative feedback on leadership skills will be provided from group members and instructors using the critical friends protocol to promote ongoing development of leadership and facilitation skills.

1. I like . . . (share one thing you liked about their leadership skills)
2. A possibility to consider might be . . . (share one thing that could be considered to enhance leadership/facilitation skills)

Learning Outcomes Addressed: 1 & 3

COMPREHENSIVE EXAM

Value: 60% of final grade

Date: Week 11-12

Length: 3 hours

Type: The intent of the comprehensive exam is to evaluate student attainment of NP entry-level competencies, practice standards, and program outcomes as well as support preparation for the NP licensing exam.

Description: This closed-book exam consists of 180-200 questions, which may be a mixture of multiple choice, true/false, matching, and/or short answer type questions. Topics covered are comprehensive of the NP program, with increased emphasis on clinician competencies.

Please see Exam Guidelines section of the syllabus for further instruction related to exam guidelines.

Learning Outcome Addressed: 7

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified.

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

EXAM POLICIES, PROCEDURES AND GUIDELINES

The midterm and final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctor's note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.

7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education ([CASN, 2022](#)). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations).

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

STUDENT LEARNING SERVICES

Student Learning Services (SLS) offers assistance to USask undergraduate and graduate students. For information on specific services, please see the SLS website: <https://library.usask.ca/studentlearning/>

STUDENT AND ENROLMENT SERVICES DIVISION

The Student and Enrolment Services Division (SESD) focuses on providing developmental and support services and programs to students and the university community. For more information, see the students' web site <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette: <https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by USask NP Program Faculty and Instructors

APPENDIX A: GUIDE TO THE USASK NP PROGRAM CAPSTONE PROJECT

Updated 2022



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE AND POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 840**
- 2.2 Academic credit units: **3**

2.3 Course Long Title (maximum 100 characters): **Nurse Practitioner Clinical Residency I**

Course Short Title (maximum 30 characters): **NP Clinical I**

2.4 Total Hours: Lecture Seminar Lab Tutorial **Other: 200 clinical hours in 10 weeks**

2.5 Weekly Hours: Lecture Seminar Lab Tutorial Other

2.6 Term in which it will be offered: **T1** T2 T1 or T2 T1 and T2

2.7 Prerequisite: **NURS 836: Transition to Nurse Practitioner Clinical Practice or NURS 875: Transition to Advanced Nursing Practice and NURS 835 Advanced Health Assessment & Diagnostic Reasoning II**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

2.8 Catalogue description (150 words or less): **This clinical course focuses on integration and application of NP clinical competencies in primary care settings. Emphasis is on developing entry-level competencies and standards related to health assessment, diagnosis, management, and the professional NP role.**

2.9 Do you allow this course to be repeated for credit? **NO**

3. **Please list rationale for introducing this course: This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**

4. **Please list the learning objectives for this course:**

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Accurately perform and interpret findings of many focused and comprehensive health assessments with minimal preceptor guidance. (NP ELCs 1.1, 1.3, 1.4, 1.16)
2. Apply evidence-informed diagnostic strategies, integrating patient factors, preferences, and resource considerations, to select and interpret appropriate investigations. (NP ELCs 1.4 and 1.5)
3. Analyze patient data to identify appropriate differential diagnosis, prioritizing critical must-not-miss conditions. (NP ELC 1.5)
4. Describe basic evidence-based therapeutic interventions, explain principles for selecting appropriate management, and apply evidence-based patient education. (NP ELCs 1.6-1.11, and 4.1)
5. Apply fundamental principles of clinical documentation to develop and enhance documentation competence. (NP ELC 1.14)
6. Demonstrate consistent accountability to professionalism expectations of the nurse practitioner role, ability to articulate the NP role and scope of practice and developing time management skills. (NP ELC 1.15 and NP Practice Standards)
7. Apply cultural humility and demonstrate sensitivity to diverse cultural identities, gender identities, sexual orientations, and personal expressions in clinical interactions. (NP ELCs 3.2 and 3.3)

5. **Impact of this course**

Are the programs of other departments or Colleges affected by this course? **NO**

If so, were these departments consulted? (Include correspondence)

Were any other departments asked to review or comment on the proposal?

6. **Other courses or program affected** (please list course titles as well as numbers)

6.1 Courses to be deleted? **NURS 880.3: Practicum I Advanced Nursing Practice in Primary Health Care**

6.2 Courses for which this course will be a prerequisite? **NURS 841: Nurse Practitioner Clinical Residency II**

6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Dates & Topics	Learning Activities, Assignments & Evaluation
<p>Week 1 Orientation Reflective Practice</p>	<p>Required Readings/Media: NP Program Preceptor Manual Clinical Site Orientation Checklist Guide to Typhon's NP Student Tracking System for USask SNPs University of Cambridge Reflective Practice Toolkit https://libguides.cam.ac.uk/reflectivepracticetoolkit The Robert Gillespie Academic Skills Centre. Fundamentals of Reflective Practice (Reflective Writing) Patel, K.M. & Metersky, K. (2022). Reflective practice in nursing: A concept analysis. <i>International Journal of Nursing Knowledge</i>, 33(3), 180-187. doi: 10.1111/2047-3095.12350. Epub 2021 Oct 9. Agnew, T. (2022). Reflective practice 3: making it meaningful and using it in practice. <i>Nursing Times [online]</i>, 118(7). Self-directed research for clinical cases*</p> <p>Assignments: Reflective Practice 1: Learning Plan Clinical Schedule, Hours and Logs</p>
<p>Week 2 Case Presentation 1 Seeking & Receiving Feedback on Clinical Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Algrairgi, A. (2014). Ten tips for receiving feedback effectively in clinical practice. <i>Medical Education Online</i>, 19, doi: 10.3402/meo.v19.25141 • Burgess, A., van Diggele, C., Roberts, C. & Mellis, C. (2020). Feedback in the clinical setting. <i>BMC Medical Education</i>, 20(2), OpenAccess. • Self-directed research for clinical cases • Review the following resources from <i>Transition to NP Clinical Practice Course</i> to support the Case Presentation Assignment: NHS Institute. SBAR - Situation, Background, Assessment, Recommendation – Toolkit. http://www.ihl.org/resources/Pages/Tools/sbartoolkit.aspxLinks to an external site. • SNAPPS: A Six-Step Learner-Centered Approach to Clinical Education (2017). https://paeaonline.org/wp-content/uploads/2017/02/SNAPPS.pdf • How to Present a Patient Case: The SNAPPS Method. University of Calgary. https://www.youtube.com/watch?v=zWavIV7zPFY <p>Assignments Case Presentation 1</p>

	<p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 3 No new content – catch up and work ahead</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 4 Documentation – SOAP Note 1</p>	<p>Required Readings/Media:</p> <p>Bates Guide to Physical Examination and History Taking. Thirteenth Edition. Review the following:</p> <p>Chapter 3. Health History section on Recording your Findings (pp 103-106);</p> <p>Chapter 4. Physical Examination section on Recording your Findings (pp. 132-134);</p> <p>Chapter 5. Clinical Reasoning, Assessment, and Plan sections on Clinical Reasoning: Documentation and Progress Note and Patient Problem List in the EHR (pp. 146-154).</p> <p>Regional Examination Chapters also include example documentation as part of each chapter that may be helpful to review for specific examples of documentation related to each body system. [<i>Review from Transition to NP Clinical Practice</i>]</p> <p>Pearce, et al. (2016). The essential SOAP note for an EHR age. <i>Nurse Practitioner</i>, 41(2), 29-36.</p> <ul style="list-style-type: none"> SOAP note template [<i>Introduced in Transition to NP Clinical Practice</i>] Canadian Nurse Protective Society (CNPS). InfoLAW: Quality documentation: Your best defence. https://cnps.ca/article/infolaw-qualitydocumentation/ Canadian Medical Protective Association (CMPA). (2023). Writing with Care (5-min read). https://www.cmpa-acpm.ca/en/advice-publications/browse-articles/2020/writing-with-care

	<ul style="list-style-type: none"> Review documentation standards, guidelines, policies, and/or procedures for your jurisdiction and clinical agency Self-directed research for clinical cases <p>Assignments:</p> <p>SOAP Note 1</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 5 NP Role as Clinician Clinical Evaluation</p>	<p>Required Readings/Media:</p> <p>Clarke, V., Lehane, E., Mulcahy, H. & Cotter, P. (2021). Nurse Practitioners' implementation of evidence-based practice into routine care: A scoping review, <i>Worldviews in Evidence Based Nursing</i>, 18(3), 180-189, doi: 10.1111/wvn.12510</p> <p>Nordick, C. (2021). Integrating strategies for improving diagnostic reasoning and error reduction. <i>JAAANP</i>, 33(5), 366-372.</p> <p>Baverstock, S. & Hulatt, I. (2020). Developing the mindful nurse practitioner, <i>Mental Health Practice</i>, 27(4), doi: 10.7748/mhp.2020.e1406</p> <p>Taylor, I., Bing-Jonsson, P., Wangensteen, S., Finnbakk, E., Sandvik, L., McCormack, B. & Fagerstorm, L. (2019). The self-assessment of clinical competence and the need for further training: A cross-sectional survey of advanced practice nursing students. <i>Journal of Clinical Nursing</i>, 29(3-4), 545-555. https://doi.org/10.1111/jocn.15095</p> <p>Review articles on reflective practice from week 1 as required</p> <p>Assignments:</p> <p>Reflective Practice 2</p> <p>Clinical Hours and Logs</p> <p>Midterm Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p>
<p>Week 6 Case Presentation 2</p>	<p>Required Readings/Media:</p> <p>Review resources for case presentation from week 2 as required</p> <p>Review feedback on Case Presentation 1</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Case Presentation 2</p> <p>Clinical Hours and Logs</p>

	Seek feedback on developing clinical competencies
Week 7 No new content – catch up and work ahead	Required Readings/Media: Self-directed research for clinical cases Assignments: Clinical Hours and Logs Seek feedback on developing clinical competencies
Week 8 SOAP Note 2	Required Readings/Media: Review resources on SOAP documentation from week 4 Review feedback on SOAP note 1 Self-directed research for clinical cases Assignments: SOAP Note 2 Clinical Hours and Logs Seek feedback on developing clinical competencies
Week 9 No new content	Required Readings/Media: <ul style="list-style-type: none"> Self-directed research for clinical cases Assignments Clinical Hours and Logs Seek feedback on developing clinical competencies
Week 10 Wrap-Up & Evaluation	Required Readings/Media: Review learning plan evaluation description and requirements in the course syllabus Review reflective practice readings/materials from week 1 as required to support completion of your learning plan evaluation and reflection on learning over the term Assignments Reflective Practice 3 Clinical Hours and Logs Final Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online) Submit Clinical Skills List

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE – DISTANCE LEARNING**

- 10-50
 50-90
 90-130
 130+

9. **Student evaluation**

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **PASS/FAIL**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

Component Title	Due Date	Grade
Clinical Logs	Logged daily	Complete/Incomplete
Reflective Practice Assignments	Reflective Practice 1: Due Week 1 Reflective Practice 2: Due Week 5 Reflective Practice 3: Due Week 10	Pass/Fail*
SOAP Note Assignments	SOAP Note 1: Due Week 4 SOAP Note 2: Due Week 8	Pass/Fail
Case Presentation Assignments	Case Presentation 1: Due Week 2 Case Presentation 2: Due Week 6	Pass/Fail
Clinical Competency Evaluation <ul style="list-style-type: none"> • Clinical Evaluation Tool for NP Learners • Clinical Skills List 	Midterm: Week 5 Final: Week 10	Pass/Fail
Professionalism	Ongoing	Pass/Fail

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **YES**

10. **Required text**

Include a bibliography for the course.

Required readings and media for this course are outlined **in the course schedule**. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

There are no new textbooks for this course. It is expected that students will consult resources (i.e. textbooks, clinical practice guidelines, other evidence-based sources) from previous theory courses to support application of this knowledge in the clinical setting. Core NP textbooks and resources most relevant to this clinical course include:

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. **FREE ebook available at:*
<https://openpress.usask.ca/undergradimaging/>

Colyar, M.R. (2020). **Advanced Practice Nursing Procedures (2nd ed).** F.A. Davis.

Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition).** F.A. Davis

Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed).** Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*

Jensen, B., Regier, L.D., Kosar, L. (Eds). (2021). **RxFiles: Drug Comparison Charts (13th edition).** Saskatoon City Hospital. **Available online for FREE through USask library*

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*

Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition.** Elsevier.

Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition.** Elsevier.

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed)**. McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Extended benefits and drug plan. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan> **Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction*

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
- 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted selection.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class

PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRO – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites)

- 3.1 Permission Required:
- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Open only to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 836: Transition to Nurse Practitioner Practice or NURS 875: Transition to Advanced Nursing Practice and NURS835 Advanced Health Assessment & Diagnostic Reasoning II**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **NURS 837: Nurse Practitioner Roles I**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **None**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here:

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent: **None for this course.**

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive: **None for this course.**

***Please note:** SIRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS			
Course Title:	Nurse Practitioner Clinical Residency I		
Course Code:	NURS 840	Term:	TBD
Course Credits:	3 credit units	Delivery:	Clinical Residency
Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	10 weeks to complete 200 clinical hours		
Course Calendar Description:	This clinical course focuses on integration and application of NP clinical competencies in primary care settings. Emphasis is on developing entry-level competencies and standards related to health assessment, diagnosis, management, and the professional NP role.		
Pre or Co Requisite:	NURS 836 Transition to NP Clinical Practice and NURS 835: Advanced Health Assessment & Diagnostic Reasoning II or NURS 875: Transition to Advanced Nursing Practice (Pre); NURS 837: Nurse Practitioner Roles I (Pre/Co)		

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment

to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Accurately perform and interpret findings of many focused and comprehensive health assessments with minimal preceptor guidance. (NP ELCs 1.1, 1.3, 1.4, 1.16)
2. Apply evidence-informed diagnostic strategies, integrating patient factors, preferences, and resource considerations, to select and interpret appropriate investigations. (NP ELCs 1.4 and 1.5)
3. Analyze patient data to identify appropriate differential diagnosis, prioritizing critical must-not-miss conditions. (NP ELC 1.5)
4. Describe basic evidence-based therapeutic interventions, explain principles for selecting appropriate management, and apply evidence-based patient education. (NP ELCs 1.6-1.11, and 4.1)
5. Apply fundamental principles of clinical documentation to develop and enhance documentation competence. (NP ELC 1.14)
6. Demonstrate consistent accountability to professionalism expectations of the nurse practitioner role, ability to articulate the NP role and scope of practice and developing time management skills. (NP ELC 1.15 and NP Practice Standards)
7. Apply cultural humility and demonstrate sensitivity to diverse cultural identities, gender identities, sexual orientations, and personal expressions in clinical interactions. (NP ELCs 3.2 and 3.3)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- This course is graded as Pass or Fail. Consistent with NP program policy, a minimum percentage of 70% required for a Pass.
- All course evaluation components must be completed and Passed to receive credit for this course

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

NP Clinical Residency I is the first clinical course in the University of Saskatchewan NP program, providing hands-on clinical experience where students translate theoretical concepts from their coursework into practice. Under the guidance of experienced practitioners in supervised clinical placements, students engage directly with patients, performing advanced health assessments,

diagnosing medical conditions, identifying first-line management options, and providing health promotion.

Students will perform both focused and comprehensive health assessments, analyzing and interpreting findings to formulate accurate diagnosis. They will hone skills in selecting and interpreting medical investigations to support differentials, with consideration to research evidence, patient preferences and available resources. The introduction to basic therapeutic interventions aids students in selecting appropriate management strategies and delivering patient education grounded in evidence-informed practice. This residency also emphasizes the cultivation of the professional NP role, culturally safe care, enhancing clinical documentation skills, and developing time management skills for advanced practice. Continuous evaluation and self-reflection activities will encourage students to seek feedback and adjust behaviours to support competency development.

COURSE SCHEDULE

Dates & Topics	Learning Activities, Assignments & Evaluation
<p>Week 1 Orientation Reflective Practice</p>	<p>Required Readings/Media: NP Program Preceptor Manual Clinical Site Orientation Checklist Guide to Typhon's NP Student Tracking System for USask SNPs University of Cambridge Reflective Practice Toolkit https://libguides.cam.ac.uk/reflectivepracticetoolkit The Robert Gillespie Academic Skills Centre. Fundamentals of Reflective Practice (Reflective Writing) Patel, K.M. & Metersky, K. (2022). Reflective practice in nursing: A concept analysis. <i>International Journal of Nursing Knowledge</i>, 33(3), 180-187. doi: 10.1111/2047-3095.12350. Epub 2021 Oct 9. Agnew, T. (2022). Reflective practice 3: making it meaningful and using it in practice. <i>Nursing Times [online]</i>, 118(7). Self-directed research for clinical cases*</p> <p>Assignments: Reflective Practice 1: Learning Plan Clinical Schedule, Hours and Logs</p>
<p>Week 2 Case Presentation 1 Seeking & Receiving Feedback on Clinical Practice</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Algiraigri, A. (2014). Ten tips for receiving feedback effectively in clinical practice. <i>Medical Education Online</i>, 19, doi: 10.3402/meo.v19.25141 • Burgess, A., van Diggele, C., Roberts, C. & Mellis, C. (2020). Feedback in the clinical setting. <i>BMC Medical Education</i>, 20(2), OpenAccess.

	<ul style="list-style-type: none"> • Self-directed research for clinical cases • Review the following resources from <i>Transition to NP Clinical Practice Course</i> to support the Case Presentation Assignment: NHS Institute. SBAR - Situation, Background, Assessment, Recommendation – Toolkit. http://www.ihl.org/resources/Pages/Tools/sbartoolkit.aspxLinks to an external site. • SNAPPS: A Six-Step Learner-Centered Approach to Clinical Education (2017). https://paeaonline.org/wp-content/uploads/2017/02/SNAPPS.pdf • How to Present a Patient Case: The SNAPPS Method. University of Calgary. https://www.youtube.com/watch?v=zWavIV7zPFY <p>Assignments</p> <p>Case Presentation 1</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 3</p> <p>No new content – catch up and work ahead</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 4</p> <p>Documentation – SOAP Note 1</p>	<p>Required Readings/Media:</p> <p>Bates Guide to Physical Examination and History Taking. Thirteenth Edition. Review the following:</p> <p>Chapter 3. Health History section on Recording your Findings (pp 103-106);</p> <p>Chapter 4. Physical Examination section on Recording your Findings (pp. 132-134);</p> <p>Chapter 5. Clinical Reasoning, Assessment, and Plan sections on Clinical Reasoning: Documentation and Progress Note and Patient Problem List in the EHR (pp. 146-154).</p> <p>Regional Examination Chapters also include example documentation as part of each chapter that may be helpful to review for specific</p>

	<p>examples of documentation related to each body system. [<i>Review from Transition to NP Clinical Practice</i>]</p> <p>Pearce, et al. (2016). The essential SOAP note for an EHR age. <i>Nurse Practitioner</i>, 41(2), 29-36.</p> <ul style="list-style-type: none"> • SOAP note template [<i>Introduced in Transition to NP Clinical Practice</i>] • Canadian Nurse Protective Society (CNPS). InfoLAW: Quality documentation: Your best defence. https://cnps.ca/article/infolaw-qualitydocumentation/ • Canadian Medical Protective Association (CMPA). (2023). Writing with Care (5-min read). https://www.cmpa-acpm.ca/en/advice-publications/browse-articles/2020/writing-with-care • Review documentation standards, guidelines, policies, and/or procedures for your jurisdiction and clinical agency • Self-directed research for clinical cases <p>Assignments:</p> <p>SOAP Note 1</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 5 NP Role as Clinician Clinical Evaluation</p>	<p>Required Readings/Media:</p> <p>Clarke, V., Lehane, E., Mulcahy, H. & Cotter, P. (2021). Nurse Practitioners' implementation of evidence-based practice into routine care: A scoping review, <i>Worldviews in Evidence Based Nursing</i>, 18(3), 180-189, doi: 10.1111/wvn.12510</p> <p>Nordick, C. (2021). Integrating strategies for improving diagnostic reasoning and error reduction. <i>JAANP</i>, 33(5), 366-372.</p> <p>Baverstock, S. & Hulatt, I. (2020). Developing the mindful nurse practitioner, <i>Mental Health Practice</i>, 27(4), doi: 10.7748/mhp.2020.e1406</p> <p>Taylor, I., Bing-Jonsson, P., Wangensteen, S., Finnbakk, E., Sandvik, L., McCormack, B. & Fagerstorm, L. (2019). The self-assessment of clinical competence and the need for further training: A cross-sectional survey of advanced practice nursing students. <i>Journal of Clinical Nursing</i>, 29(3-4), 545-555. https://doi.org/10.1111/jocn.15095</p> <p>Review articles on reflective practice from week 1 as required</p>

	<p>Assignments:</p> <p>Reflective Practice 2</p> <p>Clinical Hours and Logs</p> <p>Midterm Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p>
<p>Week 6</p> <p>Case Presentation 2</p>	<p>Required Readings/Media:</p> <p>Review resources for case presentation from week 2 as required</p> <p>Review feedback on Case Presentation 1</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Case Presentation 2</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 7</p> <p>No new content – catch up and work ahead</p>	<p>Required Readings/Media:</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 8</p> <p>SOAP Note 2</p>	<p>Required Readings/Media:</p> <p>Review resources on SOAP documentation from week 4</p> <p>Review feedback on SOAP note 1</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>SOAP Note 2</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 9</p> <p>No new content</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 10</p> <p>Wrap-Up & Evaluation</p>	<p>Required Readings/Media:</p>

	<p>Review learning plan evaluation description and requirements in the course syllabus</p> <p>Review reflective practice readings/materials from week 1 as required to support completion of your learning plan evaluation and reflection on learning over the term</p> <p>Assignments</p> <p>Reflective Practice 3</p> <p>Clinical Hours and Logs</p> <p>Final Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p> <p>Submit Clinical Skills List</p>
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*Students are responsible for self-directed study/research related to cases seen in clinical. Such research will vary based on individual student learning needs and clinical presentations seen. NP program textbooks and evidence-based guidelines/resources will support student self-directed study.

INSTRUCTOR INFORMATION:

<p><u>Clinical Coordinator</u></p> <p>Name :</p> <p>Ph:</p>	<ul style="list-style-type: none"> • Responsible for oversight of course • Supports NPCFs, preceptors and students, meeting with them as necessary to address clinical concerns. • In collaboration with the NPCF determines if students meet requirements to pass the course
<p><u>Nurse Practitioner Clinical Facilitator (NPCF)</u></p> <p>Your NPCF will send you a welcome message with their preferred contact information</p>	<p>Each student is assigned a NPCF who is responsible for monitoring and evaluating student attainment of course learning outcomes. The NPCF:</p> <ul style="list-style-type: none"> • Contacts preceptors a minimum of three times over the course of the clinical placement (beginning, midterm and final) by phone, email or videoconference to review clinical expectations, discuss the clinical experience, receive feedback on student performance and address any questions or concerns • Provides support to preceptors and students, meeting with them as necessary to address concerns • Grades clinical assignments • Completes a summary of student competency evaluation at midterm and final, summarizing student progress towards meeting course learning outcomes and NP ELCs • In collaboration with the Clinical Coordinator determines if students meet requirements to pass the course • If requested, provides the preceptor with feedback on their performance. <p>NOTE: Students should contact their NPCF for all clinical related concerns. The NPCF will collaborate with the clinical coordinator as required.</p>

Office Hours: As posted on Canvas.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message.

REQUIRED RESOURCES

Required readings and media for this course are outlined **in the course schedule**. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

There are no new textbooks for this course. It is expected that students will consult resources (i.e. textbooks, clinical practice guidelines, other evidence-based sources) from previous theory courses to support application of this knowledge in the clinical setting. Core NP textbooks and resources most relevant to this clinical course include:

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. **FREE ebook available at:*
<https://openpress.usask.ca/undergradimaging/>

Colyar, M.R. (2020). **Advanced Practice Nursing Procedures (2nd ed).** F.A. Davis.

Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition).** F.A. Davis

Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed).** Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*

Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*

Jensen, B., Regier, L.D., Kosar, L. (Eds). (2021). **RxFiles: Drug Comparison Charts (13th edition).** Saskatoon City Hospital. **Available online for FREE through USask library*

Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education.

**eBook available for FREE through USask library AccessMedicine database*

Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition.** Elsevier.

Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition.** Elsevier.

Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed).** McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Extended benefits and drug plan. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health->

[coverage/extended-benefits-and-drug-plan](#) *Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free to access through the University of Saskatchewan Library.

GRADING SCHEME		
Component Title	Due Date	Grade
Clinical Logs	Logged daily	Complete/Incomplete
Reflective Practice Assignments	Reflective Practice 1: Due Week 1 Reflective Practice 2: Due Week 5 Reflective Practice 3: Due Week 10	Pass/Fail*
SOAP Note Assignments	SOAP Note 1: Due Week 4 SOAP Note 2: Due Week 8	Pass/Fail
Case Presentation Assignments	Case Presentation 1: Due Week 2 Case Presentation 2: Due Week 6	Pass/Fail
Clinical Competency Evaluation <ul style="list-style-type: none"> • Clinical Evaluation Tool for NP Learners • Clinical Skills List 	Midterm: Week 5 Final: Week 10	Pass/Fail
Professionalism	Ongoing	Pass/Fail

* Passing grade equivalent to $\geq 70\%$

EVALUATION COMPONENTS

The following components are mandatory for meeting the clinical practicum requirements of this course:

CLINICAL TRACKING SYSTEM

Value: Complete/Incomplete

Dates: **Clinical Schedule** –due by the end of your third clinical shift

Clinical Hours - ≥ 240 hrs recorded in the clinical log system by [insert date]

Clinical Logs - entered within 72 hours of a clinical shift, preferably daily

Type: Clinical hours provide opportunity for student to apply and be evaluated on developing NP entry-level competencies, with a focus on those related to the [NP role as clinician](#) (1.0). To support attainment of clinical hour requirements and open communication with your NPCF, you will arrange your clinical schedule and evaluation dates with your NPCF at the beginning of term. Keeping logs of your daily clinical activities provides supporting evidence of how you are spending your clinical hours including types of patients seen, diagnosis, procedures, and prescriptions.

Description: Under the supervision of a preceptor, you will apply NP entry-level competencies to provide care to populations across the age spectrum, with acute, chronic and stable health conditions, demonstrating development towards entry-level nurse practitioner competencies (ELCs). You are required to complete a minimum of **240** clinical hours recorded in the clinical logging system (Typhon) by the end of the course.

Clinical Schedule. In keeping with professional standards and courtesy, prior to the start of clinical you are required to contact your preceptor(s) to arrange a clinical schedule. By the end of your third clinical day, you will have entered this schedule into the clinical logging system as well as arranged dates for your midterm and final clinical evaluations with your NPCF and preceptor. You should also communicate to your typical workday hours (e.g. 830am – 5pm, with 30 minute lunch break) to your NPCF. Please book at least 2-extra clinical shifts to account for potential missed days (e.g., due to preceptor illness, poor weather, personal illness). Update your NPCF of any changes to your schedule in a timely manner, and ensure these same updates are made in the clinical scheduler.

Clinical Logs. You will keep logs of your daily clinical encounters and activities using the clinical logging system. Clinical logs are used by instructors to help assess clinical learning experiences such as the types and numbers of patients seen, student level of independence in providing care, time spent with patients, diagnosis seen, and prescriptions written. In keeping with standards of professional documentation and to ensure accuracy, clinical logs must be entered **within 72 hours (3 days)** of the clinical encounter, preferably daily. If you are unable to meet this deadline, you are required to contact your NPCF to discuss if accommodations can be made. Failure to enter clinical logs in a timely manner may result in inability to include late clinical log entries towards clinical hours.

Please refer to the Student Guide for Clinical Logs (posted on Canvas) for a detailed overview of logging your clinical hours.

REFLECTIVE PRACTICE

Value: Pass/Fail (Pass is $\geq 70\%$ on overall average of reflective practice assignments)

Due Dates: **As outlined below**

Type: Reflective practice is a core component of continuing professional development for registered nurses and nurse practitioners. Reflective practice activities in this course will support you to further develop NP ELCs and demonstrate attainment of course learning outcomes.

Length: Each reflective practice should be approximately 500 words

Description: You will complete 3 reflective practice activities as part of the course. Grading of reflective practice assignments is guided by the [CGPS literal descriptors](#) with a minimum 70% (pass) required for a "pass".

Reflective Practice 1: Learning Plan

Due: Week 1

At the beginning of the course, you will review and reflect on course learning outcomes, NP ELCs, practice standards and your personal learning needs to develop an individualized learning plan for the course. Your learning plan will not address every course learning outcome and/or ELC but should focus on two areas of particular learning need.

As part of this reflective practice assignment, consider what you already know, what you would like to build on, and strategies for getting there. Include a specific learning plan with two SMART learning objectives, how these learning objectives link to course learning outcomes and NP ELCs, how you will demonstrate achievement of the learning outcomes (evidence), and strategies and/or resources you will use to achieve the objective. An example learning plan is provided below.

Criteria	Example
SMART* Learning Objectives * Specific, Measurable, Achievable, Realistic and Time Limited	<i>By the end of my practicum on Nov. 15, I will demonstrate my ability to independently perform well baby/child visits for children 5 years of age and under and interpret findings of the health assessment as normal or abnormal.</i>
Course Learning Outcome that is related to the SMART objective	Learning outcome 1. Accurately complete and interpret findings of many focused and comprehensive health assessments with minimal preceptor guidance
Targeted NP ELC that is related to the SMART objective. ELC needs to be from the jurisdiction you are practising in.	1.1 – Establish the reasons for client encounter to determine the nature of services required 1.3 – Use critical inquiry to analyze and synthesize information from multiple sources to identify client needs and inform assessment and diagnosis 1.4 – conduct an assessment relevant to the client’s presentation to inform diagnostic decisions 1.5 – Integrate critical inquiry and diagnostic reasoning to formulate differential diagnosis and final diagnosis
Rational for selection of learning goal/focus	<i>Pediatric health assessment is not something I have encountered in my RN practice, and a learning need. I am particularly uncomfortable and would like to enhance competency assessing children 5 and under. My preceptor has identified this clinical placement will provide good opportunity for well baby/child assessment, and therefore I would like to capitalize on this opportunity to enhance my competency and meet ELCs related to pediatric wellness visits.</i>
Evidence to demonstrate achievement of learning objective. Evidence should be quantifiable (objective). <i>Consider tools you already use in the course such as your Typhon logs, clinical evaluation forms, clinical skills list as well as other evidence</i>	<ul style="list-style-type: none"> <i>Typhon logs show I have seen 10 (or more) patient 5 and under for well baby/child visits (ICD-10 code Z00-129, Z00.12, and Z00.11). Rational – assessment skills will improve with repeated opportunity for feedback and application</i> <i>Typhon logs show my increasing responsibility of care for children 5 years and under presenting for well child/baby visits. Rational – increasing independence shows I am gaining increased skill and requiring less preceptor support to accurately complete visits</i>

<i>to evaluate achievement of objectives.</i>	<ul style="list-style-type: none"> • <i>Preceptor provides verbal feedback on ability to accurately and independently perform well baby/child visits</i> • <i>Preceptor provides written feedback on my ability to accurately and independently perform well baby/child visits on my final clinical performance evaluation</i> • <i>My clinical documentation reflects ability to accurately perform (document) well baby/child visits and interpret findings as normal or abnormal</i>
Resources & Strategies	<ul style="list-style-type: none"> • <i>Let preceptor and front desk staff know I would like to see children 5 and under for well baby/child visits</i> • <i>Review Baby Rourke, Bates Guide to History Taking and Physical Exam (pediatrics chapter), and Bates Visual Guide to Physical Exam (Pediatric Assessment videos)</i> • <i>Document well baby/child assessments in the EMR and seek feedback from preceptor on documentation to further refine skills</i> • <i>Have preceptor observe pediatric health assessments and provide feedback; incorporate feedback into subsequent visits</i>

The above is provided as an example. Your learning plan must be original or risk not meeting academic requirements.

The learning plan will be used to help guide clinical learning and considered as part of your clinical competency evaluation. NPCFs will review and provide feedback you on their learning plan through Canvas assignments. Revisions and resubmissions may be requested at the NPCFs discretion.

Learning Outcome(s) Addressed: Targeted outcomes will depend on student personally identified learning needs

Reflective Practice 2: NP Clinician Role Development

Due: Week 5

Description: Reflect on your developing role as an NP Clinician. How do you demonstrate accountability to professionalism expectations for NPs in your jurisdiction? How do you describe the NP role and scope to other team members? To patients? Is this communication effective? Do you feel you understand NP scope of practice? How do you apply cultural humility and demonstrate sensitivity to diverse cultural identities, gender identities, sexual orientations, and personal expressions in clinical interactions?

Learning Outcome Addressed: 6 & 7

Reflective Practice 4: Evaluation of Learning

Due: Week 10

Description: At the end of the practicum experience, you will review and reflect on how you have met course learning outcomes, NP ELCs, and your personal learning plan (established in Reflective Practice 1). You will also consider your ongoing learning needs, and plans for addressing these in future clinical courses. You are encouraged to reflect on your clinical evaluation, [NP entry-level competencies](#), [Nurse Practitioner Practice Standards](#), and [clinical skills list](#) to identify future learning needs.

Course Learning Outcome(s) Addressed: All/Any

Please note: All reflective practice activities will be considered as part of evaluating clinical competencies. NPCFs will review and provide feedback to students on their reflective practice assignments through Canvas assignments. Revisions and resubmissions may be requested at the NPCFs discretion. Grading of is guided by the [CGPS literal descriptors](#) with a minimum 70% (pass) required for a “pass” on each assignment.

CASE PRESENTATION ASSIGNMENTS

Value: Pass/Fail (Pass is $\geq 70\%$)

Due Dates: Case presentation 1 – Week 2 (by midnight SK time)
 Case presentation 2 – Week 6 (by midnight SK time)

Length: 5 minutes

Type: This assignment provides opportunity to evaluate competencies in health assessment, diagnostic reasoning, and case presentation.

Description: You will record and submit a case presentation of a patient encounter. The case presentation will include:

- Patient information – relevant background information such as demographics, reason for encounter, past medical history, etc. (do not include actual patient name for confidentiality)
- Case presentation – assessment findings, including HPI, ROS, PMHx, relevant family and social Hx, physical exam, available diagnostic investigations and highlighting pertinent positives & negatives
- Differentials – minimum of three, starting with most likely and including rational for each
- Suggested Plan – considering diagnostic investigations, pharmacotherapy and non-pharmacotherapy, including rational
- What you need from your preceptor to inform the plan/next steps

Case Presentations will be graded by your NPCF using a set marking rubric based on the [College of Graduate and Postdoctoral Studies Literal Descriptors](#). Individual feedback will be provided to each student to promote ongoing development of documentation skills.

Students unsuccessful in passing one of the case presentations, may be provided remediation. Students unsuccessful in passing both case presentations, will not be provided the option of further remediation. Remediation will include submission of a new assignment that responds to feedback and areas of competency deficiency. If the remediation assignment meets competency requirements, the student will receive a passing grade for this assignment; if it does not meet competency requirements (i.e. failure), a failure will be assigned as the grade for this assignment.

Learning Outcome(s) Addressed: 1-4, and 6

SOAP NOTE ASSIGNMENTS

Value: Pass/Fail (Pass is $\geq 70\%$)

Due Dates: SOAP Note 1 – Week 4 (by midnight SK time)

SOAP Note 2 – Week 8 (by midnight SK time)

Length: Maximum 750 words (excluding reference list)

Type: This assignment provides opportunity to evaluate competencies in health assessment, diagnostic reasoning, and documentation.

Description: You will write two focused SOAP notes that will be evaluated by your NPCF. One SOAP note will be for a client presenting with a **dermatological concern** (i.e. a patient presenting with “rash”). The other SOAP will be for a patient presenting with **an episodic illness or injury** (i.e. a patient presenting with upper respiratory tract symptoms, musculoskeletal injury, dysuria, or shortness of breath). Cases should clearly demonstrate your developing diagnostic reasoning skills. Patients presenting for medication renewals, chronic diseases, procedures, or other reasons for which the final diagnosis is generally known from the onset of the encounter are not appropriate for this assignment.

Please note the SOAP note template is for a comprehensive health visit. For this assignment you are required to write a focused SOAP note, demonstrating your ability to select relevant assessments to rule in/out differentials and your diagnostic reasoning.

SOAP note assignment submissions should reflect documentation used within the clinical setting, using short-hand format and medically accepted abbreviations as appropriate. You will also need to provide relevant background information (i.e. demographics, past-medical history, risk factors), both medical and nursing diagnosis, listing the most likely diagnosis first, and provide rationale with supporting evidence for management decisions as part of your SOAP note submissions. Including nursing diagnosis will help you to consider the nursing perspective and how this intersects with “medical diagnosis” as an important part of providing holistic care. If you did not agree with selected treatment/management, include an explanation and support of why you did not agree and what you would do differently.

SOAP notes will be graded by your NPCF using a set marking rubric posted in Canvas based on the [College of Graduate and Postdoctoral Studies Literal Descriptors](#). Individual written feedback will be provided to each student to promote ongoing development of documentation skills.

Students unsuccessful in passing one of the SOAP Notes, may be provided remediation. Students unsuccessful in passing both SOAP notes, will not be provided the option of further remediation. Remediation will include submission of a new assignment that responds to feedback and areas of competency deficiency. If the remediation assignment meets competency requirements, the student will receive a passing grade for this assignment; if it does not meet competency requirements (i.e. failure), a failure will be assigned as the grade for this assignment.

Learning Outcome(s) Addressed: 1-6

CLINICAL COMPETENCY EVALUATION

Value: Pass/Fail

Dates: Midterm (~ 120 clinical hours) and Final (~240 clinical hours)

Type: Evaluation of clinical competency performance provides evidence of student progression towards meeting NP ELCs, practice standards and course learning outcomes.

Description: Evaluation of clinical competencies will be done formally using the NP Residency II - Clinical Evaluation tool for NP Learners (see appendix A), supplemented through student clinical assignments, clinical skills list, clinical logs, and communication between students, faculty and preceptors to provide robust evaluation of clinical expectations through multiple modes. Preceptors and students will complete a formal evaluation at midterm and final, and students should regularly review clinical progress with their preceptor, obtaining feedback on developing competencies and making plans for addressing ongoing learning needs throughout the term. At a minimum, each student will initiate a review of clinical progress with their preceptor as outlined below:

1. Beginning of Practicum	Establish clear understanding of clinical expectations
2. ~40-60 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
3. Midterm (~120 hours)	Formal written evaluation in Typhon and joint phone call between preceptor, student & NPCF to review; NPCF summary of clinical learning and competency development
4. ~160-180 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
5. Final (minimum 240 hours)	Formal written evaluation in Typhon and joint phone call with preceptor, student & NPCF to review; NPCF summary of clinical learning and competency development

A joint phone call or video conference between yourself (the learner), your preceptor and NPCF will be done at midterm and final to review the evaluation and progress towards meeting clinical expectations. You will set up the dates for the midterm and final clinical evaluation meeting with your NPCF and preceptor at the beginning of term when you submit your clinical schedule (**by the end of your 3rd clinical day**).

Prior to the midterm and final evaluation meeting with your preceptor and NPCF, the *Clinical Evaluation Tool for NP Learners – Preceptor and Self-Assessment* needs to be completed for your NPCF to review. It is important these are completed in advance so they can be discussed and clarified during the meeting. During evaluation meetings you will discuss your progress towards meeting clinical expectations, examples of clinical competency development, your learning plan, clinical skills list, identified strengths, areas for improvement, and plans for addressing learning needs to meet course clinical expectations.

If significant discordance is identified in preceptor and learner evaluation of competencies, and/or there is concern a learner will not meet clinical expectations, the NPCF will complete the NP Residency I Clinical Evaluation Tool for NP learners, considering evidence from preceptor and learner evaluations, communications with student and preceptor, clinical assignments, Typhon logs, and other evidence of

clinical competency performance. A copy of the NPCF evaluation will be shared with the learner on Typhon, and a meeting set up to discuss competency development.

If you have more than one clinical site/preceptor, discuss with your NPCF the timing of your midterm and final evaluations.

At the end of the course, download a hard copy of your final preceptor and self-evaluations from Typhon to keep for your own personal records.

Learning Outcome(s) Addressed: 1-8

CLINICAL SKILLS LIST

Value: Complete/Incomplete

Due Date: Within 3 days of completing clinical hours; no later than [insert date]

Type: The clinical skills list includes common procedures and skills performed by NPs and is used to guide competency development of these skills within the clinical setting.

Description: You will use the same clinical skills list for all your clinical courses, adding new skills to it as you gain clinical competence. Please review the clinical skills list with your preceptor regularly (e.g., weekly) to address opportunity to develop these skills. **Your preceptor should sign off for a skill when they feel you are able to perform the skill independently.** You also need to have the Master Signature Sheet at the end of the Skills List signed by each preceptor. The skills list is intended to guide and supplement clinical learning; acting as an adjunct to the clinical evaluation form. Foundational skills (marked with an asterisk *) are considered ELCs and therefore need to be assessed as independent (signed off) by completion of NURS 878.

Within 3 days of completing clinical practicum hours, and no later than [insert date], a scanned copy of the clinical skills list (including the master signature sheet) need to be submitted to Canvas in the appropriate assignment area.

Learning Outcome(s) Addressed: 1-4

PROFESSIONALISM

Value: Pass/Fail

Due Dates: Ongoing

Type: Professionalism is a foundational element of NP competencies, practice standards, and expectations for USask NP students.

Description: As a Registered Nurse (RN) you are accountable to the [RN Practice Standards](#) (CRNS, 2024) and [CNA Code of Ethics](#) (2017). You are expected to consistently display professionalism in interactions with preceptors, clients, peers, instructors, clinical agencies, and the community. This includes respectful communication (written, face-to-face, telephone and/or web-based) as well as other behaviours (e.g., punctuality, appearance, confidentiality, conflict resolution, attitude, time management, accountability, professional boundaries, ethical decision making). **Unprofessional behavior may result in course failure.** Grievous unprofessional conduct may also result in a charge of [academic misconduct](#).

Examples of lapses in professionalism include, but are not limited to:

- Not contacting your preceptor in advance of the course start date to arrange a clinical schedule and discuss clinical expectations;
- Late submission of clinical assignments without prior discussion with your instructor;
- Not notifying the appropriate supervisor (e.g., preceptor, instructor) of an absence from clinical or seminar;
- Failure to adequately prepare for clinical (e.g., you are asked to research/read up on a topic and do not bring appropriate resources to clinical);
- Poor communication with course instructors and/or preceptor regarding clinical scheduling;
- Lack of reliability (e.g., frequent absenteeism or lateness, saying an assessment has been completed when it has not been completed);
- Breach of patient confidentiality;
- Failing to promptly return communications from instructors or preceptors;
- Misrepresenting yourself (e.g., saying you have performed an assessment skill in the past when you have not)
- Engaging in inappropriate and/or offensive communication with colleagues or instructors

When a lapse in professionalism is noted by an instructor, a meeting will be called with the student and course instructor(s) to review the identified concern, providing opportunity for the student to respond to the concern and for instructors to provide feedback on professionalism expectations. The conversation and feedback on expectations moving forward will be documented, and a copy of documentation provided to the student by email. If after this discussion, the instructor evaluates the student would benefit from further learning support, a *Learning Support Plan* will be initiated in alignment with the [NP Program Progression and Remediation Policy](#). The *Learning Support Plan* will outline expectations and supports, as well as consequences of further professionalism concerns, which may include course failure. In cases of significant professionalism concerns in which there is potential for or actual harmful consequences for others, or there is a gross breach of a well-recognized standard of RN practice, NP Program Academic Lead will be consulted to discuss management, which may include immediate removal from the clinical setting and/or course failure.

Learning Outcome(s) Addressed: 6

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified. When naming electronic files for submission, please use the following naming: initial last name_assignment (i.e. JLuimes_ReflectivePractice1).

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

FINAL EXAMINATION SCHEDULING

The final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

FITNESS TO PRACTICE STATEMENT

By arriving to the clinical or lab setting and proceeding to provide patient care, students are acknowledging that they can demonstrate fitness to practice ([CRNS RN Practice Standard 5: Self-Regulation, p. 8](#)). Fitness to practice are "all the qualities and capabilities of an individual relevant to their practice as a nurse, including but not limited to the freedom from any cognitive, physical, psychological or emotional condition and dependence from alcohol or drugs that impairs their ability to practice nursing" ([CNA, 2017b, p.22](#)). If students do not have the necessary physical, mental or emotional capacity to practice safely and competently, they must withdraw from the provision of care after consulting with their instructor or preceptor.

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.

7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

COMPLETION OF WORK & LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

4. Assignments will be graded according to the **College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors**. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
5. Students are required to complete all course components to receive credit for a course.
6. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

WITHDRAWAL DEADLINE

USask withdrawal deadlines can be found on the University website: <https://students.usask.ca/academics/deadlines.php>

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or

may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

ACADEMIC HELP FOR STUDENTS

The University Library offers a range of learning and academic support to assist USask undergrad and graduate students. For information on specific services, please see the Learning page on the Library web site <https://library.usask.ca/support/learning.php>.

Remote learning support information <https://students.usask.ca/study/remote-learning.php>

Remote learning tutorial https://libguides.usask.ca/remote_learning

Study skills materials for online learning <https://libguides.usask.ca/studyskills>

TEACHING, LEARNING AND STUDENT EXPERIENCE

Teaching, Learning and Student Experience (TLSE) provides developmental and support services to students and the university community. For more information, see <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by faculty and instructors in the University of Saskatchewan NP program.

APPENDIX A: NP RESIDENCY I - CLINICAL EVALUATION TOOL FOR NP LEARNERS

The University of Saskatchewan Nurse Practitioner (NP) Program is a competency-based education program that supports learners to develop [NP Entry Level Competencies \(ELCs\)](#) (CRNS, 2023) and [Practice Standards](#) (CRNS, 2024). NP ELCs and Practice Standards related to direct clinical practice are ladderred across three clinical courses, with the expectation that students develop increasing independence and precision in clinical performance as they progress from practicum I to practicum III.

EVALUATION OF CLINICAL COMPETENCY

Learner Self-Assessment: Students are expected to take an active role in their learning by participating in regular self-reflection and assessment of competency development. This includes documenting examples of progress towards ELCs and Practice Standards, reflection on strengths and areas for growth, and identification of learning strategies to address areas for growth.

Feedback (Formative Evaluation): Consistent feedback on strengths and areas for growth is a key component of competency development. Preceptors and learners should regularly discuss progress towards meeting competencies. Learners are expected to consistently seek formative feedback (i.e. every 40 hours or once per week). This formative evaluation (feedback) helps identify and address learning needs in a timely manner, supporting learners to successfully meet clinical expectations.

Summative Evaluation: Preceptors and learners will complete a summative evaluation at midterm (halfway point) and upon completion of clinical hours using the Clinical Evaluation Tool for NP Learners, discussing evaluation with each other and the assigned NP Clinical Facilitator.

Learning Support Plan: If a learner is at risk for not meeting learning outcomes at any point during the clinical, a learning support plan may be implemented to help support learning. Learning support plans will be individualized to learner needs and capacity of clinical placements to support these needs.

Competency Evaluation: Assessors will use the [Entrustability Scale](#) to evaluate the level of supervision required for a learner to safely perform professional NP competencies. With repeated clinical exposure, learners should develop increasing ability to perform competencies with less assistance so that by graduation they can perform all competencies autonomously, at the [Independent & Competent](#) level. Minimum performance expectations for this clinical are highlighted in the [Clinical Expectations](#) and in each competency assessment category. The [USASK NP STUDENT CLINICAL PLACEMENT MANUAL](#) includes supplemental information on clinical evaluation and example performance indicators for each practicum to support evaluation.

ENTRUSTABILITY SCALE

Independent & Competent	<ul style="list-style-type: none"> • “I did not need to provide direct supervision or direction for safe, competent patient care.” • Learner consistently and independently demonstrates competency at the level of a novice NP, including being self-directed in consulting and referring matters outside of their scope of practice
Moderate Guidance Needed	<ul style="list-style-type: none"> • “I needed to prompt.” • Learner requires prompting from time to time to complete competency • You are comfortable leaving learner alone in the room to assess patients - indirect supervision required
Considerable Guidance Needed	<ul style="list-style-type: none"> • “I needed to provide repeated direction.” • Learner requires regular assistance, supervision and/or direction to complete competency • Learner usually requires verbal and/or physical cues to complete competency
Constant Guidance* Needed	<ul style="list-style-type: none"> • “I needed to do.” • Learner lacks knowledge, skill, and/or judgement to perform competency without repeated guidance – direct supervision required • Learner is unprepared to provide competent, safe patient care and/or or does not demonstrate professional standards of practice

***Please contact the NP Instructor promptly if a learner repeatedly demonstrates need for constant guidance or unsafe practice**

OVERVIEW CLINICAL EXPECTATIONS

Practicum I (NURS 880) focuses on application and development of foundational ELCs and Practice Standards related to health assessment, diagnosis, management, and the professional NP role. Clinical expectations by completion of practicum I include:

- **Assessment (Moderate Guidance Needed):** Ability to accurately complete and interpret findings of many focused and comprehensive health assessments with minimal preceptor guidance. Developing ability to select and interpret evidence-based diagnostic investigations with consideration of patient factors, preferences, resources and stewardship.
- **Diagnosis (Moderate Guidance Needed):** Ability to determine appropriate differentials, including must-not-miss diagnosis.
- **Management & Counselling (Considerable to Moderate Guidance Needed):** Developing ability to select and implement evidence-based therapeutic interventions (i.e. select first line pharmacological and non-pharmacological therapies, perform minor procedures with supervision, deliver evidence-informed health promotion, provide therapeutic counselling).
- **Documentation (Moderate Guidance Needed):** Developing competence in documentation (i.e. SOAP notes).

- Professional NP Role & Responsibilities (Moderate Guidance Needed):** Consistent accountability to professionalism expectations of an advanced practice role and ability to articulate NP role and scope of practice. Developing time management skills.

Preceptor:

Clinical Site:

Student:

NPCF:

Person Completing Evaluation:

Date:

of clinical hours at time of evaluation:

Type of Evaluation: Midterm or Final

ASSESSMENT COMPETENCIES	
<ul style="list-style-type: none"> • Establishes reason for client encounter to determine nature of services required, including urgency (NP ELC 1.1) • Obtains informed consent according to legislation and regulatory requirements (NP ELC 1.2) • Analyzes and synthesizes information from multiple sources (e.g., biopsychosocial profile, culture, medical history, medication history, investigations, research, client strengths) to identify client needs and inform assessment and diagnosis (NP ELC 1.3; Practice Standard 2.1) • Conducts assessment relevant to the client’s presentation to inform diagnostic decisions (NP ELC 1.4; Practice Standard 3.1) • Employs evidence-informed virtual care strategies (1.16) 	
<p>Notes & observations related to ASSESSMENT competency development</p> <p style="text-align: center;">Link to Assessment Clinical Expectations and Example Indicators</p>	
<p>Midterm:</p> 	
<p>Final:</p> 	

Evaluation – ASSESSMENT Competencies

Minimum expectation by completion of practicum I (NURS 880): Moderate Guidance Needed

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

DIAGNOSIS COMPETENCIES

- Integrates critical inquiry and diagnostic reasoning to formulate differential diagnosis and final (most likely) diagnosis through (NP ELC 1.5; Practice Standards 3.2, 3.3, 3.4):
 - Correct interpretation of investigations
 - Generating and narrowing appropriate differentials
 - Creating shared understanding of assessment findings, diagnosis, anticipated outcomes and prognosis
 - Determining leading diagnosis based on clinical and diagnostic reasoning

Notes & observations to related to DIAGNOSIS competency development

[Link to Diagnosis Clinical Expectations and Example Indicators](#)

Midterm:

Final:

Evaluation – DIAGNOSIS Competencies

Minimum expectation by completion of practicum I (NURS 880): Moderate Guidance Needed

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

MANAGEMENT COMPETENCIES

- Uses clinical reasoning to create a shared management plan based on diagnoses and the client’s preferences and goals (NP ELC 1.6; Practice Standard 3.5)
- Prescribes and counsels clients on pharmacological and non-pharmacological interventions, across the lifespan (NP ELC 1.7; Practice Standard 3.6).
- Performs invasive and non-invasive interventions as indicated by the management plan (NP ELC 1.8; Practice Standards 3.7, 3.8)
- Evaluates the effectiveness of the management plan to identify required modifications and/or terminations of treatment (NP ELC 1.9; Practice Standard 1.6, 3.13)

Notes & observations related to MANAGEMENT competency development

[Link to Management Clinical Expectations and Example Indicators](#)

Midterm:

Final:

Evaluation – MANAGEMENT Competencies

Minimum expectation by completion of practicum I (NURS 880): Considerable Guidance Needed

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

COUNSELLING COMPETENCIES

- Co-creates a therapeutic counselling relationship that is conducive to optimal health outcomes (NP ELC 1.10)
- Provides counselling interventions as indicated by the management plan (NP ELC 1.11; NP Practice Standard 3.9)
- Applies harm-reduction strategies and evidence-informed practice to support clients with substance use disorder while adhering to federal and provincial/territorial legislation and regulation (NP ELC 1.12; Practice Standard 3.11)
- Develop and provide education to build capacity and enhance knowledge and skills (NP ELC 4.1)
- Evaluate the learning and delivery methods to improve outcomes (NP ELC 4.2)

Notes & observations related to COUNSELLING competency development

[Link to Counselling Clinical Expectations and Example Indicators](#)

Midterm:

Final:

Evaluation – COUNSELLING Competencies

Minimum expectation by completion of practicum I (NURS 880): Considerable Guidance Needed

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

DOCUMENTATION COMPETENCIES

- Conducts record keeping activities according to legislation and jurisdictional regulatory requirements (NP ELCs 1.14; 1.6f; Practice Standards 1.2, 3.7, 3.16). This includes:
 - Appropriately documenting all client encounters and rationale for actions (a)
 - Collecting, disclosing, using and destroying health information according to privacy and confidentiality legislation, regulations and standards (b)
 - Applying relevant security measures to records and documentation ©

Notes and observations related to DOCUMENTATION competency development

[Link to Documentation Clinical Expectations and Example Indicators](#)

Midterm:

Final:

Evaluation – DOCUMENTATION Competencies

Minimum expectation by completion of practicum I (NURS 880): Moderate Guidance Needed

	Constant Guidance Needed	Considerable Guidance Needed	Moderate Guidance Needed	Independent & Competent
Midterm				
Final				

PROFESSIONAL NP ROLE & RESPONSIBILITIES COMPETENCIES

- Articulates awareness of and ability to consistently apply NP Practice Standards (NP Practice Standards 1-4),
- Contributes to a culture of improvement, safety, and excellence (NP ELC 2.2)
- Contributes to a practice environment that is diverse, equitable, and inclusive, providing culturally safe, anti-racist care (NP ELCs 3.2 & 3.3)
- Demonstrates time-management skills essential to an advanced nursing role

Observations related to PROFESSIONAL NP ROLE & RESPONSIBILITIES competency development

[Link to Clinical Expectations and Example Indicators for NP Role & Responsibility](#)

Midterm:				
Final:				
Evaluation – PROFESSIONAL NP ROLE & RESPONSIBILITIES Competencies				
Minimum expectation by completion of practicum I (NURS 880): Moderate Guidance Needed				
	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

Additional Section for ONLY PRECEPTOR to Complete

Please Check to Indicate you have reviewed the following:

MIDTERM	FINAL
<input type="checkbox"/> Learning Plan	<input type="checkbox"/> Learning Plan Evaluation
<input type="checkbox"/> Clinical Skills List	<input type="checkbox"/> Clinical Skills List
<input type="checkbox"/> Learner’s self-assessment	<input type="checkbox"/> Learner’s self-assessment

Additional comments from preceptor related to learner strengths and learning needs:

Additional Section for ONLY LEARNER to Complete:

LEARNING PLAN - Self-Assessment of progress (MIDTERM):

LEARNING PLAN EVALUATION - Self-Evaluation of learning plan outcomes (FINAL):

CLINICAL SKILLS LIST – Progress and Plans to address gaps (MIDTERM & FINAL):

LEARNER REFLECTION on APPLICATION OF COMPETENCIES to different populations, acuity levels, health conditions (i.e. ICD-10 codes), complexity, and/or settings. Consider your Typhon log summaries to identify strengths and opportunities (MIDTERM & FINAL):

Learner identified strengths, learning needs, and plans to address needs (MIDTERM & FINAL):

Additional Section for ONLY NPCF to Complete – The NPCF will only complete a Clinical Evaluation if significant discordance is noted between preceptor and learner evaluation and/or there is concern regarding the learner not meeting clinical expectations. The NPCF will consider multiple sources of data in completing the evaluation including preceptor and student evaluations, communication with the learner and preceptor, clinical assignments, and other evidence of competency development.

Reason for NPCF Clinical Evaluation being completed (Select all that Apply):

- Discrepancy between student and preceptor evaluation**
- Concern of learner not meeting clinical expectations**
- Other (please specify):** Click or tap here to enter text.

Please explain:

Learner strengths identified by NPCF:

Learning needs identified by NPCF:

Based on available evidence, what is the overall level of supervision this learner requires?

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

NPCF Recommendations:

Preceptor Signature & Date:

Learner Signature & Date:

NPCF Signature & Date:

CLINICAL EXPECTATIONS & EXAMPLE INDICATORS FOR PRACTICUM I

ASSESSMENT COMPETENCIES

Clinical Expectations	<ul style="list-style-type: none"> • Ability to accurately complete and interpret findings of many focused and comprehensive health assessments with minimal preceptor guidance. • Developing ability to select and interpret evidence-based diagnostic investigations with consideration of patient factors, preferences, resources, and stewardship.
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Determine the reason for visit and identify concerns requiring more urgent attention • Collect a focused and comprehensive health history appropriate to the presenting concern • Synthesize and interpret findings from history to guide selection of physical exam • Perform and correctly interpret findings of physical exam • Apply relevant assessment tools, evidence-based guidelines and literature to inform assessment • Conduct assessment demonstrating principles of culturally safe care

	<ul style="list-style-type: none"> • Order evidence-based screening and diagnostic investigations • Implement evidence-based virtual care, identifying when virtual care is appropriate and adapting assessment accordingly
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DIAGNOSIS COMPETENCIES

Clinical Expectations	Ability to determine appropriate differential diagnosis, including must-not-miss diagnosis, with minimal preceptor guidance.
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Accurately interpret assessment findings and diagnostic investigations to determine differential diagnosis, including must-not-miss diagnosis, for clients presenting with low-complexity concerns (i.e. straight forward episodic illness, preventative health visits, medication renewals) • Correctly identify leading (most likely) diagnosis for clients presenting with low-complexity concerns • Apply principles of health literacy and therapeutic communication to discuss assessment findings and diagnosis with client, promoting a shared understanding

MANAGEMENT COMPETENCIES

Clinical Expectations	Developing ability to select and implement evidence-based therapeutic interventions (i.e. select first line therapies, perform minor procedures with supervision, deliver evidence-informed health promotion, provide therapeutic counselling) with consideration of patient factors, preferences, resources and stewardship.
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Apply evidence-based health promotion, screening and patient education relevant to the presenting concern • Select evidence-based diagnostic investigations and therapeutic interventions (pharmacological and non-pharmacological) for clients presenting with low-complexity health concerns (i.e. preventative health screening, straight-forward episodic illnesses like URTI, UTI, dermatitis, etc.) • Consider patient factors (i.e. culture, social determinants of health), resources and stewardship in selection of diagnostic investigations and therapeutic interventions

	<ul style="list-style-type: none"> • Apply principles of shared decision making when establishing care plans • Perform invasive and non-invasive procedures under supervision • Implement appropriate monitoring and follow-up based on patient presentation
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COUNSELLING COMPETENCIES

Clinical Expectations	Developing skills in therapeutic counselling (i.e. motivational interviewing, trauma and violence informed care, creating safe spaces, applying principles of harm reduction)
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Apply appropriate communication strategies and cultural safety to establish therapeutic counselling relationship • Provide motivational interviewing, trauma and violence informed care, harm reduction strategies and other counselling approaches with preceptor support • Provide appropriate patient education, considering evidence-informed practice, health literacy, culture, and other factors that influence learning

DOCUMENTATION COMPETENCIES

Clinical Expectations	Developing competence in documentation (e.g., SOAP Notes)
Example Indicator	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Demonstrate independence documenting straight forward patient encounters (i.e. SOAP notes). May require some assistance documenting more complex patient encounters.

PROFESSIONAL NP ROLE & RESPONSIBILITIES COMPETENCIES

Professional NP Role	<p>Consistent accountability to professionalism expectations of an advanced practice role.</p> <p>Developing understanding and application of NP Practice standards</p> <p>Developing time-management skills</p>
Example Indicators	<p>Learner is able to demonstrate:</p> <ul style="list-style-type: none"> • Professional conduct and accountability (i.e. regular punctual attendance, clear professional communication, timely patient follow-up, reliability, etc.) • Ability to articulate and apply NP Practice Standards, Entry-Level Competencies, Scope of Practice and the Canadian Nurses Association Code of Ethics • Awareness and ability to practice in accordance with regulatory body guidelines, federal and provincial legislation, and agency policy • Growth mindset, engaging in self-directed learning and reflective practice • Ability to effectively elicit, incorporate and receive feedback • Ability to clearly articulate the NP role • Provision of safe, ethical, competent care that is in the clients best interest and culturally safe • Beginning ability to prioritizes client concerns appropriately; may require more time to complete and document client care • Proactively seeking out learning opportunities to address learning needs most of the time; may require assistance identifying and addressing learning needs • Beginning ability to organize workload in an effective manner

Updated 2022



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE AND POSTDOCTORAL STUDIES**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 841**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Nurse Practitioner Clinical Residency II**
Course Short Title (maximum 30 characters): **NP Clinical II**
- 2.4 Total Hours: Lecture Seminar Lab Tutorial **Other: 250 clinical hours in 10 weeks**
- 2.5 Weekly Hours: Lecture Seminar Lab Tutorial Other
- 2.6 Term in which it will be offered: T1 T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **NURS 841: Nurse Practitioner Clinical Residency I.**

If there is a prerequisite waiver, who is responsible for signing it? **Not applicable.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

2.8 Catalogue description (150 words or less): **This course focuses on expanding foundational competencies established in residency I to increase independence in advanced health assessment and diagnosis, and further develop competencies in holistic management, interprofessional care, consultation, referral and supporting transition of care.**

2.9 Do you allow this course to be repeated for credit? **NO**

3. **Please list rationale for introducing this course: This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**

4. **Please list the learning objectives for this course:**

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Accurately complete and interpret findings of the majority of focused and comprehensive health assessments with minimal preceptor guidance. (NP ELCs 1.1, 1.3, 1.4, 1.16)
 2. Appropriately select and interpret diagnostic investigations with minimal preceptor guidance while considering patient factors, preferences, resources, and stewardship. (NP ELCs 1.4f, 1.5)
 3. Analyze patient data to determine appropriate differential diagnoses, including leading and critical 'must not miss' conditions, with minimal preceptor guidance. (NP ELC 1.5)
 4. Apply evidence-based, patient-centered therapeutic care plans with increasing independence, incorporating pharmacotherapy, non-pharmacotherapy, procedures, counseling, patient education, monitoring/follow-up and ensuring considerations of available resources and stewardship. (NP ELCs 1.6-1.12, 4.1)
 5. Apply developing interprofessional competencies essential for nurse practitioners, including effective consultation, collaboration, referral processes, communication strategies, leadership, and role clarification. (NP ELCs 1.9f, 1.13b, 2.1)
 6. Demonstrate ability to guide patient in accessing and utilizing community resources to support their healthcare needs. (NP ELC 1.13)
 7. Demonstrate accurate and comprehensive record keeping activities for a variety of client presentations, ensuring compliance with regulatory and legislative standards. (NP ELC 1.14)
 8. Consistently demonstrate accountability to professionalism expectations of a nurse practitioner role, application of NP practice standards, and display satisfactory time management skills. (NP ELC 1.15 and Practice Standard 1)
 9. Identify and integrate client's own understanding of health, well-being, and healing, including traditional healing practices, into the care plan, ensuring the involvement of key persons and resources such as Knowledge keepers, cultural navigators and/or persons who are significant to the patient. (NP ELCs 1.6, 3.2, 3.3)
5. **Impact of this course**
 Are the programs of other departments or Colleges affected by this course? **NO**
 If so, were these departments consulted? (Include correspondence)
 Were any other departments asked to review or comment on the proposal?
6. **Other courses or program affected** (please list course titles as well as numbers)

- 6.1 Courses to be deleted? **NURS 888.3: Practicum II Nursing Therapeutics and Advanced Management.**
- 6.2 Courses for which this course will be a prerequisite? **NURS 842: Nurse Practitioner Clinical Residency III.**
- 6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Dates & Topics	Learning Activities, Assignments & Evaluation
<p>Week 1 Orientation Review of Reflective Practice Interprofessional competencies</p>	<p>Required Readings/Media:</p> <p>NP Program Preceptor Manual</p> <p>Clinical Site Orientation Checklist</p> <p>Guide to Typhon's NP Student Tracking System for USask SNPs</p> <p>Edwards, S. (2017). Reflecting differently. New dimensions: reflection-before-action and reflection-beyond-action. <i>International Practice Development Journal</i>, 7(1). https://doi.org/10.19043/ipdj.71.002</p> <p>Giesbrecht, D. & Mills, S. (2023). Durable skills series post 3: The importance of receiving and giving feedback for effective teamwork. USask Collaborative Practices Blog</p> <p>Canadian Interprofessional Health Collaborative (CIHC). (2010). A National Interprofessional Competency Framework. http://www.cihc-cpis.com/publications1.html</p> <ul style="list-style-type: none"> • Canadian Nurses Association. Interprofessional Collaboration • Review guidelines/standards in your jurisdiction related to interprofessional practice. For example: CRNA Interprofessional Collaboration Guidelines (2023) • Schot, E., Tummers, L., & Noordegraaf, M. (2019). Working on working together. A systematic review on how healthcare professionals contribute to interprofessional collaboration. <i>Journal of Interprofessional Care</i>, 34(3), 332-342. https://doi.org/10.1080/13561820.2019.1636007 • Collaborative Practice Blog: Going further together – explore the informative short articles on this USask site for tips on developing Interprofessional competencies. • CNPS. (2017). Lessons from the courtroom: Collaborative care. <p>Self-directed research for clinical cases*</p>

	<p>Assignments:</p> <p>Reflective Practice 1</p> <p>Clinical Schedule, Hours & Logs</p>
<p>Week 2</p> <p>Quality Consultation (verbal)</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Quality Referral and Consultation online course – Module 1: Effective Referral and Consultation Communication in an Acute Care Setting Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 3</p> <p>Quality Referral (written)</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Quality Referral and Consultation online course – Module 2 – Effective written consultation Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p> <p>Verbal Consultation Assignment</p>
<p>Week 4</p> <p>SOAP Note with Referral Letter Assignment</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> SOAP Note Template <p>Pearce, et al. (2016). The essential SOAP note for an EHR age. <i>Nurse Practitioner</i>, 41(2), 29-36.</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments:</p> <p>SOAP Note with Referral Letter</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 5</p> <p>Midterm Clinical Evaluation</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments:</p>

	<p>Clinical Hours and Logs</p> <p>Midterm Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p>
<p>Week 6 No new content</p>	<p>Required Readings/Media:</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 7 Referral Letter 2</p>	<p>Required Readings/Media:</p> <p>Review resources for quality consultation modules as needed</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Referral Letter 2</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 8 NP Navigator</p>	<p>Required Readings/Media:</p> <p>Carter, N., Valaitis, R., Lam, A., Feather, J., Nicholl, J., & Cleghorn, L. (2018). Navigation delivery models and roles of navigators in primary care: a scoping literature review. <i>BMC Health Service Research</i>, 18(96). doi: 10.1186/s12913-018-2889-0</p> <p>Andermann, A. (2016). Taking action on the social determinants of health in clinical practice: a framework for health professionals. <i>CMAJ</i>, 188(17-18), E474-E483. doi: 10.1503/cmaj.160177</p> <p>Health Leads. (2023). Navigation tips: Helping patients connect with community resources.</p> <p>Gallan, A., McColl-Kennedy, J., Barakshina, T., Figueriredo, B., Go Jefferies, J., Gollnhofer, J., Hibbert, S., Luca, N., Roy, S., Spanjol, J., & Winklhofer, H. (2019). Transforming community well-being through patients' lived experiences. <i>Journal of Business Research</i>, 100, 376-391. https://doi.org/10.1016/j.jbusres.2018.12.029</p> <p>AHRQ. (2024) Health Literacy Universal Precautions Toolkit. Attend to Social Needs: Tool 18.</p> <p>BCCN&M Indigenous Cultural Safety, Cultural Humility, and Anti-Racism –and NSCN Position Statement Cultural Safety and Humility (2022) <i>*while these are jurisdictional documents, the concepts are applicable across jurisdictions</i></p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p>

	<p>Reflective Practice 2</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 9</p> <p>No new content</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 10</p> <p>Wrap-Up & Evaluation</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments</p> <p>Reflective Practice 3</p> <p>Clinical Hours and Logs</p> <p>Final Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p> <p>Submit Clinical Skills List</p>

8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**

And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course: **NOT APPLICABLE – DISTANCE LEARNING**

- 10-50
- 50-90
- 90-130
- 130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **PASS/FAIL**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

Component Title	Due Date	Grade
Clinical Logs	Logged daily	Complete/Incomplete
Reflective Practice Assignments	Reflective Practice 1: Due Week 1 Reflective Practice 2: Due Week 8 Reflective Practice 3: Due Week 10	Pass/Fail*
Verbal Consultation Assignment	Due Week 3	Pass/Fail
SOAP Note with Referral Letter	Due Week 4	Pass/Fail
Referral Letter 2	Due Week 7	Pass/Fail
Clinical Competency Evaluation <ul style="list-style-type: none"> Clinical Evaluation Tool for NP Learners Clinical Skills List 	Midterm: Week 5 Final: Week 10	Pass/Fail
Professionalism	Ongoing	Pass/Fail

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **YES**

10. Required text

Include a bibliography for the course.

Required readings and media for this course are outlined in the course schedule. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

There are no new textbooks for this course. It is expected that students will consult resources (i.e. textbooks, clinical practice guidelines, other evidence-based sources) from previous theory courses to support application of this knowledge in the clinical setting. Core NP textbooks and resources most relevant to this clinical course include:

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. **FREE access through USask library*

- Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals**. University of Saskatchewan Distance Education Unit. *FREE ebook available at: <https://openpress.usask.ca/undergradimaging/>
- Colyar, M.R. (2020). **Advanced Practice Nursing Procedures (2nd ed)**. F.A. Davis.
- Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition)**. F.A. Davis
- Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed)**. Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*
- Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis**. McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*
- Jensen, B., Regier, L.D., Kosar, L. (Eds). (2021). **RxFiles: Drug Comparison Charts (13th edition)**. Saskatoon City Hospital. **Available online for FREE through USask library*
- Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed**. McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*
- Power-Kean, K., Zettel, S., El-Husseini, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition**. Elsevier.
- Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition**. Elsevier.
- Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed)**. McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

- College of Registered Nurses of Saskatchewan (CRNS) Bylaws.** <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>
- CRNS NP Entry-level Competencies (ELC)s** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS NP Practice Standards** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS Nurse Practitioner Practice Guidelines** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Extended benefits and drug plan. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan> **Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction*

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
 - 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>
-

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted selection.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites)

3.1 Permission Required:

- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 842: Nurse Practitioner Clinical Residency I.**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **Not applicable.**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **None.**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here:

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent: **None for this course.**

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive: **None for this course.**

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS			
Course Title:	Nurse Practitioner Clinical Residency II		
Course Code:	NURS 841	Term:	TBD
Course Credits:	3 credit units	Delivery:	Clinical Residency
Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	10 weeks to complete 250 clinical hours		

Course Calendar Description:	This course focuses on expanding foundational competencies established in residency I to increase independence in advanced health assessment and diagnosis, and further develop competencies in holistic management, interprofessional care, consultation, referral and supporting transition of care.
Pre or Co Requisite:	NURS 840 NP Clinical Residency I

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is *on Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Accurately complete and interpret findings of the majority of focused and comprehensive health assessments with minimal preceptor guidance. (NP ELCs 1.1, 1.3, 1.4, 1.16)
2. Appropriately select and interpret diagnostic investigations with minimal preceptor guidance while considering patient factors, preferences, resources, and stewardship. (NP ELCs 1.4f, 1.5)
3. Analyze patient data to determine appropriate differential diagnoses, including leading and critical 'must not miss' conditions, with minimal preceptor guidance. (NP ELC 1.5)
4. Apply evidence-based, patient-centered therapeutic care plans with increasing independence, incorporating pharmacotherapy, non-pharmacotherapy, procedures, counseling, patient education, monitoring/follow-up and ensuring considerations of available resources and stewardship. (NP ELCs 1.6-1.12, 4.1)
5. Apply developing interprofessional competencies essential for nurse practitioners, including effective consultation, collaboration, referral processes, communication strategies, leadership, and role clarification. (NP ELCs 1.9f, 1.13b, 2.1)
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7. Demonstrate accurate and comprehensive record keeping activities for a variety of client presentations, ensuring compliance with regulatory and legislative standards. (NP ELC 1.14)
8. Consistently demonstrate accountability to professionalism expectations of a nurse practitioner role, application of NP practice standards, and display satisfactory time management skills. (NP ELC 1.15 and Practice Standard 1)
9. Identify and integrate client's own understanding of health, well-being, and healing, including traditional healing practices, into the care plan, ensuring the involvement of key persons and resources such as Knowledge keepers, cultural navigators and/or persons who are significant to the patient. (NP ELCs 1.6, 3.2, 3.3)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;
- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at:

<https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- This course is graded as Pass or Fail. Consistent with NP program policy, a minimum percentage of 70% required for a Pass.
- All course evaluation components must be completed and Passed to receive credit for this course

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

NP Clinical Residency II is designed to refine and advance NP clinical competencies with a focus on enhancing independence performing advanced health assessment, establishing appropriate diagnosis and developing comprehensive evidence-informed therapeutic management for populations across the age spectrum. Special consideration is given to developing interprofessional competencies in consultation, referral and communication, as well as the navigator role of NPs, supporting clients to access community resources to meet their health needs. Through immersive, hands-on clinical experiences under the guidance of experienced preceptors, students will work towards mastering the integration of theory and practice in diverse healthcare settings.

COURSE SCHEDULE

Dates & Topics	Learning Activities, Assignments & Evaluation
<p>Week 1 Orientation Review of Reflective Practice Interprofessional competencies</p>	<p>Required Readings/Media: NP Program Preceptor Manual Clinical Site Orientation Checklist Guide to Typhon's NP Student Tracking System for USask SNPs Edwards, S. (2017). Reflecting differently. New dimensions: reflection-before-action and reflection-beyond-action. <i>International Practice Development Journal</i>, 7(1). https://doi.org/10.19043/ipdj.71.002 Giesbrecht, D. & Mills, S. (2023). Durable skills series post 3: The importance of receiving and giving feedback for effective teamwork. USask Collaborative Practices Blog</p>

	<p>Canadian Interprofessional Health Collaborative (CIHC). (2010). A National Interprofessional Competency Framework. http://www.cihc-cpis.com/publications1.html</p> <ul style="list-style-type: none"> • Canadian Nurses Association. Interprofessional Collaboration • Review guidelines/standards in your jurisdiction related to interprofessional practice. For example: CRNA Interprofessional Collaboration Guidelines (2023) • Schot, E., Tummers, L., & Noordegraaf, M. (2019). Working on working together. A systematic review on how healthcare professionals contribute to interprofessional collaboration. <i>Journal of Interprofessional Care</i>, 34(3), 332-342. https://doi.org/10.1080/13561820.2019.1636007 • Collaborative Practice Blog: Going further together – explore the informative short articles on this USask site for tips on developing Interprofessional competencies. • CNPS. (2017). Lessons from the courtroom: Collaborative care. <p>Self-directed research for clinical cases*</p> <p>Assignments:</p> <p>Reflective Practice 1</p> <p>Clinical Schedule, Hours & Logs</p>
<p>Week 2</p> <p>Quality Consultation (verbal)</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Quality Referral and Consultation online course – Module 1: Effective Referral and Consultation Communication in an Acute Care Setting • Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 3</p> <p>Quality Referral (written)</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Quality Referral and Consultation online course – Module 2 – Effective written consultation • Self-directed research for clinical cases

	<p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p> <p>Verbal Consultation Assignment</p>
<p>Week 4</p> <p>SOAP Note with Referral Letter Assignment</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> SOAP Note Template <p>Pearce, et al. (2016). The essential SOAP note for an EHR age. <i>Nurse Practitioner</i>, 41(2), 29-36.</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments:</p> <p>SOAP Note with Referral Letter</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 5</p> <p>Midterm Clinical Evaluation</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Midterm Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p>
<p>Week 6</p> <p>No new content</p>	<p>Required Readings/Media:</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 7</p> <p>Referral Letter 2</p>	<p>Required Readings/Media:</p> <p>Review resources for quality consultation modules as needed</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Referral Letter 2</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 8</p> <p>NP Navigator</p>	<p>Required Readings/Media:</p> <p>Carter, N., Valaitis, R., Lam, A., Feather, J., Nicholl, J., & Cleghorn, L. (2018). Navigation delivery models and roles of navigators in primary</p>

	<p>care: a scoping literature review. <i>BMC Health Service Research</i>, 18(96). doi: 10.1186/s12913-018-2889-0</p> <p>Andermann, A. (2016). Taking action on the social determinants of health in clinical practice: a framework for health professionals. <i>CMAJ</i>, 188(17-18), E474-E483. doi: 10.1503/cmaj.160177</p> <p>Health Leads. (2023). Navigation tips: Helping patients connect with community resources.</p> <p>Gallan, A., McColl-Kennedy, J., Barakshina, T., Figueriredo, B., Go Jefferies, J., Gollnhofer, J., Hibbert, S., Luca, N., Roy, S., Spanjol, J., & Winklhofer, H. (2019). Transforming community well-being through patients' lived experiences. <i>Journal of Business Research</i>, 100, 376-391. https://doi.org/10.1016/j.jbusres.2018.12.029</p> <p>AHRQ. (2024) Health Literacy Universal Precautions Toolkit. Attend to Social Needs: Tool 18.</p> <p>BCCN&M Indigenous Cultural Safety, Cultural Humility, and Anti-Racism –and NSCN Position Statement Cultural Safety and Humility (2022) <i>*while these are jurisdictional documents, the concepts are applicable across jurisdictions</i></p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Reflective Practice 2</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 9</p> <p>No new content</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 10</p> <p>Wrap-Up & Evaluation</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments</p> <p>Reflective Practice 3</p> <p>Clinical Hours and Logs</p> <p>Final Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p> <p>Submit Clinical Skills List</p>

*Students are responsible for self-directed study/research related to cases seen in clinical. Such research will vary based on individual student learning needs and clinical presentations seen. NP program textbooks and evidence-based guidelines/resources will support student self-directed study.

INSTRUCTOR INFORMATION:

<p><u>Clinical Coordinator</u> Name : Ph:</p>	<ul style="list-style-type: none"> • Responsible for oversight of course • Supports NPCFs, preceptors and students, meeting with them as necessary to address clinical concerns. • In collaboration with the NPCF determines if students meet requirements to pass the course
<p><u>Nurse Practitioner Clinical Facilitator (NPCF)</u> Your NPCF will send you a welcome message with their preferred contact information</p>	<p>Each student is assigned a NPCF who is responsible for monitoring and evaluating student attainment of course learning outcomes. The NPCF:</p> <ul style="list-style-type: none"> • Contacts preceptors a minimum of three times over the course of the clinical placement (beginning, midterm and final) by phone, email or videoconference to review clinical expectations, discuss the clinical experience, receive feedback on student performance and address any questions or concerns • Provides support to preceptors and students, meeting with them as necessary to address concerns • Grades clinical assignments • Completes a summary of student competency evaluation at midterm and final, summarizing student progress towards meeting course learning outcomes and NP ELCs • In collaboration with the Clinical Coordinator determines if students meet requirements to pass the course • If requested, provides the preceptor with feedback on their performance. <p>NOTE: Students should contact their NPCF for all clinical related concerns. The NPCF will collaborate with the clinical coordinator as required.</p>

Office Hours: As posted on Canvas.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message.

REQUIRED RESOURCES

Required readings and media for this course are outlined in the course schedule. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory,

political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

There are no new textbooks for this course. It is expected that students will consult resources (i.e. textbooks, clinical practice guidelines, other evidence-based sources) from previous theory courses to support application of this knowledge in the clinical setting. Core NP textbooks and resources most relevant to this clinical course include:

- Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.
- Bates' Visual Guide to Physical Examination.** Wolters Kluwer. **FREE access through USask library*
- Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. **FREE ebook available at:*
<https://openpress.usask.ca/undergradimaging/>
- Colyar, M.R. (2020). **Advanced Practice Nursing Procedures (2nd ed).** F.A. Davis.
- Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition).** F.A. Davis
- Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed).** Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*
- Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*
- Jensen, B., Regier, L.D., Kosar, L. (Eds). (2021). **RxFiles: Drug Comparison Charts (13th edition).** Saskatoon City Hospital. **Available online for FREE through USask library*
- Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*
- Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition.** Elsevier.
- Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition.** Elsevier.
- Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed).** McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

College of Registered Nurses of Saskatchewan (CRNS) Bylaws. <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>

CRNS NP Entry-level Competencies (ELC)s <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS NP Practice Standards <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

CRNS Nurse Practitioner Practice Guidelines <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Extended benefits and drug plan. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan> **Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction*

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Component Title	Due Date	Grade
Clinical Logs	Logged daily	Complete/Incomplete
Reflective Practice Assignments	Reflective Practice 1: Due Week 1 Reflective Practice 2: Due Week 8 Reflective Practice 3: Due Week 10	Pass/Fail*
Verbal Consultation Assignment	Due Week 3	Pass/Fail
SOAP Note with Referral Letter	Due Week 4	Pass/Fail
Referral Letter 2	Due Week 7	Pass/Fail
Clinical Competency Evaluation <ul style="list-style-type: none"> • Clinical Evaluation Tool for NP Learners • Clinical Skills List 	Midterm: Week 5 Final: Week 10	Pass/Fail
Professionalism	Ongoing	Pass/Fail

* Passing grade equivalent to $\geq 70\%$

EVALUATION COMPONENTS

The following components are mandatory for meeting the clinical practicum requirements of this course:

CLINICAL TRACKING SYSTEM

Value: Complete/Incomplete

Dates: **Clinical Schedule** –due by the end of your third clinical shift

Clinical Hours - ≥ 240 hrs recorded in the clinical log system by [insert date]

Clinical Logs - entered within 72 hours of a clinical shift, preferably daily

Type: Clinical hours provide opportunity for student to apply and be evaluated on developing NP entry-level competencies, with a focus on those related to the [NP role as clinician](#) (1.0). To support attainment of clinical hour requirements and open communication with your NPCF, you will arrange your clinical schedule and evaluation dates with your NPCF at the beginning of term. Keeping logs of your daily clinical activities provides supporting evidence of how you are spending your clinical hours including types of patients seen, diagnosis, procedures, and prescriptions.

Description: Under the supervision of a preceptor, you will apply NP entry-level competencies to provide care to populations across the age spectrum, with acute, chronic and stable health conditions, demonstrating development towards entry-level nurse practitioner competencies (ELCs). You are required to complete a minimum of 250 clinical hours recorded in the clinical logging system (Typhon) by the end of the course.

Clinical Schedule. In keeping with professional standards and courtesy, prior to the start of clinical you are required to contact your preceptor(s) to arrange a clinical schedule. By the end of your third clinical

day, you will have entered this schedule into the clinical logging system as well as arranged dates for your midterm and final clinical evaluations with your NPCF and preceptor. You should also communicate to your typical workday hours (e.g. 830am – 5pm, with 30 minute lunch break) to your NPCF. Please book at least 2-extra clinical shifts to account for potential missed days (e.g., due to preceptor illness, poor weather, personal illness). Update your NPCF of any changes to your schedule in a timely manner, and ensure these same updates are made in the clinical scheduler.

Clinical Logs. You will keep logs of your daily clinical encounters and activities using the clinical logging system. Clinical logs are used by instructors to help assess clinical learning experiences such as the types and numbers of patients seen, student level of independence in providing care, time spent with patients, diagnosis seen, and prescriptions written. In keeping with standards of professional documentation and to ensure accuracy, clinical logs must be entered **within 72 hours (3 days)** of the clinical encounter, preferably daily. If you are unable to meet this deadline, you are required to contact your NPCF to discuss if accommodations can be made. Failure to enter clinical logs in a timely manner may result in inability to include late clinical log entries towards clinical hours.

Please refer to the Student Guide for Clinical Logs (posted on Canvas) for a detailed overview of logging your clinical hours.

REFLECTIVE PRACTICE

Value: Pass/Fail (Pass is $\geq 70\%$ on overall average of reflective practice assignments)

Due Dates: **As outlined below**

Type: Reflective practice is a core component of continuing professional development for registered nurses and nurse practitioners. Reflective practice activities in this course will support you to further develop NP ELCs and demonstrate attainment of course learning outcomes.

Length: Each reflective practice should be approximately 500 words

Description: You will complete 3 reflective practice activities as part of the course. Grading of reflective practice assignments is guided by the [CGPS literal descriptors](#) with a minimum 70% (pass) required for a "pass".

Reflective Practice 1: Learning Plan

Due: **Week 1**

At the beginning of the course, you will review and reflect on course learning outcomes, NP ELCs, practice standards and your personal learning needs to develop an individualized learning plan for the course. Your learning plan will not address every course learning outcome and/or ELC but should focus on two areas of particular learning need. **One learning goal must be related to interprofessional competency building. See required readings for week 1 for readings to support reflection and development of NP interprofessional competencies.**

As part of this reflective practice assignment, consider what you already know, what you would like to build on, and strategies for getting there. Include a specific learning plan with two SMART learning objectives, how these learning objectives link to course learning outcomes, NP ELCs, and interprofessional competencies (as applicable), how you will demonstrate achievement of the learning outcomes (evidence), and strategies and/or resources you will use to achieve the objective. An learning plan template and example are provided below.

Criteria	Example
<p>SMART* Learning Objective</p> <p>* Specific, Measurable, Achievable, Realistic and Time Limited</p>	<p><i>By the end of my clinical hours on Mar 15, I will provide evidence-informed diabetes management, including prescribing antihyperglycemic therapy, non-pharmacological interventions, and initiating appropriate monitoring/follow-up for a minimum of 10 adult patients with type 2 diabetes, following the Diabetes Canada guidelines, principles of rational prescribing, and patient-centred care.</i></p>
<p>Course Learning Outcome that is related to the SMART objective</p>	<p>Learning outcome 4. Apply evidence-based, patient-centered therapeutic care plans with increasing independence, incorporating pharmacotherapy, non-pharmacotherapy, procedures, counseling, patient education, monitoring/follow-up and ensuring considerations of available resources and stewardship.</p>
<p>Targeted NP ELC that is related to the SMART objective. ELC needs to be from the jurisdiction you are practising in.</p>	<p>1.6 – use clinical reasoning to create a shared management plan based on diagnosis and the client’s preference and goals</p> <p>1.7 – prescribe and counsel clients on pharmacological and non-pharmacological interventions, across the lifespan</p> <p>1.9 – Evaluate the effectiveness of the management plan to identify required modifications and/or terminations of treatment</p>
<p>Rational for selection of learning goal</p>	<p><i>Critical reflection on NP ELCs, review of my Typhon clinical logs and reflection on my clinical competency evaluation from NP Clinical Residency I identified a learning need related to increasing my knowledge and independence providing evidence-based patient centred therapeutic management for patients with type 2 diabetes. In my first clinical, the majority of the patients I saw were for episodic health visits, and I did not have as much opportunity for chronic disease management visits. This practicum, my preceptor has informed me chronic disease will be a key component of visits. I also recognize awareness of chronic disease is important to my future practice as an NP and attaining entry-level competencies.</i></p>
<p>Evidence to demonstrate achievement of learning objective. Evidence should be quantifiable (objective). Consider tools you already use in the course such as your Typhon logs, clinical evaluation forms, clinical skills list as well as other evidence to evaluate achievement of objectives.</p>	<ul style="list-style-type: none"> • <i>Typhon logs indicate minimum 10 adult patient with type 2 diabetes have been seen at the independent level of responsibility</i> • <i>Keep a clinical log of diabetes management performed, including pharmacological therapy, non-pharmacological theory, and monitoring initiated, date of visit, age of patient, A1C, level of independence/preceptor consultation</i> • <i>Final clinical evaluation includes a statement from preceptor indicating competence providing therapeutic management that follows Diabetes Canada guidelines, principles of rational prescribing and patient centred care.</i>
<p>Resources & Strategies</p>	<ul style="list-style-type: none"> • <i>Diabetes Canada Guidelines http://guidelines.diabetes.ca/</i> • <i>Royal College of Physicians Rational Prescribing: https://www.rcpjournals.org/content/clinmedicine/16/5/459</i> • <i>Complete Interdisciplinary hours with Dietician Diabetic Educator</i>

	<ul style="list-style-type: none"> • <i>Let preceptor and front desk staff know I would like to see patient's with diagnosis of T2DM and to book these in my schedule when possible to see</i>
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The above is provided as an example. Your learning plan must be original or risk not meeting academic requirements.

The learning plan will be used to help guide clinical learning and considered as part of your clinical competency evaluation. NPCFs will review and provide feedback you on their learning plan through Canvas assignments. Revisions and resubmissions may be requested at the NPCFs discretion.

Learning Outcome(s) Addressed: Targeted outcomes will depend on student personally identified learning needs

Reflective Practice 2: NP Navigator

Due: Week 8

Description: This reflective practice exercise provides opportunity to demonstrate and further evaluate developing skills as a NP navigator committed to providing patient-centred, culturally safe care. In your role as a student NP, you will have encountered situations requiring integration of various health services and community resources to provide comprehensive patient care. Learning to navigate these resources effectively, while providing evidence-based patient centred care that keeps the patient's preferences at the forefront, can be challenging, but is crucial to improving health outcomes and patient satisfaction.

Think of a patient case from your clinical that benefited, or in hindsight would have benefited, from community resources to support their healthcare needs. Think of community resources broadly as including both health care services, as well as other services and people impacting health and well-being (i.e. cultural navigators, Knowledge Keepers, employment support, financial aid, etc..). In your reflective practice, briefly describe the case and identify the patients physical, emotional, spiritual/cultural and socioeconomic needs. Reflect on how you addressed these needs (i.e. your management plan) with particular emphasis on how you guided the patient in accessing and utilizing community resources/individuals to support their health needs. What went well? What could be improved? How will continue to address your learning needs in this area?

Learning Outcomes Addressed: 5, 6 & 9

Reflective Practice 3: Evaluation of Learning

Due: Week 10

Description: At the end of the practicum experience, you will review and reflect on how you have met course learning outcomes, NP ELCs, and your personal learning plan (established in Reflective Practice 1). You will also consider your ongoing learning needs, and plans for addressing these in future clinical courses. You are encouraged to reflect on your clinical evaluation, [NP entry-level competencies](#), [Nurse Practitioner Practice Standards](#), and [clinical skills list](#) to identify future learning needs.

Learning Outcome(s) Addressed: All/Any

Please note: All reflective practice activities will be considered as part of evaluating clinical competencies. NPCFs will review and provide feedback to students on their reflective practice assignments through Canvas assignments. Revisions and resubmissions may be requested at the NPCFs

discretion. Grading of is guided by the [CGPS literal descriptors](#) with a minimum 70% (pass) required for a “pass” on each assignment.

VERBAL CONSULTATION ASSIGNMENT

Value: Pass/Fail (Pass is \geq 70%)

Due Dates: **Week 2**

Length: 5 minutes

Type: This assignment provides opportunity to apply knowledge learned in the Quality Referral and Consultation Modules related to verbal consultation with specialists, as well as demonstrate developing competencies in advanced health assessment, diagnosis and management.

Description: You will record and submit an example verbal consultation you would do with another healthcare provider, to seek their advice/guidance on a patient case seen in your clinical setting. The consultation should include key components of a quality consultation, as outlined in the Quality Referral and Consultation Modules.

Presentations will be graded by your NPCF using a set marking rubric based on the [College of Graduate and Postdoctoral Studies Literal Descriptors](#). Individual feedback will be provided to each student to promote ongoing development of consultation skills.

Students unsuccessful in passing this assignment on their first attempt, may be provided remediation and one additional attempt to pass the assignment. Remediation will include submission of a new assignment that responds to feedback and areas of competency deficiency. If the second attempt meets competency requirements, the student will receive a passing grade for this assignment; if it does not meet competency requirements (i.e. failure), a failure will be assigned as the grade for this assignment.

Learning Outcome(s) Addressed: 1-5

SOAP NOTE WITH REFERRAL LETTER ASSIGNMENT

Value: Pass/Fail (Pass is \geq 70%)

Due Dates: **Week 4**

Length: 4 pages (excluding reference list)

Type: This assignment provides opportunity for students to apply and be evaluated on knowledge related to quality referral letter writing as well as demonstrate developing competencies in advanced health assessment, diagnostic reasoning, evidence-informed management and documentation for moderately complex clients.

Description: You will write a focused SOAP note with associated referral letter for a **moderately complex case** that required referral to another provider to optimize assessment and/or management. Moderately complex is defined as a patient with a comorbidity (medical or social determinant) that confounds assessment, diagnosis and/or management or a suspected diagnosis/management outside the scope of novice NP practice. Some examples case that would be considered moderately complex include:

- A patient presenting with symptoms of a UTI, who also has diabetes
- A child presenting with symptoms of a cold, who is unimmunized related to parental vaccine hesitancy.
- A patient presenting with hypertension, who is unable to pay for recommended medication
- An adolescent presenting with suspected immune thrombocytopenic purpura (ITP)

You will write a SOAP note for the case that clearly demonstrates your developing diagnostic reasoning skills and ability to select evidence-informed, patient centred management (make sure you don't know the diagnosis from the onset of the encounter – such as a patient presenting for a medication renewal or uncomplicated chronic disease management – as the diagnostic reasoning process is more challenging to illustrate through a SOAP note).

Please note the SOAP note template provided is for a comprehensive health visit. For this assignment you are required to write a focused SOAP note, demonstrating your ability to select relevant assessments to rule in/out differentials and your diagnostic reasoning.

SOAP note assignment submissions should reflect documentation used within the clinical setting, with short-hand format and medically accepted abbreviations acceptable. However, you will need to provide relevant background information (i.e. demographics, past-medical history, risk factors), both medical and nursing diagnosis, listing the most likely diagnosis first, and provide rationale with supporting evidence for management decisions. Including nursing diagnosis will help you to consider the nursing perspective and how this intersects with "medical diagnosis" as an important part of providing holistic care. If you did not agree with selected treatment/management, include an explanation and support of why you did not agree and what you would do differently.

Referral letters should incorporate principles outlined in the Quality Referral and Consultation modules and required readings for this course. They should be written in standard letter format (not filling in a template).

This assignment will be graded by your NPCF using a set marking rubric based on the [College of Graduate and Postdoctoral Studies Literal Descriptors](#). Individual written feedback will be provided to each student to promote ongoing development of documentation skills.

Students unsuccessful in passing this assignment on their first attempt, may be provided remediation and one additional attempt to pass the assignment. Remediation will include submission of a new assignment that responds to feedback and areas of competency deficiency. If the second attempt meets competency requirements, the student will receive a passing grade for this assignment; if it does not meet competency requirements (i.e. failure), a failure will be assigned as the grade for this assignment.

Course Learning Outcome(s) being Evaluated: 1-4, and 7

REFERRAL LETTER 2 ASSIGNMENT

Value: Pass/Fail (Pass is $\geq 70\%$)

Due Dates: **Week 7**

Length: 2 pages

Type: This assignment provides opportunity for students to continue developing and demonstrating skills in writing a quality referral letter writing, incorporating feedback from the first referral letter assignment to refine skills. You will also demonstrate developing competencies in advanced health assessment, diagnostic reasoning, and evidence-informed management as part of this assignment.

Description: You will write a referral letter for a moderately complex case that required referral to another provider to optimize assessment and/or management. Moderately complex is defined as a patient with a comorbidity (medical or social determinant) that confounds assessment, diagnosis and/or management or a patient with a diagnosis/management outside the scope of novice primary care NP practice. Some examples case that would be considered moderately complex include:

- A patient presenting with persistent concussion symptoms impacting their ability to attend school and carry out daily activities
- A pregnant patient with vaginal bleeding
- A child presenting with symptoms of autism spectrum disorder

Referral letters should incorporate principles outlined in the Quality Referral and Consultation modules and required readings for this course. They should be written in standard letter format (not filling in a template).

This assignment will be graded by your NPCF using a set marking rubric based on the [College of Graduate and Postdoctoral Studies Literal Descriptors](#). Individual written feedback will be provided to each student to promote ongoing development of documentation skills.

Students unsuccessful in passing this assignment on their first attempt, may be provided remediation and one additional attempt to pass the assignment. Remediation will include submission of a new assignment that responds to feedback and areas of competency deficiency. If the second attempt meets competency requirements, the student will receive a passing grade for this assignment; if it does not meet competency requirements (i.e. failure), a failure will be assigned as the grade for this assignment.

Course Learning Outcome(s) being Evaluated: 1-4, and 7

CLINICAL COMPETENCY EVALUATION

Value: Pass/Fail

Dates: Midterm (~ 120 clinical hours) and Final (~240 clinical hours)

Type: Evaluation of clinical competency performance provides evidence of student progression towards meeting NP ELCs, practice standards and course learning outcomes.

Description: Evaluation of clinical competencies will be done formally using the NP Residency II - Clinical Evaluation tool for NP Learners (see appendix A), supplemented through student clinical assignments, clinical skills list, clinical logs, and communication between students, faculty and preceptors to provide robust evaluation of clinical expectations through multiple modes. Preceptors and students will complete a formal evaluation at midterm and final, and students should regularly review clinical progress with their preceptor, obtaining feedback on developing competencies and making plans for addressing ongoing learning needs throughout the term. At a minimum, each student will initiate a review of clinical progress with their preceptor as outlined below:

1. Beginning of Practicum	Establish clear understanding of clinical expectations
2. ~40-60 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
3. Midterm (~120 hours)	Formal written evaluation in Typhon and joint phone call between preceptor, student & NPCF to review; NPCF summary of clinical learning and competency development
4. ~160-180 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
5. Final (minimum 240 hours)	Formal written evaluation in Typhon and joint phone call with preceptor, student & NPCF to review; NPCF summary of clinical learning and competency development

A joint phone call or video conference between yourself (the learner), your preceptor and NPCF will be done at midterm and final to review the evaluation and progress towards meeting clinical expectations. You will set up the dates for the midterm and final clinical evaluation meeting with your NPCF and preceptor at the beginning of term when you submit your clinical schedule (**by the end of your 3rd clinical day**).

Prior to the midterm and final evaluation meeting with your preceptor and NPCF, the *Clinical Evaluation Tool for NP Learners – Preceptor and Self-Assessment* needs to be completed for your NPCF to review. It is important these are completed in advance so they can be discussed and clarified during the meeting. During evaluation meetings you will discuss your progress towards meeting clinical expectations, examples of clinical competency development, your learning plan, clinical skills list, identified strengths, areas for improvement, and plans for addressing learning needs to meet course clinical expectations.

If significant discordance is identified in preceptor and learner evaluation of competencies, and/or there is concern a learner will not meet clinical expectations, the NPCF will complete the NP Residency I Clinical Evaluation Tool for NP learners, considering evidence from preceptor and learner evaluations, communications with student and preceptor, clinical assignments, Typhon logs, and other evidence of clinical competency performance. A copy of the NPCF evaluation will be shared with the learner on Typhon, and a meeting set up to discuss competency development.

If you have more than one clinical site/preceptor, discuss with your NPCF the timing of your midterm and final evaluations.

At the end of the course, download a hard copy of your final preceptor and self-evaluations from Typhon to keep for your own personal records.

Learning Outcome(s) Addressed: 1-9

CLINICAL SKILLS LIST

Value: Complete/Incomplete

Due Date: Within 3 days of completing clinical hours; no later than [insert date]

Type: The clinical skills list includes common procedures and skills performed by NPs and is used to guide competency development of these skills within the clinical setting.

Description: You will use the same clinical skills list for all your clinical courses, adding new skills to it as you gain clinical competence. Please review the clinical skills list with your preceptor regularly (e.g., weekly) to address opportunity to develop these skills. **Your preceptor should sign off for a skill when they feel you are able to perform the skill independently.** You also need to have the Master Signature Sheet at the end of the Skills List signed by each preceptor. The skills list is intended to guide and supplement clinical learning; acting as an adjunct to the clinical evaluation form. Foundational skills (marked with an asterisk *) are considered ELCs and therefore need to be assessed as independent (signed off) by completion of NURS 878.

Within 3 days of completing clinical practicum hours, and no later than [insert date], a scanned copy of the clinical skills list (including the master signature sheet) need to be submitted to Canvas in the appropriate assignment area.

Learning Outcome(s) Addressed: 1-4, and 8

PROFESSIONALISM

Value: Pass/Fail

Due Dates: Ongoing

Type: Professionalism is a foundational element of NP competencies, practice standards, and expectations for USask NP students.

Description: As a Registered Nurse (RN) you are accountable to the [RN Practice Standards](#) (CRNS, 2019) and [CNA Code of Ethics](#) (2017). You are expected to consistently display professionalism in interactions with preceptors, clients, peers, instructors, clinical agencies, and the community. This includes respectful communication (written, face-to-face, telephone and/or web-based) as well as other behaviours (e.g., punctuality, appearance, confidentiality, conflict resolution, attitude, time management, accountability, professional boundaries, ethical decision making). **Unprofessional behavior may result in course failure.** Grievous unprofessional conduct may also result in a charge of [academic misconduct](#).

Examples of lapses in professionalism include, but are not limited to:

- Not contacting your preceptor in advance of the course start date to arrange a clinical schedule and discuss clinical expectations;
- Late submission of clinical assignments without prior discussion with your instructor;
- Not notifying the appropriate supervisor (e.g., preceptor, instructor) of an absence from clinical or seminar;
- Failure to adequately prepare for clinical (e.g., you are asked to research/read up on a topic and do not bring appropriate resources to clinical);

- Poor communication with course instructors and/or preceptor regarding clinical scheduling;
- Lack of reliability (e.g., frequent absenteeism or lateness, saying an assessment has been completed when it has not been completed);
- Breach of patient confidentiality;
- Receiving or responding to feedback inappropriately;
- Failing to promptly return communications from instructors or preceptors;
- Misrepresenting yourself (e.g., saying you have performed an assessment skill in the past when you have not)
- Engaging in inappropriate and/or offensive communication with colleagues or instructors

When a lapse in professionalism is noted by an instructor, a meeting will be called with the student and course instructor(s) to review the identified concern, providing opportunity for the student to respond to the concern and for instructors to provide feedback on professionalism expectations. The conversation and feedback on expectations moving forward will be documented, and a copy of documentation provided to the student by email. If after this discussion, the instructor evaluates the student would benefit from further learning support, a *Learning Support Plan* will be initiated in alignment with the [NP Program Progression and Remediation Policy](#). The *Learning Support Plan* will outline expectations and supports, as well as consequences of further professionalism concerns, which may include course failure. In cases of significant professionalism concerns in which there is potential for or actual harmful consequences for others, or there is a gross breach of a well-recognized standard of RN practice, NP Program Academic Lead will be consulted to discuss management, which may include immediate removal from the clinical setting and/or course failure.

Learning Outcome(s) Addressed: 8

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified. When naming electronic files for submission, please use the following naming: initial last name_assignment (i.e. JLuimes_ReflectivePractice1).

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
2. Students are required to complete all course components to receive credit for a course.

3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

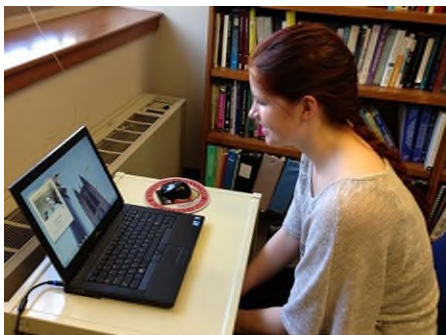
FINAL EXAMINATION SCHEDULING

The final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

FITNESS TO PRACTICE STATEMENT

By arriving to the clinical or lab setting and proceeding to provide patient care, students are acknowledging that they can demonstrate fitness to practice ([CRNS RN Practice Standard 5: Self-Regulation, p. 8](#)). Fitness to practice are "all the qualities and capabilities of an individual relevant to their practice as a nurse, including but not limited to the freedom from any cognitive, physical, psychological or emotional condition and dependence from alcohol or drugs that impairs their ability to practice nursing" ([CNA, 2017b, p.22](#)). If students do not have the necessary physical, mental or emotional capacity to practice safely and competently, they must withdraw from the provision of care after consulting with their instructor or preceptor.

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are

required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examsoft to facilitate any necessary note taking.
7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.

12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

COMPLETION OF WORK & LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

4. Assignments will be graded according to the **College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors**. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
5. Students are required to complete all course components to receive credit for a course.
6. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

WITHDRAWAL DEADLINE

USask withdrawal deadlines can be found on the University website:

<https://students.usask.ca/academics/deadlines.php>

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

ACADEMIC HELP FOR STUDENTS

The University Library offers a range of learning and academic support to assist USask undergrad and graduate students. For information on specific services, please see the Learning page on the Library web site <https://library.usask.ca/support/learning.php>.

Remote learning support information <https://students.usask.ca/study/remote-learning.php>

Remote learning tutorial https://libguides.usask.ca/remot_learning

Study skills materials for online learning <https://libguides.usask.ca/studyskills>

TEACHING, LEARNING AND STUDENT EXPERIENCE

Teaching, Learning and Student Experience (TLSE) provides developmental and support services to students and the university community. For more information, see <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by faculty and instructors in the University of Saskatchewan NP program.

APPENDIX A: NP RESIDENCY II – CLINICAL EVALUATION TOOL FOR NP LEARNERS

The University of Saskatchewan Nurse Practitioner (NP) Program is a competency-based education program that supports learners to develop [NP Entry Level Competencies \(ELCs\)](#) (CRNS, 2023) and [Practice Standards](#) (CRNS, 2024). NP ELCs and Practice Standards related to direct clinical practice are ladderred across three clinical courses, with the expectation that students develop increasing independence and precision in clinical performance as they progress from practicum I to practicum III.

EVALUATION OF CLINICAL COMPETENCY

Learner Self-Assessment: Students are expected to take an active role in their learning by participating in regular self-reflection and assessment of competency development. This includes documenting

examples of progress towards ELCs and Practice Standards, reflection on strengths and areas for growth, and identification of learning strategies to address areas for growth.

Feedback (Formative Evaluation): Consistent feedback on strengths and areas for growth is a key component of competency development. Preceptors and learners should regularly discuss progress towards meeting competencies. Learners are expected to consistently seek formative feedback (i.e. every 40 hours or once per week). This formative evaluation (feedback) helps identify and address learning needs in a timely manner, supporting learners to successfully meet clinical expectations.

Summative Evaluation: Preceptors and learners will complete a summative evaluation at midterm (halfway point) and upon completion of clinical hours using the Clinical Evaluation Tool for NP Learners, discussing evaluation with each other and the assigned NP Clinical Facilitator.

Learning Support Plan: If a learner is at risk for not meeting learning outcomes at any point during the clinical, a learning support plan may be implemented to help support learning. Learning support plans will be individualized to learner needs and capacity of clinical placements to support these needs.

Competency Evaluation: Assessors will use the [Entrustability Scale](#) to evaluate the level of supervision required for a learner to safely perform professional NP competencies. With repeated clinical exposure, learners should develop increasing ability to perform competencies with less assistance so that by graduation they can perform all competencies autonomously, at the [Independent & Competent](#) level. Minimum performance expectations for this clinical are highlighted in the [Clinical Expectations](#) and in each competency assessment category. The [USASK NP STUDENT CLINICAL PLACEMENT MANUAL](#) includes supplemental information on clinical evaluation and example performance indicators for each practicum to support evaluation.

ENTRUSTABILITY SCALE

Independent & Competent	<ul style="list-style-type: none"> • “I did not need to provide direct supervision or direction for safe, competent patient care.” • Learner consistently and independently demonstrates competency at the level of a novice NP, including being self-directed in consulting and referring matters outside of their scope of practice
Moderate Guidance Needed	<ul style="list-style-type: none"> • “I needed to prompt.” • Learner requires prompting from time to time to complete competency • You are comfortable leaving learner alone in the room to assess patients - indirect supervision required

Considerable Guidance Needed	<ul style="list-style-type: none"> • “I needed to provide repeated direction.” • Learner requires regular assistance, supervision and/or direction to complete competency • Learner usually requires verbal and/or physical cues to complete competency
Constant Guidance* Needed	<ul style="list-style-type: none"> • “I needed to do.” • Learner lacks knowledge, skill, and/or judgement to perform competency without repeated guidance – direct supervision required • Learner is unprepared to provide competent, safe patient care and/or or does not demonstrate professional standards of practice

***Please contact the NP Instructor promptly if a learner repeatedly demonstrates need for constant guidance or unsafe practice**

OVERVIEW OF CLINICAL EXPECTATIONS

Practicum II (NURS 888) focuses on expanding foundational competencies established in practicum I to increase independence in advanced health assessment and diagnosis, and further develop competencies in holistic management, interprofessional care, consultation, referral and supporting transition of care. Clinical expectations by completion of practicum II include:

- **Assessment (Independent & Competent):** Ability to accurately complete and interpret findings of the majority of focused and comprehensive health assessments with minimal preceptor guidance. Ability to appropriately select and interpret diagnostic investigations with consideration of patient factors, preferences, resources and stewardship with minimal preceptor guidance.
- **Diagnosis (Moderate Guidance Needed to Independent & Competent):** Ability to determine appropriate differential, leading and must not-miss diagnosis, with minimal preceptor guidance.
- **Management & Counselling (Moderate Guidance Needed):** Increasing independence developing and implementing evidence-based, patient centered therapeutic care plans that consider pharmacotherapy, non-pharmacotherapy, procedures, counselling, monitoring/follow-up, available resources, and stewardship. Developing interprofessional competencies of an advanced practice nurse (i.e. consultation, collaboration, referral, communication, leadership, role clarification).
- **Transition of Care (Moderate Guidance Needed):** Developing competence supporting transition of care (i.e. admission, discharge, connection to community services) to support client continuity, safety and outcomes.

- **Documentation (Independent & Competent):** Accurate and complete documentation for a variety of client presentations.
- **Professional NP Role & Responsibilities (Independent & Competent):** Consistent accountability to professionalism expectations of an advanced practice role and application of NP Practice Standards. Satisfactory time management skills.

Preceptor:

Clinical Site:

Student:

NPCF:

Person Completing Evaluation:

Date:

of clinical hours at time of evaluation:

Type of Evaluation: Midterm or Final

ASSESSMENT COMPETENCIES.	
<ul style="list-style-type: none"> • Establishes reason for client encounter to determine nature of services required, including urgency (1.1) • Obtains informed consent according to legislation and regulatory requirements (1.2) • Analyzes and synthesizes information from multiple sources (e.g., biopsychosocial profile, culture, medical history, medication history, investigations, research, client strengths) to identify client needs and inform assessment and diagnosis (1.3) • Conducts assessment relevant to the client’s presentation to inform diagnostic decisions (1.4) • Employs evidence-informed virtual care strategies (1.16) 	
<p>Notes & observations related to ASSESSMENT competency development</p> <p style="text-align: center;">Link to Clinical Expectations and Example Indicators for Assessment</p>	
<p>Midterm:</p>	

Final:				
Evaluation – ASSESSMENT Competencies				
Minimum expectation by completion of practicum II: Independent & Competent				
	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

DIAGNOSIS COMPETENCIES
<ul style="list-style-type: none"> • Integrates critical inquiry and diagnostic reasoning to formulate differential diagnosis and final (most likely) diagnosis through (1.5): <ul style="list-style-type: none"> ○ Correct interpretation of investigations ○ Generating and narrowing appropriate differentials ○ Creating shared understanding of assessment findings, diagnosis, anticipated outcomes and prognosis ○ Determining leading diagnosis based on clinical and diagnostic reasoning
<p style="text-align: center;">Notes & observations related to DIAGNOSIS competency development</p> <p style="text-align: center;"><u>Link to Clinical Expectations and Example Indicators for Diagnosis</u></p>
Midterm:

Final:

Evaluation – DIAGNOSIS Competencies

Minimum expectation by completion of practicum II: Moderate Guidance Needed

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

MANAGEMENT COMPETENCIES

- Uses clinical reasoning to create a shared management plan based on diagnoses and the client's preferences and goals (1.6)
- Prescribes and counsels clients on pharmacological and non-pharmacological interventions, across the lifespan (1.7).
- Performs invasive and non-invasive interventions as indicated by the management plan (1.8)
- Evaluates the effectiveness of the management plan to identify required modifications and/or terminations of treatment (1.9)

Notes & observations related to MANAGEMENT competency development

[Link to Clinical Expectations and Example Indicators for Management](#)

Midterm:

Final:

Evaluation – MANAGEMENT Competencies

Minimum expectation by completion of practicum II: Moderate Guidance Needed

	Constant Guidance Needed	Considerable Guidance Needed	Moderate Guidance Needed	Independent & Competent
Midterm				
Final				

COUNSELLING COMPETENCIES

- Co-creates a therapeutic counselling relationship that is conducive to optimal health outcomes (1.10)
- Provides counselling interventions as indicated by the management plan (1.11)
- Applies harm-reduction strategies and evidence-informed practice to support clients with substance use disorder while adhering to federal and provincial/territorial legislation and regulation (1.12)
- Develop and provide education to build capacity and enhance knowledge and skills (4.1)
- Evaluate the learning and delivery methods to improve outcomes (4.2)

Notes & observations related to COUNSELLING competency development

[Link to Clinical Expectations and Example Indicators for Counselling](#)

Midterm:

Final:

Evaluation – COUNSELLING Competencies

Minimum expectation by completion of practicum II: Moderate Guidance Needed

	Constant Guidance Needed	Considerable Guidance Needed	Moderate Guidance Needed	Independent & Competent
Midterm				
Final				

TRANSITION of CARE COMPETENCIES

- Leads admission, transition of care, and discharge planning that ensures continuity and safety of client care (1.13). This includes:
 - Collaborating with client to facilitate access to required resources, follow-up and support continuity of care (a)
 - Facilitating transfer of information to support continuity of care (b)
 - Facilitating access to community services and system resources (c)
 - Monitoring and modifying management plan based on client transition needs (d)

Notes and Observations to Support TRANSITION of CARE Competency

[Link to Clinical Expectations and Example Indicators for Transition of Care](#)

Midterm:

Final:

Evaluation – TRANSITION of CARE Competencies

Minimum expectation by completion of practicum II: Moderate Guidance Needed

Evaluation – PROFESSIONAL NP ROLE & RESPONSIBILITIES Competencies				
Minimum expectation by completion of practicum II: Independent & Competent				
	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

Additional Section for PRECEPTOR to Complete

Please Check to Indicate you have reviewed the following:

MIDTERM	FINAL
<input type="checkbox"/> Learning Plan <input type="checkbox"/> Clinical Skills List <input type="checkbox"/> Learner’s self-assessment	<input type="checkbox"/> Learning Plan Evaluation <input type="checkbox"/> Clinical Skills List <input type="checkbox"/> Learner’s self-assessment

Additional comments from preceptor related to learner strengths and learning needs:

Additional Section for LEARNER to Complete:

LEARNING PLAN - Self-Assessment of progress (MIDTERM):

LEARNING PLAN EVALUATION - Self-Evaluation of learning plan outcomes (FINAL):

CLINICAL SKILLS LIST – Progress and Plans to address gaps (MIDTERM & FINAL):

LEARNER REFLECTION on APPLICATION OF COMPETENCIES to different populations, acuity levels, health conditions (i.e. ICD-10 codes), complexity, and/or settings. Consider your Typhon log summaries to identify strengths and opportunities (MIDTERM & FINAL):

Learner identified strengths, learning needs, and plans to address needs (MIDTERM & FINAL):

Additional Section for NPCF to Complete – The NPCF will only complete a Clinical Evaluation if significant discordance is noted between preceptor and learner evaluation and/or there is concern regarding the learner not meeting clinical expectations. The NPCF will consider multiple sources of data in completing the evaluation including preceptor and student evaluations, communication with the learner and preceptor, clinical assignments, and other evidence of competency development.

Reason for NPCF Clinical Evaluation being completed (Select all that Apply):

- Discrepancy between student and preceptor evaluation**
- Concern of learner not meeting clinical expectations**
- Other (please specify):**

Please explain reason for NPCF completing evaluation further here:

Learner strengths identified by NPCF:

Learning needs identified by NPCF:

Based on available evidence, what is the overall level of supervision this learner requires?

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

NPCF Recommendations:

Preceptor Signature & Date:

Learner Signature & Date:

NPCF Signature & Date:

CLINICAL EXPECTATIONS & EXAMPLE INDICATORS

ASSESSMENT COMPETENCIES

ELCs 1.1-1.5, 1.16

Clinical Expectations	<ul style="list-style-type: none"> • Ability to accurately complete and interpret findings of the majority of focused and comprehensive health assessments with minimal preceptor guidance. • Ability to appropriately select and interpret diagnostic investigations with consideration of patient factors, preferences, resources and stewardship with minimal preceptor guidance.
Example Indicators	Learner is able to:

	<ul style="list-style-type: none"> • Determine the reason for visit and prioritize concerns as routine, urgent, or emergent • Support patients to make informed decisions, obtaining informed consent • Collect a focused or comprehensive health history appropriate to the presenting concern(s) • Synthesize and interpret findings from history to guide selection of appropriate physical exam and differential diagnosis • Perform and correctly interpret findings of physical exam • Conduct assessment demonstrating principles of cultural safety, equity, diversity and inclusion • Select, apply and interpret relevant assessment tools (i.e. screening questionnaires, growth charts), evidence-based guidelines and literature to inform assessment • Order and interpret evidence-based screening and diagnostic investigations, applying principles of resource stewardship • Implement evidence-based virtual care, applying relevant regulatory and legal considerations and adapting assessment appropriately for the virtual environment
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DIAGNOSIS COMPETENCIES

ELC 1.5

Clinical Expectations	<ul style="list-style-type: none"> • Ability to determine appropriate differential, leading and must not-miss diagnosis, with minimal preceptor guidance.
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Accurately interpret assessment findings and diagnostic investigations to determine differential diagnosis, including must-not-miss diagnosis, for clients presenting with low and moderate complexity concerns (i.e.

	<p>episodic illness in a patient with relevant comorbidity; patient presenting with 2 health concerns; chronic disease management)</p> <ul style="list-style-type: none"> • Correctly identify leading (most likely) diagnosis for clients presenting with low and moderate complexity concerns • Apply principles of health literacy and therapeutic communication to discuss assessment findings and diagnosis with client, promoting a shared understanding
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MANAGEMENT COMPETENCIES

ELCs 1.2, 1.6, 1.7, 1.9, 2.3, 4.1-4.2, & NP Practice Standards

<p>Clinical Expectations</p>	<ul style="list-style-type: none"> • Increasing independence developing and implementing evidence-based, patient centered therapeutic care plans that consider pharmacotherapy, non-pharmacotherapy, procedures, counselling, monitoring/follow-up, available resources, and stewardship. • Developing interprofessional competencies of an advanced practice nurse (i.e. consultation, collaboration, referral, team functioning, communication, leadership, role clarification)
<p>Clinical Expectations</p>	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Apply, adapt and evaluate evidence-based health promotion, screening and education to individual patient needs • Independently create shared management plans with patients who present with low and moderate complexity health concerns • Demonstrate increasing competence in consultation, collaboration, and referral • Independently select evidence-based, patient centred diagnostic investigations for low and moderately complex patient presentations • Independently select evidence-informed therapeutic interventions (pharmacological and non-pharmacological) with consideration of patient factors, preferences, resources, and stewardship • Demonstrate increasing independence selecting and performing invasive and non-invasive procedures appropriate to the patient presentation and scope of practice

	<ul style="list-style-type: none"> • Write prescriptions that comply with evidence-based practice and regulatory standards • Independently counsel patient on evidence-based pharmacological and non-pharmacological management options • Evaluate the effectiveness of management, adjusting or terminating interventions as required
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COUNSELLING COMPETENCIES

ELCs 1.10-1.12, 3.2, 3.3, 4.1, 4.2

Clinical Expectations	<ul style="list-style-type: none"> • Increasing independence in therapeutic counselling (i.e. motivational interviewing, trauma and violence informed care, creating safe spaces, applying principles of harm reduction)
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Apply advanced communication strategies and cultural safety to establish therapeutic counselling relationship • Deliver motivational interviewing, trauma and violence informed care and other counselling approaches appropriate to patient presentation • Recognize and refer patient's requiring advanced counselling (i.e. psychotherapy) to another appropriate provider after discussion with the patient about their goals and wishes • Implement harm-reduction strategies to support clients with substance use disorder • Provide appropriate patient education, considering evidence-informed practice, health literacy, culture, and other factors that influence learning • Evaluate and adapt patient education to improve outcomes (i.e. applies teach-back techniques, asks patient's to explain their understanding, supports patient to demonstrate technique)

TRANSITION OF CARE COMPETENCIES

ELCs 1.13-1.14

Clinical Expectations	<ul style="list-style-type: none"> • Developing competence in supporting transition of care, including admission and discharge planning to support client continuity and safety
Example Indicators	<p>Learner is able to:</p>

	<ul style="list-style-type: none"> • Identify when a patient would benefit from transition of care and with support helps initiate this transfer (i.e. transfer to ER, transfer to specialist care, transfer to allied health care provider) • Write comprehensive and appropriate referral letters • Demonstrate developing competence verbally consulting with other healthcare providers to present client assessment and request their advice (i.e. calling on-call specialist for advice) • Assess client access to resources to support care transition (i.e. transportation, financial means, cultural fit, knowledge, etc.), and with support helps patient navigate access
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DOCUMENTATION COMPETENCIES

ELCs 1.13-1.16

Clinical Expectations	<ul style="list-style-type: none"> • Accurate and complete documentation for a variety of client presentations, including developing competence in written referrals.
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Demonstrate independence documenting low and moderate complexity patient encounters (i.e. SOAP notes). May require some assistance with very complex or new types of visits.

PROFESSIONAL NP ROLE & RESPONSIBILITIES COMPETENCIES

ELCs 1.15, 2.1, 2.2, 3.1-3.5 & NP Practice Standards

Clinical Expectations	<ul style="list-style-type: none"> • Consistent accountability to professionalism expectations of an advanced practice role. • Consistent application of NP Practice Standards. • Satisfactory time management skills.
Example Indicators	<p>Learner is able to demonstrate:</p> <ul style="list-style-type: none"> • Professional conduct and accountability (i.e. regular punctual attendance, clear professional communication, timely patient follow-up, reliability, etc.)

- Ability to clearly articulate and consistently apply NP Practice Standards, Entry-Level Competencies, Scope of Practice and the Canadian Nurses Association Code of Ethics
- Awareness and ability to practice in accordance with regulatory body guidelines, federal and provincial legislation, and agency policy
- Growth mindset, engaging in self-directed learning and reflective practice to address competency development
- Ability to effectively elicit, incorporate and receive feedback
- Provision of culturally safe, anti-racist care, contributing to practice environments that are equitable and inclusive
- Ability to clearly articulate the NP role to clients and other members of the health care team
- Provision of safe, ethical, competent care that is in the clients best interest
- Beginning leadership that contributes to high quality health (i.e. situational awareness, conflict resolution, collaboration, building partnerships, communication skills, etc.)
- Ability to prioritizes client concerns appropriately often; may require more time to complete and document client care
- Proactively seeking out learning opportunities to address learning needs with minimal assistance required to identify learning needs or strategies to address these needs
- Ability to organizes and plans workload in an efficient and effective manner often



UNIVERSITY OF
SASKATCHEWAN

**New Course
Proposal & Creation Form**

1. Approval by Department Head or Dean

- 1.1 College or School with academic authority: **College of GRADUATE AND POSTDOCTORAL STUDIES NURSING**
- 1.2 Department with academic authority: **NURSING**
- 1.3 Term from which the course is effective: **September 2026**

2. Information required for the Catalogue

- 2.1 Label & Number of course: **NURS 842**
- 2.2 Academic credit units: **3**
- 2.3 Course Long Title (maximum 100 characters): **Nurse Practitioner Clinical Residency III.**
Course Short Title (maximum 30 characters): **NP Clinical III.**
- 2.4 Total Hours: Lecture Seminar Lab Tutorial Other: 300 clinical hours in 12 weeks
- 2.5 Weekly Hours: Lecture Seminar Lab Tutorial Other
- 2.6 Term in which it will be offered: T1 T2 T1 or T2 T1 and T2
- 2.7 Prerequisite: **NURS 841: Nurse Practitioner Residency II; NURS 838: NP Roles II**

If there is a prerequisite waiver, who is responsible for signing it? **NOT APPLICABLE.**

D – Instructor/Dept Approval

H – Department Approval

I – Instructor Approval

2.8 Catalogue description (150 words or less): **This course focuses on refining and consolidating clinical competencies to the level of an entry-level NP. Students will develop independence and increased confidence applying nurse practitioner competencies and Practice Standards to a variety of patient populations across the age spectrum with acute, chronic, and comorbid health concerns.**

2.9 Do you allow this course to be repeated for credit? **NO**

- 3. **Please list rationale for introducing this course: This course has been developed to ensure graduates of the Master of Nursing-Nurse Practitioner program meet the new entry level competencies developed by the regulatory body (College of Registered Nurses of Saskatchewan).**
- 4. **Please list the learning objectives for this course:**

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Independently complete and interpret findings from focused and comprehensive health assessments for a variety of patient presentations and concerns seeking appropriate consultation if situation is beyond the scope of entry level practice. (NP ELCs 1.1, 1.3, 1.4, 1.16)
 2. Independently select and accurately interpret diagnostic investigations for a range of client presentations and acuity levels. (NP ELCs 1.4f, 1.5)
 3. Independently determine appropriate differential, leading and must-not-miss diagnosis for patients presenting with a variety of health concerns. (NP ELCs 1.5)
 4. Independently develop and implement comprehensive evidence-based, patient centered therapeutic care plans for a variety of patient presentations, complexities, acuity levels and populations. (NP ELCs 1.6-1.12, 4.1)
 5. Consistently apply interprofessional competencies essential to the nurse practitioner role, including consultation, collaboration, referral, effective communication, leadership, and role clarification. (NP ELCs 1.9f, 1.13b, 2.1)
 6. Independently facilitate safe and effective transitions of care, including patient admissions, discharges, and connections with community services. (NP ELC 1.13)
 7. Demonstrate accurate and comprehensive record keeping activities for a range of client presentations and acuity levels, including mastery in writing referrals, conducting consultations, and managing transitions of care such as admissions, discharge planning, and care coordination, that comply with legal, regulatory, and best practice standards. (NP ELCs 1.14)
 8. Demonstrate consistent and independent accountability to professionalism expectations of the nurse practitioner role, independent application of NP Practice Standards and proficient time-management skills at the level of a novice NP. (NP ELC 1.15, NP Practice Standard 1)
 9. Collaborate with and lead interdisciplinary teams to address the complex needs of diverse patient populations and promote health equity. (NP ELCs 1.9f, 1.13b, 2.1)
5. **Impact of this course**
 Are the programs of other departments or Colleges affected by this course? **NO**.
 If so, were these departments consulted? (Include correspondence)
 Were any other departments asked to review or comment on the proposal?
6. **Other courses or program affected** (please list course titles as well as numbers)

- 6.1 Courses to be deleted? **NURS 878: Practicum III Advanced Nursing Practice with Vulnerable Populations.**
- 6.2 Courses for which this course will be a prerequisite? **NONE**
- 6.3 Is this course to be required by your majors, or by majors in another program? **This course is required for students in the Master of Nursing-Nurse Practitioner program only.**

7. **Course outline**

(Weekly outline of lectures or include a draft of the course information sheet.)

Dates & Topics	Learning Activities, Assignments & Evaluation
<p>Week 1</p> <p>Orientation</p>	<p>Required Readings/Media:</p> <p>NP Program Preceptor Manual</p> <p>Clinical Site Orientation Checklist</p> <p>Guide to Typhon's NP Student Tracking System for USask SNPs</p> <p>Brown, M. (2018). Linking theory and practice through mindfulness: Reflections of a nurse practitioner student. <i>International Journal of Nursing Student Scholarship (IJNSS)</i>, 5(25). https://cdm.ucalgary.ca/index.php/ijnss/article/view/56842</p> <ul style="list-style-type: none"> • Horner, D. K. (2017). Mentoring: Positively influencing job satisfaction and retention of new hire nurse practitioners. <i>Plastic Surgical Nursing</i>, 37 (1), 7-22. doi: 10.1097/PSN.0000000000000169. https://primo-pmtna02.hosted.exlibrisgroup.com/permalink/f/fbi72i/TN_cdi_proquest_miscellaneous_1872887382. • Pleshkan, V. & Hussey, L. (2020). Nurse practitioners' experiences with role transition: Supporting the learning curve through preceptorship. <i>Nurse Education in Practice</i>, 42, https://doi.org/10.1016/j.nepr.2019.102655. • Saskatchewan Association for Nurse Practitioners (SANP). Mentorship. https://sasknp.org/Mentorship <p>Self-directed research for clinical cases*</p> <p>Assignments:</p> <p>Reflective Practice 1</p> <p>Clinical Schedule, Hours & Logs</p>
<p>Week 2</p> <p>Transition of Care</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Boersma, K. (2021). Three steps to a safer hospital discharge: an infographic for optimal patient outcomes. <i>Canadian Nurse</i>. https://community.cna-aiic.ca/dev-cn-en/blogs/cn-

	<p>content/2021/07/26/three-steps-to-a-safer-hospital-discharge-an-infog.</p> <ul style="list-style-type: none"> • Saskatchewan Health Quality Council (2024). High-quality care transitions: A guide to improving continuity of care. https://www.saskhealthquality.ca/reports-tools-publications/high-quality-care-transitions-a-guide-to-improving-continuity-of-care/. • Agency for Healthcare Research and Quality [AHRQ]. Care coordination. https://www.ahrq.gov/ncepcr/care/coordination.html. • Canadian Medical Protective Association. (2021). Transitions in care. Handing over patient information to deliver safe care. https://www.cmpa-acpm.ca/en/education-events/good-practices/physician-team/transitions-in-care. • Samuels, C., Harris, T., Gonzales, T., & Mosquera, R. (2017). The case for the use of nurse practitioners in the care of children with medical complexity. <i>Children</i>, 4(4), https://doi.org/10.3390/children4040024 • Mora, K., Dorreijo, X., Carreon, K., & Butt, S. (2017). Nurse practitioner-led transitional care interventions: An integrative review. <i>Journal of the American Association of Nurse Practitioners</i>, 29(12), 773-390. https://doi.org/10.1002/2327-6924.12509 <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p> <p>Work on Transition of Care Assignment</p>
<p>Week 3</p> <p>No New Content</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 4</p> <p>Leading Interdisciplinary Clinical Teams</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Insert readings on leading teams • Self-directed research for clinical cases <p>Assignments:</p>

	<p>Reflective Practice: Leading Interdisciplinary Clinical Teams</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 5</p> <p>Midterm Clinical Evaluation</p> <p>Evolving Case 1</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Midterm Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p> <p>Evolving Case Posting 1</p>
<p>Week 6</p> <p>Evolving Case 2</p>	<p>Required Readings/Media:</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p> <p>Evolving Case Posting 2</p>
<p>Week 7</p> <p>Evolving Case 3</p>	<p>Required Readings/Media:</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p> <p>Evolving Case Posting 3</p>
<p>Week 8</p> <p>Transition of Care Assignment</p>	<p>Required Readings/Media:</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Transition of Care Assignment</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 9</p> <p>No new content</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>

Week 10 Wrap-Up & Evaluation	Required Readings/Media: <ul style="list-style-type: none"> Self-directed research for clinical cases Assignments <ul style="list-style-type: none"> Reflective Practice: Learning Plan Evaluation and plans for ongoing professional development Clinical Hours and Logs Final Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online) Submit Clinical Skills List
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8. Enrolment

8.1 What is the maximum enrolment number for this course? **35**
 And from which colleges? **NURSING**

8.2 For room bookings, please indicate the maximum estimated room size required for this course:

NOT APPLICABLE – DISTANCE LEARNING

- 10-50
 50-90
 90-130
 130+

9. Student evaluation

Give approximate weighting assigned to each indicator (assignments, laboratory work, mid-term test, final examination, essays or projects, etc.)

9.1 How should this course be graded? **PASS/FAIL**

C – Completed Requirements

(Grade options for instructor: Completed Requirements, Fail, IP In Progress)

N – Numeric/Percentage

(Grade options for instructor: grade of 0% to 100%, IP in Progress)

P – Pass/Fail

(Grade options for instructor: Pass, Fail, In Progress)

Component Title	Due Date	Grade
Clinical Logs	Logged daily	Complete/Incomplete
Reflective Practice Assignments	Reflective Practice 1: Due Week 1 Reflective Practice 2: Due Week 4 Reflective Practice 3: Due Week 10	Pass/Fail*
Case Study Assignment	Due Week 3	Pass/Fail
Evolving Case Discussion Board	Posting 1: Due Week 5	

	Posting 2: Due Week 6 Posting 3: Due Week 7	
Transition of Care Assignment	Due Week 8	Pass/Fail
Clinical Competency Evaluation <ul style="list-style-type: none"> Clinical Evaluation Tool for NP Learners Clinical Skills List 	Midterm: Week 5 Final: Week 10	Pass/Fail
Professionalism	Ongoing	Pass/Fail

S – Special

(Grade options for instructor: NA – Grade Not Applicable) If other, please specify:

9.2 Is the course exempt from the final examination? **YES**

10. **Required text**

Include a bibliography for the course.

Required readings and media for this course are outlined **in the course schedule**. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

There are no new textbooks for this course. It is expected that students will consult resources (i.e. textbooks, clinical practice guidelines, other evidence-based sources) from previous theory courses to support application of this knowledge in the clinical setting. Core NP textbooks and resources most relevant to this clinical course include:

Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.

Bates' Visual Guide to Physical Examination. Wolters Kluwer. *FREE access through USask library

Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. *FREE ebook available at:

<https://openpress.usask.ca/undergradimaging/>

Colyar, M.R. (2020). **Advanced Practice Nursing Procedures (2nd ed).** F.A. Davis.

- Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6th edition)**. F.A. Davis
- Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed)**. Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*
- Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis**. McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*
- Jensen, B., Regier, L.D., Kosar, L. (Eds). (2021). **RxFiles: Drug Comparison Charts (13th edition)**. Saskatoon City Hospital. **Available online for FREE through USask library*
- Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed**. McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*
- Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition**. Elsevier.
- Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition**. Elsevier.
- Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed)**. McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

- College of Registered Nurses of Saskatchewan (CRNS) Bylaws.** <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>
- CRNS NP Entry-level Competencies (ELC)s** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS NP Practice Standards** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- CRNS Nurse Practitioner Practice Guidelines** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnnp-resources/>
- *Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

ELECTRONIC RESOURCES

USask Library Research Guide – Nursing. Contains information and links to important (free) resources for practice and scholarship including evidence-based practice guidelines, videos, drug guides, online textbooks, as well as guides on how to conduct a literatures search, evaluate the quality of evidence, scholarly writing and more. Book mark this page to your computer, as it should be a well-used resource throughout your clinical rotations. <http://libguides.usask.ca/nursing>.

Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

Dynamed. A clinical reference tool with clinically-organized summaries for nearly 3,000 topics, this is an evidence-based reference intended to answer clinical questions at the point of care for health care professionals. A DynaMed app can be downloaded to your mobile device. Free for students to access through the University of Saskatchewan Library.

Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Extended benefits and drug plan.
<https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan> *Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction

Lexicomp. A full-text collection of drug information databases. A Lexicomp app can be downloaded to your mobile device and authenticated from within the Lexicomp web interface. It free for students to access through the University of Saskatchewan Library.

e-CPS Canadian Pharmacy Association's (CPhA's) *Therapeutic Choices* and *e-CPS* (online version of Compendium of Pharmaceuticals and Specialties). Free for students to access through the University of Saskatchewan Library.

VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

11. Resources

- 11.1 Proposed instructor: **Current faculty within the College of Nursing teaching in the Nurse Practitioner programs.**
- 11.2 How does the department plan to handle the additional teaching or administrative workload? **The Master of Nursing-Nurse Practitioner programs have sufficient existing teaching and administrative resources to deliver this course.**
- 11.3 Are sufficient library or other research resources available for this course? **YES**
- 11.4 Are any additional resources required (library, audio-visual, technology, etc.)? **NO**

12. Tuition

- 12.1 Will this course attract tuition charges? If so, how much? (use tuition category) **YES, Graduate Studies Special Tuition Program category**
 - 12.2 Does this course require non-standard fees, such as materials or excursion fees? If so, please include an approved "Application for New Fee or Fee Change Form"
<http://www.usask.ca/sesd/info-for-instructors/program-course-preparation.php#course-fees>
-

Detailed Course Information

1. Schedule Types

Please choose the Schedule Types that can be used for sections that fall under this course: **See highlighted selection.**

Code	Description	Code	Description
CL	Clinical	PRB	Problem Session
COO	Coop Class	RDG	Reading Class
FLD	Field Trip	RES	Research
ICR	Internet Chat Relay	ROS	Roster (Dent Only)
IHP	Internet Help	SEM	Seminar
IN1	Internship - Education	SSI	Supervised Self Instruction
IN2	Internship - CMPT & EPIP	STU	Studio
IN3	Internship - General	SUP	Teacher Supervision
LAB	Laboratory	TUT	Tutorial
LC	Lecture/Clinical (Dent Only)	WEB	Web Based Class
LEC	Lecture	XCH	Exchange Program
LL	Lecture/Laboratory	XGN	Ghost Schedule Type Not Applicable
MM	Multimode	XHS	High School Class
PCL	Pre-Clinical (Dent Only)	XNA	Schedule Type Not Applicable
PRA	Practicum	XNC	No Academic Credit

2. Course Attributes

Please highlight the attributes that should be attached to the course (they will apply to all sections):

Off or Distance Ed Stdnt Fee

Fee - Graduate Studies

2.1 NOAC No Academic Credit

0 Credit Unit courses that possess "deemed" CUs (Called Operational Credit Units). NOAC causes the system to roll 0 academic credit units to academic history.

2.2 For the College of Arts and Science only: To which program type does this course belong?

- FNAR Fine Arts
- HUM Humanities
- SCIE Science
- SOCS Social Science
- ARNP No Program Type (Arts and Science)

Does this course satisfy one of the official college requirements:

- ELWR – English Language Writing Requirement
- ILRQ – Indigenous Learning Requirement
- QRRQ – Quantitative Reasoning Requirement

3. Registration Information (Note: multi-term courses cannot be automated as corequisites)

3.1 Permission Required:

- 3.2 Restriction(s): course only open to students in a specific college, program/degree, major, year in program: **Only open to MN-NP students.**
- 3.3 Prerequisite(s): course(s) that must be completed prior to the start of this course: **NURS 841: Nurse Practitioner Clinical Residency II.**
- 3.4 Prerequisite(s) or Corequisite(s): course(s) that can be completed prior to or taken at the same time as this course: **NURS 839: Nurse Practitioner Roles III**
- 3.5 Corequisite(s): course(s) that must be taken at the same time as this course: **None.**
- 3.6 Notes: recommended courses, repeat restrictions/content overlap, other additional information

4. List Equivalent Course(s) here:

An equivalent course can be used in place of the course for which this form is being completed, specifically for the purposes of prerequisite and degree audit checking. Credit will be given for only one of the equivalent courses.

- 4.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be equivalent: **Not applicable to this course.**

***Please note:** If the equivalent courses carry an UNEQUAL number of credit units, DegreeWorks will automatically enforce the following, unless otherwise stated:

- If a 3 credit unit course is considered to be equivalent to a 6 credit unit course, it will fulfill the 6 credit unit requirement and the student will not have to complete another 3 credit units toward the overall number of required credit units for the program.
- If a 6 credit unit course is considered to be equivalent to a 3 credit unit course, ALL 6 of the credit units may be used to fulfill the 3 credit unit requirement.

5. List Mutually-Exclusive Course(s) here:

Mutually exclusive courses have similar content such that students cannot receive credit for both.

- 5.1 If this is a recently-repurposed course number, please list the courses that are no longer considered to be mutually exclusive: **Not applicable to this course.**

***Please note:** SiRIUS cannot enforce a situation where the exclusion goes only one way.

6. Additional Notes: Syllabus attached.

COURSE SYLLABUS			
Course Title:	Nurse Practitioner Clinical Residency III		
Course Code:	NURS 842	Term:	TBD
Course Credits:	3 credit units	Delivery:	Clinical Residency
Location:	Distance Learning	Website:	https://canvas.usask.ca/
Course Dates & Times:	12 weeks to complete 300 clinical hours		

Course Calendar Description:	This course focuses on refining and consolidating clinical competencies to the level of an entry-level NP. Students will develop independence and increased confidence applying nurse practitioner competencies and Practice Standards to a variety of patient populations across the age spectrum with acute, chronic, and comorbid health concerns.
Pre or Co Requisite:	NURS 841: Nurse Practitioner Clinical Residency II (Pre);NURS 839: Nurse Practitioner Roles III (CO/PRE)

*Note: All times refer to Saskatchewan Time Zone

LAND ACKNOWLEDGMENT

As we engage in teaching and learning, we acknowledge that the University of Saskatchewan Saskatoon campus is on *Treaty Six Territory* and the *Homeland of the Métis*. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. We recognize that many are attending this course from other traditional Indigenous lands and ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

LEARNING OUTCOMES

Learning outcomes and evaluation in the University of Saskatchewan NP program is based on the [Nurse Practitioner Entry-Level Competencies \(ELCs\)](#) as set out by the Canadian Council of Registered Nurse Regulators (CCRNRR) and the College of Registered Nurses of Saskatchewan (CRNS) as well as the [CRNS Nurse Practitioner Practice Standards](#). ELCs reflect the knowledge, skill and judgement required of a novice NP to provide safe, competent, ethical and compassionate care. Practice standards compliment ELCs as broad statements of the minimal requirements for safe and effective NP practice.

Specific learning outcomes for this course include:

1. Independently complete and interpret findings from focused and comprehensive health assessments for a variety of patient presentations and concerns seeking appropriate consultation if situation is beyond the scope of entry level practice. (NP ELCs 1.1, 1.3, 1.4, 1.16)
2. Independently select and accurately interpret diagnostic investigations for a range of client presentations and acuity levels. (NP ELCs 1.4f, 1.5)
3. Independently determine appropriate differential, leading and must-not-miss diagnosis for patients presenting with a variety of health concerns. (NP ELCs 1.5)
4. Independently develop and implement comprehensive evidence-based, patient centered therapeutic care plans for a variety of patient presentations, complexities, acuity levels and populations. (NP ELCs 1.6-1.12, 4.1)
5. Consistently apply interprofessional competencies essential to the nurse practitioner role, including consultation, collaboration, referral, effective communication, leadership, and role clarification. (NP ELCs 1.9f, 1.13b, 2.1)

6. Independently facilitate safe and effective transitions of care, including patient admissions, discharges, and connections with community services. (NP ELC 1.13)
7. Demonstrate accurate and comprehensive record keeping activities for a range of client presentations and acuity levels, including mastery in writing referrals, conducting consultations, and managing transitions of care such as admissions, discharge planning, and care coordination, that comply with legal, regulatory, and best practice standards. (NP ELCs 1.14)
8. Demonstrate consistent and independent accountability to professionalism expectations of the nurse practitioner role, independent application of NP Practice Standards and proficient time-management skills at the level of a novice NP. (NP ELC 1.15, NP Practice Standard 1)
9. Collaborate with and lead interdisciplinary teams to address the complex needs of diverse patient populations and promote health equity. (NP ELCs 1.9f, 1.13b, 2.1)

UNIVERSITY OF SASKATCHEWAN GRADING SYSTEM FOR GRADUATE COURSES

Grading in this course follows the University of Saskatchewan College of Graduate and Postdoctoral Studies (CGPS) Literal Descriptors. The following describes the relationship between literal descriptors and percentage scores for courses in the College of Graduate Studies and Research:

90-100 Exceptional

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of subject matter;
- an ability to make insightful, critical evaluation of information;
- an exceptional capacity for original, creative and/or logical thinking;
- an exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- an exceptional ability to analyze and solve difficult problems related to subject matter.

80-89 Very Good to Excellent

A very good to excellent performance with strong evidence of:

- a comprehensive grasp of subject matter;
- an ability to make sound critical evaluation of information;
- a very good to excellent capacity for original, creative and/or logical thinking;
- a very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently;
- a very good to excellent ability to analyze and solve difficult problems related to subject matter.

70-79 Satisfactory to Good

A satisfactory to good performance with evidence of:

- a substantial knowledge of subject matter;
- a satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology;
- a satisfactory to good capacity for logical thinking;
- some capacity for original and creative thinking;

- a satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner;
- a satisfactory to good ability to analyze and solve moderately difficult problems.

60-69 Poor

A generally weak performance, but with some evidence of:

- a basic grasp of the subject matter;
- some understanding of the basic issues;
- some familiarity with the relevant literature and techniques;
- some ability to develop solutions to moderately difficult problems related to the subject matter;
- some ability to examine the material in a critical and analytical manner.

<60 Failure

An unacceptable performance.

Further information on literal descriptors for grading at the University of Saskatchewan can be found at: <https://students.usask.ca/academics/grading/grading-system.php#GradingSystem> Please note: There are different literal descriptors for undergraduate and graduate students.

ACADEMIC POLICIES

Students are expected to follow USask Policies. These can be found at: <http://policies.usask.ca>

USask Academic Courses Policy on course delivery, examinations and assessment of student learning can be found at: <http://policies.usask.ca/policies/academic-affairs/academic-courses.php>

College of Nursing Graduate program policies can be found at: <https://nursing.usask.ca/policies/graduate.php>

USASK LEARNING CHARTER

The USask Learning Charter defines aspirations about the learning experience that the University aims to provide, and the roles to be played in realizing these aspirations by students, instructors and the institution. A copy of the Learning Charter can be found at:

http://www.usask.ca/university_secretary/LearningCharter.pdf

LEARNING ENVIRONMENT OVERVIEW

As a graduate degree, the USask NP program requires you to apply advanced-level thinking, analysis, critical evaluation, and self-directed learning. Course design is based on a professional, self-directed learning environment in which instructors facilitate and support your development of entry level NP competencies and graduate level learning outcomes (as defined by the [CASN National Nursing Education Framework](#) 2022). As an adult learner, you are expected to take responsibility for your own learning, identifying personal learning needs and activities to meet course learning outcomes.

Synchronous online seminars use Zoom as the videoconferencing platform for delivery. Although the classroom is online, the seminars are considered private USask classrooms, accessible only to students

registered in the course. Online seminar etiquette, including professional behaviours and appearance, is expected of all seminar participants.

PROGRAM REQUIREMENTS AND CRITERIA THAT MUST BE MET TO PASS

- This course is graded as Pass or Fail. Consistent with NP program policy, a minimum percentage of 70% required for a Pass.
- All course evaluation components must be completed and Passed to receive credit for this course

Please refer to the following College of Nursing Graduate program policies at:

<https://nursing.usask.ca/policies/graduate.php> for further details on academic requirements:

- Completion of Work
- Grade Assignment
- NP Program Progression and Remediation Policy
- NP Students Promotion and Graduation
- Supplemental and Deferred Exams

COURSE OVERVIEW

NP Clinical Residency III provides opportunity for students to refine and consolidate competencies to perform all competencies independently at the level of a novice entry-level nurse practitioner. Students will complete a minimum of 300 clinical hours under the supervision of a nurse practitioner or physician preceptor. By completion of clinical hours, students should be able to independently manage the workload of a novice provider in the select setting. To further assess competencies, and help students prepare for their licensing exam, this course also includes a comprehensive exam assessing content cumulative of the NP program with a focus on entry-level NP competencies and practice standards.

COURSE SCHEDULE

Dates & Topics	Learning Activities, Assignments & Evaluation
<p>Week 1 Orientation</p>	<p>Required Readings/Media: NP Program Preceptor Manual Clinical Site Orientation Checklist Guide to Typhon's NP Student Tracking System for USask SNPs Brown, M. (2018). Linking theory and practice through mindfulness: Reflections of a nurse practitioner student. <i>International Journal of Nursing Student Scholarship (IJNSS)</i>, 5(25). https://cdm.ucalgary.ca/index.php/ijnss/article/view/56842</p> <ul style="list-style-type: none"> • Horner, D. K. (2017). Mentoring: Positively influencing job satisfaction and retention of new hire nurse practitioners. <i>Plastic Surgical Nursing</i>, 37 (1), 7-22. doi:

	<p>10.1097/PSN.0000000000000169. https://primo-pmtna02.hosted.exlibrisgroup.com/permalink/f/fbi72i/TN_cdi_proquest_miscellaneous_1872887382.</p> <ul style="list-style-type: none"> • Pleshkan, V. & Hussey, L. (2020). Nurse practitioners' experiences with role transition: Supporting the learning curve through preceptorship. <i>Nurse Education in Practice</i>, 42, https://doi.org/10.1016/j.nepr.2019.102655. • Saskatchewan Association for Nurse Practitioners (SANP). Mentorship. https://sasknp.org/Mentorship <p>Self-directed research for clinical cases*</p> <p>Assignments:</p> <p>Reflective Practice 1</p> <p>Clinical Schedule, Hours & Logs</p>
<p>Week 2</p> <p>Transition of Care</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Boersma, K. (2021). Three steps to a safer hospital discharge: an infographic for optimal patient outcomes. <i>Canadian Nurse</i>. https://community.cna-aiic.ca/dev-cn-en/blogs/cn-content/2021/07/26/three-steps-to-a-safer-hospital-discharge-an-infog. • Saskatchewan Health Quality Council (2024). High-quality care transitions: A guide to improving continuity of care. https://www.saskhealthquality.ca/reports-tools-publications/high-quality-care-transitions-a-guide-to-improving-continuity-of-care/. • Agency for Healthcare Research and Quality [AHRQ]. Care coordination. https://www.ahrq.gov/ncepcr/care/coordination.html. • Canadian Medical Protective Association. (2021). Transitions in care. Handing over patient information to deliver safe care. https://www.cmpa-acpm.ca/en/education-events/good-practices/physician-team/transitions-in-care. • Samuels, C., Harris, T., Gonzales, T., & Mosquera, R. (2017). The case for the use of nurse practitioners in the care of children with medical complexity. <i>Children</i>, 4(4), https://doi.org/10.3390/children4040024

	<ul style="list-style-type: none"> Mora, K., Dorreijo, X., Carreon, K., & Butt, S. (2017). Nurse practitioner-led transitional care interventions: An integrative review. <i>Journal of the American Association of Nurse Practitioners</i>, 29(12), 773-390. https://doi.org/10.1002/2327-6924.12509 <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p> <p>Work on Transition of Care Assignment</p>
<p>Week 3</p> <p>No New Content</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 4</p> <p>Leading Interdisciplinary Clinical Teams</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Insert readings on leading teams Self-directed research for clinical cases <p>Assignments:</p> <p>Reflective Practice: Leading Interdisciplinary Clinical Teams</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p>
<p>Week 5</p> <p>Midterm Clinical Evaluation</p> <p>Evolving Case 1</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> Self-directed research for clinical cases <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Midterm Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online)</p> <p>Evolving Case Posting 1</p>
<p>Week 6</p> <p>Evolving Case 2</p>	<p>Required Readings/Media:</p> <p>Self-directed research for clinical cases</p> <p>Assignments:</p> <p>Clinical Hours and Logs</p> <p>Seek feedback on developing clinical competencies</p> <p>Evolving Case Posting 2</p>

<p>Week 7 Evolving Case 3</p>	<p>Required Readings/Media: Self-directed research for clinical cases</p> <p>Assignments: Clinical Hours and Logs Seek feedback on developing clinical competencies Evolving Case Posting 3</p>
<p>Week 8 Transition of Care Assignment</p>	<p>Required Readings/Media: Self-directed research for clinical cases</p> <p>Assignments: Transition of Care Assignment Clinical Hours and Logs Seek feedback on developing clinical competencies</p>
<p>Week 9 No new content</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Self-directed research for clinical cases <p>Assignments Clinical Hours and Logs Seek feedback on developing clinical competencies</p>
<p>Week 10 Wrap-Up & Evaluation</p>	<p>Required Readings/Media:</p> <ul style="list-style-type: none"> • Self-directed research for clinical cases <p>Assignments</p> <ul style="list-style-type: none"> • Reflective Practice: Learning Plan Evaluation and plans for ongoing professional development <p>Clinical Hours and Logs Final Clinical Competency Evaluation - Preceptor and Self-Evaluation (to be completed online) Submit Clinical Skills List</p>

*Students are responsible for self-directed study/research related to cases seen in clinical. Such research will vary based on individual student learning needs and clinical presentations seen. NP program textbooks and evidence-based guidelines/resources will support student self-directed study.

INSTRUCTOR INFORMATION:

<p>Clinical Coordinator Name :</p>	<ul style="list-style-type: none"> • Responsible for oversight of course
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Ph:	<ul style="list-style-type: none"> • Supports NPCFs, preceptors and students, meeting with them as necessary to address clinical concerns. • In collaboration with the NPCF determines if students meet requirements to pass the course
<p><u>Nurse Practitioner Clinical Facilitator (NPCF)</u></p> <p>Your NPCF will send you a welcome message with their preferred contact information</p>	<p>Each student is assigned a NPCF who is responsible for monitoring and evaluating student attainment of course learning outcomes. The NPCF:</p> <ul style="list-style-type: none"> • Contacts preceptors a minimum of three times over the course of the clinical placement (beginning, midterm and final) by phone, email or videoconference to review clinical expectations, discuss the clinical experience, receive feedback on student performance and address any questions or concerns • Provides support to preceptors and students, meeting with them as necessary to address concerns • Grades clinical assignments • Completes a summary of student competency evaluation at midterm and final, summarizing student progress towards meeting course learning outcomes and NP ELCs • In collaboration with the Clinical Coordinator determines if students meet requirements to pass the course • If requested, provides the preceptor with feedback on their performance. <p>NOTE: Students should contact their NPCF for all clinical related concerns. The NPCF will collaborate with the clinical coordinator as required.</p>

Office Hours: As posted on Canvas.

Email Communication: University of Saskatchewan email addresses will be used for email communication within this course. Instructors will review and respond to messages within 48 hours, **with the exception of weekends and holidays** during which time regular monitoring of email cannot be guaranteed.

Urgent Concerns (requiring attention within 1-2 hours): Please call or send a text message.

REQUIRED RESOURCES

Required readings and media for this course are outlined in the course schedule. Readings come from program textbooks, peer-reviewed evidence-based articles, and other electronic medical sources. Assigned readings and resources were carefully selected to address course learning outcomes. Relevant national and provincial documents as well as journal articles complement and supplement course textbooks, providing Canadian and regional context on theoretical, regulatory, political and practice considerations for nurse practitioners. Given the evolving landscape of policy, regulation and evidence-based practice, additions to the course reading list may occur during the term to introduce new and relevant literature. Any changes to the reading list will be communicated to students through a Canvas announcement.

TEXTBOOKS

There are no new textbooks for this course. It is expected that students will consult resources (i.e. textbooks, clinical practice guidelines, other evidence-based sources) from previous theory courses to support application of this knowledge in the clinical setting. Core NP textbooks and resources most relevant to this clinical course include:

- Bickley, L.S., Szilagyi, P.G., Hoffman, R.M., & Rainier, S. (Eds.) (2021). **Bates' Guide to Physical Examination and History Taking** (13th ed). Wolters Kluwer.
- Bates' Visual Guide to Physical Examination.** Wolters Kluwer. **FREE access through USask library*
- Burbridge, B. (2017). **Undergraduate Diagnostic Imaging Fundamentals.** University of Saskatchewan Distance Education Unit. **FREE ebook available at:*
<https://openpress.usask.ca/undergradimaging/>
- Colyar, M.R. (2020). **Advanced Practice Nursing Procedures (2nd ed).** F.A. Davis.
- Dunphy, L., Winland-Brown, J.E., Porter, B.O. & Thomas, D.J. (2022). **Primary Care: Art and Science of Advanced Practice Nursing (6thedition).** F.A. Davis
- Garcia, T.B. (2014). **12-Lead ECG. The Art of Interpretation (2nd ed).** Jones & Bartlett Learning. **If you own an ECG interpretation text from past experiences courses, this may suffice.*
- Henderson, M.C., Tierney, L.M., Smetana, G.W. (Eds). (2012). **The Patient History: An Evidence-based Approach to Differential Diagnosis.** McGraw Hill. **eBook available for FREE through USask library AccessMedicine database*
- Jensen, B., Regier, L.D., Kosar, L. (Eds). (2021). **RxFiles: Drug Comparison Charts (13th edition).** Saskatoon City Hospital. **Available online for FREE through USask library*
- Nicoll, D., Lu, C.M., & McPheel, S.J. (2017). **Guide to Diagnostic Tests, 7th ed.** McGraw Hill Education. **eBook available for FREE through USask library AccessMedicine database*
- Power-Kean, K., Zettel, S., El-Hussein, M.T., Huether, S.E., & McCance, K.L. (2023). **Huether and McCance's Understanding Pathophysiology, Second Canadian Edition.** Elsevier.
- Rosenthal, L. & Burchum, J. (2021). **Lehne's Pharmacotherapeutics for Advanced Practice Nurses and Physician Assistants, 2nd Edition.** Elsevier.
- Stern, S.D.C., Cifu, A.S., & Altkorn, D. (2020). **Symptom to Diagnosis. An Evidence-Based Guide (S2D) (4th ed).** McGraw-Hill Education. **eBook available for FREE through USask library AccessMedicine database*

PROVINCIAL DOCUMENTS

- College of Registered Nurses of Saskatchewan (CRNS) Bylaws.** <https://www.crns.ca/about-us/how-we-govern/act-bylaws/>
- CRNS NP Entry-level Competencies (ELC)s** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>
- CRNS NP Practice Standards** <https://www.crns.ca/nursing-practice/nursing-practice-resources/rnp-resources/>

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***Students not residing in Saskatchewan are required to familiarize themselves with the NP entry-level competencies, practice standards and guidelines in the jurisdiction where they are practicing.**

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Bugs and Drugs: Antimicrobial reference book <http://www.bugsanddrugs.ca/>

ClinicalKey. Provides access to current medical and surgical content including journals, medical and surgical books, medical videos and images. Free for students to access through the University of Saskatchewan Library.

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Government of Canada. **Non-insured health benefits for First Nations and Inuit:** <https://sac-isc.gc.ca/eng/1572888328565/1572888420703>

Government of Saskatchewan. Extended benefits and drug plan. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan> **Students outside Saskatchewan should familiarize themselves with the drug benefits in their jurisdiction*

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VisualDx. VisualDx is a web-based system that assists "in the identification of dermatologic, infectious, genetic, metabolic, nutritional and occupational diseases, benign and malignant growths, drug-induced conditions, and other injuries." Free for students to access through the University of Saskatchewan Library.

GRADING SCHEME

Component Title	Due Date	Grade
Clinical Logs	Logged daily	Complete/Incomplete

Reflective Practice Assignments	Reflective Practice 1: Due Week 1 Reflective Practice 2: Due Week 4 Reflective Practice 3: Due Week 10	Pass/Fail*
Case Study Assignment	Due Week 3	Pass/Fail
Evolving Case Discussion Board	Posting 1: Due Week 5 Posting 2: Due Week 6 Posting 3: Due Week 7	
Transition of Care Assignment	Due Week 8	Pass/Fail
Clinical Competency Evaluation <ul style="list-style-type: none"> • Clinical Evaluation Tool for NP Learners • Clinical Skills List 	Midterm: Week 5 Final: Week 10	Pass/Fail
Professionalism	Ongoing	Pass/Fail

* Passing grade equivalent to $\geq 70\%$

EVALUATION COMPONENTS

The following components are mandatory for meeting the clinical practicum requirements of this course:

CLINICAL TRACKING SYSTEM

Value: Complete/Incomplete

Dates: **Clinical Schedule** –due by the end of your third clinical shift

Clinical Hours - ≥ 300 hrs recorded in the clinical log system by [insert date]

Clinical Logs - entered within 72 hours of a clinical shift, preferably daily

Type: Clinical hours provide opportunity for student to apply and be evaluated on developing NP entry-level competencies, with a focus on those related to the [NP role as clinician](#) (1.0). To support attainment of clinical hour requirements and open communication with your NPCF, you will arrange your clinical schedule and evaluation dates with your NPCF at the beginning of term. Keeping logs of your daily clinical activities provides supporting evidence of how you are spending your clinical hours including types of patients seen, diagnosis, procedures, and prescriptions.

Description: Under the supervision of a preceptor, you will apply NP entry-level competencies to provide care to populations across the age spectrum, with acute, chronic and stable health conditions, demonstrating development towards entry-level nurse practitioner competencies (ELCs). You are required to complete a minimum of 300 clinical hours recorded in the clinical logging system (Typhon) by the end of the course.

Clinical Schedule. In keeping with professional standards and courtesy, prior to the start of clinical you are required to contact your preceptor(s) to arrange a clinical schedule. By the end of your third clinical day, you will have entered this schedule into the clinical logging system as well as arranged dates for

your midterm and final clinical evaluations with your NPCF and preceptor. You should also communicate to your typical workday hours (e.g. 830am – 5pm, with 30 minute lunch break) to your NPCF. Please book at least 2-extra clinical shifts to account for potential missed days (e.g., due to preceptor illness, poor weather, personal illness). Update your NPCF of any changes to your schedule in a timely manner, and ensure these same updates are made in the clinical scheduler.

Clinical Logs. You will keep logs of your daily clinical encounters and activities using the clinical logging system. Clinical logs are used by instructors to help assess clinical learning experiences such as the types and numbers of patients seen, student level of independence in providing care, time spent with patients, diagnosis seen, and prescriptions written. In keeping with standards of professional documentation and to ensure accuracy, clinical logs must be entered **within 72 hours (3 days)** of the clinical encounter, preferably daily. If you are unable to meet this deadline, you are required to contact your NPCF to discuss if accommodations can be made. Failure to enter clinical logs in a timely manner may result in inability to include late clinical log entries towards clinical hours.

Please refer to the Student Guide for Clinical Logs (posted on Canvas) for a detailed overview of logging your clinical hours. You will also be oriented to this system during your course orientation.

REFLECTIVE PRACTICE

Value: Pass/Fail (Pass is $\geq 70\%$ on overall average of reflective practice assignments)

Due Dates: **As outlined below**

Type: Reflective practice is a core component of continuing professional development for registered nurses and nurse practitioners. Reflective practice activities in this course will support you to further develop NP ELCs and demonstrate attainment of course learning outcomes.

Length: Each reflective practice should be approximately 500 words

Description: You will complete 3 reflective practice activities as part of the course. Grading of reflective practice assignments is guided by the [CGPS literal descriptors](#) with a minimum 70% (pass) required for a "pass".

Reflective Practice 1: Learning Plan

Due: **Week 1**

At the beginning of the course, you will review and reflect on course learning outcomes, NP ELCs, practice standards and your personal learning needs to develop an individualized learning plan for the course. Your learning plan will not address every course learning outcome and/or ELC but should focus on two areas of particular learning need. **One learning goal must be related to transition of care. See required readings for week 2 for readings to support reflection and development of NP competencies supporting transition of care.**

As part of this reflective practice assignment, consider what you already know, what you would like to build on, and strategies for getting there. Include a specific learning plan with two SMART learning objectives, how these learning objectives link to course learning outcomes, NP ELCs, and interprofessional competencies (as applicable), how you will demonstrate achievement of the learning outcomes (evidence), and strategies and/or resources you will use to achieve the objective. A learning plan template and example are provided below.

Criteria	Example
<p>SMART* Learning Objective</p> <p>* Specific, Measurable, Achievable, Realistic and Time Limited</p>	<p><i>By the end of my clinical hours on June 30, I will demonstrate ability to lead safe, effective transition of care for a minimum 4 patients admitted or discharged from the hospital from my care. This will be demonstrated through documentation of effective written and verbal communication with other health care providers and the patient/family, medication reconciliation, and connecting patients/families with community resources to support preferences and health needs.</i></p>
<p>Course Learning Outcome that is related to the SMART objective</p>	<p>Learning outcome 5. Consistently apply interprofessional competencies essential to the advanced practice nurse role, including consultation, collaboration, referral, effective communication, leadership, and role clarification; 6. Independently facilitate safe and effective transition of care, including patient admissions, discharges, and connections with community services. 9. Collaborate and lead interdisciplinary teams to address the complex needs of diverse patient populations and promote health equity.</p>
<p>Targeted NP ELC that is related to the SMART objective. ELC needs to be from the jurisdiction you are practising in.</p>	<p>1.6 – use clinical reasoning to create a shared management plan based on diagnosis and the client’s preference and goals</p> <p>1.7 – prescribe and counsel clients on pharmacological and non-pharmacological interventions, across the lifespan</p> <p>1.9 – Evaluate the effectiveness of the management plan to identify required modifications and/or terminations of treatment</p> <p>1.13 – Lead admission, the transition of care, and discharge planning that ensure client care continuity and safety</p>
<p>Rational for selection of learning goal</p>	<p><i>Through critical reflection on NP ELCs and course learning outcomes I identified a learning need related to increasing my knowledge and independence leading transition of care. I have had the opportunity to participate in transferring/referring patients to other health care providers, as well as receiving them back to care, but have relied more on my preceptor to lead this process in the past. As I enter my final practicum, I recognize the need to increase my independence in this area and take on more of a leadership role.</i></p>
<p>Evidence to demonstrate achievement of learning objective. Evidence should be quantifiable (objective). Consider tools you already use in the course such as your Typhon logs, clinical evaluation forms, clinical skills list as well as other evidence to evaluate achievement of objectives.</p>	<ul style="list-style-type: none"> • <i>Keep a clinical log of patient for whom I take a leadership role in supporting transition of care. This log will include the patient initials, age, diagnosis, transitional support provided (i.e. admission, discharge planning, transfer of care, connecting with community resources, etc), and level of independence in providing this support</i> • <i>Transition of care assignment will reflect a minimum passing grade of 70%</i> • <i>Final clinical evaluation reflects achievement of this competency and verification from preceptor on provided examples of how I am demonstrating this competency</i>
<p>Resources & Strategies</p>	<ul style="list-style-type: none"> • <i>Week 2 required readings</i>

	<ul style="list-style-type: none"> • <i>Review agency best practices for supporting transition of care (look up policies and procedures)</i> • <i>Let preceptor and front desk staff know of this learning need and that I would like to see patients recently discharged from the hospital, requiring supporting connecting with community resources, and complex patients who may require transition of care (i.e. transition to LTC). I recognize transfer to hospital is more difficult to predict in advance and more opportunistic in nature</i>
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The above is provided as an example. Your learning plan must be original or risk not meeting academic requirements.

The learning plan will be used to help guide clinical learning and considered as part of your clinical competency evaluation. NPCFs will review and provide feedback you on their learning plan through Canvas assignments. Revisions and resubmissions may be requested at the NPCFs discretion.

Learning Outcome(s) Addressed: Targeted outcomes will depend on student personally identified learning needs

Reflective Practice 2: Leading Interdisciplinary Teams

Due: Week 4

Description: This reflective practice encourages you to examine your developing role identify as a NP leader within interdisciplinary teams, particularly as it relates to addressing the complex needs of complex patient populations and promoting health equity. Reflect on one or more cases that have required you to, or where in hindsight you could have stepped in, to demonstrate leadership within the interdisciplinary team to support the care needs of a patient/family with respect to health equity and inclusion. Describe the situation and what you think went well, as well as what did not go well. What strengths and challenges did you encounter? How would you change your actions going forward? Are there steps you need to take to continue developing this competency area?

Learning Outcome(s) Addressed: 8-9

Reflective Practice 3: Evaluation of Learning

Due: Week 10

Description: At the end of the practicum experience, you will review and reflect on your progress towards meeting course learning outcomes and your personal learning plan (established in Reflective Practice 1). You will also consider your ongoing learning needs, and plans for addressing these in future clinical courses. You are encouraged to reflect on your clinical evaluation, [NP entry-level competencies](#), [Nurse Practitioner Practice Standards, and clinical skills list](#) to identify future learning needs.

Learning Outcome(s) Addressed: All/Any

Please note: All reflective practice activities will be considered as part of evaluating clinical competencies. NPCFs will review and provide feedback to students on their reflective practice assignments through Canvas assignments. Revisions and resubmissions may be requested at the NPCFs discretion. Grading of is guided by the [CGPS literal descriptors](#) with a minimum 70% (pass) required for a "pass" on each assignment.

TRANSITION OF CARE ASSIGNMENT

Value: Pass/Fail (Pass is $\geq 70\%$)

Due Dates: Week 8

Length: Max 4 pages (double spaced) excluding reference list and title page

Type: This assignment provides opportunity to apply knowledge and skills to lead admission, the transition of care, and discharge planning that ensure client care continuity and safety (NP ELC 1.13).

Description: You will develop a transition of care plan for a patient seen in your clinical setting for whom you led transition of care. Examples of transition of care may include:

- Leading referral/collaboration with another service (i.e. homecare, allied health care professional, specialist, palliative care, community agency, etc) to support patient needs
- Facilitating transfer of a patient to another care facility to meet their health needs (e.g., hospital, long-term care, hospice, etc.)
- Receiving a patient back to care after discharge from a hospital and assuming lead responsibility for their smooth transition of care and health needs

Begin by providing an overview of the case, including relevant patient demographics, history, and reason for transition of care. Next, describe a comprehensive transition of care plan for the patient that addresses therapeutic needs (i.e. assessment, diagnostic testing, management, etc.), monitoring/follow-up, and resources to support the patient and family with safe transition of care and health outcomes. Illustrate how you facilitated transfer of information and if applicable, how client access to community services was supported. This assignment requires integration of evidence to support actions taken as well as proper APA (student version) formatting.

Assignments will be graded by your NPCF using a set marking rubric (posted in Canvas) based on the [College of Graduate and Postdoctoral Studies Literal Descriptors](#). Individual feedback will be provided to each student to promote ongoing development of consultation skills.

Students unsuccessful in passing this assignment on their first attempt, may be provided remediation and one additional attempt to pass the assignment. Remediation will include submission of a new assignment that responds to feedback and areas of competency deficiency. If the second attempt meets competency requirements, the student will receive a passing grade for this assignment; if it does not meet competency requirements (i.e. failure), a failure will be assigned as the grade for this assignment.

Learning Outcome(s) Addressed: 4-7 & 9

CASE STUDY ASSIGNMENT

Value: Pass/Fail (Pass is $\geq 70\%$)

Due Dates: Week 3

Length: Max 4 pages (excluding reference list) or 10 minutes (oral presentation)

Type: This assignment provides opportunity for students to apply and be evaluated on competencies in advanced health assessment, diagnosis and therapeutic management, particularly as it relates to the counselling role.

Description: You will develop a case study on a patient seen in your clinical for whom you provided comprehensive care, including demonstration of counselling competencies (NP ELCs 1.10-1.12).

The case study will include the following:

- Patient demographics (initials, gender, age)
- Chief Concern (Reason for visit)
- History of Presenting Illness
- Relevant Past Medical History, Social History, Family History
- Pertinent Physical Exam
- Differential Diagnosis, listing most likely diagnosis first with rationale
- Management plan that consider non-pharmacotherapy, pharmacotherapy, monitoring/follow-up, health promotion, and counselling.
- Critical reflection on developing counselling skills, including strengths, opportunities for improvement, and plans for addressing learning needs

Case studies may be presented in one of the following two formats:

- Written
- Recorded video presentation.

This assignment will be graded by your NPCF using a set marking rubric (posted on Canvas) based on the [College of Graduate and Postdoctoral Studies Literal Descriptors](#). Individual written feedback will be provided to each student to promote ongoing development of documentation skills.

Students unsuccessful in passing this assignment on their first attempt, may be provided remediation and one additional attempt to pass the assignment. Remediation will include submission of a new assignment that responds to feedback and areas of competency deficiency. If the second attempt meets competency requirements, the student will receive a passing grade for this assignment; if it does not meet competency requirements (i.e. failure), a failure will be assigned as the grade for this assignment.

Learning Outcome(s) Addressed: 1-4

EVOLVING CASE DISCUSSION BOARD ASSIGNMENT

Value: Pass/Fail (Pass is $\geq 70\%$)

Due Dates: **Week 5**

Type: This assignment provides opportunity for students to demonstrate and be evaluated in competencies in advanced health assessment, diagnosis and management, as well as competencies in coaching and mentoring their peers.

Description: You will select a case from your clinical which demonstrates a diagnostic dilemma and provides opportunity to highlight your diagnostic reasoning competence. In the course discussion board forum, you will present an overview of the case, including relevant background information (i.e. clinical setting, patient age/gender), history, physical exam, and diagnostic investigations (as appropriate). **Do**

NOT reveal the diagnosis or management plan. Your job is to present sufficient information that your peers can work through the information provided, applying their diagnostic reasoning, to come up with their own hypothesis of the differentials and management and post this is a discussion board reply. You will then provide them with feedback on their response and discuss what was done in the actual case including the rationale for why.

The three parts of this discussion board are summarized with their corresponding due dates below:

Posting 1 – Case presentation: Present the history and physical examination of a more complex case you have seen in clinical. Do NOT reveal the diagnosis or management plan; Your peers will try to determine these based on the information you present. No references are required for this posting. (Due Week 5)

Posting 2 – Peer response: Select a minimum one peer posting to write your response. Determine three differentials based on the case presentation, including the most likely diagnosis. Write a response articulating your rationale for these differentials and the most likely diagnosis. Based on the most likely diagnosis, determine an evidence-based patient-centered management plan that considers pharmacotherapy, non-pharmacotherapy, patient education, follow-up/monitoring and referral/consultation as applicable. Please try to respond to different postings to ensure all postings receive a response. (Due Week 6)

Posting 3 – Case resolution and peer feedback: Review and provide peer feedback the response(s) to your original case posting. Discuss the actual diagnosis and management plan, including rationale. (Week 7)

As this discussion board relies on each posting being done by the deadline to facilitate subsequent posting, students need to adhere to set deadlines.

Learning Outcome(s) Addressed: 1-4 & 7

CLINICAL COMPETENCY EVALUATION

Value: Pass/Fail

Dates: Midterm (~ 150 clinical hours) and Final (~300 clinical hours)

Type: Evaluation of clinical competency performance provides evidence of student progression towards meeting NP ELCs and course learning outcomes.

Description: Evaluation of clinical competencies will be done formally using the NP Residency III - Clinical Evaluation tool for NP Learners (see appendix A), supplemented through student clinical assignments, clinical skills list, clinical logs, and communication between students, faculty and preceptors to provide robust evaluation of clinical expectations through multiple modes. Preceptors and students will complete a formal evaluation at midterm and final, and students should regularly review clinical progress with their preceptor, obtaining feedback on developing competencies and making plans for addressing ongoing learning needs throughout the term. At a minimum, each student will initiate a review of clinical progress with their preceptor as outlined below:

1. Beginning of Practicum	Establish clear understanding of clinical expectations
2. ~40-50 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
3. ~90-100 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
4. Midterm ~140-150 hours	Formal written evaluation in Typhon and joint phone call between preceptor, student & NPCF to review; NPCF summary of clinical learning and competency development
5. ~190-200 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
6. ~240-250 hours	Complete a self-evaluation of competency development, reviewing with preceptor to obtain feedback on competency development
7. Final (minimum 300 hours)	Formal written evaluation in Typhon and joint phone call with preceptor, student & NPCF to review; NPCF summary of clinical learning and competency development

A joint phone call or video conference between yourself (the learner), your preceptor and NPCF will be done at midterm and final to review the evaluation and progress towards meeting clinical expectations. You will set up the dates for the midterm and final clinical evaluation meeting with your NPCF and preceptor at the beginning of term when you submit your clinical schedule (**by the end of your 3rd clinical day**).

Prior to the midterm and final evaluation meeting with your preceptor and NPCF, the *Clinical Evaluation Tool for NP Learners – Preceptor and Self-Assessment* needs to be completed for your NPCF to review. It is important these are completed in advance so they can be discussed and clarified during the meeting. During evaluation meetings you will discuss your progress towards meeting clinical expectations, examples of clinical competency development, your learning plan, clinical skills list, identified strengths, areas for improvement, and plans for addressing learning needs to meet course clinical expectations.

If significant discordance is identified in preceptor and learner evaluation of competencies, and/or there is concern a learner will not meet clinical expectations, the NPCF will complete the NP Residency I Clinical Evaluation Tool for NP learners, considering evidence from preceptor and learner evaluations, communications with student and preceptor, clinical assignments, Typhon logs, and other evidence of clinical competency performance. A copy of the NPCF evaluation will be shared with the learner on Typhon, and a meeting set up to discuss competency development.

If you have more than one clinical site/preceptor, discuss with your NPCF the timing of your midterm and final evaluations.

At the end of the course, download a hard copy of your final preceptor and self-evaluations from Typhon to keep for your own personal records.

Learning Outcome(s) Addressed: 1-9.

CLINICAL SKILLS LIST

Value: Complete/Incomplete

Due Date: **Within 3 days of completing clinical hours; no later than [insert date]**

Type: The clinical skills list includes common procedures and skills performed by NPs and is used to guide competency development of these skills within the clinical setting.

Description: You will use the same clinical skills list for all your clinical courses, adding new skills to it as you gain clinical competence. Please review the clinical skills list with your preceptor regularly (e.g., weekly) to address opportunity to develop these skills. **Your preceptor should sign off for a skill when they feel you are able to perform the skill independently.** You also need to have the Master Signature Sheet at the end of the Skills List signed by each preceptor. The skills list is intended to guide and supplement clinical learning; acting as an adjunct to the clinical evaluation form. Foundational skills (marked with an asterisk *) are considered ELCs and therefore need to be assessed as independent (signed off) by completion of NURS 878.

Within 3 days of completing clinical practicum hours, and no later than [insert date], a scanned copy of the clinical skills list (including the master signature sheet) need to be submitted to Canvas in the appropriate assignment area.

Learning Outcome(s) Addressed: 1-4

PROFESSIONALISM

Value: Pass/Fail

Due Dates: **Ongoing**

Type: Professionalism is a foundational element of NP competencies, practice standards, and expectations for USask NP students.

Description: As a Registered Nurse (RN) you are accountable to the [RN Practice Standards](#) (CRNS, 2019) and [CNA Code of Ethics](#) (2017). You are expected to consistently display professionalism in interactions with preceptors, clients, peers, instructors, clinical agencies, and the community. This includes respectful communication (written, face-to-face, telephone and/or web-based) as well as other behaviours (e.g., punctuality, appearance, confidentiality, conflict resolution, attitude, time management, accountability, professional boundaries, ethical decision making). **Unprofessional behavior may result in course failure.** Grievous unprofessional conduct may also result in a charge of [academic misconduct](#).

Examples of lapses in professionalism include, but are not limited to:

- Not contacting your preceptor in advance of the course start date to arrange a clinical schedule and discuss clinical expectations;
- Late submission of clinical assignments without prior discussion with your instructor;

- Not notifying the appropriate supervisor (e.g., preceptor, instructor) of an absence from clinical or seminar;
- Failure to adequately prepare for clinical (e.g., you are asked to research/read up on a topic and do not bring appropriate resources to clinical);
- Poor communication with course instructors and/or preceptor regarding clinical scheduling;
- Lack of reliability (e.g., frequent absenteeism or lateness, saying an assessment has been completed when it has not been completed);
- Breach of patient confidentiality;
- Receiving or responding to feedback inappropriately;
- Failing to promptly return communications from instructors or preceptors;
- Misrepresenting yourself (e.g., saying you have performed an assessment skill in the past when you have not)
- Engaging in inappropriate and/or offensive communication with colleagues or instructors

When a lapse in professionalism is noted by an instructor, a meeting will be called with the student and course instructor(s) to review the identified concern, providing opportunity for the student to respond to the concern and for instructors to provide feedback on professionalism expectations. The conversation and feedback on expectations moving forward will be documented, and a copy of documentation provided to the student by email. If after this discussion, the instructor evaluates the student would benefit from further learning support, a *Learning Support Plan* will be initiated in alignment with the [NP Program Progression and Remediation Policy](#). The *Learning Support Plan* will outline expectations and supports, as well as consequences of further professionalism concerns, which may include course failure. In cases of significant professionalism concerns in which there is potential for or actual harmful consequences for others, or there is a gross breach of a well-recognized standard of RN practice, NP Program Academic Lead will be consulted to discuss management, which may include immediate removal from the clinical setting and/or course failure.

Learning Outcome(s) Addressed: 8

SUBMITTING ASSIGNMENTS

Assignments will be submitted in electronic format in Canvas, unless otherwise specified. When naming electronic files for submission, please use the following naming: initial last name_assignment (i.e. JLuimes_ReflectivePractice1).

LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

1. Assignments will be graded according to the College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result

in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.

2. Students are required to complete all course components to receive credit for a course.
3. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

ATTENDANCE EXPECTATIONS

Regular, punctual attendance and active participation at scheduled seminars is expected. Seminar and/or lab activities may be designated as mandatory in the course syllabus and absenteeism from these activities may result in the inability to meet course requirements and therefore failure in the course. If you will be absent from a scheduled learning activity through no fault of your own (e.g., illness, bereavement), please contact your instructor as soon as possible to discuss if and how missed time will be addressed. Students are required to have appropriate technology, including a headset with microphone, webcam and reliable high speed internet to facilitate participation in online learning activities.

FINAL EXAMINATION SCHEDULING

The final exam in this course must be done on the date and time scheduled. If a student is unable to write an exam through no fault of their own (e.g., for medical reasons), they should notify their instructor as soon as possible. With proper documentation (e.g., doctors note) an opportunity to write the missed exam may be given in compliance with [University Policy on Supplemental and Deferred Examination](#). Please review all examination policies and procedures to familiarize yourself with expectations: <https://cgps.usask.ca/policy-and-procedure/Academics/examinations.php>

FITNESS TO PRACTICE STATEMENT

By arriving to the clinical or lab setting and proceeding to provide patient care, students are acknowledging that they can demonstrate fitness to practice ([CRNS RN Practice Standard 5: Self-Regulation, p. 8](#)). Fitness to practice are "all the qualities and capabilities of an individual relevant to their practice as a nurse, including but not limited to the freedom from any cognitive, physical, psychological or emotional condition and dependence from alcohol or drugs that impairs their ability to practice nursing" ([CNA, 2017b, p.22](#)). If students do not have the necessary physical, mental or emotional capacity to practice safely and competently, they must withdraw from the provision of care after consulting with their instructor or preceptor.

NP PROGRAM EXAM PROCEDURES



All tests/exams, unless otherwise specified in the syllabus, will be written individually, online, with remote proctoring using video conferencing (e.g., Zoom®). You are required to have a reliable internet connection and a webcam that can be positioned to provide a side view (e.g., webcam on a tripod, separate device with a webcam). Throughout the exam your webcam should be positioned to capture your side profile, including your upper torso, head, desktop and computer screen. (See example picture).

Unless otherwise specified, use of mobile or other electronic devices, other than the exam program, is not permitted during exams. Please refer to [University of Saskatchewan Exam writing procedures](#). The online exam sessions will be recorded. Once the course is completed, the recorded sessions will be deleted.

EXAM GUIDELINES

Although students will write the exams from their home computer using remote invigilation, it is the University's expectation that students approach the exam as though they were writing an in-person invigilated exam. In addition to the [University of Saskatchewan Exam Regulations](#) students are expected to follow these guidelines:

1. Students are expected to start their exam at the scheduled start time. ***Please log in a minimum 15 minutes early to ensure you are on time and your technology is working.***
2. Students starting the exam later than 30-minutes after the start of the examination may be denied the opportunity to sit the exam.
3. At the end of the scheduled examination time, the exam software will automatically close the exam.
4. Students are expected to go to the washroom prior to the exam to minimize disruptions.
5. Students who need to get up and move out of the camera view for any reason (e.g., address an urgent issue, washroom break) must clearly indicate the reason to the invigilator prior to moving and return to the exam as quickly as possible.
6. Students are not permitted to have any books, notes, calculators or electronic devices other than those being used for the exam/invigilation near them during the exam. This includes cell phones, tablets, iPods, etc. The notes, calculator, text highlighting, and missing answer reminder functions will be enabled on Examssoft to facilitate any necessary note taking.

7. Communicating with any other individual (other than to speak to the screen for invigilation purposes) is not permitted during the exam.
8. Prior to or during an exam, the invigilator may ask a student to pan the room with their webcam, to confirm exam guidelines are being met (e.g., student is alone, there are no accessible textbooks or electronics).
9. Students should wear clothing acceptable in an in-person environment.
10. Students should avoid using inappropriate language.
11. Students may have water and a small snack for the exam, but these items must be in place before the exam begins. Students are not allowed to take breaks to get food or drinks.
12. Students should avoid whispering or talking to themselves during the exam. Any student found talking during an exam will have their microphone turned on by the invigilator.
13. Students need to ensure their webcam lens is clean prior to the exam and that the angle of the webcam allows proper viewing of the upper torso, head, desk and computer screen. Students also need to ensure lighting is appropriate to allow the invigilator to see their face.
14. Students should not change rooms while writing an exam, unless for urgent reasons. Students should explain the reason for changing rooms to the invigilator prior to moving.
15. Students should write the exam in a private space (e.g., home office or kitchen table).

COMPLETION OF WORK & LATE ASSIGNMENTS

As per graduate program policy (<https://nursing.usask.ca/policies/graduate.php>):

4. Assignments will be graded according to the **College of Graduate & Postdoctoral Studies Grading Scale and Literal Descriptors**. Students must submit all required assignments before or on the specified dates. Late submission without the professor's prior consent (extension granted) will result in a deduction of 5% of the assignment grade per calendar day and a grade of 0% for all unexcused assignments submitted five business days after the assignment deadline.
5. Students are required to complete all course components to receive credit for a course.
6. Unless other arrangements have been made with the course facilitator, the last day for acceptance of assignments will be communicated in each course syllabus.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

Before you copy or distribute others' copyright-protected materials, please ensure that your use of the materials is covered under the University's Fair Dealing Copyright Guidelines available at <https://library.usask.ca/copyright/general-information/fair-dealing-guidelines.php>. For example, posting others' copyright-protected materials on the open web is not covered under the University's Fair Dealing Copyright Guidelines, and doing so requires permission from the copyright holder.

For more information about copyright, please visit <https://library.usask.ca/copyright/index.php> or contact the University's Copyright Coordinator at <mailto:copyright.coordinator@usask.ca> or 306-966-8817.

RECORDING OF THE COURSE

At the University of Saskatchewan, the classroom is considered a private setting. Recording of lectures without the written consent of the instructor is prohibited. Students registered with AES who have been assessed as benefiting from lecture recordings may record lectures after informing the instructor and confirming the need to maintain the integrity of the use of the recording for their own learning needs (the recording cannot be copied, distributed or shared with other students and all recordings will be destroyed after completion of the course in each academic term).

EXAMINATIONS WITH ACCESS AND EQUITY SERVICES (AES)

Students who have disabilities (learning, medical, physical, or mental health) are strongly encouraged to register with Access and Equity Services (AES) if they have not already done so. Students who suspect they may have disabilities should contact AES for advice and referrals. In order to access AES programs and supports, students must follow AES policy and procedures. For more information, check www.students.usask.ca/aes, or contact ES at 306-966-7273 or aes@usask.ca.

Students registered with AES may request arrangements for mid-term and final examinations by contacting their course instructor directly. Requests are NOT made through Accommodate as all exams are written online.

STUDENT FEEDBACK

Students are encouraged to provide feedback on the instructor and course at the end of the term. Students will receive a PAWS email with links to an online course evaluation survey. Results of the survey will contribute to course changes and instructor feedback for course delivery.

WITHDRAWAL DEADLINE

USask withdrawal deadlines can be found on the University website: <https://students.usask.ca/academics/deadlines.php>

INTEGRITY IN A REMOTE LEARNING CONTEXT

Although teaching and learning online is a different environment than a traditional classroom, the rules and principles governing academic integrity remain the same. If you have questions about what may or may not be permitted, ask your instructor. Students have found it especially important to clarify rules related to exams administered remotely and to follow these carefully and completely.

The University of Saskatchewan is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Student Conduct & Appeals section of the University Secretary Website and avoid any behavior that could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

Scholarship, including development of scholarly writing skills, is an essential learning outcome of Masters level nursing education (CASN, 2022). In order to effectively develop and evaluate student writing skills, students are expected to create and submit their own original assignments. In addition to the definition and examples of Academic Misconduct outlined in the [University of Saskatchewan Academic Misconduct Regulations](#), students are not permitted to use of Artificial Intelligence (AI) text generators (such as ChatGPT) for assessments (e.g., written assignments, open book exams, other evaluations) .

All students should read and be familiar with the Student Academic Misconduct Regulations (<https://governance.usask.ca/student-conduct-appeals/academic-misconduct.php>) as well as the Standard of Student Conduct in Non-Academic Matters and Procedures for Resolution of Complaints and Appeals (<https://governance.usask.ca/student-conduct-appeals/non-academic-misconduct.php>)

For more information on what academic integrity means for students see: <https://academic-integrity.usask.ca/>

STUDENT SUPPORTS

ACADEMIC HELP FOR STUDENTS

The University Library offers a range of learning and academic support to assist USask undergrad and graduate students. For information on specific services, please see the Learning page on the Library web site <https://library.usask.ca/support/learning.php>.

Remote learning support information <https://students.usask.ca/study/remote-learning.php>

Remote learning tutorial https://libguides.usask.ca/remote_learning

Study skills materials for online learning <https://libguides.usask.ca/studyskills>

TEACHING, LEARNING AND STUDENT EXPERIENCE

Teaching, Learning and Student Experience (TLSE) provides developmental and support services to students and the university community. For more information, see <http://students.usask.ca>.

FINANCIAL SUPPORT

Any student who faces challenges securing their food or housing and believes this may affect their course performance is urged to contact Student Central (<https://students.usask.ca/student-central.php>).

ABORIGINAL STUDENTS' CENTRE

The Aboriginal Students' Centre (ASC) is dedicated to supporting Aboriginal student academic and personal success. The centre offers personal, social, cultural and some academic supports to Métis, First Nations, and Inuit students. The centre is also dedicated to intercultural education, bringing Aboriginal and non-Aboriginal students together to learn from, with and about one another in a respectful, inclusive and safe environment. Students are encouraged to visit the ASC's Facebook page (<https://www.facebook.com/aboriginalstudentscentre/>) to learn more.

RECOMMENDED TECHNOLOGY FOR REMOTE LEARNING

Students are reminded of the importance of having the appropriate technology for remote learning. The list of recommendations can be found at <https://nursing.usask.ca/technology/overview.php>

GUIDELINES FOR COMMUNICATION

Respectful written and verbal communication are an expectation for students and instructors. Please view the following USask guidelines on Netiquette:

<https://teaching.usask.ca/documents/gmctl/netiquette-usask-detailed-270720.pdf>

As Registered Nurses, you are accountable to your governing body professional standards and regulation. This includes the [CNA Code of Ethics](#), and other regulatory standards such as those on [Professional Boundaries](#) and [Social Media](#). You are encouraged to review these regulations as necessary.

SYLLABUS CHANGES

The instructor reserves the right to make changes to the syllabus reading material and seminar schedule to accommodate scheduling of guest lectures or clinical updates. If changes are made students will be contacted by email, using their USask email address, and a posting will be placed in the course Canvas site. It is the students' responsibility to routinely check their USask email and Canvas.

TECHNICAL SUPPORT

If you need assistance with technical support, contact IT services help desk or the College of Nursing IT services. itsupport@usask.ca or 306-966-2222

ACKNOWLEDGEMENTS

Contributions to this course were provided by faculty and instructors in the University of Saskatchewan NP program.

APPENDIX A: RESIDENCY III - CLINICAL EVALUATION TOOL FOR NP LEARNERS

The University of Saskatchewan Nurse Practitioner (NP) Program is a competency-based education program that supports learners to develop [NP Entry Level Competencies \(ELCs\)](#) (CRNS, 2023) and

[Practice Standards](#) (CRNS, 2024). NP ELCs and Practice Standards related to direct clinical practice are ladderred across three clinical courses, with the expectation that students develop increasing independence and precision in clinical performance as they progress from practicum I to practicum III.

EVALUATION OF CLINICAL COMPETENCY

Learner Self-Assessment: Students are expected to take an active role in their learning by participating in regular self-reflection and assessment of competency development. This includes documenting examples of progress towards ELCs and Practice Standards, reflection on strengths and areas for growth, and identification of learning strategies to address areas for growth.

Feedback (Formative Evaluation): Consistent feedback on strengths and areas for growth is a key component of competency development. Preceptors and learners should regularly discuss progress towards meeting competencies. Learners are expected to consistently seek formative feedback (i.e. every 40 hours or once per week). This formative evaluation (feedback) helps identify and address learning needs in a timely manner, supporting learners to successfully meet clinical expectations.

Summative Evaluation: Preceptors and learners will complete a summative evaluation at midterm (halfway point) and upon completion of clinical hours using the Clinical Evaluation Tool for NP Learners, discussing evaluation with each other and the assigned NP Clinical Facilitator.

Learning Support Plan: If a learner is at risk for not meeting learning outcomes at any point during the clinical, a learning support plan may be implemented to help support learning. Learning support plans will be individualized to learner needs and capacity of clinical placements to support these needs.

Competency Evaluation: Assessors will use the [Entrustability Scale](#) to evaluate the level of supervision required for a learner to safely perform professional NP competencies. With repeated clinical exposure, learners should develop increasing ability to perform competencies with less assistance so that by graduation they can perform all competencies autonomously, at the [Independent & Competent](#) level. Minimum performance expectations for this clinical are highlighted in the [Clinical Expectations](#) and in each competency assessment category. The USask NP Student Clinical Placement Manual includes supplemental information on clinical evaluation and example performance indicators for each practicum to support evaluation.

ENTRUSTABILITY SCALE

Independent & Competent	"I did not need to provide direct supervision or direction for safe, competent patient care."
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	Learner consistently and independently demonstrates competency at the level of a novice NP, including being self-directed in consulting and referring matters outside of their scope of practice
Moderate Guidance Needed	<p>"I needed to prompt."</p> <p>Learner requires prompting from time to time to complete competency</p> <p>You are comfortable leaving learner alone in the room to assess patients - indirect supervision required</p>
Considerable Guidance Needed	<p>"I needed to provide repeated direction."</p> <p>Learner requires regular assistance, supervision and/or direction to complete competency</p> <p>Learner usually requires verbal and/or physical cues to complete competency</p>
Constant Guidance* Needed	<p>"I needed to do."</p> <p>Learner lacks knowledge, skill, and/or judgement to perform competency without repeated guidance – direct supervision required</p> <p>Learner is unprepared to provide competent, safe patient care and/or or does not demonstrate professional standards of practice</p>

***Please contact the NP Instructor promptly if a learner repeatedly demonstrates need for constant guidance or unsafe practice**

OVERVIEW OF CLINICAL EXPECTATIONS

Practicum III focuses on refining and consolidating clinical competencies to the level of an entry-level NP. Learners will develop independence and increased confidence applying NP ELCs and Practice Standards to a variety of patient populations across the age spectrum with acute, chronic, and comorbid health concerns. Clinical expectations by completion of practicum III include:

- Assessment (Independent & Competent):** Independence completing and interpreting findings from focused and comprehensive health assessments for a variety of patient presentations and concerns seeking appropriate consultation if situation is beyond the scope of entry level practice. Ability to independently select and interpret appropriate diagnostic investigations for a variety of client presentations and acuity levels. When uncertain, initiates consultation as would be appropriate for an entry-level NP.

- **Diagnosis (Independent & Competent):** Ability to independently determine appropriate differential, leading and must-not-miss diagnosis for patients presenting with a variety of health concerns.
- **Management & Counselling (Independent & Competent):** Ability to independently develop and implement comprehensive evidence-based, patient centered therapeutic care plans for a variety of patient presentations, complexities, acuity levels and populations. Consistent demonstration of interprofessional competencies of an advanced practice nurse (i.e. consultation, collaboration, referral, communication, leadership, role clarification).
- **Transition of Care (Independent & Competent):** Ability to independently support safe and effective transition of care (i.e. admission, discharge, connection with community services).
- **Documentation (Independent & Competent):** Accurate and complete documentation for a variety of client presentations and acuity levels, including competence in written referrals, consultation, and transition of care (i.e. admission, discharge planning, care coordination).
- **NP Role & Responsibilities (Independent & Competent):** Consistent and independent accountability to professionalism expectations of an advanced practice role. Independent application of NP Practice Standards. Proficient time-management skills at the level of a novice NP.

Preceptor:

Clinical Site:

Student:

NPCF:

Person Completing Evaluation:

Date:

of clinical hours at time of evaluation: Type of Evaluation: Midterm or Final

ASSESSMENT COMPETENCIES.
<ul style="list-style-type: none"> • Establishes reason for client encounter to determine nature of services required, including urgency (1.1) • Obtains informed consent according to legislation and regulatory requirements (1.2)

- Analyzes and synthesizes information from multiple sources (e.g., biopsychosocial profile, culture, medical history, medication history, investigations, research, client strengths) to identify client needs and inform assessment and diagnosis (1.3)
- Conducts assessment relevant to the client’s presentation to inform diagnostic decisions (1.4)
- Employs evidence-informed virtual care strategies (1.16)

Notes & observations related to ASSESSMENT competency development

[Link to Clinical Expectations and Example Indicators for Assessment](#)

Midterm:

Final:

Evaluation – ASSESSMENT Competencies

Minimum expectation by completion of practicum III: Independent & Competent

	Constant Guidance Needed	Considerable Guidance Needed	Moderate Guidance Needed	Independent & Competent
Midterm				
Final				

DIAGNOSIS COMPETENCIES

- Integrates critical inquiry and diagnostic reasoning to formulate differential diagnosis and final (most likely) diagnosis through (1.5):
 - Correct interpretation of investigations
 - Generating and narrowing appropriate differentials
 - Creating shared understanding of assessment findings, diagnosis, anticipated outcomes and prognosis
 - Determining leading diagnosis based on clinical and diagnostic reasoning

Notes & observations related to DIAGNOSIS competency development

[Link to Clinical Expectations and Example Indicators for Diagnosis](#)

Midterm

Final:

Evaluation – DIAGNOSIS Competencies

Minimum expectation by completion of practicum III: Independent & Competent

	Constant Guidance Needed	Considerable Guidance Needed	Moderate Guidance Needed	Independent & Competent
Midterm				
Final				

MANAGEMENT COMPETENCIES

- Uses clinical reasoning to create a shared management plan based on diagnoses and the client's preferences and goals (1.6)
- Prescribes and counsels clients on pharmacological and non-pharmacological interventions, across the lifespan (1.7).
- Performs invasive and non-invasive interventions as indicated by the management plan (1.8)
- Evaluates the effectiveness of the management plan to identify required modifications and/or terminations of treatment (1.9)

Notes & observations related to MANAGEMENT competency development

[Link to Clinical Expectations and Example Indicators for Management](#)

Midterm:

Final:

Evaluation – MANAGEMENT Competencies

Minimum expectation by completion of practicum III: Independent & Competent

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

COUNSELLING COMPETENCIES	
<ul style="list-style-type: none"> • Co-creates a therapeutic counselling relationship that is conducive to optimal health outcomes (1.10) • Provides counselling interventions as indicated by the management plan (1.11) • Applies harm-reduction strategies and evidence-informed practice to support clients with substance use disorder while adhering to federal and provincial/territorial legislation and regulation (1.12) • Develop and provide education to build capacity and enhance knowledge and skills (4.1) • Evaluate the learning and delivery methods to improve outcomes (4.2) 	
<p>Notes & observations related to COUNSELLING competency development</p> <p style="text-align: center;"><u>Link to Clinical Expectations and Example Indicators for Counselling</u></p>	
Midterm:	
Final:	

Evaluation – PROFESSIONAL NP ROLE & RESPONSIBILITIES Competencies				
Minimum expectation by completion of practicum III: Independent & Competent				
	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

Additional Section for PRECEPTOR to Complete

Please Check to Indicate you have reviewed the following:

MIDTERM	FINAL
<input type="checkbox"/> Learning Plan <input type="checkbox"/> Clinical Skills List <input type="checkbox"/> Learner's self-assessment	<input type="checkbox"/> Learning Plan Evaluation <input type="checkbox"/> Clinical Skills List <input type="checkbox"/> Learner's self-assessment

Additional comments from preceptor related to learner strengths and learning needs:

Is this student meeting NP entry-level competencies and practice standards and ready to start practice as an independent nurse practitioner?

YES NO – If No, please explain:

Additional Section for LEARNER to Complete:

LEARNING PLAN - Self-Assessment of progress (MIDTERM):

LEARNING PLAN EVALUATION - Self-Evaluation of learning plan outcomes (FINAL):

CLINICAL SKILLS LIST – Progress and Plans to address gaps (MIDTERM & FINAL):

LEARNER REFLECTION on APPLICATION OF COMPETENCIES to different populations, acuity levels, health conditions (i.e. ICD-10 codes), complexity, and/or settings. Consider your Typhon log summaries to identify strengths and opportunities (MIDTERM & FINAL):

Learner identified strengths, learning needs, and plans to address needs (MIDTERM & FINAL):

Are you meeting NP entry-level competencies and practice standards and ready to start practice as an independent nurse practitioner?

- YES NO – If No, please explain:

Additional Section for NPCF to Complete – The NPCF will only complete a Clinical Evaluation if significant discordance is noted between preceptor and learner evaluation and/or there is concern regarding the learner not meeting clinical expectations. The NPCF will consider multiple sources of data in completing the evaluation including preceptor and student evaluations, communication with the learner and preceptor, clinical assignments, and other evidence of competency development.

Reason for NPCF Clinical Evaluation being completed (Select all that Apply):

- Discrepancy between student and preceptor evaluation
- Concern of learner not meeting clinical expectations
- Other (please specify):

Please explain reason for NPCF completing evaluation further here:

Learner strengths identified by NPCF:

Learning needs identified by NPCF:

Based on available evidence, what is the overall level of supervision this learner requires?

	<u>Constant Guidance Needed</u>	<u>Considerable Guidance Needed</u>	<u>Moderate Guidance Needed</u>	<u>Independent & Competent</u>
Midterm				
Final				

Is this student meeting NP entry-level competencies and practice standards and ready to start practice as an independent nurse practitioner?

- YES NO – If No, please explain:

NPCF Recommendation

Preceptor Signature & Date:

Learner Signature & Date:

NPCF Signature & Date:

CLINICAL EXPECTATIONS & EXAMPLE INDICATORS

ASSESSMENT COMPETENCIES

ELCs 1.1-1.5, 1.16

Clinical Expectations	<ul style="list-style-type: none"> • Independence completing and interpreting findings from focused and comprehensive health assessments for a variety of patient presentations and concerns. When uncertain, is self-directed initiating appropriate consultation as would be expected of a novice NP. • Ability to independently select and interpret appropriate diagnostic investigations for a variety of client presentations and acuity levels. When uncertain, initiates consultation as would be appropriate for an entry-level NP.
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Determine the reason for visit and prioritize concerns as routine, urgent, emergent, or life threatening • Support patients to make informed decisions, obtaining informed consent and co-creating a shared understanding of care • Collect a focused or comprehensive health history appropriate to the presenting concern(s) • Synthesize and interpret findings from history to guide selection of appropriate physical exam and differential diagnosis • Perform and correctly interpret findings of physical exam to inform differential diagnosis • Conduct assessment demonstrating principles of cultural safety, equity, diversity and inclusion and trauma and violence informed care • Select, apply and correctly interpret relevant assessment tools (i.e. screening questionnaires, growth charts), evidence-based guidelines and literature to inform assessment • Order and interpret evidence-based screening and diagnostic investigations, applying principles of resource stewardship • Discuss and support client wishes related to advanced care planning, palliative and end-of-life care • Implement evidence-based virtual care, applying relevant regulatory and legal considerations and adapting assessment appropriately for the virtual environment

DIAGNOSIS COMPETENCIES

ELC 1.5

Clinical Expectations	<ul style="list-style-type: none"> • Ability to independently determine appropriate differential, leading and must-not-miss diagnosis for patients presenting with a variety of health concerns
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Accurately interpret assessment findings and diagnostic investigations to determine differential diagnosis, including must-not-miss diagnosis, for a variety of client presentations, complexities, and populations • Correctly identify leading (most likely) diagnosis for a variety of client presentations, complexities and populations • Apply principles of health literacy and therapeutic communication to discuss assessment findings and diagnosis with client, promoting a shared understanding

MANAGEMENT COMPETENCIES

ELCs 1.2, 1.6, 1.7, 1.9, 1.11, 1.13, 2.1, 2.3, 4.1-4.2, & NP Practice Standards

Clinical Expectations	<ul style="list-style-type: none"> • Ability to develop and implement comprehensive evidence-based, patient centered therapeutic care plans for a variety of patient presentations, complexities, acuity levels and populations. • Consistently demonstrates interprofessional competencies of an advanced practice nurse (i.e. consultation, collaboration, referral, team functioning, communication, leadership, role clarification)
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Apply, adapt, evaluate and coach others in evidence-based health promotion, screening and education to meet individual patient needs • Independently develops and implements evidence-based, patient centered management plans, using a shared decision making approach, for a variety of client presentations, complexities, acuity levels and populations • Demonstrates interprofessional competencies in team work, role clarification, communication, leadership, consultation, collaboration and referral • Develops comprehensive evidence-based care plans that consider pharmacotherapy, non-pharmacotherapy, investigations, monitoring, follow-up, and patient education • Considers resources, patient preferences, regulatory parameters and stewardship in development of management plans • Independently selects and performs invasive and non-invasive procedures appropriate to the patient presentation and within scope of practice

	<ul style="list-style-type: none"> • Independently writes prescriptions that comply with evidence-based practice and regulatory standards • Independently counsels patient on evidence-based pharmacological and non-pharmacological management options • Evaluates the effectiveness of management, adjusting or terminating interventions as required
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COUNSELLING COMPETENCIES

ELCs 1.10-1.12, 3.2, 3.3, 4.1, 4.2

Clinical Expectations	<ul style="list-style-type: none"> • Ability to co-create therapeutic counselling relationships and provide counselling interventions as indicated by the management plan (i.e. motivational interviewing, trauma and violence informed care, creating safe spaces, applying principles of harm reduction)
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> • Apply advanced communication strategies and cultural safety to establish therapeutic counselling relationship • Independently provide motivational interviewing, trauma and violence informed care and other counselling approaches appropriate to client presentation • Independently recognize and refer patient's requiring advanced counselling to another appropriate provider, after discussion with patient • Appropriately implement harm reduction strategies to support individuals with substance use disorder • Provide appropriate patient education, considering evidence-informed practice, health literacy, culture, and other factors that influence learning • Evaluate and adapt patient education to improve outcomes (i.e. applies teach-back techniques, asks patient's to explain their understanding, supports patient to demonstrate technique)

TRANSITION OF CARE COMPETENCIES

ELCs 1.13 & 1.14

Clinical Expectations	<ul style="list-style-type: none"> Ability to support safe transition of care, including admission and discharge planning
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> Identify when a patient would benefit from transition of care and initiates appropriate transfer (i.e. transfer to ED, specialist care, allied health care provider) Write comprehensive and appropriate referral letters Demonstrate competence verbally consulting with other providers to support client care (i.e. calling on-call specialist for advice, collaborating with community programs to support client care needs) Assess and help client access resources to support care transition (i.e. transportation, financial means, drug coverage, cultural fit, knowledge, etc.)

DOCUMENTATION COMPETENCIES

ELCs 1.13-1.16

Clinical Expectations	<ul style="list-style-type: none"> Accurate and complete documentation for a variety of client presentations and acuity levels, including competence in written referrals, consultation and transition of care (i.e. admission, discharge planning, care coordination)
Example Indicators	<p>Learner is able to:</p> <ul style="list-style-type: none"> Independently, accurately and appropriately complete documentation for a variety of client presentations and acuity levels

PROFESSIONAL NP ROLE & RESPONSIBILITIES COMPETENCIES

ELCs 1.15, 2.1, 2.2, 3.1-3.5 & NP Practice Standards

Clinical Expectations	<ul style="list-style-type: none"> Consistent and independent accountability to professionalism expectations of an advanced practice role and application of NP Practice Standards. Proficient time-management skills at the level of a novice NP
Example Indicators	<p>Learner is able to demonstrate:</p> <ul style="list-style-type: none"> Professional conduct and accountability (i.e. regular punctual attendance, clear professional communication, timely patient follow-up, reliability, etc.) Ability to clearly articulate and consistently apply NP Practice Standards, Entry-Level Competencies, Scope of Practice and the Canadian Nurses Association Code of Ethics across settings and with various populations Awareness and ability to consistently practice in accordance with regulatory body guidelines, federal and provincial legislation, and agency policy Growth mindset, engaging in self-directed learning and reflective practice to address competency development

	<ul style="list-style-type: none">• Ability to effectively elicit, incorporate and receive feedback• Provision of culturally safe, anti-racist care, contributing to practice environments that are equitable and inclusive• Ability to clearly articulate the NP role to clients, members of the health care team and the public• Provision of safe, ethical, competent care that is in the clients best interest• Leadership that contributes to high quality health (i.e. situational awareness, conflict resolution, collaboration, building partnerships, communication skills, etc.)• Ability to prioritize client concerns appropriately within appointment timeframe• Completion and documentation of client care within appropriate timeframe• Consistent, proactive and self-directed behaviours in seeking out learning opportunities and appropriate strategies to address learning needs• Ability to plan and organize workload to provide efficient and effective care
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Updated 2022



Consultation with the Registrar (CWR) – Proposal Highlights

Title of Proposal: Master of Nursing (M.N.) Nurse Practitioner – Replacement Program and Termination of Primary Health Care Concentration

General Description: The college is revising the current M.N. Nurse Practitioner program. Revisions include the following: 13 new courses, increase of overall credit units from 36 to 45, revised admission requirements, and termination of the concentration in *Primary Health Care*. (Note that “concentration” refers to a “theme” or “focus” within the program of study.) Current students (those admitted to the program *prior* to 2026-27) will be able to complete the program to which they were admitted, according to the Time Limit for Degree Completion rules in the College of Graduate and Postdoctoral Studies. These rules are outlined in the *University Catalogue*.

Degree College: College of Graduate and Postdoctoral Studies

College Approval: Received College of Graduate and Postdoctoral Studies on October 23, 2024

Effective Term: May 2026

Course implications

- 13 new courses
- Use existing “NURS” course subject code; no new course subject code is necessary

Registration and classes

- Class time slots, terms, and sessions will be similar to the existing schedule
- Room scheduling needs will be similar to current needs

Convocation

- No new hood

Financial and Budget

- Existing tuition rate will be maintained (\$14,001.00); however, method of tuition assessment will change from program rate to per credit unit assessment
- SFO and Provost’s Office approved to proceed with CWR step

Student Mobility

- No unique mobility or external partners/agreements

