



DOUGLAS COLLEGE

# **Comprehensive Program Review**

## Faculty of Health Sciences

### Bachelor of Nursing

Accrediting Bodies:

Canadian Association of Schools of Nursing (Accrediting)

BC Colleges of Nurses and Midwives (Approving)

## Table of Contents

---

1. Gap Analysis	Page 3
2. Response from the Vice President Academic and Provost	Page 8

## DDP Accreditation Reports vs. Douglas College Comprehensive Program Review: GAP ANALYSIS

**DDP and credential type:** Bachelor of Science in Nursing  
**Accrediting body:** Canadian Association of Schools of Nursing (Accrediting) and BC College of Nurses and Midwives (Approving)

**Accreditation report submission date:** 1/31/2022

CPR COMPONENT	CPR CONTENT	FOR CPR: SUGGESTED FORMAT AND INFORMATION/DATA SOURCES	ACCREDITATION REPORT CONTENT
Prelim pages	<a href="#">Title Page</a>		✓
Prelim pages	<a href="#">Table of Contents</a>		✓
Prelim pages	<a href="#">Scope of the Self-Study</a>		✓
Prelim pages	<a href="#">Recommendations</a> (Summary + Summary List)		X
Prelim pages	<a href="#">Previous CPR List of Recommendations</a> , DDP IAP and 1-year Follow-Up Report	Add text <u>only</u> if rationale for inaction needed	X (N/A?)
Prelim pages	<a href="#">Overview – Methodology/Process</a>	Text	X
1.	<a href="#">Program Content/Curriculum</a>	Text; table(s) (templates provided)	✓ Focus of 1 <sup>st</sup> std – full charts X most recent CG update (although 5-year max. is cited, re: <i>CG Policy</i> , and annual review at May meetings noted [need to check actual CGs—provide list in supplemental CPR]) X Refer to DQAB-approved curriculum framework and note any re-structuring, course substitution or other “drift” since approval
2.	<a href="#">Core Competencies and Program Outcomes</a>	Approved (Ed Co, DQAB) program documentation; excerpts from College Strat Plan, Vision/Values (source: website)	✓ In 1 <sup>st</sup> std ✓ In 2 <sup>nd</sup> std
3.	<a href="#">Experiential Learning Opportunities</a>	Tables (templates provided) (data sources: DDP practicum placement records, DCI, Career Centre, etc.); quotations/anecdotes (source: surveys)	✓ Implicit in 1 <sup>st</sup> std and throughout clinical content ✓ In 2 <sup>nd</sup> std (e.g., pp. 42ff: simulation centre section)
4.	<a href="#">Program/Course Delivery</a>	Text; table (sources: Tableau; surveys); cross-functional input (source: surveys)	✓ Grading standards, norming, consistency of rigour (p. 59) ✓ Progression considerations (pp. 73ff) at general level

5.	<a href="#">Engagement with College Mandate, Priorities and Strategic Plan</a>	Text (sources: excerpts from CGs, DDP website, minutes; from DC Strat Plan, Vision/Values)	<p>App. EEE BSN Strat Plan – noted as Draft in 2020-23</p> <ul style="list-style-type: none"> <li>• Recommend pulling the document (updated version if available) into the body of CPR and commenting on its alignment with HS Faculty and DC strat plans; also, report on progress on the initiatives listed</li> <li>• BSN NCLEX Strat Plan (pp. 778ff in Appendix) + pp. 803ff</li> <li>• App. CCCC HS Strat Plan 2020-23 (pp. 833ff) – ✓ shows total alignment; could just be referred to in supplemental CPR</li> </ul>
6.	<a href="#">Student Outcomes</a>	Charts/tables (source: AR), quotations/anecdotes (source: surveys)	<p>X No data given on course fails, repeats, progression issues Program attrition addressed in Appendix (p. 780) re: Strat Plan; recommend pulling out highlights of issues and resolutions</p> <ul style="list-style-type: none"> <li>✓ In clinical – course evals ask re: placement suitability</li> <li>✓ Preceptor surveys on student performance (pp. 75ff)</li> <li>✓ 3<sup>rd</sup> std: Graduates – see table p. 83 for overview of mechanisms</li> <li>✓ Grad surveys sent annually – <math>\Sigma</math> of improvement ideas p. 94</li> </ul> <p>X Details captured through them (e.g., new focus group: areas identified for improvement?) Recommend updating CPEC Action Plan (pp. 770ff in Appendices) and capturing most recent CPEC review (p. 85 AccR)</p> <ul style="list-style-type: none"> <li>• Recommend also updating the data on first-time pass rates for program grads (Tables 13-15, pp. 86-87)</li> </ul>
7.	<a href="#">Admissions, Enrolments, FTE</a> (criteria, application, yield rate)	Charts/tables/graphs (sources: AR; surveys; website); text	<ul style="list-style-type: none"> <li>✓ AFN outlined in Overview, incl. recent changes + wait time to admission</li> <li>✓ Applicant pool sizes also in Overview</li> </ul> <p>X Discussion of demographics of population; expected future demand/enrolments; any</p>

			issues with converting applicants to registrants; attrition
8.	<a href="#">Transfer and Pathways</a> (credential laddering; articulation; BTAs)	Text; information from <a href="#">BC Transfer Guide</a> (template provided)	✓ AFN + tsf outlined in Overview X Not evident if there are transfer agreements, BTAs or known grad school pathways
9.	<a href="#">PACs and External Partnerships</a> (includes placement site considerations)	Motion/recommendations from PAC minutes; quotations/ anecdotes (source: surveys); text	X PAC in 1 <sup>st</sup> std – had not met for 3 years; no ref. to DC policy; no PAC minutes (appendix) ✓ In 2 <sup>nd</sup> std – placements ✓ In 3 <sup>rd</sup> std – employer surveys and placement surveys/input
10.	<a href="#">Faculty and Professional Development</a>	Table; list (source: Faculty PD logs)	✓ # and qualifications of reg fac X 2 <sup>nd</sup> std (pp. 57-58) does not address depth of expertise or area/QTT coverage, or succession concerns X PD discussion general/list; no evidence of participation or link to curriculum currency (pp. 60ff); no details at all on individuals (need last 4 yrs)
11.	<a href="#">DDP Operations</a>	Table; website extracts; cross-functional input (source: surveys)	✓ Facilities outlined in Overview X Sufficiency of QTT list or contract list not addressed X No info from x-functional areas (survey needed)
12.	<a href="#">Summary: Risks/Challenges/Opportunities</a>	Text; information from <a href="#">WorkBC</a>	✓ Conclusion to 1 <sup>st</sup> std (pp. 31-32) ✓ Placement challenges in 2 <sup>nd</sup> std (pp. 51ff) ✓ Present latest Action Plan (p. 99) X For supplemental info given, and recommend pulling all rec's into the one table at front of CPR
	<a href="#">Appendices*</a> (required vs. optional)	AR (templates) since last CPR or last four years (minimum)	X ARs missing (last 4 yrs)

### Summary of gap analysis:

A modified version of the BSN Comprehensive Program Review (CPR) should provide the following information to supplement the CASN/BCCNM accreditation report (AccR), in order for the BSN program review to be complete and compliant with Douglas College Admin policy A38 *Program Review*:

- ✓ At the outset (**preliminary pages**), a CPR is expected to foreground recommendations and plans for action arising from any previous CPRs (or in this case, accreditation reports), with updates on progress to date and rationale for any recommendations set aside since previous review(s)

- ✓ The supplemental CPR should present a table at the front, by way of an executive summary, pulling together the recommendations from the AccR and any new recommendations arising from the work involved in providing the missing components as identified in this gap analysis (**see Self-Study template for more on this table of recommendations**)
  
- ✓ The AccR presents thorough information on program content/curriculum, but two required elements are missing from the related **component 1** of the CPR Self-Study: a table showing all required courses and providing sections offered per year and the year each CG was most recently revised (to compare against the stated policy requiring review every 5 years); and discussion of how (if at all) the curriculum framework has changed/evolved/drifted away from the framework as it was first granted approval by DQAB/Minister
  
- ✓ The AccR provides department-, Faculty- and College-level strategic plans (**component 5 of the CPR**), but all now out of date; to satisfy the CPR requirement re: engagement at DDP level with the College's Strat Plan, the review team is encouraged to write a brief narrative to explain the existence of these other Strat Plans, and provide an updated table showing the DDP's latest plan, with progress on initiatives noted, with special attention to highlighting links between DDP initiatives and College strategic goals/initiatives
  
- ✓ The AccR describes mechanisms for measuring student outcomes at length (**component 6 of the CPR, and some overlap with component 4**), including from point of view of alumni/grads and employers: supplemental information needed includes
  - specific data: e.g., on course fails, repeats, any progression issues;
  - Recommend pulling the highlights of the discussion of program attrition issues found in an Appendix (p. 780) re: the Strat Plan and summarizing here (in **component 6**)
  - Recommend presenting updated data on first-time pass rates for program grads (Tables 13-15, pp. 86-87 of AccR)
  - Recommend presenting updated CPEC Action Plan (pp. 770ff in Appendices) and capturing most recent CPEC review (p. 85 AccR)
  
- ✓ The AccR provides discussion of admission via year 1 (AFN) and recent changes; some of the data required in a CPR on the program's performance in terms of applications, enrolments, attrition/graduation rates and trends are missing (much of this will be captured simply through inclusion of the Annual Reviews – **component 7 of the CPR and required appendix**)
  
- ✓ The AccR addresses the pathway in (AFN) but does not address transfer credit or transfer students within the BSN years (likely because N/A?); if transfer is not a phenomenon in the BSN, address briefly in the Self-Study in **component 8 of the CPR** why this is not relevant (normally, a large table is constructed to capture recognition of transfer credit at other post-secondary institutions within the BC sector); then add a brief discussion of eligibility of grads to enter relevant graduate programs, and if known, provide any information about their success
  
- ✓ Discussion and required information about the PAC is needed in **component 9 of the CPR**: missing elements include composition of the PAC; discussion of whether it is compliant with the DC PAC Policy; details about its meeting history (there is mention in the 2022 AccR that it had not met in 3 years at the time the AccR was written – update?); listing of and discussion of

advice/motions from the minutes from the most recent 4 years' meetings (minutes could appear as an appendix), and information as to whether the program has responded to these recommendations or chosen not to do so (in which case, a rationale for not responding is expected); the AccR provides good information about clinical placement sites and survey information from alumni/grads – nothing more needed on these aspects of component 9

- ✓ The AccR is missing some required information about individual faculty QTT areas and recent PD (within last 4 years), both as evidence of currency of expertise and as evidence of engagement with the College's Strategic Plan (**component 10 of the CPR**); the AccR outlines the processes and opportunities available for PD but does not present required detail on what individual instructors have actually completed/accomplished, or discuss whether current faculty (including the QTT and contract lists) adequately complement program needs (existing and projected)
- ✓ Some information about program operations is missing/needed (**component 11 of CPR**), particularly input from College departments/areas/services outside the program: this is provided/informed by the required cross-functional survey of staff/faculty in service and educational units outside the program (*see template for the survey tool on DCC*)
- ✓ The supplemental CPR should end with the required identification of risks/challenges/opportunities the program faces (**see component 12 of CPR**); some recommendations are found in the AccR at the end of each "standard" section, and for ease of discussing and following up on priorities, these should be brought forward and incorporated with any additional recommendations that arise from the CPR; this is the conclusion, and a place for consolidating possible/proposed action over the next X years – and this section will be commented on by the VPA and will inform the DDP's Implementation and Action Plan (IAP)

#### Further Steps:

1. The Dean supplements the Self-Study with costing information on the degree program, provided by Finance, and forwards to the VPA
2. The self-study typically goes next to 2-3 external reviewers before the VPA responds and provides recommendations to guide the program's efforts over the next years (prior to the next CPR); **given the role of the external accrediting body, the Dean and VPA may agree to waive this requirement**
3. The VPA responds to the program and Dean, providing recommendations as noted in (2)
4. Within 45 days of receiving the VPA's response, the program provides the Dean and VPA with an Implementation Action Plan (IAP), outlining commitments and leads for follow-up actions
5. The Dean follows up on progress on the IAP within one year of its submission



**DOUGLAS COLLEGE COMPREHENSIVE REVIEW (CR)  
RESPONSE FROM THE  
OFFICE OF THE VICE-PRESIDENT, ACADEMIC AND PROVOST**

Douglas College Administration policy A38: Program Review requires a follow-up plan be developed by the Vice President, Academic and Provost, in response to the Self-Study and External Report.

<b>FACULTY (Lead Dean/Associate Dean)</b>	Health Sciences	
<b>Department / Program</b>	Bachelor of Science in Nursing	
<b>Date Submitted</b>	November 2025	
<b>External Review Panel (ERP) [List all]</b>	Canadian Association of Schools of Nursing (CASN) Accreditation Panel Members	<p>Louela Manankil-Rankin, Associate Professor, BPSO Co-Lead, Nipissing University</p> <p>Lynnette Leeseberg-Stamler, Professor Emerita, University of Nebraska Medical Center College of Nursing (R)</p> <p>Jennifer Stephens, Assistant Professor, University of Wyoming</p>
<b>Reason for Timing of Comprehensive Review</b>	<input checked="" type="checkbox"/> Schedule (routine) or <input type="checkbox"/> Off-cycle, due to emergent concerns (specify below) <ul style="list-style-type: none"> <li><input type="checkbox"/> Changes in discipline/field/licensing</li> <li><input type="checkbox"/> New program development</li> <li><input type="checkbox"/> Demand/enrolment/budget concerns</li> <li><input type="checkbox"/> Other (specify)</li> </ul>	
<b>Date of last Comprehensive Review</b>	N/A: First Review	
<b>SUMMARY of BCCNM &amp; CASN ACCREDITATIONS, COMPREHENSIVE PROGRAM REVIEW PROCESS and VPA RESPONSE/RECOMMENDATIONS</b>		
<p>The Bachelor of Science in Nursing (BSN) receives its authorization to operate and accept students via an approval (accreditation) undertaken by the BC College of Nurses and Midwives (BCCNM). In 2022, the BSN ‘educational program’ received a 7 year approval to operate, without terms or conditions, from the Education Program Review Committee of the BCCNM. The next BCCNM review of the program is scheduled for June 2029.</p> <p>Additionally, the BSN program is nationally accredited by the Canadian Association of Schools of Nursing (CASN) which, in February of 2023, gave the ‘educational unit’ a 5 year approval/accreditation and the ‘educational program’ a 7 year term before the next scheduled review.</p> <p>The VPA&amp;P accepts all of CASN’s recommendations (as responded to by the program team).</p>		

The review panel for CASN accreditation included:

**Louela Manankil-Rankin**, Associate Professor, BPSO Co-Lead, Nipissing University

**Lynnette Leeseberg-Stamler**, Professor Emerita, University of Nebraska Medical Center  
College of Nursing (R)

**Jennifer Stephens**, Assistant Professor, University of Wyoming

### **COMPREHENSIVE PROGRAM REVIEW AND GAP-ANALYSIS**

This is the first Comprehensive Program Review (CPR) of the BSN. Previously, program accreditation – with its attendant rigor – were allowed to stand in for the CPR. This process was changed in 2021.

The Douglas College Comprehensive Program Review (CPR) process is similar in structure, process and rigor to the accreditation reviews undertaken by the BCCNM and CASN. And, CPRs share many (or most) of the same review elements as an accreditation. Consequently, the College does not require Departments/Programs to replicate those elements of a CPR that have already been the subject of a recent accreditation. Further, the College does not empanel external reviewers for the CPR of an accredited program when a panel review has already been conducted by an accrediting body.

Instead, accredited programs are required to complete: 1) a ‘gap analysis’ and 2) a self-study of any elements of the College CPR which were not covered by the accreditation process. Subsequently, the VPA&P alone conducts the review of the discipline’s self-study.

Below is the VPA&P’s response to the Comprehensive Program Review (Gap-Analysis) of the Bachelor of Science in Nursing (BScN) in the Faculty of Health Sciences (HS).

### **VPA&P FEEDBACK AND RECOMMENDATIONS**

The VPA&P notes that the BSN degree program is a highly-regulated and scrutinized. It must be simultaneously aligned with the educational requirement of the Degree Quality Assessment Board, the provincial regulator (BCCNM), its national accrediting body (CASN), and must meet the needs and requirements of provincial health authorities that it both serves and relies upon for student practicums.

The VPA&P commends the program for a well-written and detailed CPR – and for its extensive and continuing work on: 1) curriculum/programming – most recently relating to the articulation of learning outcomes, 2) Diversity, Equity and Inclusion, 3) indigenization. The VPA&P notes that the program is highly-focused on student success and is home to a unique Peer Mentorship Program as well as the Nursing Resource and Learning Hub.

*“The BSN program is noted for clear, organized curriculum, supported by a robust review process which has been enhanced recently through program review. Recent updates ensure alignment with BCCNM entry-level competencies and incorporate innovations in specialty pathways, leadership, ethics, and relational practice.*”



*There is a clear focus on progressive skill development with comprehensive competency mapping in alignment with BCCNM Entry to Practice Standards.”*

The VPA&P supports all eight of the recommendations outlined in the program’s Self-Study:

1. Enhancing lab skills and practice.
2. Exploring updated resources and teaching mechanisms (Simulation).
3. Symmetry of Sectioned Courses as a baseline with standardized learning outcomes and evaluation methods. Include Clinical Librarian Expertise.
4. Addressing workplace culture – improving communication, transparency and accountability on all levels.
5. More robust communication strategy for students in reporting on feedback and outcomes. Increased visibility and transparency.
6. Expansion of DDP PAC Membership.
7. Adjusting to Students with Varying and Complex Needs/Accommodations. Current Trend is not sustainable under existing structure and resources. (650 student per academic year)
8. Ongoing Challenges / risk for securing Clinical Practicum sites.

Further recommendations. The program self-study identified a drop in student perceptions of their instruction and education in 2023 and 2024 (BGS survey) and has proposed important initiatives to address the drop. The VPA&P notes however that the BGS survey of students is conducted 2 years after graduation, meaning that the results from 2023 and 2024 represent students who studied at Douglas during the height of the COVID pandemic when much of their instruction would have been delivered online. The VPA&P asks the program and Dean to pay close attention to BGS survey results during the next few years in anticipation that perceptions will improve – buoyed by the proposed new initiatives and corresponding to the post-COVID return of students to in-person instruction.

The Self-Study describes Enhancing Lab and Skills Practice as the program’s largest “vulnerability.”

*“Industry has changed with programs required to provide ever-changing skills for students who enter clinical areas practice ready. Agencies cannot ensure students have opportunity to practice skills and therefore programs must ensure ample practice and evaluation time for faculty.”*

The VPA&P supports the program’s efforts to provide greater lab and skills practice while also being mindful of escalating costs. The VPA&P asks the program director to continue the current pilot/model of support for lab students and, assuming the pilot’s success, to either reallocate resources or seek a funding lift during the 2026/27 budget cycle to make the pilot model permanent.

In summary, the VPA&P supports the recommendations of the accrediting bodies and Self-Study.

As per the College’s routine follow-up to comprehensive program reviews, the Department is to submit its Implementation and Action Plan (IAP) to the Dean within 45 days of receipt of this Report, and to report back to the Dean one year after submission of the IAP to account for progress made.

All Self-Study recommendations accepted?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No [If no, brief explanation.]
All External Report recommendations accepted?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No [If no, brief explanation.]
<b>Next scheduled PR (5 – 7 years):</b>	2032



A handwritten signature in blue ink, consisting of a large, sweeping loop followed by a smaller, more detailed signature.

January 30, 2026

---

Vice-President, Academic and Provost

---

Date