College of Registered Nurses of Saskatchewan

Curriculum Mapping Guide

Effective: June 5, 2024

Introduction

This guide provides step-by-step instructions on how to complete a curriculum assessment using the College of Registered Nurses of Saskatchewan (CRNS) curriculum mapping tool.

Curriculum mapping is foundational to all entry-level nursing programs. It is one of the indicators used by the CRNS to evaluate and approve entry-level nursing education programs. Curriculum mapping is a mandatory indicator focused on the regulatory mandate of public safety and integrating and teaching Entry-Level Competencies (ELCs).

During a curriculum review, programs assess their curricula and provide evidence of the teaching and learning experiences required to prepare graduates to be competent and safe practicing nurses. Curriculum mapping provides a systematic approach for programs to document their curriculum against the ELCs and contemporary issues in nursing practice for each program.

A curriculum review is to be completed for all entry-level nursing programs offered including Nurse Practitioner (NP) and Baccalaureate Nursing (RN). CRNS will provide the programs with the following documents to complete the curriculum review:

· CRNS curriculum mapping tool (ELC and contemporary issues in nursing practice);

· CRNS ELCs; and,

· Contemporary issues in nursing practice interpretations.

When is Curriculum Mapping Required?

Curriculum mapping is required for entry-level nursing education programs under the following two conditions:

1. During the comprehensive review, which occurs every seven years:

   · A program will be notified in advance of their requirement to complete a curriculum mapping tool.

   · Each entry-level nursing education program is required to complete one curriculum map.

   · For programs participating in a collaborative process, one curriculum map is required if the curriculum is common across all schools.

   · If gaps in the curriculum are identified during the review, a program may be requested to resubmit a complete or partial curriculum mapping tool before the next program approval review.

2. For any new entry-level nursing program being developed:

   · Any new program will require the CRNS's Nursing Education Program Approval Committee (NEPAC) approval before its implementation.

   · Programs are to notify NEPAC of a new entry-level nursing program and are to complete the curriculum mapping tool nine to 12 months before the program's start date.

ELCs and Contemporary Issues in Nursing Practice

ELCs

Each category of practice has a unique set of ELCs. These competencies outline the knowledge, skill, ability and judgment nurses in Saskatchewan must have upon entry and for ongoing registration with the College. The ELCs for each category of practice have been organized into roles (Table 1).

Table 1: Roles for the ELC profiles for each category of practice

Registered Nurse – ELC roles	Nurse Practitioner – ELC roles
Clinician	Clinician
Professional	Leader
Communicator	Advocate
Collaborator	Educator
Coordinator	Scholar
Leader	
Advocate	
Educator	
Scholar	

Contemporary Issues in Nursing Practice

The contemporary issues in nursing practice identified below were determined through the analysis of CRNS data from practice inquiries, complaints and investigation reports:

· Therapeutic Nurse-Client Relationships;

· Professional Standards;

· Medication;

· Documentation;

· Confidentiality and Privacy-Personal Health Information; and,

· Racism in Health Care.

Consistent "themes" of high-risk practices with potential for the greatest impact on client safety emerged from the data analysis.

Table 2: Themes for each of the six contemporary issues in nursing practice

Contemporary Issue	Themes in Nursing Practice
Therapeutic Nurse-Client Relationship	· Students understand the adverse impact on client safety and quality of care when professional boundaries in the nurse-client relationship become blurred or crossed. · Students understand that there are significant client safety and quality of care risks if the client does not have a full understanding or comprehension of informed consent.
Professional Standards	· Programs support students to become reflective practitioners by implementing and facilitating learning activities consistent with CRNS's Continuing Competence Program (CCP). · Students engage in setting, achieving and evaluating learning goals. This should include the integration of the CRNS's CCP documents into the program curriculum.
Medication	· Students understand their accountabilities in preventing and reducing the likelihood of medication errors. · Students understand that nurses and/or other colleagues who divert drugs pose significant threats to client safety. (Only for RN curriculum).
Documentation	· Students understand that accurate, timely and complete nursing documentation decreases the potential for miscommunication and errors. This is a critical factor for client safety.
Confidentiality and Privacy – Personal Health Information	· Students understand that inappropriate access to client information may adversely affect client safety and quality of care. It can also undermine the client's relationship with providers.
Racism in Health Care	· Students understand their responsibility to learn the truth about the harmful past of colonialism and residential schools and take action toward reconciliation. · Students understand the impact of colonization and racism in the health care system and take action when they see it.

Completing the Curriculum Mapping Tool

When completing the Curriculum Mapping Tool be sure to include the following demographic data:

· School name;

· Program name;

· Person(s) completing the curriculum map; and,

· Date submitted.

Do not fill out any areas marked "For CRNS use ONLY."

Evidence

The evidence that programs are required to submit to the NEPAC are the facts, information and documents that give reason for the NEPAC to believe that programs are teaching to the entry-level competencies (ELC).

The evidence provided should:

· Be succinct and relevant to the ELC;

· Demonstrate a clear link between the theory, application and evaluation portions of the ELC;

· Be the most salient example that the program is teaching to the ELCs and thus preparing learners to be safe, competent and ethical practitioners; and,

· Be linked in a way that the NEPAC should clearly see the connection of the evidence to the ELC.

Variety in the types of evidence provided is important. Although a single piece of evidence can be used more than once in the curriculum map, a variety of sources of evidence presents a well-rounded and wide-ranging curriculum.

ELC sources of evidence

ELCs are listed on the left side of the curriculum mapping tool. The source of evidence to support each competency (syllabus, course outline, clinical evaluation form, etc.) should be documented in the same row as the competency, under the appropriate column headings (theory, application or evaluation).

ELC descriptors

In the descriptor column, provide a short, explicit description of the source of evidence and directions as to where the source of evidence can be found. There must be a minimum of one descriptor. Table 3 lists some examples of sources of evidence and descriptors.

Table 3: Examples of sources of evidence and descriptors

Source of Evidence	Descriptor
Course syllabus	Specific chapter numbers/module titles
Course outline	Specific paragraph or page numbers
Integrated practicum manual	Specific course outcomes
Student handbook	Specific learning outcomes
Clinical evaluation form	Specific form sections • Note: Although clinical evaluation is a form of evaluation, if provided as a source of evidence, it should be a secondary source and accompanied by another source of evidence. • Rationale: Students have different experiences in clinical and an evaluation tool may be too broad to determine the student has gained the ELC.

There are three types of evidence required: theoretical, application and evaluative. These evidence categories enable the school to demonstrate certain components clearly:

1. Teaching and learning opportunities that address theory concepts.

2. Key educational experiences that enable students to demonstrate the application of acquired knowledge and skills.

3. Evaluation processes that determine the student's understanding and integration of knowledge.

Sources of evidence examples include, but are not limited to:

· Theoretical – article, course syllabus, book chapter, CRNS practice standard
· Application – assignment or seminar discussion on assigned readings
· Evaluation – scoring rubric for the assignment

Programs must provide at least one and a maximum of three sources of evidence for each category (theoretical, application and evaluative) for each ELC. The evidence provided should demonstrate a direct link to the ELC.

It is important to use multiple sources of evidence to prove that the ELCs have been met. In some instances, the same source of evidence can be used across more than one category or used to support more than one ELC. For example, a medication quiz could be used as an application and an evaluation tool, but the use of the quiz as an application would need to be detailed in the descriptor column.

It is not necessary to submit three sources of evidence when one source of evidence clearly substantiates the ELC.

It is important to submit the most relevant source of evidence that best substantiates the ELC. Use sources that:

· Provide direct evidence of teaching and evaluating students' attainment of all ELCs.
· Provide evidence indicating that components of the ELCs are fully integrated in the education program.
· Provide enough support to indicate acquisition of the competency in the course content or evaluative process.

Contemporary Issues in Nursing Practice

Contemporary Issues in Nursing Practice tool is a separate tab on the curriculum mapping tool. Only one source of evidence and descriptor(s) for each contemporary issue in the nursing practice theme is required per evidence category (theoretical, application and evaluative).

The source of evidence must directly address the issue(s) identified for each of the six contemporary issues in nursing practice. There is an overlap between the issues and the ELCs. However, in the ELCs, the actual theme is sometimes embedded within the larger competency. For example, "develops a therapeutic relationship with clients." There are many components of the therapeutic relationship that a school may choose to map for this ELC. It may, or may not, be the identified contemporary issue in nursing practice theme of "impact on client safety and quality of care when professional boundaries in the nurse-client relationship become blurred or crossed."

If a program has provided sources of evidence that substantiate the nursing practice theme within their ELCs, then further sources of evidence are not required for mapping of the nursing practice theme. Simply list the ELC number on the contemporary issues map or copy the information from the ELC.

Curriculum Mapping Tool Submission

Referencing supporting documents

Programs are required to submit documents that are cited in the curriculum mapping tool. For example, if a school cites "ADHD 1 Syllabus" as a source of evidence, it must submit the syllabus and any corresponding descriptors with the completed map.

Programs must ensure the sources of evidence and descriptors are provided consistently. For example, if the same course meets more than one competency, the course title must be entered in the same manner for each ELC it is being used to support. Titles of supporting documents submitted with the completed curriculum mapping tool must also match what is entered on the map.

When referencing an article, exam, quiz or book chapter as sources of evidence, schools are not required to submit the actual article, exam/quiz questions or book chapter.

Submitting documents – file structure

Titles of supporting documents need to match what is entered on the mapping tool. Use consistent terminology throughout the mapping tool.

Here is an example of a file structure:

Indicator 4 (curriculum mapping)

Pathophysiology course

- Syllabus
- Modules
- Assignments
- Evaluation rubrics

Pharmacotherapeutics course

- Syllabus
- Modules
- Assignments
- Supporting documents
  - Consultation notes, grading form
  - Reflective journal
  - Clinical evaluation form
  - Learning Plan form
  - Investigative modules

Legend

Programs can also submit a legend with their curriculum mapping tool. Table 4 shows an example of a legend.

Table 4: Example of a legend

COL	Course Outline
CO	Course outcome
LO	Learning outcome
Patho	Pathophysiology
IP	Integrated practicum

Online Portal

Programs submit their curriculum mapping files electronically through a secure online portal. Instructions and access are provided to programs during orientation sessions.

Scoring the Curriculum Mapping Tool

The curriculum mapping indicator is a mandatory indicator and must be met (receive a score of two) for program approval. The curriculum mapping tool has two components that contribute to the total curriculum mapping score: the ELCs and the contemporary issues in nursing practice. The total curriculum mapping score is converted to an indicator score that is included as part of the overall program approval score. This section describes:

· How the ELCs are evaluated and rated;

· How the contemporary issues in nursing practice are evaluated and rated; and,

· How the ELCs and contemporary issues in nursing practice ratings contribute to the overall curriculum mapping tool rating and score.

How each ELC is evaluated and rated

Each ELC is evaluated and rated for curriculum integration using sources of evidence from the following categories:

· Theoretical

· Application

· Evaluation

The competency is rated as either Met, Partially Met or Not Met. Definitions for these ratings are listed in Table 5.

Table 5: Ratings and definitions for ELCs

Ratings	Definition/Criteria
Met	· The competency is explicitly demonstrated through the supporting evidence and the assessor is not required to make any inferences. · Sources of evidence for each category (theory, application and evaluation) are identified and demonstrate explicit integration into the curriculum.
Partially Met	· The competency is partially demonstrated through the supporting evidence and the assessor is required to make some inferences. · At least one source of evidence for each category (theory, application and evaluation) is identified and demonstrates integration into the curriculum.
Not Met	· The competency is not demonstrated through the supporting evidence and the assessor is required to make major inferences. · Sources of evidence do not demonstrate clear and consistent alignment with the ELC.

How each contemporary issue in nursing practice is evaluated and rated

Each contemporary issue in nursing practice is evaluated and rated as Met or Not Met. There is no Partially Met option in the rating of these six contemporary issues in nursing practice. Definitions for these ratings are listed in Table 6.

Table 6: Ratings and definitions for contemporary issues in nursing practice

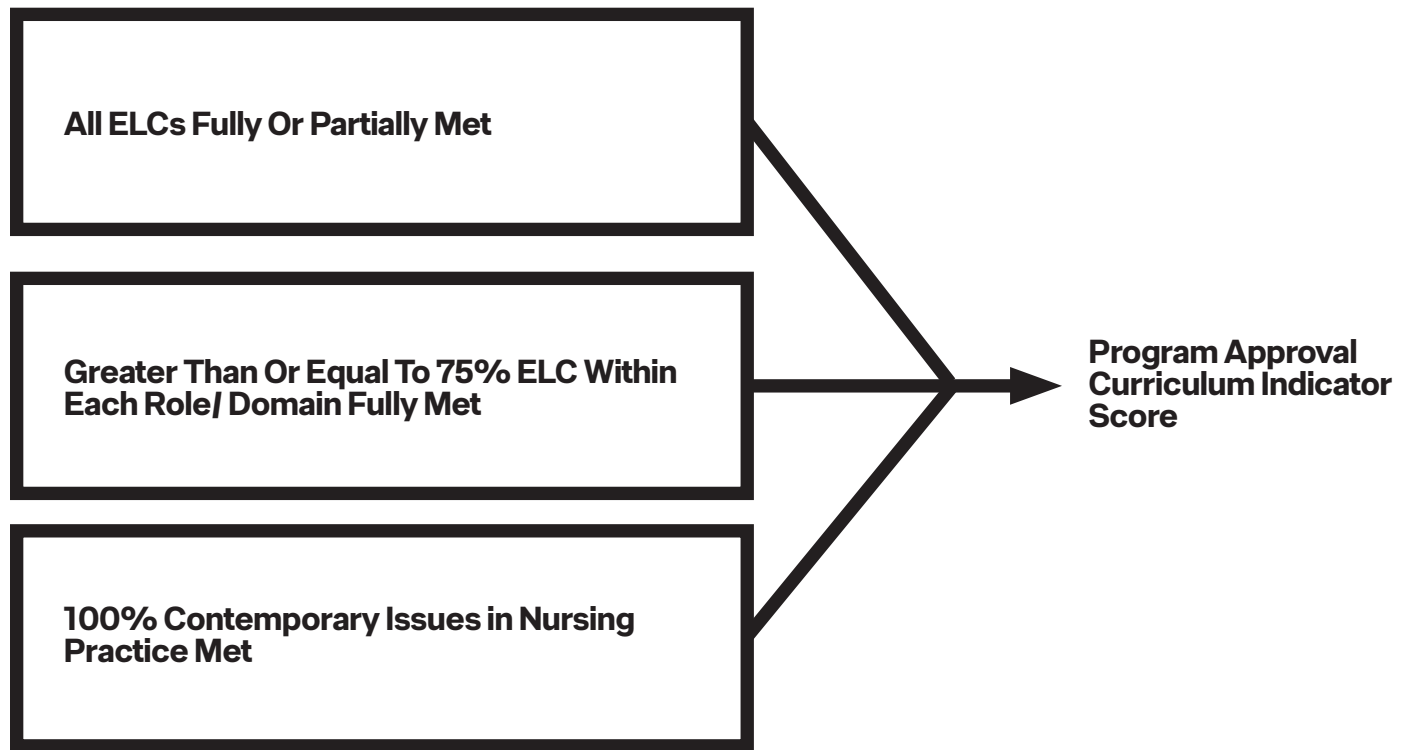| Ratings	Definition/Criteria
Met	• The contemporary issue in nursing practice is explicitly demonstrated through the supporting evidence and the assessor is not required to make any inferences. • Sources of evidence for each category (theory, application and evaluation) are identified and demonstrate explicit integration into the curriculum. • Sources of evidence demonstrate clear alignment with the contemporary issues in nursing practice.
Not Met	• The contemporary issue in nursing practice is not demonstrated through supporting evidence and the assessor is required to make major inferences. • Sources of evidence do not demonstrate clear and consistent alignment with the contemporary issue in nursing practice.

How overall curriculum mapping is evaluated

The ratings for the ELCs and the contemporary issues in nursing practice contribute to the overall curriculum mapping score. For a rating of met (score =2), the curriculum mapping tool must meet the following three criteria:

· There are no unmet ELCs (all ELCs must be rated Met or Partially Met per Table 5).

· 75 per cent or more of the ELCs within each role or domain must be rated Met.

· 100 per cent of the contemporary issues in nursing practice must be rated Met. (See Figure 5 below)

Table 7: Definitions for overall curriculum mapping tool ratings and scores

Ratings	Scoring	Definition/Criteria
Met	2	A program is considered to have met curriculum expectations when all three criteria are achieved.
Not Met	1	A program is considered to have not met curriculum expectations when any one or a combination of criteria is not achieved.

Figure 5: Curriculum mapping tool criteria contributing to a program approval indicator score

All ELCs Fully Or Partially Met	
Greater Than Or Equal To 75% ELC Within Each Role/ Domain Fully Met	→ **Program Approval Curriculum Indicator Score**
100% Contemporary Issues in Nursing Practice Met	

Frequently Asked Questions

How many descriptors can be included in the curriculum mapping tool?

There is no maximum for the number of descriptors. There must be a minimum of one descriptor. Descriptor(s) must provide explicit information and direction as to where the evidence can be found in the curriculum. For example, Chapter 1, Section 1.3, pp. 12–15.

Can I use the same source of evidence for more than one ELC?

Yes. A source of evidence can be used to support more than one competency. To illustrate the full integration of the ELCs into the curriculum, schools are encouraged to use multiple sources of evidence and descriptors, and not rely on a select few.

Can I use the same source of evidence for more than one category (theoretical, application, evaluation)?

Yes. In some instances, the same source of evidence can be used across more than one category. For example, a medication quiz could be used as an application and an evaluation tool, but the use of the quiz as an application would need to be detailed in the descriptor column.

What kind of documents should I submit to support the curriculum mapping tool?

Programs must submit documents cited in the curriculum mapping tool. Titles of supporting documents submitted must match what is entered in the completed curriculum mapping tool. Programs are not required to submit exams, quiz questions, articles or book chapters.