UTQAP CYCLICAL REVIEW: 2023 SELF-STUDY

November 17, 2023

Linda Johnston, Dean & Professor

THIS IS
NURSING IN
ACTION.

LBFON 2023 UTQAP
Cyclical Review: Self-Study

Cover Sheet

As Commissioning Officer, I have reviewed and approved the self-study and confirm that it addresses:

- ✓ The terms of reference, including, for each discrete program that is part of the review, the evaluation criteria and quality indicators identified in UTQAP 6.7.2
- ✓ Program-related data and measures of performance, including applicable provincial,
- ✓ national and professional standards (where available), with a notation of all relevant data sources
- ✓ How concerns and recommendations raised in previous reviews have been addressed, especially those detailed in the Final Assessment Report and Implementation Plan and subsequent monitoring reports from the previous Cyclical Review of the program
- ✓ For the first Cyclical Review of a new program, the steps taken to address any issues or items flagged in the monitoring report for follow-up, and/or items identified for follow-up by the Quality Council in its approval letter
- ✓ Areas that the program's faculty, staff and/or students have identified through the conduct of the self-study as: requiring improvement; holding promise for enhancement and/or opportunities for curricular change
- ✓ The adequacy of all relevant academic services that directly contribute to the academic quality of each program under review

I confirm that:

- ✓ The self-study describes in detail the participation of program faculty, staff and students in the self-study and how their views have been obtained and taken into account

I have identified the reports and information to be provided to the Review Committee in advance of the site visit, and confirm that the following core items will be provided:

- ✓ Terms of reference
- ✓ Self-study
- ✓ Previous review report, administrative response(s), and Final Assessment Report and Implementation Plan

> - ✓ Any non-University commissioned reviews (e.g., for professional accreditation) completed since the last review of the unit and/or program
> - ✓ Any documents required to provide context for the evaluation of "Program objectives and key features" (e.g., institutional or divisional plans, reports or policy statements that articulate priorities or commitments)
> - ✓ The site visit schedule
> - ✓ Access to all course descriptions
> - ✓ Access to the curricula vitae of faculty
> - ✓ (In the case of professional programs): the views of employers and professional associations solicited by the unit/program and made available to the Review Committee. (note: the Commissioning Officer may instead/in addition provide these during the site visit)

Commissioning Officer*: [insert name]	Signoff Date: [insert date]

*The Dean is normally the Commissioning Officer for reviews of programs and units in departmentalized divisions; the Vice-Provost, Academic Programs is the Commissioning Officer for reviews of Faculties/Divisions with or without their programs.

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1. INTRODUCTION & CONTEXT

1.1 Introduction to Bloomberg Nursing

Bloomberg Nursing is currently ranked 7th in the world in the QS World University Rankings by Subject for Nursing and is a research-intensive Faculty that embraces the University's tripartite mission of excellence in research, education, and practice. The Faculty offers multiple innovative graduate and undergraduate degree programs, drawing on the dynamic partnership and joint academic mission between the Faculty and fourteen University of Toronto affiliated teaching hospitals; the Toronto Academic Health Science Network (TAHSN), and multiple community providers.

1.2 Bloomberg Nursing: By the Numbers

Institutional Rankings	
QS World University Rankings by Subject for Nursing	7th

Programs Under Review & Student Enrolment					
	2018-19	2019-20	2020-21	2021-22	2022-23
Bachelor of Science in Nursing (BScN)	348	351	348	353	376
Master of Nursing (MN) Clinical & HSLA	118	138	142	123	116
MN − Nurse Practitioner (MN-NP)	142	163	179	177	174
Doctor of Philosophy (PhD)	39	46	44	45	41
Doctor of Nursing (DN)				9	12
Post-Master's − Nurse Practitioner (PM-NP) Diploma	19	21	29	30	26
Total	**666**	**719**	**742**	**737**	**745**

Faculty Complement (FTE)	
Tenure Stream	23.0
Teaching Stream	14.6

Staff Complement (FTE)	
PM	9.0
USW	33.5

Toronto Academic Health Sciences Network Clinical Partners

Baycrest
Centre for Addiction and Mental Health (CAMH)
Holland Bloorview Kids Rehabilitation Hospital
Hospital for Sick Children
Humber River Health
Michael Garron Hospital
North York General Hospital
Scarborough Health Network
Sinai Health
Sunnybrook Health Sciences Centre
Trillium Health Partners
Unity Health Toronto
University Health Network
Women's College Hospital

Research Funding
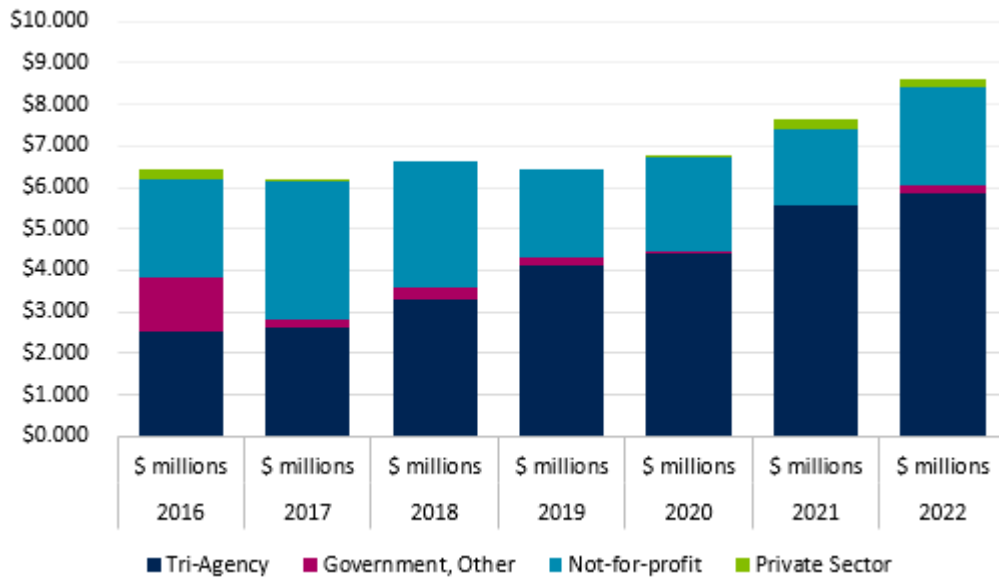
Operating Budget

Figure 1. Faculty Revenue and Operating Budget 2018 − 2022

1.3 History

Bloomberg Nursing's history as an educational groundbreaker dates to its genesis in 1920 as the Department of Public Health Nursing through the initiative of Ms. E. Kathleen Russell, a world leader in education innovation. Ms. Russell established the Department of Public Health Nursing as an experiment in educational science. Her vision was to improve upon the traditional hospital-focused training of nurses by including social welfare and public health education — a radical notion at the time. Ms. Russell pioneered the first nursing program in Canada to be completely university-based.

1928   Department became a unit of the School of Hygiene and in 1933 it was recognized as an independent School of Nursing.

1942   Original three-year program evolved into a four-year BScN degree program.

1970   Graduate Department of Nursing Science was instituted offering a 2-year thesis-based Master of Science in Nursing (MScN) degree program.

1972   School of Nursing was granted Faculty status.

1993   PhD program was launched.

1994   2-year non-thesis professional Master of Nursing (MN) degree program was offered and the thesis-based MScN degree program was phased out.

Mid 90's   Development of interprofessional educational experiences (IPE). In close collaboration with hospital and community partners, a mandated IPE curriculum for all health science students was introduced.

1997   Innovative 2-year Bachelor of Science in Nursing (BScN) program established.

2000   Post-Master's Nurse Practitioner diploma program was launched and the Master of Nursing – Nurse Practitioner degree program commenced as a third field of study within the MN program.

2007   Financier and philanthropist Lawrence S. Bloomberg donated the largest ever gift to a Canadian nursing school at that time. To recognize this visionary gift, we became the first named Faculty of Nursing in Canada. In addition to a major expansion in student awards, the funding was allocated towards a 10-year program of institutional change known as the Transformation Agenda. This program set an agenda for the Faculty to focus on the quality of student experience and to build the international reputation of the Faculty as a world-leader in nursing education and research.

2021   DN program launched - the first professional doctorate in nursing in Canada.

2023   The Scarborough Academy of Medicine and Integrated Health (SAMIH) received final approval from U of T's Governing Council. The Academy is designed to address the critical shortage of health care professionals in the Scarborough and Durham region through the delivery of academic programs for physicians, physician assistants, nurse practitioners, physical therapists and life sciences students.

1.4 Strategic Academic Plan

Bloomberg Nursing's *Strategic Academic Plan 2017-2022 Shaping Tomorrow's Leaders Today* (Appendix 6) was endorsed by the LBFON Faculty Council and brought forward to the University's Academic Board in May 2017. Over the five years of that Plan, the Faculty focused on sustaining and bolstering existing strengths across five priorities that were identified as contributing to our role as a local, national and global leader in nursing education, research and practice. Those priorities were aligned with planned actions described in the Annual Budget Review process of Bloomberg Nursing each year and included:

- Embedding the internationalization agenda across all domains of activity within the Faculty;
- Pursuing new knowledge through interdisciplinary research of social, cultural, economic and/or public policy benefit, beyond academia;

- Widening access to, and participation in, educational programs delivered with innovative pedagogies that produce graduates with the attributes required to meet the needs of employers;
- Fostering a productive and sustainable partnership with our affiliated world-leading clinical institutions and community-based service providers; and
- Engaging with our community of friends, alumni and donors to contribute to, and advocate for, our success as an internationally recognized leader in health higher education.

The core values of Bloomberg Nursing have remained unchanged; scholarship and critical inquiry, innovation and creativity, interdisciplinarity and collaboration, and social justice. Each of those values have been reflected in part, or in whole, in the decisions made and directions taken over the past five years.

The current Dean of the Faculty completes their second term in July 2024 and the search for a new Dean has commenced. The new Dean will be responsible for developing and delivering on the next Strategic Academic Plan.

1.5 Academic Programs: Professional Education Pathways

Bloomberg Nursing has a reputation for leading the development of innovative programs that meet the changing needs of today's health care environment.

BScN - The Bachelor of Science in Nursing (BScN) is an accelerated, two-year second entry program that provides the foundation for a career in nursing. Graduates of the BScN undergraduate program meet requirements to write registration examinations leading to the professional designation of Registered Nurse. Graduates are educated to be professional Registered Nurses who work across a wide variety of community and institutional settings to provide nursing care to individuals, groups and societies.

Masters - The Master of Nursing (MN) program is a 2-year, full-time professional master's degree, normally completed over 6 consecutive terms.

- **MN NP & PM NP** - Graduates from the Master of Nursing in the Nurse Practitioner field, as well as from the Post-Master's Nurse Practitioner Diploma, are eligible to write registration examinations for the designation of Registered Nurse-Extended Class (with the College of Nurses of Ontario). These students engage in focused education and clinical experiences enabling them to sit for registration examinations for the Registered Nurse-Extended Class category.

- **MN - HSLA & Clinical** - The Master of Nursing fields in Clinical Nursing and Health Systems Leadership and Administration (HSLA) do not lead to specific registration requirements but prepare graduates as advanced practice nurses with a focus on clinical and leadership roles across health care settings. MN − HSLA students may apply to complete the Certified

Health Executive designation from the Canadian College of Health Leaders (CCHL) as part of our ongoing collaboration with this organization.

PhD - The Doctor of Philosophy (PhD) program is designed for students to complete the degree in 4 years of full-time study. In the PhD program, students acquire advanced knowledge and skills in research, theory, and scholarship as well as expert knowledge in their substantive areas. Graduates are well-prepared to develop independent programs of research in their areas of interest.

DN - The Doctor of Nursing program is a full-time cohort-based graduate program with eight consecutive terms consisting of required and elective courses, internships, residencies, and a thesis. The DN program is designed to prepare nurses at the doctoral level for leadership roles in organizations and systems in healthcare, or leadership roles in nurse education, nationally and internationally.

Program Expansion

UTSC - SAMIH - To increase the uptake of our programing among underserved and diverse communities, as well as to promote timely access to healthcare for these populations, Bloomberg Nursing is collaborating with an interdisciplinary team to launch the Scarborough Academy of Medicine and Integrated Health (SAMIH). This new academy is located at the University of Toronto Scarborough. Students will complete their clinical placements within SAMIH and the surrounding community with the goal of retaining NPs in the community after graduation.

SAMIH Partners
- Bloomberg Nursing   - Temerty Faculty of Medicine   - Leslie Dan Faculty of Pharmacy   - University of Toronto Scarborough (UTSC)   - Scarborough Health Network   - Lakeridge Health   - Ontario Shores Centre for Mental Health Sciences   - Sunnybrook Health Sciences Centre   - Michael Garron Hospital

UTM - Bloomberg Nursing is currently engaging in preliminary conversations with academic leaders at the University of Toronto Mississauga (UTM) regarding the possibility of opening 30 places for a cohort of BScN students at UTM. The program change would be modelled on the format of the current [Mississauga Academy of Medicine](), and would rely on a close partnership with Trillium Health Partners (TPH) to provide the necessary clinical placements. The plan would involve 'assigning' 30 of the BScN seats that are currently at the St. George campus to the UTM campus. In this proposal, the curriculum would remain the same as the BScN program at the St. George campus and the instruction would be a combination of in person instruction at UTM and bi-lateral virtual instruction between St. George and UTM. The goal is to establish this expansion by 2025 and include our graduate programs at UTM by 2030.

1.6 EDIA

Bloomberg Nursing is engaging in advocacy and allyship to create supportive, equitable and inclusive environments within our administrative, academic and clinical settings. We aim to:

- act as a role model of professionalism and demonstrate an ethic of care when working with others;
- reflect openly about our current community (students, staff, faculty) and think holistically about the composition of our community for the future;
- utilize qualitative and quantitative data to stay attuned to the mental health and wellbeing of all members of the Bloomberg Nursing community and invest in appropriate supports and resources.

1.6.1 Supporting Wellbeing

> …achieving the goal of fostering a culture of caring across the three campuses will require significant, sustained investment from all stakeholders…This culture shift will require an appreciation for the immense diversity of students at the University and the many different lived experiences that they bring.
>
> Presidential & Provostial Task Force on Student Mental Health – Final Report & Recommendations – December 2019

Nursing, as a profession, is entrenched in caring for all aspects of personal health and the profession has a long and storied history with wellbeing and mental health. Promotion of wellness and mental health are a fundamental part of who we are – academically and professionally. Mental health and wellness are addressed openly and often across our curriculum, and culturally in our work environment.

Attention to Life Circumstances

Both our second entry UG students and our graduate students are mature students with multiple accountabilities beyond their academics, often with complex family and financial demands in their lives. Some of our students are young adults who are starting families, financing new homes, and still paying first degree educational loans. Our students are primarily adults with established families with children and adolescents and ageing relatives for whom they care. Many of our graduate students continue to work as registered nurses or nurse practitioners in a clinical practice setting, to finance their education and lives, maintain their clinical competency and to remain

current with the pressing research, educational, and practice issues in their field. Our faculty and staff members are also managing multiple, often competing demands.

Students visiting the Wellness Counselor are struggling with:

- Interpersonal relationship distress
- Anxiety and stress
- Depressed mood
- Grief and loss
- Adjustment during transitions
- Stress of academic/clinical demands

Bloomberg Nursing 2022-23 On Location Health & Wellness Report

In addition, as a professional Faculty, members of the Bloomberg Nursing community have been impacted by the pandemic academically, professionally, and personally. The demands that were placed on the health care community were felt by our faculty members, staff, and students. Quantitative and qualitative survey data indicate that all members of our community are struggling with their mental health and wellbeing as the impact of the pandemic compounded the stress from life circumstances. As such, Bloomberg Nursing has paid careful attention to the mental health and wellness of all members of our community, and we have tried to invest in additional support systems and resources accordingly.

In recognition of the impact life circumstances have on wellness – especially with respect to COVID-19 - Bloomberg Nursing implemented the following (Table 1):

Table 1. COVID-19: Responsive Initiatives

Undergraduate	Graduate	Faculty & Staff
Inviting students to identify notable life circumstances and accommodations for consideration when assigning clinical learning placements.	Encouraging course instructors to incorporate resiliency/flexibility around weekly activities/expectations and major assignments into courses.	Being receptive to workplace accommodations related to mental and physical health and/or competing demands for staff and faculty members.
Communicating our openness to hearing students' challenges and working to minimize stress where possible.	Removing language/rules around suggested work hours in recognition of financial stress/barriers to access.	Promoting and supporting flexible work from home policies and practices.
Continuously strategizing about the stress of high stakes evaluations in our program.	Introducing a fall reading week to give students a designated time to take a break from academic work.	Providing Special Support Awards, valued at $5,000 each, to eight pre-tenure faculty members to assist in progressing their research productivity during the pandemic.

Introducing a Director's forum as a means for students to share concerns and feedback.	Holding Town Halls across all graduate programs as a means for students to share concerns and feedback.	Administering a faculty & staff wellness survey and organizing wellness activities (based on survey responses): social gatherings, therapy dogs.
	Aligning course activities and assignment due dates across courses while communicating these in advance.	Discussing feedback on accommodations/efforts during staff & faculty meetings.
Enabling students to declare absences related to missed academic obligations during courses without the need to provide onerous medical documentation.		
Promoting health and wellness and accessibility counsellors at orientation, in course syllabi and in meetings with students.		
Providing reminders to all members our community of the supports that are available as recommended through the 2019 Presidential and Provostial Taskforce on Student Mental Health: "Develop a comprehensive strategy to enhance mental health literacy among students, staff, and faculty, including knowledge of mental health supports and services."		

Supporting Students

In the 2021 SERU and gradSERU student experience surveys, Bloomberg Nursing students were asked "over the last 2 weeks, how often have you been bothered by the following problems?" 52% of UG respondents and 33% of MN respondents expressed feeling "nervous, anxious, or on edge" 'more than half the days' or 'nearly every day'. When asked the same question, 43% of PhD respondents indicated that they are 'not able to stop worrying' 'more than half the days' or 'nearly every day'. These responses are comparable to students across U of T and Bloomberg Nursing is using this data to better understand the mental health stressors for our students.

Health & Wellness – Bloomberg Nursing partners with the U of T Health and Wellness Centre to offer confidential, on-site counselling services to all of the students who are enrolled in our programs. Through this partnership, students have access to individual, time-limited coaching, counselling and solution/goal-focused psychotherapy through the Faculty's Embedded Wellness Counsellor. The Counsellor offers brief counselling services to students tailored to the challenges presented by university life as a nursing student.

Supporting faculty and staff members

In the November 2020 U of T Employee Pulse survey, about sixty percent of Bloomberg Nursing faculty and staff rated their mental health as good to excellent compared to 43% of faculty and 50% of staff across U of T. In January 2021, 56% of faculty and 39% of staff at Bloomberg Nursing rated their mental health as good to excellent compared to 35% of faculty and 47% of staff across

U of T. Throughout the pandemic the challenges shifted for each employee group, but maintaining a good work-life balance, productivity, and managing schedules were consistently rated as top concerns. Responses to open-ended questions indicated some faculty were experiencing stress related to increased workload with the shift to online teaching and "Zoom meeting fatigue". Challenges while working from home included working longer hours and lack of a proper workstation setup for both employee groups. Sixty percent of faculty and staff reported feeling supported by their manager and connected to their colleagues while working from home - about the same percentage as U of T overall.

Bloomberg Nursing drew on the resources in the U of T Return to Campus Leadership Toolkit with full-scale resumption of in-person activities in the Fall of 2022 and has continued to be informed by the University Resilience Project Team.

Supporting Staff: During the pandemic, Bloomberg Nursing established Alternative Work Arrangements (AWAs) for staff to help mitigate the stress of commuting and working in shared environments. A Pulse survey that was administered in Fall 2022 focused on the impact of having an AWA on outcomes such as engagement, intention to leave, and burnout. The majority of staff at that time had an AWA that

> "I think the friendliness and collaborative nature I've seen across people I work with and around, now that we are working more in person, has made all the difference working here."
>
> Faculty/staff wellness survey response

required working on campus three days/week. The survey results regarding the impact of having an AWA indicated the Bloomberg Nursing staff had high levels of engagement, motivation, satisfaction and commitment and low levels of burnout. The majority of our staff members continue to have AWAs in place that extend until June 2024 and work three days a week on campus.

Supporting Faculty – Teaching stream faculty were supported in their academic work through the purchase of specialised software and programs to deliver virtual simulations remotely. And all faculty were encouraged, although not required, to include the impact that caregiving responsibilities may have had on their teaching, research, and professional practice in submissions for academic and performance review processes. Delays to tenure and continuing status reviews were accommodated. Requests for re-imbursement of expenses related to remote work for faculty were also accommodated.

Bloomberg Nursing is committed to supporting the mental health and wellness of everyone in our community, but finding the right resources and supports, and the right balance, across our community is a work in progress. We will continue to try to connect with members of our community – and use data - to better understand and evaluate mental health and wellbeing.

1.6.2 Supporting Accommodations

> It is the University's goal to create a community that is inclusive of all persons and treats all members of the community in an equitable manner… the University will strive to provide support for, and facilitate the accommodation of individuals with disabilities so that all may share the same level of access to opportunities, participate in the full range of activities that the University offers, and achieve their full potential as a member of the University community.
>
> Statement of Commitment Regarding Persons with Disabilities - 2021

Bloomberg Nursing has been working to create a more inclusive community, which includes facilitating accommodations for people with disabilities. In an effort to dismantle the legacy of ableist and sanist practices, we are highly focused on building practices and processes that support the success of the people in our community with visible and invisible disabilities.

Students

The need for academic support has been increasing significantly since the last review (Figure 2). Bloomberg Nursing has an on-location Accessibility Advisor who consults with instructors, provides guidance and support to individual students (consultations, meetings, email), and leads workshops.

In addition, our program directors and instructors have focused on incorporating considerations for accommodations into our academic and clinical settings. Currently, a faculty member and a grad student are drafting *Processes, experiences, and outcomes of accommodating nursing students with disabilities in the classroom and clinical learning environments: A scoping review of the literature* - April 2024 completion.

> "The Advisor met frequently with Directors in all degree levels to discuss student matters, including: the feasibility of accommodations in clinical settings, the triage and referral process, and understanding academic vs. disability complexity."
>
> Faculty of Nursing 2021-22 On-Location Report

The intentionality in recognizing student accommodations has meant that our program directors and instructors are investing an increasing amount of time and effort into responding effectively to the growing number of accommodations. This is a notable shift in workload that will be important to monitor to also support our faculty members.

**ACCESSIBILITY SERVICES
ON LOCATION REPORT
TOTAL STUDENT INTERACTIONS***

1202

473

376

156

88

2018-19   2019-20   2020-21   2021-22   2022-23

*Total student interactions include in-person, phone & virtual appointments, and email messages.

Figure 2. Bloomberg Nursing Student Interactions with Accessibility Services 2018-2022

Accommodations and Clinical Placements - Finding ways to accommodate students' disability-related needs in the clinical placement component of the BScN and MN programs has been an ongoing challenge. Our instructors, members of our Clinical Education Office and our Accessibility Advisors work together to ensure that appropriate accommodations are put in place during placements. Tackling the challenge head on, we have established a Clinical Accommodation Process that enhances the accessibility of our program for individuals with varying abilities.

Accommodations for Mental or Physical Health: When students need accommodations for their mental or physical health (or parental leaves) we start with open discussions about strategies and supports and, if needed, a referral to specialized student support services. Examples of accommodation mechanisms include leaves of absence, course work extensions, disability-related extensions, exam deferrals and alternative evaluation methods.

Universal Design: Capitalizing on universal design principles, and implementing classroom and test accommodations are well established practices in our programs. All programs offered through Bloomberg Nursing adhere to the universal design principles of providing multiple means of:

- representation - offering alternatives for written, auditory and visual information;
- action and expression - use of multimedia; supportive goal setting, planning and strategies for development; and
- engagement - optimizing individual choice and autonomy; developing self-assessment and reflection.

Financial Resources – Bloomberg Nursing has financial resources (e.g., Student Crisis Fund and tuition refunds) to alleviate cost impacts that may arise from student accommodations or leaves.

The 2021 SERU and gradSERU student experience survey data indicate our efforts to support accommodations have been effective. When UG students were asked to consider statements about themselves, 88% of "students with a disability or condition like mine are respected at this university" 'somewhat agreed', 'agreed', or 'strongly agreed' with the statement and 92% of doctoral respondents and 79% of professional masters respondents 'agreed' or 'strongly agreed' that "the climate for students with disabilities in my program is at least as good as it is for students without disabilities." Bloomberg Nursing will continue to use quantitative and qualitative data to ensure we continue to support everyone in our community with respect to accommodations.

1.6.3 Equity, Diversity, Inclusion & Indigenous Reconciliation

"We call upon medical and nursing schools in Canada to require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights, and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism."

Truth and Reconciliation Commission of Canada Call to Action #24

"The aim should be to facilitate the hiring of a significant number of Indigenous faculty members over the next three years. To begin the needed process of inclusion, divisions and departments should consider specifically targeting Indigenous hiring."

Truth and Reconciliation Calls to Action − University of Toronto #6

Responding to the TRC Calls to Action

As part of our commitment to the TRC Calls to Action, Bloomberg Nursing has focused on improving our Faculty governance, student admissions processes, and course content with respect to the principles of Indigenous reconciliation.

Faculty Governance - In 2021 an Equity, Diversity, Inclusion and Indigenous Reconciliation (EDI&IR) Committee was established as a standing committee of Faculty Council. As stated in the Terms of Reference (Appendix 16) the Committee "is part of the Faculty's strategy to build structures and processes that are sustainable and ensure engagement with diverse groups, including students, faculty, staff, alumni, clinical partners, and nurse leaders. The EDI&IR Committee's efforts will also align with the broader University's work to combat anti-Black racism as well as to advance the University's calls to action for the Truth and Reconciliation Commission of Canada (TRC). Indigenous Peoples (i.e., First Nations, Métis, and Inuit) are rights-holding as First Peoples of Canada." (EDI&IR ToR).

Priority Pathway for Indigenous Applicants - Bloomberg Nursing has also focused on increasing the number of Indigenous students in our programs. A priority pathway for Indigenous applicants was implemented in 2021 for the UG program and expanded to the Masters program for the 2023-

2024 intake. Applicants who identify as First Nations (status, non-status, treaty, or non-treaty), Métis and Inuit are eligible for this priority pathway. These applicants have their files reviewed by Indigenous community members and are considered on the basis of their qualifications, rather than in relation to other applicants.

Bloomberg Nursing News

In 2023 we had a single BScN applicant apply through this pathway. The applicant was offered admission but declined and chose to accept an offer elsewhere. At the MN & PMNP level, we had 4 people apply through the Indigenous Priority Pathway (2 NP PHC, 1 Clinical, 1 HSLA). All 4 applicants were offered admission. Three applicants accepted the offer (1 NP PHC, 1 Clinical, 1 HSLA) and the other student accepted an offer elsewhere.

Applicants who are considered through the priority pathway are also eligible to apply for the Indigenous Nursing Student Scholarship, valued at $10,000.

Integrating Indigenous content: - The processes for developing and revising Program Outcomes (POs), Program Learning Outcomes (PLOs) and curriculum content across our programs have been grounded in our commitment to ensuring our programs meet our accountabilities as per the Truth and Reconciliation Commission of Canada Call to Action #24.

In 2021 the Faculty Council Curriculum Committee formed the Indigenous Health Nursing Working Group (IHNWG)(Appendix 7). The IHNWG was formed to make recommendations to the Curriculum Committee to support the undergraduate and graduate programs in meeting relevant accountabilities to the TRC Calls to Action, College of Nurses of Ontario (Indigenous health and related entry-to-practice competencies), as well as our accountabilities to patients, families, and the broader community. The purpose of the IHNWG also included identifying opportunities to incorporate principles of cultural safety, cultural humility, social justice, and anti-racist approaches related to Indigenous health within the undergraduate and graduate program curricula. In 2022, the IHNWG finalized a status report (Appendix 7) that included recommendations and next steps. The recommendations from the working group were presented at program level meetings and to the EDI&IR Committee in the Spring of 2022.

BScN - The UG Program made the decision to integrate required content in the program across courses rather than introduce a dedicated course related to Indigenous history, health, and ways of knowing. An exemplar is an instructor who completed an Advanced Decolonizing Education

certification program at the Centre for Indigegogy at Wilfred Laurier University and then designed a curriculum that she integrates across all the courses she teaches.

MN - In 2019-2020, course content in the MN program was reviewed and a Report on Integration of Indigenous Health Content to Program Curricula 2019-2020 was developed, identifying where Indigenous health content was included, along with a list of supporting resources. Course instructors made a commitment to support the integration of Indigenous knowledges, Indigenous voices, and the decolonialization of nursing practice across MN programs. An exemplar is a course that includes a guest lecture from an Indigenous nursing leader to discuss the clinical leadership commitments of advanced practice nurses to privilege reconciliation in health systems.

Equity, Diversity, Inclusion

> …we strive to be an equitable and inclusive community, rich with diversity, protecting the human rights of all persons, and based upon understanding and mutual respect for the dignity and worth of every person.
>
> Statement on Equity, Diversity, and Excellence- University of Toronto Governing Council - December 2006

As part of our commitment to equity and social justice, Bloomberg Nursing has been focused on reaching and serving more diverse populations, hiring and retaining more diverse staff and faculty, and creating a more inclusive academic and professional environment.

Demographic Data - In 2021 Bloomberg Nursing surveyed undergraduate and graduate applicants as well as faculty and staff to better understand the demographics of our community (Figure 3).

Sexual Orientation

Applicants
- Heterosexual
- LGBTQ+
- prefer not to respond
- no answer

Staff & Faculty
- Heterosexual
- 2SLGBTQ+

Ethno-cultural Background

Applicants
- [Aboriginal]
- [Black]
- [East & Southeast Asian]
- [Latin American]
- [South Asian]
- [West Asian & Arab]
- [White]
- [Additional Identities]
- [Prefer Not to Respond]

*Other identities not reported due to small sample size
28% Self-identified as racialized or persons of colour

Staff & Faculty
- White
- Asian

Figure 3. 2021 Bloomberg Nursing Demographic Survey Data

Hiring – since the last UTQAP review, all hiring and promotions committee members are required to have undertaken relevant training on unconscious bias, equity, diversity and accessibility.

Application criteria for both tenure- and teaching-stream positions include providing evidence of experience working with, teaching, or mentoring/supervising diverse groups or diverse students; and contributions to fostering diversity on campus, and within the curriculum or nursing profession. In addition, all faculty jobs are advertised in a range of forums including Canadian Black Nurses Alliance (CBNA) and Canadian Indigenous Nurses Association (CINA) to help ensure we reach a more diverse pool of applicants.

UTQAP Staff and Faculty Feedback Session

Suggestion for improvement: "A faculty that represents more diversity in terms of sex/gender and race/ethnicity would be an asset."

Admissions – In 2020-21 an Admissions Committee Working Group was formed to address EDI issues related to Admissions processes. The following changes have been implemented based on the WG recommendations:

- Adjunct faculty who identify as members of underrepresented groups are invited to participate in the undergraduate application review.
- A demographic survey was developed and implemented for all undergraduate and graduate applicants to empirically assess representation and diversity among applicants. Data in Figure 3 above.
- An expedited review process was created for Indigenous undergraduate and graduate applicants.
- The reference letter requirement was eliminated from the undergraduate application process.
- Every reviewer must participate in admissions review training which includes unconscious-bias training.

In addition, Bloomberg Nursing established underinvolvement and graduate admissions awards for Black and Indigenous students and a Nursing Science Preparation Certificate is in development at UTSC to support recruitment of students to Nursing from equity-deserving populations graduating from UTSC health studies programs.

U of T News

Nursing student seeks to foster change and diversity in health care

"Many people do not realize the impact that representation can have"

Kyle Samuels, a master's student at U of T's Lawrence S. Bloomberg Faculty of Nursing, says he wants to provide competent and compassionate care to patients from different cultural and socio-economic backgrounds (supplied image)

Curriculum – In 2021 two working groups of the Faculty Council Curriculum Committee were established - the Black Health Equity Working Group (BHEWG) and the Indigenous Health Nursing Working Group (as summarized above).

The BHEWG was established to make recommendations (Appendix 8) to the Curriculum Committee to enhance students' knowledge and skills in addressing anti-Black systemic racism and promoting health equity and social justice through nursing (including providing care, leadership, research, education, and advocacy). The work of the WG also supported the undergraduate and graduate programs in incorporating principles of anti-oppression, cultural safety, cultural humility, equity, compassion, and empathy within their curricula to

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Student Feedback 2020 & 2021: Annual UG Exit Survey

"information was very out of date, some content was transphobic/sexist/racist"

"we have very little education about the challenges BIPOC people face when accessing healthcare, and the ways in which we can help improve this experience."

"lack of 2SLGBTQ+ inclusive content in the program and the limited attention to Trauma-informed Care"

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contribute to the development of undergraduate and graduate nursing students who provide care grounded in anti-racist and anti-oppressive practice, especially when caring for the Black populations which they serve. A secondary aim of the WG was to contribute to an environment that promotes belonging, where Black nursing students feel included, safe and supported in academic and clinical settings.

Recommendations from the working groups were presented at program level meetings and to the EDI&IR Committee in the Spring of 2022. Since the implementation of these recommendations, adjustments to course content and resources have been made, particularly in clinical courses.

To support course instructors in integrating the recommendations from both working groups, while also considering populations such as 2SLGBTQ+, an accompanying repository of resources was developed in Quercus, the University's online learning management system. This repository includes working group recommendations, as well as journal articles, videos, learning modules and other assorted resources accessible to all faculty.

This past year we have paid particular attention to our community of Muslim students in response to specific needs/requests for religious accommodations. We consulted with the Anti-Racism and Cultural Diversity Office and with the Multi-faith Center to collectively create an inclusive and respectful environment that protects students' human rights while maintaining essential requirements of the program. Programs have created assignment calendars that note and endeavour to avoid significant religious holidays across all faith communities.

Disclosure Protocol – since the last review, Bloomberg Nursing created a disclosure process for students who have witnessed or experienced harassment, discrimination or harmful unprofessionalism. Students are able to complete an event disclosure form (which is located on the website and in student handbooks) or they can contact the Faculty's designated intake officer to report an incident.

Faculty Professional Development - To promote the development of knowledge related to EDI and Indigenous reconciliation, Bloomberg Nursing has offered several sessions on Indigenous Cultural Competency, the Blanket Exercise, as well as a session on Understanding Your Responsibility to Preventing Racial Discrimination and Harassment. Faculty have also attended many of the sessions offered through the Centre for Teaching Support & Innovation and the Anti-Racism and Cultural Diversity Office.

Research - To address the under-representation of members of equity-seeking groups among University of Toronto Canada Research Chairholders, the University developed a Special Call for Canada Research Chair (CRC) applicants from Federally Designated Groups (Tier 1 and Tier 2). Bloomberg Nursing supported a total of six nominations from faculty who self-identify as members of one or more of the four federally designated groups and were successful in receiving one of 19 prestigious CRC awards.

In August 2023 the EDI&IR Committee reviewed the strategic priorities of the Committee in the previous academic year and identified two top priorities going forward; recruitment and hiring of

faculty and staff; and student recruitment and admissions. A set of recommendations for addressing those priorities has been sent to the Dean's Office for consideration and response.

1.7 Context & Long-Range Challenges

There have been notable external factors that have impacted internal operations for Bloomberg Nursing. The factors are highlighted below to help provide important context for the self-study.

COVID − 19 and the Health Care System

Bloomberg Nursing undergraduate and graduate programs are very much based on a partnership model with our affiliated clinical institutions. The clinical institutions are critically important contributors to our research enterprise, our teaching, and of course provision of clinical placement experiences for our students. For many of our partners the pandemic continues to have a significant impact, with huge backlogs of patients needing care, and a health workforce, particularly nursing, that remains severely reduced. In turn, our student placements are affected in multiple ways: recruitment of units willing to take on students continues to be challenging as many units face workforce shortages and wish to limit burden on staff; recruitment of preceptors and clinical instructors is difficult given continued higher demands and burnout in individual practitioners in the practice setting and requirements by some institutions that clinical instructors must be employees of the organization; and available preceptors and clinical instructors have fewer years of experience than in the past as the most senior nurses are occupied in mentoring newly hired nurses in the setting. Limited placement opportunities and additional seats in our undergraduate program have also necessitated placements in locations further away from downtown Toronto, which has had implications for our students in terms of the time and cost required for travel to suburban locations.

COVID-19 and Bloomberg Nursing

As the pandemic increasingly impacted clinical operations, a request for declaration of academic disruption was submitted in March 2020 for Provostial approval under the University Policy on Academic Continuity. An academic disruption was declared for the BScN, MN and PMNP programs, allowing for provision of course changes as needed to maintain the integrity of our academic programs and provide a reasonable opportunity for students to continue learning and complete academic requirements. Clinical placements for all health sciences learners were suspended across the province.

In the undergraduate program, faculty turned to purchasing online learning resources such as ShadowHealth and Laerdal vSIM modules as an alternative approach to clinical skills development. HESI RN Case Studies were used to help prepare students for their National Council of State Boards of Nursing Exam (NCLEX). The Bloomberg Nursing SIM lab was utilised for training in donning and doffing of PPE. Students were required to complete the mandatory online course on caring for patients with COVID-19. Faculty held frequent online townhalls with students to keep them informed of any changes to modes of assessment and remind them about wellness resources available. FAQs were continuously updated on the website to reflect OHS requirements at clinical sites.

In 2019-2020, COVID-19 was a challenge across all MN programs, however; given Bloomberg Nursing's long-standing use of, and expertise in, online teaching in our MN-NP and MN-HSLA programs, faculty members were able to quickly pivot any in-person MN Clinical courses to online delivery with the support of our instructional technology staff. In the Winter of 2020, all placements for students in the MN programs were cancelled for the Spring of 2020. To replace clinical placements in the NP program, an innovative faculty-developed virtual Bloomberg Clinic was offered to support learning. The Objective Structured Clinical Examinations (OSCE) that are normally held in-person were transitioned to video-based assessments. Despite efforts to replace experiential learning, based on feedback from Fall 2020 preceptors, it was clear that a small subset of first-year students struggled with their physical assessment skills. Overall, students were able to catch up on these missed skills during the remainder of their second-year placements. For the MN Clinical and HSLA programs, Spring placements were replaced with various learning activities. Feedback in our post-graduation surveys suggests that students felt that they missed out on this placement-related learning.

Early in the pandemic, PhD students whose research was delayed due to COVID-19 were required to work with their supervisors to develop an alternative plan for their thesis projects so that no student's graduation was significantly delayed. Supervisors were encouraged by the School of Graduate Studies and Bloomberg Nursing to be responsive to the emergent situation of COVID-19, and to reasonably adjust expectations (e.g., decreasing sample size or scope of project) for thesis projects to ensure students' timely completion of the PhD program. In addition, the launch of our DN program that was scheduled for Fall 2020 was delayed until Fall 2021. Although the DN program is delivered primarily online, we recognized that many of the DN students would have significantly increased work and life demands due to the stresses of the pandemic.

Ontario Government Program Expansion

To help address the current Health Human Resources crisis in Ontario, the government announced the addition of 1,000 seats across undergraduate nursing programs in the province. Our BScN yearly cohort of 176 students was expanded in Fall 2021 with a "one time only" enrolment increase of 16 (Full Time Head Count) and a "sustained" increase of 30 (Full Time Head Count) in Fall 2022. In Fall 2023, our enrolment was increased further bringing a total target enrolment to 231 seats.

While enrolment targets for the MN Clinical, MN HSLA and MN NP programs have remained stable for some years, the Ontario government response to COVID-19 included an announcement in April 2023 that an additional 150 NP seats would be allocated to programs in the province. The Faculty received written notice in May 2023 that U of T was allocated 20 seats as part of that expansion, effective Fall 2023.

The challenge is now planning for a target number with uncertainty about meeting this new target, or indeed a possible imposed new target. The additional seats across undergraduate nursing programs have created more competition between programs, meaning it is harder to project the number of applicants who will accept their offer. This year, it looks like we will lose more applicants to other programs than has historically been the case as seen in Table 2 below.

Table 2. 2023 Offers, Acceptances, Deferrals, and Targets

Program	Total Offers Issued	Total Offers Accepted	Total Deferred Offers	Total Melt	Registered in Program (Sept)	Targets
BScN	362	257	3	42	212	231
MN	233	179	2	13	164	171
PM-NP	17	11	0	2	9	15
DN	11	10	0	1	9	10
PhD	9	9	0	0	8	10

Long Range Challenges

The combined effect of the pandemic and related enrolment expansion has had an impact on instruction, clinical placements, faculty complement, and the budget. The impact is especially evident when considering long range challenges.

Enrolment Strategy

Undergraduate - The short notice of expansion provided by the government precluded any strategic approach to recruitment, particularly any approach to increasing the number of students from equity deserving groups, including racialized and Indigenous students. The increase in the number of students in the system has also negatively impacted the availability of clinical placements of sufficient diversity and quality. As previously mentioned, the Faculty is exploring the potential to deliver the BScN program to a cohort of students at UTM. Such an initiative could ease placement pressures in the downtown hospitals and address health workforce needs in the Peel region.

In addition, the increased interest in Nursing as a profession brought on by the pandemic abated across all nursing programs in the province. Bloomberg Nursing's Fall 2023 BScN applicant pool dropped to 854 compared to 1140 in 2022 and 896 in 2021. As seen in Table 2, this Fall 362 offers were made and 257 offers were accepted, but only 212 students registered, meaning we fell below the government expanded target of 231.

Masters - Again, the delayed notice of enrolment expansion meant strategic recruitment activities could not be undertaken, making it difficult to recruit a pool of high-quality applicants. The chronic shortage of placements for students in the primary health care NP emphasis in particular, has been exacerbated by the increased number of NP seats across the province. The planned delivery of the NP program at SAMIH in Fall 2026 may provide an opportunity to further strengthen the relationship of the Faculty with placement providers in the region, resulting in improved availability of both placements and preceptors.

Doctoral - The enrolment target for the PhD program has remained at 10 for a number of years with enrolment numbers usually reaching between 7 and 9, but notably, applications and acceptances from International students have increased over the last few years. Competition for prospective

PhD students is increasing as nineteen schools in Canada offered doctoral programs in 2020-2021 with 112 admissions (CASN 2020-2021 Registered Nurses Education in Canada Statistics Report). The DN program also has a target of 10 currently, with unique recruiting challenges as a new program and the first of its kind in Canada. Both programs will benefit from targeted recruitment activities.

Faculty Complement Plan

As of Fall 2021 the Faculty had 23.0 FTE tenure stream and 14.4 teaching stream faculty, with 11 tenure stream faculty at the highest rank of Professor and 4 teaching stream faculty at the rank of Associate Professor. The Fall 2021 Student: Faculty ratio was 18.9:1 compared with the U of T ratio of 25.7:1. The Faculty faces a number of anticipated retirements over the next three years and has been actively seeking to recruit both teaching and tenure stream faculty since 2022, without a great deal of success. The failure to recruit faculty is multifactorial. Firstly, the pool of PhD-prepared nursing faculty is small in Canada with the Canadian Association of Schools of Nursing (CASN) 2020-2021 Registered Nurses Education in Canada Statistics Report indicating a steady state of only 60-65 doctorally-prepared graduates annually across the country. Secondly, the cost of living in Toronto may preclude potential applicants from moving to take up a job offer. Thirdly, as a still female-dominant occupation, potential applicants tend to have caregiving responsibilities that may preclude moving. Finally, the addition of at least 1,000 seats in undergraduate programs and 150 seats in nurse practitioner (NP) programs in the province means schools are facing greater competition in securing sufficient faculty. The CASN 2020-2021 Registered Nurses Education in Canada Statistics Report also indicated participating schools predicted a need to hire 543 full-time faculty in 2022, suggesting that recruitment challenges will be long-lasting.

Student Financial Aid

Bloomberg Nursing provides over $1.5M in student aid to the 700+ students enrolled each year. Student support from the operating budget is on average $350,000 per year including the PhD funding package contributions, fund matching and top-ups. Undergraduate and graduate admissions awards for Black and Indigenous students were established in 2021. The Faculty's Professional Master's Financial Aid fund provides support to MN and Post-Master's NP students and the Faculty increased the commitment to $300,000 in operational support as of 2023. The PhD base funding package was increased to $18,250 in 2023. Student financial aid is an approved fundraising priority in Bloomberg Nursing's Defy Gravity campaign.

Development/Fundraising Initiatives

Bloomberg Nursing has an ambitious goal of raising $48M during the Defy Gravity campaign. A campaign cabinet has been established and a new initiative; Bloomberg Nursing Giving Circle, is in the early stages of development. Frequent turnover in the role of Director of Advancement in the Faculty has resulted in significant delays in moving any initiatives forward.

Management and Leadership

The current Dean of the Faculty completes their second term in July 2024 and the search for a new Dean has commenced. The senior leadership currently comprises the Dean, Associate Dean Academic, Associate Dean Research and External Relations, and the Chief Administrative Officer. As NP program delivery commences at SAMIH and BScN programming is potentially implemented at the UTM campus, there may be benefit in considering what, if any, academic management/leadership structure would best serve those initiatives.

QUESTIONS FOR REFLECTION

What strategies can help make Bloomberg Nursing more agile when dealing with significant external factors that impact internal operations (pandemic, government policies/decisions)?

Is program expansion (to UTSC and UTM) a viable strategy for Bloomberg Nursing — administratively and programmatically - when considering longer-term enrolment strategies and demands for a larger nursing workforce?

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2. CONTINUOUS IMPROVEMENT

2.1 Previous Reviews

Following the 2017 UTQAP External Review, Bloomberg Nursing created an Implementation Status Report (Appendix 5) using a "traffic light system" to track the implementation of specific recommendations raised by the external reviewers (Appendix 4). Various "administrative leads" were identified as being responsible for the implementation, and "progress against plan" was reported annually at the Faculty Leadership Committee meetings.

2.2 Self Study Participation

In preparation for the Bloomberg Nursing 2023-24 UTQAP Review, feedback was collected from students, faculty, staff, and clinical partners. The feedback was reviewed collectively along with the Implementation Status Report, exit surveys, post-graduation surveys, and Committee reports. Reflection on the feedback, reports, and the progress/changes since the last review helped inform the content for this self-study.

UTQAP Process

Launch	Collect Feedback	Self Study	External Review

Phase 1 **UTQAP Launch**	Phase 2 **UTQAP Feedback**	Phase 3 **UTQAP Draft Self Study**	Phase 4 **UTQAP Review/Finalize Self Study**
List of activities	List of activities	List of activities	List of activities
9-30-22 VPAP launch meeting	3-9-23 HSLA Yr 1 feedback session	2-23 Program Directors draft sections	Site visit planning and prep
11-22-22 Finalized ToR/external reviewers	3-22-23 PhD feedback session	4-23 Research office draft section	Site visit
12-9-22 Schedule monthly planning mtgs.	4-25-23 NP Adult feedback session	8-23 CAO draft sections	
1-25-23 Announcment of launch	5-2-23 NP Primary HC feedback session	8-23 Dean draft sections	
	5-31-23 Faculty and staff feedback session	8-23 Edit sections	
	6-16-23 TAHSN feedback session	Finalized draft for review/consultation	
	6-22-23 DN feedback session	VPAP review	
	6-26-23 NP/HSLA/Clinical feedback sessions	Finalize self study	
	Monthly topic for all Committee meetings	Self study to VPAP to external reviewers	

2.3 Self-Study Reflections: Challenges that Hold Promise for Enhancement
2.3.1 Clinical Placements and Simulation

Clinical Placements: Challenges

Clinical education is a core, non-negotiable component of all of the programs except the doctoral programs. It provides students with the opportunity to immediately apply knowledge in real world practice. In addition, the clinical education curriculum is scaffolded, enabling students to experience increasing complexity of client populations, increased accountability for clinical reasoning and judgement, and increased expectations for technical skills and advanced relational capacity as they progress through their program. The impact of enrolment expansion and the pandemic have made it more difficult to secure enough clinical placements and to recruit enough clinical instructors to meet the demand of our increased student population.

Impact of enrolment expansion on clinical placements: Since the last review we have seen a 21% increase in the number of students who need placements. The increased number of students impacts the number of placements that need to be coordinated because students in the MN Clinical/HSLA have 2 placements throughout their program, students in the BScN program have 8 placements and NP/PM NP programs have 4 placements. For 2023-24 Bloomberg Nursing has

748 students in clinical group and preceptored placements. This means the Clinical Education Office will coordinate a total of 2214 placements for 2023-24 (Table 3).

Table 3. Bloomberg Nursing: Number of Clinical Placements 2017 - 2023

	BScN Total # of Students Placed	Total # of Student Placements Coord.	MN Clinical/HSLA Total # of Students Placed	Total # of Student Placements Coord.	MN NP & PM NP Total # of Students Placed	Total # of Student Placements Coord.	Total # of All Students Placed	Total # of All Placements Coord.
2017	351	1405	90	90	175	363	616	1858
2018	348	1394	118	118	161	329	627	1841
2019	351	1403	138	138	184	332	673	1873
2020	348	1390	142	142	208	434	698	1966
2021	351	1419	123	123	207	401	681	1943
2022	376	1524	116	116	200	422	692	2062
2023	414	1686	124	124	210	388	748	2198

Between enrolment expansion and the pandemic our Clinical Education Office is consistently grappling with the challenge of finding enough placement spots and recruiting enough clinical instructors for our current student population. Recent Ontario Hospital Association (OHA) data indicates clinical instructor recruitment is challenged by nurse vacancies, lack of compensation or incentive, lack of dedicated administrative staff, lack of space and lack of training or supports for clinical instructors. Ontario Health (OH) data indicates that there is no capacity for increasing clinical placements in the Greater Toronto Area (GTA). All of these factors make the work of placing students more stressful for staff and less efficient for students. Faculty, staff, and student feedback all indicate that the organization and communication around the clinical placement process could be improved. A recently commissioned review of the nursing placement process in the GTA provided a number of recommendations that are now being considered by placement providers in consultation with academic programs.

In the past Bloomberg Nursing could have compensated for the clinical placement challenges in the GTA by increasing placements in other Provinces, but the Faculty stopped Out-of-Province placements because the Provincial Health Authorities outside Ontario (NS, BC, AB etc) refused placement agreements to accommodate Ontario-based students. This eliminated opportunities for

Out-of-Province students to undertake placements in their home province and, paired with the Toronto cost-of-living, negatively impacted recruitment outside Ontario (one of the recommendations from the 2017 UTQAP Review).

In response to these challenges, Bloomberg Nursing has expanded the range of placement sites in Ontario. As a result, some placement sites require a longer commute and may not be accessible through public transportation. Student feedback regarding the time and logistical challenges of reaching sites outside of the GTA has increased. A growing number of students are asking to be compensated for the time and expense involved in travelling to their clinical placement sites.

Financial impact of enrolment expansion: A base clinical education funding allocation of $495,000 plus an activity share calculated based on a five-year average enrolment was awarded to support program expansion, but clinical education funding provision is well below the actual costs of delivery.The annual clinical education costs of Bloomberg Nursing over the past three years were on average $2.2M. Relatedly, the Clinical Education Grant allocation over the last three years has been approximately 1/6 of the total clinical education cost (Table 4).

Table 4. Government Clinical Education Grant Funding Allocation

	Clinical Education Grant - Nursing									
	2019-20 Actual	2020-21 Actual	2021-22 Actual	2022-23 Bdgt	2022-23 Est Act	2023-24 Plan	2024-25 Plan	2025-26 Plan	2026-27 Plan	2027-28 Plan
Nursing Clinical Ed Grant	334,723	334,723	344,985	347,551	1,099,066	1,099,066	1,099,066			
Projected Funding Allocation for 2022-2025										
Awaiting confirmation on whether 2022 -25 funding allocation will continue after 2025										

Clinical Placements: Quality Improvement Initiatives

The University and the Faculty have established affiliation agreements with over 50 clinical placement sites, including the Toronto Health Sciences Network (TAHSN). The Clinical Placement program capitalizes on the depth and breadth of expertise available, allowing students to access high quality placements settings across a range of specialties. Prospective students, current students, and faculty members often remark that our clinical placements set Bloomberg Nursing apart from other nursing education programs.

> "What would you say are the two most significant strengths of your program."
>
> #1 response: clinical placement options/experiences/connections
>
> UTQAP student feedback sessions

Since the last review, Bloomberg Nursing has implemented numerous noteworthy initiatives to further improve the quality of our clinical placements (Table 5).

Table 5. Quality Improvement Initiatives for Clinical Placements

Initiative	Benefit

Clinical Instructor orientation	Comprehensive orientation promotes quality of instruction in clinical placements
UG and Grad Clinical Education WGs	Ongoing oversight of clinical learning
New placement matching systems	Increase transparency and promote equity
Student/preceptor placement and site evaluations	Evaluation of student and preceptor performances and quality of placement sites
Bloomberg Teaching Professoriate Awards to Support Scholarship	2022 Awardees' Project: Development a preceptor hub to serve as a centralized source of resources to support PD of NP preceptors
Clinical Resource Faculty Role	To build capacity and excellence in UG clinical learning; oversight for the quality of CI and Preceptor teaching

Bloomberg Nursing will continue to build and improve on the quality of our clinical placements, but the financial and logistical challenges related to placements will not be solved quickly. The advances in technology and the cancellation of clinical placements during the pandemic have led Bloomberg Nursing toward further enhancing our simulation facility and curriculum.

Simulation: Holding Promise for Enhancement

The Simulation Lab facility and learning experience provides a learning connection to real life situations and clinical dilemmas through a variety of activities and simulation exercises in a supportive setting. It effectively meets the educational needs of both undergraduate and, to a lesser extent, graduate students. Simulation is fully integrated into all undergraduate clinical courses and the goal is to integrate it into more courses in our MN program. Through the integration of advanced technology, informatics and active learning principles, students have the opportunity to practice hands-on high quality and safe nursing care individually and in groups. The simulations are tailor-made for students in consideration of their abilities and stage of study within their program.

Since the last review, the SIM lab and the programming have been transformed. Table 6 lists the improvements that have been made to the lab and the programming.

Table 6. Improvements to SIM learning

SIM Lab
Lab renovation in 2020 created new apartment space, clinic space
Large donation of mannequins − 3 X SimMan 3G, 6 X Nursing Anne Simulator, 4 X Nursing Anne Classic, 3 X SimBaby, 1 X Victoria Birthing Simulator
Programming
New simulation development includes community members with lived experience to ensure authenticity of cases (i.e., trans community member; people who use substances)
Virtual simulations used as prep within courses or prior to attending simulation lab, clinical supplementation for missed clinical activities, remediation activities
Development of Simulation Lab Coordinator position and hiring into the position
SIM Team composed of faculty members with simulation training plus trained graduate students (Teaching Assistants)
Multi-faculty simulations − nursing faculty have been partnering with people from other Faculties to develop and update interprofessional simulations

The high-quality and consistency of the delivery of our simulation education is based on our staff. The newly added SIM Lab Coordinator role goes beyond the responsibility for the general functioning of the lab to include ensuring quality assurance and incorporating best practices. Our SIM team is composed of faculty members who have completed, or are in the process of completing, the Certified Healthcare Simulation Education Program, plus trained graduate students (Teaching Assistants).

The SIM lab also enables faculty to evaluate student learning in a variety of ways beyond the classroom and clinical settings, including intensive one-to-one remediation for students who are struggling clinically. Simulation is a large component of the remediation process and is tailored to student learning needs and issues identified in their learning contract.

Bloomberg Nursing News

U of T Alum's donation will help nursing students prepare for real-world clinical scenarios

Impact of Covid-19 and enrolment expansion: Simulation lab facilities are an integral component of clinical education, but our SIM lab is unable to operate at full capacity due to a lack of SIM lab instructors and faculty. The impact has been mitigated by further developing the skills of teaching assistants dedicated to simulation and we are continuing to develop relationships with adjunct faculty with an interest in simulation facilitation, but ultimately this may not be the best solution at a stable state.

Holding promise for enhancement: Since the challenges with clinical placements will continue for the foreseeable future, a potential solution is expanding simulation activities to complement clinical

placements and enhance clinical skills attainment. While simulations cannot replace in-person placements, technology and innovative curricular updates may help counter the pressure on the number and location of clinical placements.

Possible SIM lab enhancements include:

- Updating the audio-visual components of the lab (e.g. Cameras, microphones, streaming capability).
- Prioritizing the use of simulation to highlight the care of vulnerable populations and high-risk/low frequency clinical /workplace events.
- Integration of additional simulation experiences in the MN and PhD programs to allow students to apply theory and gain additional experience enacting APN competencies as well as to increase development of leadership skills (e.g. developing coaching skills, engaging in difficult conversations) and research skills (e.g. participant consent, conducting interviews, running focus groups).
- Developing a robust SIM program that includes a Human Resource plan, SOPs, standardized templates for all SIM learning material, mapping of SIM to curriculum PLOs, etc.
- The addition of a faculty member; Director of Simulation Learning, to our staffing of the SIM lab.

QUESTIONS FOR REFLECTION

What can be done to protect — and even expand — the number of clinical placements with our clinical partners considering the program expansion and concurrent lack of capacity with our clinical partners?

Are advances in simulation learning (technology and innovative curricular updates) enough to potentially expanding simulation activities to compensate for the challenges with clinical placements?

How should Bloomberg Nursing, and the nursing education community, address the student payment/compensation questions regarding clinical placements?

2.3.2 Opportunities for Curricular Change

Shift from emphasis to generalist for the MN — Nurse Practitioner Field (NP)

The MN-NP field and Post-Master's Nurse Practitioner Diploma (PMNPD) is a hybrid population-based pre-licensure educational field of study guided by graduate Degree-Level Expectations at the University of Toronto, as well as national and provincial regulatory frameworks that encompass certification, licensure, standards and core competencies of NPs. Students engage in focused

education and clinical experiences specific to their chosen emphasis enabling them to sit for registration examinations for the Registered Nurse-Extended Class category.

The current Master of Nursing (MN) Nurse Practitioner (NP) field and Post-Master's Nurse Practitioner Diploma (PMNP) Bloomberg has two emphases: NP-Adult and NP-Primary Health Care (PHC). Until recently we had a third paediatric emphasis, thereby making us one of the few faculties to offer NP education for this practice speciality. We have currently suspended the Paediatric NP emphasis and have integrated some of this content in other areas of the program, in anticipation of the proposed movement to a generic all-ages NP program.

The MN-NP adult emphasis prepares graduates to write the certification exam focused on adult nursing care, and the MN-PHC emphasis prepares graduates to write a certification exam focused on family nursing care. In 2024, the regulatory body for nurses in Ontario, the College of Nurses Ontario (CNO) is shifting the focus of the regulatory framework for NP education from an emphases model to a general NP practice across the lifespan. In addition, the Canadian Council of Registered Nurse Regulators (CCRNR) is currently developing a new single national licensure exam to receive the designation of Registered Nurse-Extended Class (RN-EC, known as NPs). The new licensure exam will be administered in 2026. This certification exam, the Canadian Nurse Practitioner Exam (CNPE) is expected to include a generalist focus across the lifespan (paediatric to adult/older adult nursing care). The anticipated content of the revised exam will reflect the new vision for future NP practice to meet the evolving health needs of the public such as the increasing need to access primary care.

Given the anticipated changes to the licensure process and entry- to- practice requirements of new NPs, Bloomberg Nursing suspended the previously offered MN-NP and PM-NP Paediatric emphasis and is currently drafting a minor modification proposal to close all three emphases to create a new generalist NP field entitled "Master of Nursing Nurse Practitioner" with first entry of these students planned for Fall 2024.

MN − NP Primary Health Care UTQAP Student Feedback
- Weekly lecture not aligned with learning objectives - Ensure that lecture content is up to date - A lot of self teaching - Some objectives not covered in lectures - Online courses lack interactive learning (person and content)

To remain responsive to the changes in entry to practice competencies from the CNO, the regulatory body of nursing, we must institute this change, but this change is further supported by the student and faculty feedback collected for the UTQAP review. Feedback indicated significant support for the mode of delivery for the NP program (online courses and in-person residencies/clinical placements), but there is collective agreement that the curriculum and instructional methods need to be updated and overhauled to reflect contemporary trends in practice.

Although we are early in the UTQAP process we have already responded to some of this preliminary student

feedback to make improvements to the student experience. For example, at an annual NP retreat faculty engaged in critical self-reflection and peer review of course objectives to ensure they are comprehensively covered in lecture content and reflect the most up to date, evidence informed content. We have also collaborated with our Educational Technology experts and the Centre for Teaching Support and Innovation (CTSI) to develop an instructor workshop on creating interactive and engaging online course content that will be delivered to our Graduate Curriculum, Teaching, and Learning Committee (GCTLC).

The CNO released a new set of NP entry level competencies (ELCs) in early 2023 which will require mapping the NP generalist curriculum to the new ELCs. The MN-NP field will undergo CNO accreditation in December 2024 and this process will account for the integration of these new ELCs. The new ELCs include, among others, practice expectations related to: virtual care; understanding power relations; EDI; and culturally safe, and anti-racist care, for Indigenous Peoples. We view the integration of these new ELCs as directly aligned with our previous curricular activities related to Black and Indigenous health. Preliminary steps to integrate this curriculum include introducing the 2023 ELC curricular framework in the annual NP retreat, MN program committees, and the Curriculum Committee so faculty can become familiar with the needed curricular changes. Faculty have met to discuss the integration of the new ELCs across NP courses. Moving forward, we will conduct a formal curricular mapping and evaluation to ensure that the new ELCs are appropriately covered alongside changes to the new generalist NP field.

QUESTIONS FOR REFLECTION

How do we ensure that new ELCs related to EDI, cultural safety and humility, and power relations remain central to students' learning needs across the complexities and competing demands of different practice areas and client groups in a single emphasis NP field?

How do we leverage educational technology and e-simulation learning to maximize student learning in virtual care, a major curricular theme in the new ELCs?

How do we engage in on-going collaboration with our clinical and community partners to ensure that the new single emphasis NP curriculum appropriately meets the needs of equity deserving groups?

3. PROGRAMS

3.1 Bachelor of Science in Nursing (BScN)

3.1.1 Program objectives and key features

The Bachelor of Science in Nursing (BScN) is an accelerated, two-year second entry program that provides the foundation for a career in nursing. It is designed to prepare graduates to practice nursing safely, competently and ethically. Since the last review, the undergraduate program has undergone a systematic, thoughtful, and courageous process of reflection and refinement, if not transformation. Through a participatory and inclusive process, new Program Objectives (POs) and Program Learning Outcomes (PLOs) were developed. Of note is the intentional focus on creating these signposts such that they reflect Bloomberg Nursing's accountability to respond to the multiple calls to modernize nursing education. When last reviewed, the program lacked a focus on these obligations which became more public and urgent during the COVID-19 pandemic.

The new POs and PLOs (Table 7) are based on the five curriculum themes that were developed in 2016. The POs and PLOs now serve as a foundation for the continuous quality improvement of the program going forward and make explicit what graduates will know, and be able to do, including acting on a multiplicity of knowledges that lead to anti-discriminatory and culturally safe nursing practices. The PLOs provide a shared visionary framework that articulates how every element of the program, including lecture content, assignment design, and clinical learning experiences contribute to its purpose.

Table 7. BScN Curriculum Framework

Curriculum Themes	Program Objectives	Program Learning Outcomes
Safe, Ethical, and Competence Practice	Graduates of the BScN Program provide safe, effective, equitable, and ethical care that is relationally and technically sound; reflective of diverse theories, research, and healing practices.	Demonstrate clinical reasoning, critical thinking, clinical judgement, and ethical decision making in the provision of nursing care for individuals, families, groups, and communities[3].
		Critically reflect on how diverse social identities interact with structural factors to shape power relations within the care encounter, and create differential access to care and other resources, social determinants of health, and health outcomes[2].
		Demonstrate anti-oppressive practices and a trauma-informed approach across all healthcare sectors, settings, and specialties[1].
		Integrate cross-disciplinary and interdisciplinary knowledge into clinical practice[3].
Scholarship and Critical	Graduates of the BScN	Analyze current structural, institutional, and interpersonal forms of both colonization and reconciliation[1].

Inquiry	Program are change-agents, leaders, and critical and system level thinkers who can translate knowledge from multiple sources within the complexities of varied organizational and sociopolitical healthcare contexts.	Analyze and critique multiple knowledge sources and ways of knowing through varying theoretical and philosophical perspectives[2].
		Describe the historical context and current drivers of structures and systems of inequity[2].
		Identify and analyze emerging evidence and technologies that may change, enhance, or support health care[3].
Interdisciplinarity and Interprofessional Collaboration	Graduates of the BScN Program demonstrate critical reflexivity and an ethic of care when working with others, helping to re-shape power relations that impede collaborative practices.	Identify and access resources for the integration of Indigenous teachings and healing practices in clinical work across practice settings[1].
		Be aware of the personal and professional impact of disciplinary and sociopolitical inequities on colleagues and student peers[2].
		Role model professionalism and an ethic of care when working with others[3].
		Advocate for the advancement of the nursing profession, positioning the discipline central to policy processes and leadership within health systems[3].
Centrality of Relationships	Graduates of the BScN Program center compassion and trauma-informed practices.	Engage in the process of cultural humility to contribute to culturally safer environments where clients perceive respect for their own unique health care practices, preferences, and decisions[1].

Primary source of PLO:

1	Work of the Indigenous Health Nursing Working Group (2021-2022)
2	Work of the Black Health Equity Working Group (2021-2022)
3	Annual Undergraduate Faculty Curriculum Retreats (2020, 2021, 2022, 2023)

To break the cycle of exclusion in nursing education, we drew on collaborative and democratic processes to ensure our new PLOs were not reflective of faculty-driven priorities only. Who is involved in deciding what our graduates should know and do in practice requires thoughtful consideration of the full range of individuals and groups who have a stake in better nursing practices. As a result, we drew on the collective wisdom of our Indigenous Health Nursing Working Group (Appendix 7), Black Health Equity Working Group (Appendix 8), faculty, and students. Details of how we accessed and integrated the collective wisdom are provided throughout this report. Furthermore, we have highlighted, where appropriate, the consistency of our POs and PLOs with evolving regulatory documents from the College of Nurses of Ontario (CNO) and best practice documents from professional bodies including the Canadian Nurses Association (CNA), the Canadian Association of Schools of Nursing (CASN), and the Registered Association of Nursing of Ontario (RNAO).

Grounded in our new POs and PLOs, the undergraduate program is well positioned to contribute to the U of T mission by reflecting a commitment to *professional programs of excellent quality*. The program is pushing boundaries towards excellence by tackling deeply entrenched and problematic norms of nursing education. Furthermore, U of T's goals for teaching in particular, highlight the commitment to ensure graduates are able to *contribute constructively to society*. The program is centering the role of nurses in addressing inequities in health and healthcare for a range of marginalized communities for the betterment of society as a whole.

Key Features

Curriculum — The curriculum for the BScN program is progressive, responsive, and relevant. It challenges norms in nursing education, especially with respect to a narrow biomedical view of healthcare and nursing practice. For example, topics include intersectionality, trans competent care, trauma informed care, Indigeneity, LGBTQ2S+ and critical reflexivity.

Improvements to Clinical Education — Since the last review, Bloomberg Nursing has made numerous changes to improve the quality of our clinical instruction. We created a Clinical Resource Faculty Role and reintroduced the Undergraduate Clinical Education Working Group. This working group promotes thorough and ongoing oversight of the clinical learning component of the program and includes a focused review of clinical incidents in an effort to ensure safe, quality learning experiences for students. In addition, a Clinical Instructor Orientation was developed which promotes quality instruction in clinical placements. The comprehensive orientation includes an online modular component, face-to-face component and handbooks.

SIM Team — As noted in section 2.3, members of the SIM Team at Bloomberg Nursing have specialized simulation training and serve as a resource to other instructors. In addition, we have extended invitations to adjunct faculty to join simulations as content experts. The team creates new simulations every year and is invested in finding new and innovative methods to deliver simulation education.

> Bloomberg Nursing News
> [New nursing simulation project promotes gender affirming care for 2SLGTBQIA+ community](#)

3.1.2 Admission Requirements

The BScN is a highly competitive second-entry program. The minimum [admission requirements](#) include 2 years of university credits with at least a B average, but the applicant pool is so strong that close to 100% of admitted students enter the program with a 4-year completed degree or with an entering average GPA of 4.0. Between 11 - 15% of new admissions have earned a graduate degree. A successful candidate typically has:

- High academic standing with a GPA of B+ or greater in the final year of the bachelor's degree
- Broad knowledge of diverse disciplines in the humanities, social sciences, and life sciences
- Satisfactory grades in all prerequisite courses

- A personal statement that conveys enthusiasm and commitment to nursing
- A strong track record in community involvement, volunteerism and other relevant experiences.

The selection of candidates is made through a careful and thorough process by the Admissions Committee. We are trying to use a holistic approach to assessing applicants by highlighting applicants who have a high GPA and whose personal statements express an awareness of the social determinants of health, health and healthcare disparities, interest in working with marginalized communities, and experiences volunteering in healthcare (beyond the hospital alone). The POs and PLOs require students to have the capacity to work with multiple knowledges and to advance their awareness of - and attention to - significant societal issues. Applicants who have a breadth of experiences help ensure we have diversity of thought in our student cohort. In addition, we believe students who demonstrate a foundational awareness of societal issues will be more successful in achieving the programs' POs and PLOs.

Bloomberg Nursing is prioritizing efforts to recruit diverse candidates. During admission, we invite applicants to share adversities they have faced that impacted their prior learning. We do this in an effort to minimize the stigmatization of persons with disabilities (physical and /or mental) and create the space and opportunity for persons with a range of abilities to access nursing education. We are also committed to increasing the number of Indigenous students in our program through the aforementioned Indigenous Priority Pathway. As mentioned in section 1.7, the short notice of government enrolment expansion precluded any strategic approach to recruitment, particularly any approach to increasing the number of students from equity deserving groups.

Notably, the 2023 admissions process and data (Table 2 in section 1.7) highlight the impact of the government enrolment expansion and the historical competition with medical schools. This year, a larger number of applicants failed to respond to offers of admission, or accepted and declined our offer of admission, compared to past years. Anecdotally, competition with other nursing programs in the GTA — who have also expanded their enrolment — drew applicants away from Bloomberg Nursing. This competition, paired with programs outside of the GTA that are located in areas with more widely available housing and a lower cost of living, has impacted the acceptance rate. In addition, while Bloomberg Nursing has historically lost strong applicants and registered students to medical programs, the number is increasing as seats in medical schools have also increased. In 2023, 7-8 of the top 11 applicants who received merit awards declined their offer because they were accepted to medical school.

QUESTIONS FOR REFLECTION

What can be done to mitigate the impact of competition from the government enrolment expansion and increasing cost of living/housing deficit in the GTA?

How can Bloomberg Nursing more effectively communicate the stature of a nursing degree to help retain strong applicants?

3.1.3 Program Structure

As a practice discipline, BScN students need the opportunity to not only acquire a broad range of knowledge but, more importantly, learn how to apply that knowledge in the complex healthcare context. That context involves interprofessional and intra-professional practice and collaboration with clients and their families. Online learning is therefore minimized as students need to perfect their relational capacities to work with others. They also need the opportunity to practice clinical reasoning and decision making in "real" scenarios. This is why we have classroom learning (knowledge acquisition focus) *in parallel* to clinical placements and to SIM lab learning.

> I enjoyed the program a lot. The clinical placements were a great opportunity to learn and implement theory into practice. The first year of the program was a bit overwhelming compared to the second year. However, I believe the program really helped me prepare for nursing and my future.
>
> 2022 BScN Post-Graduation Survey Response

The courses combine scholarship and practical field work experiences. The purpose of the practicum experience is to consolidate learning from the undergraduate program in healthcare settings, utilizing the knowledge and skill of clinical instructors and preceptors currently employed in the practice role. Clinical practice is a significant component of the undergraduate BScN program. Nursing students provide direct care to vulnerable patients/clients of all ages across a wide variety of hospital and community agencies. Throughout the curriculum, students are required to complete all courses which include theory, simulation and clinical hours, as outlined in Table 8 below.

Table 8. BScN Course Timetable and Course Requirements

Code	Course Title	Lectures /Seminar (hrs/wk)	Lab (hrs/wk)	Clinical (hrs/wk)	Course Weight**
Year 1					
NUR350	Introduction to Nursing Practice	6	3	0	1
NUR351	Introduction to the Discipline and Profession of Nursing	2	-	-	0.5
NUR361	Introduction to Nursing in Health and Wellness	3	SIM lab (2hrs)	8-16	1.5
NUR325	Pathophysiology and Pharmacotherapeutics 1	3			0.5
NUR371 (7 weeks)	Introduction to Acute Care Nursing: Adults	5	SIM lab (2hrs)	16	1

NUR374 (7 weeks)	Introduction to Nursing Care of Childbearing Persons and Families	5	SIM lab (2hrs)	12	1
NUR373 (7 weeks)	Introduction to Nursing Care of Children and Families	5	SIMlab (2hrs)	12	1
NUR390	Introduction to Community Health: Nursing Perspectives	2	-	-	0.5
NUR330	Introduction to Research and Scholarship in Nursing	2			0.5
Year II					
MPL202	Current Topics in Medical Microbiology	2	-	-	0.5
NUR410	Nursing and the Health Care System: Policy, Ethics and Leadership	2	-	-	0.5
NUR420	Critical Reflexivity: Theory and Practice	2	-	-	0.5
NUR425 (first time offered Fall 2023)	Pathophysiology and Pharmacotherapeutics 2	3			.5
NUR460	Coping with Complexity in Persistent Illness	3	Pre-clinical lab (3.5hrs); SIM lab (2 hrs)	24	1.5
NUR461	Primary Health Care: Nursing Perspectives	3	Pre-clinical lab (2hrs); SIM lab (2hrs)	16	1.5
NUR470 (11 weeks)	Integrative Nursing Practicum	30 hours over 11 weeks	SIM lab (2 hrs)	360 hours in 11 weeks	1 (Pass/Fai l)

In 2023-24, the UG program will map the curriculum to the newly developed POs and PLOs as part of the UTQAP process. The UG program is finalizing the curriculum mapping of 104 College of Nurses of Ontario (CNO) Entry-to-Practice (EPTs) competencies which provide evidence for ways in

which the curriculum addresses the current state of the discipline and ensures that the curriculum is appropriate for the level of the program. The alignment of the PLOs, POs and the curriculum will continue to be discussed on an ongoing basis through the Curriculum Undergraduate Support Program (CUSP).

3.1.4 Program requirements

The BScN program prepares professional nurses who provide safe, ethical and competent nursing care across settings. The curriculum emphasizes use of knowledge from research, theory, professional standards and practice guidelines as well as from patients and families to guide nursing practice. Students are also prepared for further education at the graduate level (MN, PhD).

Students are required to complete a total of 16 courses to successfully graduate (see course descriptions in Appendix 11 – Undergraduate Calendar). Simulation learning is a component of 7 courses and students are required to complete clinical placements in 7 courses (Table 8). Clinical practice is central to nursing and mandatory in the BScN program. Full participation in both clinical and classroom learning is integral to students' success in the program and future excellence as practicing nurses.

As summarized in section 3.1.1, since the last UTQAP review, the UG Program has engaged in a reflective process to develop new POs and PLOs. The process was informed by the following:

- a comprehensive thematic analysis of student feedback on exit surveys from 2017-2019 and 2023
- annual faculty Curriculum Retreat notes/documents 2019-2023
- 4 faculty surveys using Microsoft Forms
- student feedback on Course Evaluations.
- work of Indigenous Health Nursing Working Group and Black Health Equity Working Group (2021-2022)
- Literature review
- clinical partner agencies and nurse regulators

> Exit Surveys - # Comments Counted by Strengths & Improvements
>
> 1,776 comments on program strengths
> 1,705 comments on program improvements

The newly developed PLOs reflect the complexity, breadth, and depth of knowledge required of nursing graduates as well as the high level of accountability nursing graduates will shoulder to apply that knowledge in ways that help dismantle the current inequities and deficiencies in healthcare. Nursing is not simply about being a technician. It is about leadership, relational excellence, cultural humility, and courageous advocacy. Students need to practice these nursing roles.

Table 9 lists the Ontario Universities Council On Quality Assurance Degree Level Expectations for undergraduate programs and Table 10 maps the DLEs to the new BScN PLOs. The PLOs align with

more than one DLE, as seen marked by an "x". The DLEs and PLOs that are most closely aligned are highlighted in light blue.

Table 9. BScN Degree Level Expectations

Degree Level Expectations	
1	**Depth and Breadth of Knowledge -** Students develop a depth of knowledge and critical understanding of the key concepts, methodologies, current advances, theoretical approaches and assumptions in nursing.
2	**Knowledge of Methodologies -** Students attain the capacity to evaluate the appropriateness of different approaches to solving problems using well established ideas and techniques. This capacity is fostered through the development of clinical judgment. Students learn to evaluate the appropriateness of different approaches in solving both clinical problems and more abstract problems.
3	**Application of Knowledge -** Because nursing is a practice-based discipline, knowledge of methodology and application of knowledge are closely related.
4	**Communication Skills -** Students engage in a variety of learning opportunities to develop superior communication skills in receiving and providing information orally and in writing. A significant focus is placed on the acquisition of communication skills in relation to nursing clinical practice. Students learn to establish trust and rapport in interpersonal relationships with patients/clients and team members and learn to demonstrate respect for the values and beliefs of diverse people
5	**Awareness of Limits of Knowledge -** Throughout the program students are supported to recognize the limitations of their individual experience and knowledge, and to seek guidance from more experienced practitioners.
6	**Autonomy and Professional Capacity -** Professional Standards of Nursing demand the exercise of effective decision-making in complex clinical contexts, team work, life-long, self-directed learning, and effective team work. The exercise of initiative, personal responsibility, and accountability is emphasized throughout the program. A large number of competencies in professional nursing relate to ethical practice and professional responsibility and accountability.
7	**Other Degree Level Expectations -** Students are expected to become active global citizens. Three capacities are required to develop global citizenship: 1) the critical examination of ourselves and our traditions; 2) the recognition that all persons are fellow citizens who deserve equal moral worth and consideration; 3) narrative imagination, the ability to imagine what it might be like to be a person different from oneself. Central themes of the curriculum are diversity, social justice and global citizenship.

Table 10. BScN Degree Level Expectations and Program Learning Outcomes

Program Learning Outcomes	Degree Level Expectations						
	1	2	3	4	5	6	7
1. Demonstrate clinical reasoning, critical thinking, clinical judgement, and ethical decision making in the provision of nursing care for individuals, families, groups, and communities[3].		x	X	X			
2. Critically reflect on how diverse social identities interact with structural factors to shape power relations within the care encounter, and create differential access to care and other resources, social determinants of health, and health outcomes[2].	x						X
3. Demonstrate anti-oppressive practices and a trauma-informed approach across all healthcare sectors, settings, and specialties[1].	x			X			
4. Integrate cross-disciplinary and interdisciplinary knowledge into clinical practice[3].		X			x		
5. Analyze current structural, institutional, and interpersonal forms of both colonization and reconciliation[1].	X						x
6. Analyze and critique multiple knowledge sources and ways of knowing through varying theoretical and philosophical perspectives[2].	x	X					
7. Describe the historical context and current drivers of structures and systems of inequity[2].	x						X
8. Identify and analyze emerging evidence and technologies that may change, enhance, or support health care[3].	x	X					
9. Identify and access resources for the integration of Indigenous teachings and healing practices in clinical work across practice settings[1].		X			x		
10. Be aware of the personal and professional impact of disciplinary and sociopolitical inequities on colleagues and student peers[2].				X			x
11. Role model professionalism and an ethic of care when working with others[3].			X			x	
12. Advocate for the advancement of the nursing profession, positioning the discipline central to policy processes and leadership within health systems[3].	x					X	
13. Engage in the process of cultural humility to contribute to culturally safer environments where clients perceive respect for their own unique health care practices, preferences, and decisions[1].				X			x
14. Engage in advocacy and allyship to promote equitable						x	x

Program Learning Outcomes	Degree Level Expectations						
	1	2	3	4	5	6	7
environments within health care, community, and the academic settings[2].							
15. Exercise professional and ethical judgement when establishing, maintaining, and terminating therapeutic relationships that are grounded in the principles of social justice and anti-oppression[3].			X	X			X
16. Recognize the impact of personal values, beliefs, and circumstances on interpersonal practices with individuals, families, groups, and communities[3].				X	X		
17. Relate health inequities, past and present, experienced by Indigenous Peoples to historical and ongoing colonization in Canada[1].	X						X
18. Promote health literacy, provide health teaching, and support empowered health decision making[3].		X	X				
19. Apply a strength-based approach to health promotion and illness prevention[3].	X		X				
20. Engage in action at multiple levels of change (macro, meso, micro) to optimize the sociopolitical circumstances for clients and communities to achieve equitable, healthy outcomes[3].				X			X

Primary source of PLO:

1	Work of the Indigenous Health Nursing Working Group (2021-2022)
2	Work of the Black Health Equity Working Group (2021-2022)
3	Annual Undergraduate Faculty Curriculum Retreats (2020, 2021, 2022, 2023)

3.1.5 Assessment of teaching and learning

Student learning and assessment occurs in three settings - the classroom, clinical placements, and the SIM lab.

Classroom - Classroom assessments include term work and final exams or tests. Term work includes in-course tests, essays, group projects and discussion posts. Students may have a final exam which is written or submitted after the last day of classes during the final exam period or a "final" course test which is written in the final week of classes in courses that are not followed by an exam week.

Clinical - A significant degree of assessment of student achievement happens in the clinical setting. Students have clinical learning from week 2 in term 1 through to the final day of the program. This is appropriate to ensure students' capacity to apply their learning.

For courses with a clinical nursing practice component the evaluation of clinical performance is on

a "PASS/FAIL" basis. To pass the course, the student must pass both the clinical and classroom components. Normally students will receive a verbal mid-term evaluation and a written final evaluation of their clinical performance from their clinical instructor.

SIM Lab - We also assess students in their SIM labs although the evaluations are low stakes (not worth a high %) tasks – this is to ensure student achievement stress is minimized such that they can focus on applying their knowledge in a safe space that is tolerant of error while they learn the complexities of nursing practice.

Assessments (case studies, care planning, clinical decision aids, etc.) are designed as a means of making transparent students' evolving clinical reasoning capacity which is key to nursing practice. Having knowledge is the easy thing, being able to use it ethically, effectively, and safely in very complex healthcare situations is the challenge. We have very few rote memory type tests.

While the UG Program will map the DLEs and PLOs this coming year, the CNO Entry to Practice Curriculum Map is currently being developed and it demonstrates the direct connection between the learning settings (courses), 104 ETP competencies, and the type of evidence (Theoretical Evidence, Application Evidence, and Evaluation Evidence).

Appropriateness and Effectiveness of the Program

The quality of the program and the achievement of POs and PLOs are assessed by the annual review of the first-time pass rates on the NCLEX, the responses to the annual student exit survey, course evaluations and the Committee on Standing review of grade patterns.

QUESTIONS FOR REFLECTION

The size of the cohort of students has grown from 176 in 2017 to 212 (with a target of 221) in 2023 and has reached a tipping point in terms of the type of instruction, assignments, and assessments are feasible for faculty to manage while maintaining the quality of the program. What are solutions to maintaining the quality of the program as student numbers rise?

3.1.6 Resources
3.1.6.1 BScN Faculty

Courses in the BScN program are primarily taught by full-time Associate and Assistant Professors, teaching stream (Table 77). The program currently has 8 part-time instructors in the teaching stream, some of whom also hold positions within clinical organizations and bring that clinical currency, competency, and credibility to their teaching. This experience is highly valued by our students.

The SIM Team provides supervision of all aspects of simulation education (lab, programming) and is composed of teaching stream professors. Course instructors in any course with a SIM component, whether part of the SIM team or not, are involved in the delivery of the SIM labs to the students in their course. Those course instructors may not take the lead in running a simulation, but they are available to support and debrief students.

Clinical instructors in the BScN program provide supervision while also providing opportunities for students to develop their nursing competencies. Clinical instructors demonstrate skills and encourage the integration of nursing theory and practice to their students. They normally hold, at a minimum, a BScN degree from an accredited nursing program, have several years of nursing practice experience after graduation, are interested in nursing education, and have support from their employer to permit adequate time for field instruction responsibilities.

It is now becoming more difficult to undertake long-term planning and investment in faculty, staff and infrastructure for the BScN program since the government has not confirmed the duration of the enrolment expansion and the level of funding. An increase in numbers of students necessitates an increase in the number of core faculty, Clinical Instructors and other teaching supports such as Teaching Assistants. As indicated previously, the challenges in recruiting faculty are multifactorial.

3.1.7 Quality and other indicators

Applications, Offers and Registrations

The application count for the BScN program has steadily increased between 2017 and 2022. Increases from 2020-2022 reflect, in part, the profiling of the nursing human resource crisis during the pandemic and the increasing public awareness of nursing as a career with good job prospects. The admitted yield has been decreasing as application counts have increased, with Fall 2022 being the lowest admitted yield at 61% since 2015 (Table 11).

Table 11. BScN Applications, Offers, Registrations 2015 - 2022
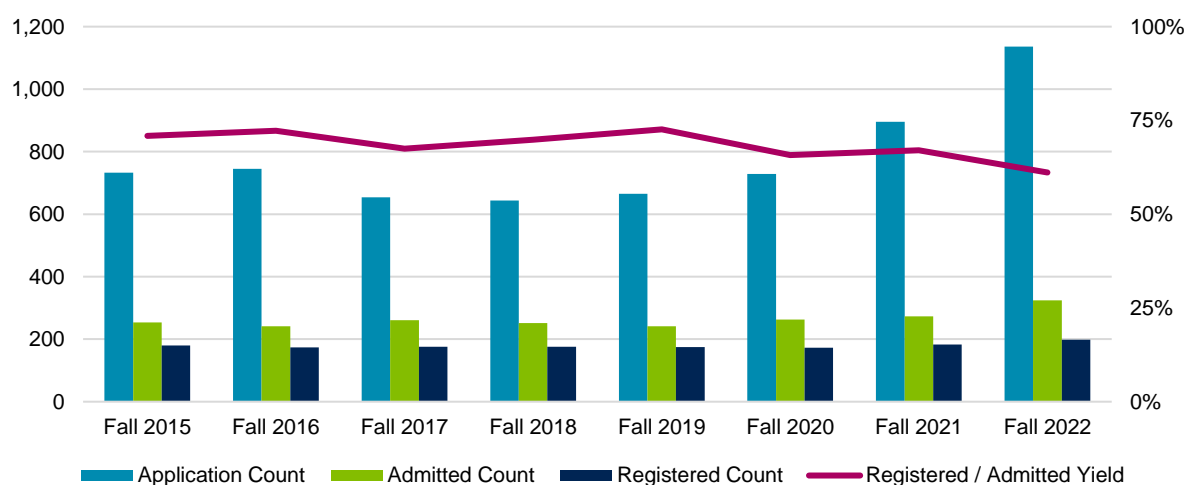
Final-year Academic Achievement

CGPA was relatively stable between 2015 and 2020. There was an increase in CGPA in 2021 and 2022 and we will continue to review the CGPA to determine if the increase was temporary.

Table 12. BScN Final-year academic achievement

Program Name		2015	2016	2017	2018	2019	2020	2021	2022
Bachelor of Science in Nursing	Graduates	177	167	176	173	171	175	171	163
	CGPA*	3.55	3.55	3.54	3.53	3.55	3.56	3.65	3.79

*CGPA = Cumulative Grade Point Average

Data Source: Degrees Awarded Analysis Tool

Notes:

1. Final cumulative grade point average (CGPA) is based on all percentage grade marks in your courses during registration in the program.
2. The Degrees Awarded Analysis Tool reports degrees awarded by calendar year (Winter, Summer, Fall terms). The tool captures official student-level graduation data that the University of Toronto submits annually to the Ministry of Colleges and Universities (MCU).

Course Evaluations - Undergraduate Courses

Bloomberg Nursing BScN course evaluation response rates were relatively stable between 2015-16 and 2020-21. We have a consistently higher response rate than any 2nd entry program at U of T (Table 13).

Table 13. Bloomberg Nursing and All 2nd Entry Programs Course Evaluations: Number of Courses and Response Rate

	Bloomberg Nursing BScN				All 2nd Entry Programs (2nd Entry)			
Academic year	Distinct Courses	Total invited	Total Responded	Response Rate	Distinct Courses	Total invited	Total Responded	Response Rate
2015-16	10	1,396	441	31.6%	28	3,610	1,049	29.1%
2016-17	15	2,614	1,096	41.9%	59	8,351	2,845	34.1%
2017-18	15	2,791	933	33.4%	121	14,417	4,083	28.3%
2018-19	14	2,602	940	36.1%	150	18,157	3,922	21.6%
2019-20	13	2,558	906	35.4%	163	18,888	3,448	18.3%
2020-21	15	2,567	876	34.1%	177	19,203	4,271	22.2%

Mean evaluation scores for questions are in the 3-4 range across all levels of courses and are consistently higher than those of other second entry programs. Means of all levels combined increased between 2015-16 and 2020-21 with a slight drop in 2019-2020, likely attributable to experiences in the pandemic. Questions Q3, Q4, Q5, Q6 demonstrate that our students feel the

program has a high quality of instruction and that the course content and assessments are valuable to their learning (Figures 4-7).
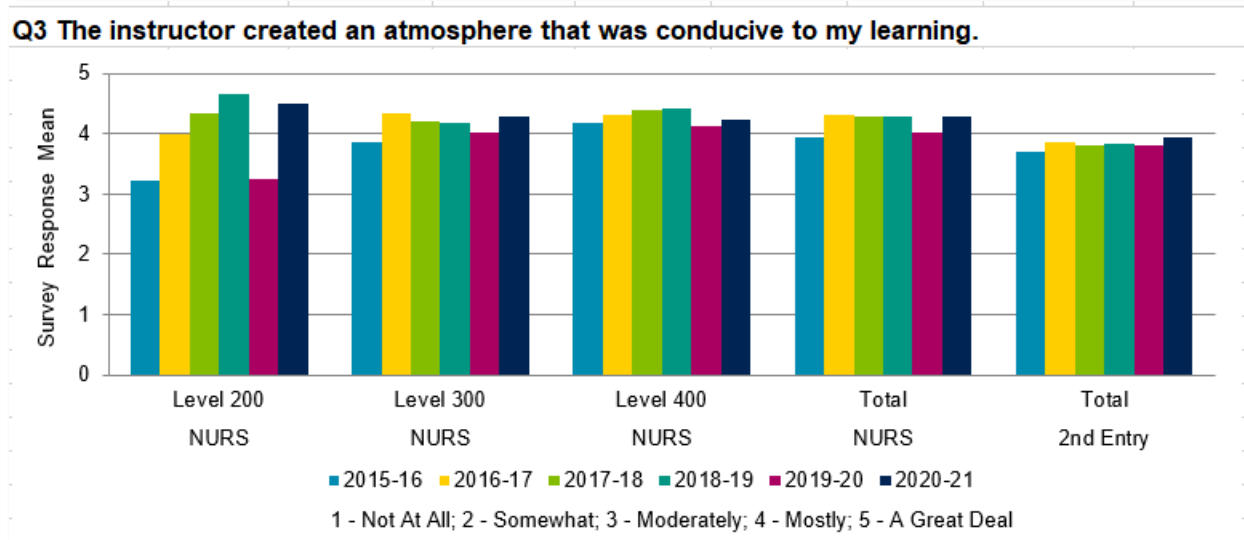
Figure 4. BScN Course Evaluations: Mean Rating Question 3
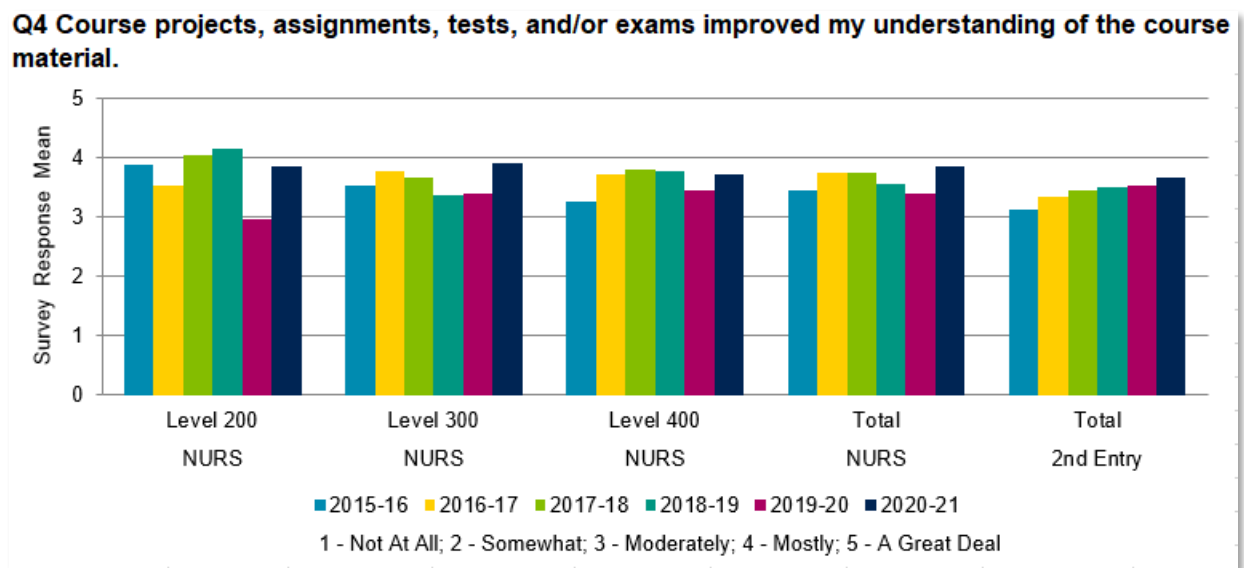
Figure 5. BScN Course Evaluations: Mean Rating Question 4
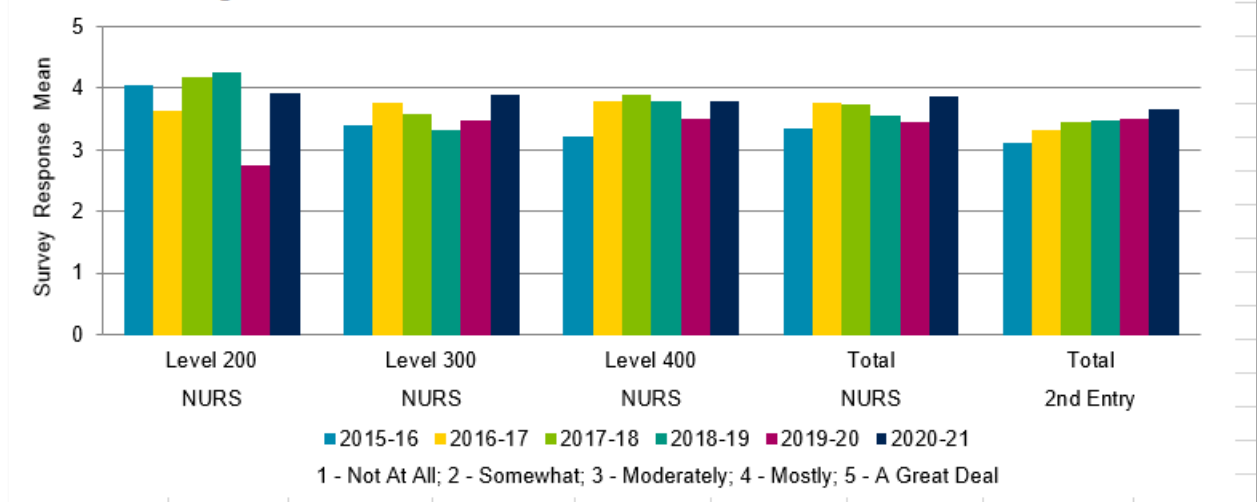
Figure 6. BScN Course Evaluations: Mean Rating Question 5
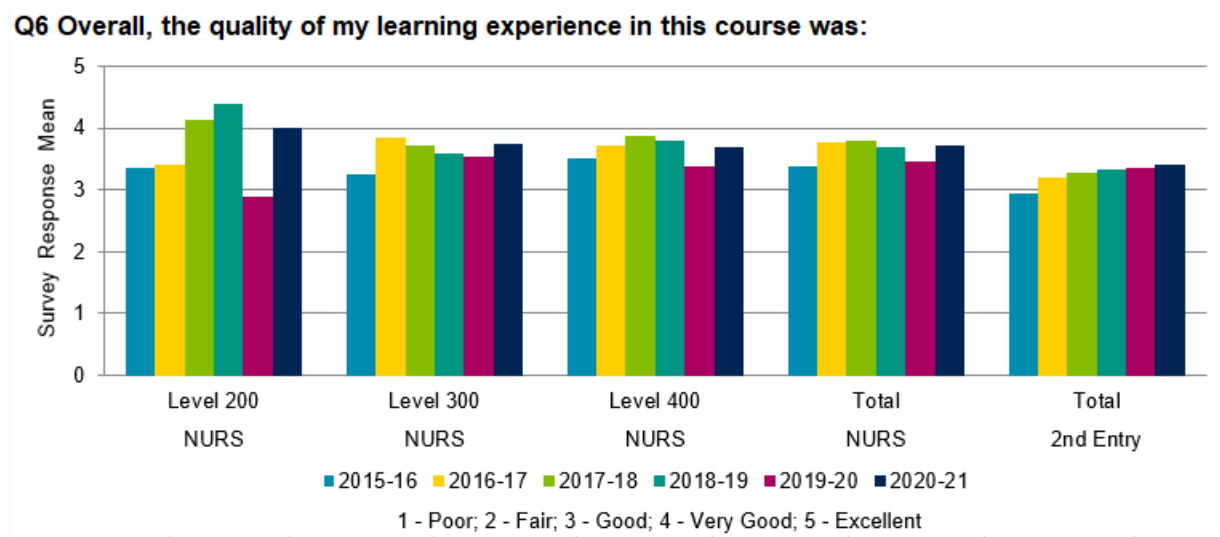
Figure 7. BScN Course Evaluations: Mean Rating Question 6

NCLEX

Graduates of the BScN program consistently have National Council Licensure Examination (NCLEX) pass rates at or above 95% and higher pass rates compared to the province, Canada, and the United States (Figure 8). The pass rates dropped for all groups in 2021 (Table 14), most likely due to the pandemic, but our pass rates continued to be higher than all groups comparatively.
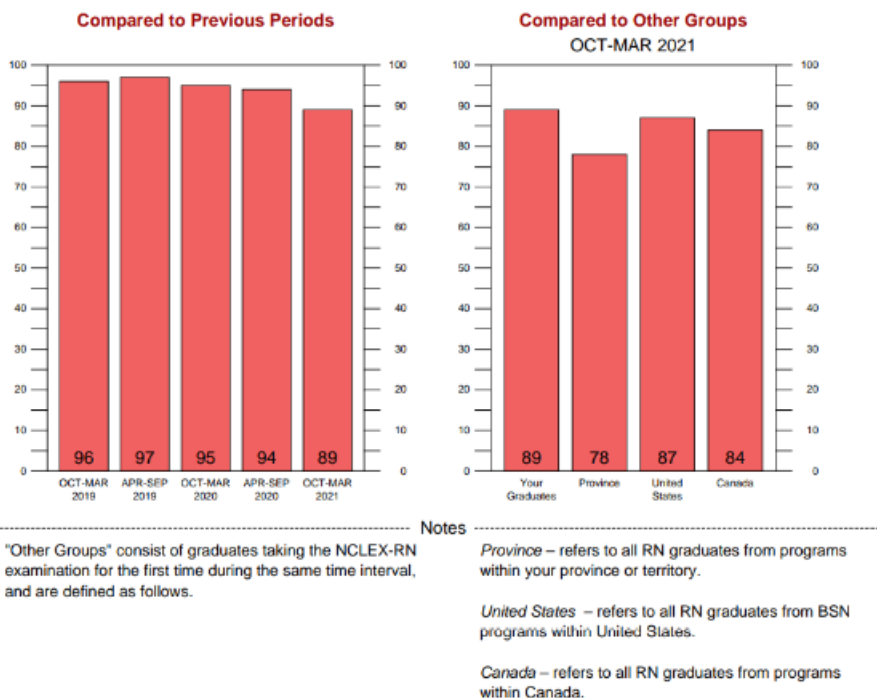
Figure 8. BScN Passing Percentages Compared to Province, United States, and Canada

Table 14. Percentage of Bloomberg Nursing BScN Graduates Passing NCLEX Exam 2019-2021

	OCT-MAR 2019	APR-SEP 2019	OCT-MAR 2020	APR-SEP 2020	OCT-MAR 2021
Total Number of Your Graduates Tested	24	152	19	151	28
Number Passing	23	147	18	142	25
Percent Passing	96%	97%	95%	94%	89%

------------------------------ Notes ------------------------------

The numbers in the first row include everyone who tested during this period for the first time and gave your program code. This may include both recent and previous graduates.

The numbers in the second and third rows tell you how many (and what percent) of your first-time candidates who tested during this time period passed.

Post-Graduation Surveys

Each year since 2014, graduating students have been invited to provide feedback about accomplishment of program objectives (pre-2023) as part of an online post-graduation survey. While the survey response rates have consistently decreased (most likely due to survey fatigue and increasingly demanding work environments) the trends in the responses have remained consistent. In the 2022 BScN Post-Graduation Survey, the mean scores related to each of the 6 program objectives range from 3.10 to 3.65 indicating graduates "mostly achieved" or "achieved a great deal".

In the 2022 Post-Graduation Survey (2-year follow-up) for the graduating class of 2020, students were asked their perceptions regarding their achievement of the program objectives. The survey responses were compared with survey responses in 2014 just after graduation. As might be expected, all mean scores improved from 2020 to 2022 as the graduates became more confident in their practice.

Now that the PLOs have been updated, Bloomberg Nursing is currently contemplating options for either updating the post-graduation surveys or finding a potentially more effective way of collecting this data, understanding that survey fatigue and demanding work environments will most likely continue to impact survey response rates.

Graduation and Employment Quality Indicators

The most recent data provided by the University indicates 97.1% of our cohorts completed their degree; substantially higher than province average (Figure 9).
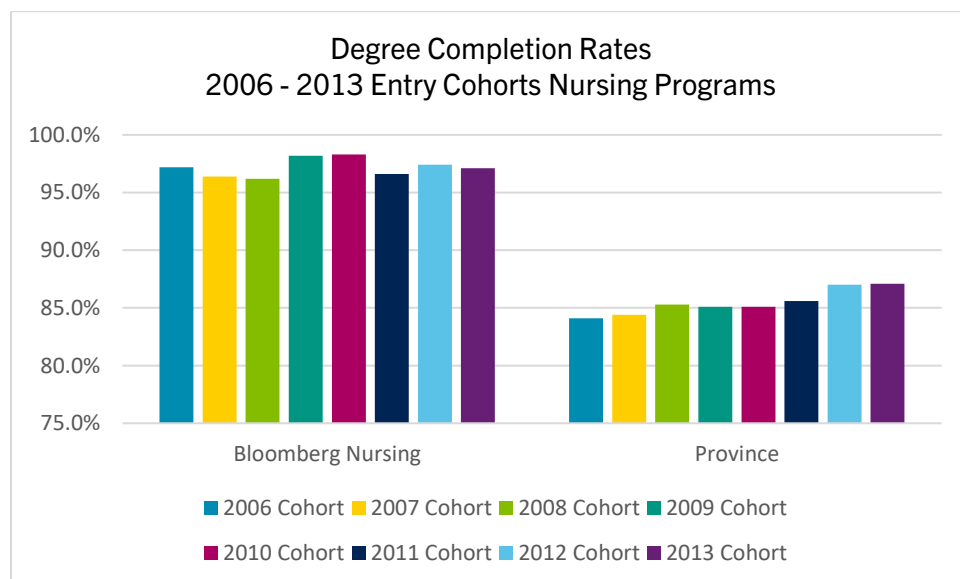
Figure 9. Degree Completion Rates 2006-2013

The same period of data for employment six months after graduation demonstrates 96.9% of graduates were employed at 6 months (Figure 10); and 98.4% by 2 years (Figure 11). Employment rates were as high, or higher, than those of the province.
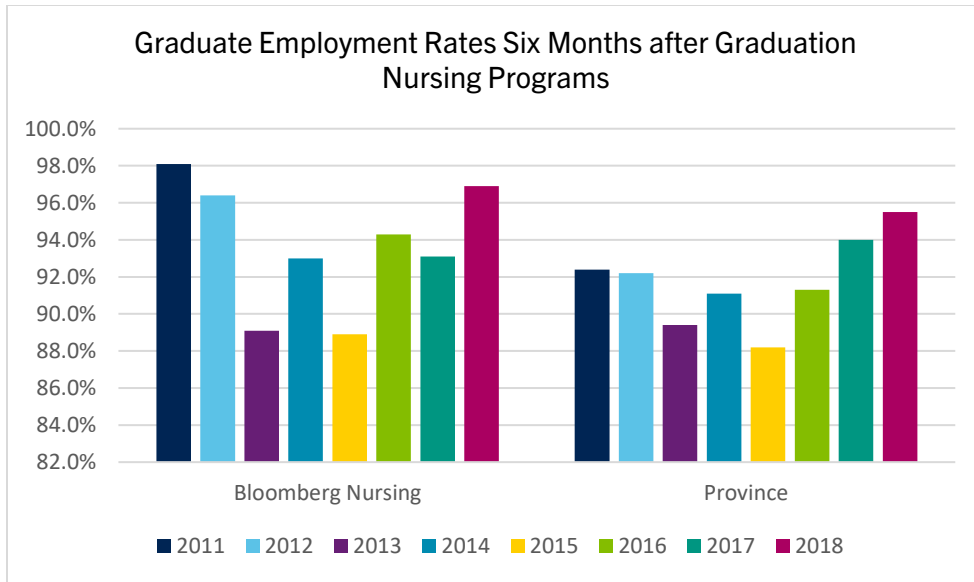
Figure 10. Graduate Employment Rates Six Months After Graduation
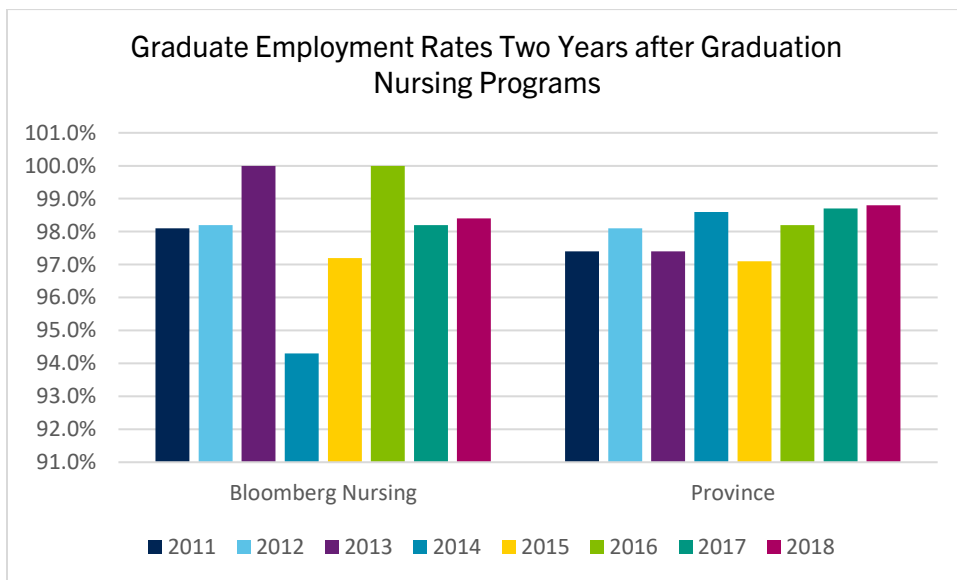
Figure 11. Graduate Employment Rates Two Years After Graduation

3.2 Master of Nursing and Post-Master's Nurse Practitioner Diploma Programs

3.2.1 Program Objectives & Key Features
3.2.1.1 Program Objectives

The Master of Nursing program prepares advanced practice nurses to be professional leaders in their chosen advanced practice field. Bloomberg Nursing has focused on ensuring that we are inclusive of all sectors within healthcare, thinking broadly beyond hospital and acute care to include LTC, primary care, public health, and community settings.

The program utilizes the research and professional expertise among faculty and our clinical partners to gain skills that will prepare graduates for the realities of practice and benefit them as they progress in their careers. In addition, students are encouraged to draw on their professional, clinical, and scholarly backgrounds as a foundation for growth as Master's prepared nurses. Graduates develop the skills to assume roles as leaders and partners in advanced clinical practice, research activities, nursing education, policy development, and quality improvement projects. Students are taught to confront and challenge situations of questionable ethics, injustice, resource constraints, structural inequity, and suboptimal care. They also acquire the contextual understandings and professional grounding to engage in leadership, mentorship, and utilize advanced knowledge and skills to improve health and health care at the micro, meso, and macro levels.

There are 3 fields within the MN program:

- MN-Clinical Nursing
- MN-Health Systems Leadership and Administration (HSLA)
- MN-Nurse Practitioner (MN-NP) & Post-Master's Nurse Practitioner (PM-NP)— two areas of emphasis
    - NP-Adult
    - NP-Primary Health Care-Global Health (PHC-GH)

MN-NP and PM-NP

The MN Nurse Practitioner field (MN-NP) and the Post-Master's Nurse Practitioner Diploma (PM-NP) are population-based pre-licensure programs that are also guided by national and provincial regulatory frameworks. Graduates are prepared to meet three sets of professional standards:

- Canadian Nurse Practitioner Core Competencies (Canadian Nurses Association [CNA], 2010) framework
- College of Nurses of Ontario's (CNO) Entry-to-Practice Level Competencies for Nurse Practitioners
- Nurse Practitioner Practice Standard (revised in 2021).

As noted in Section 1.7, the CNO released a new draft set of NP entry level competencies in early 2023, work on MN-NP and PM-NP accreditation by the CNO will occur during the 2023-2024 and 2024-2025 academic years.

MN Clinical & HSLA

The Clinical Nursing and Health Systems Leadership and Administration (HSLA) fields are not pre-registration fields mandated by the Ontario nurse regulatory body; however, they are underpinned by Canadian Nurses Association (2019) national level competencies outlining the Advanced Practice Nursing role. The MN Clinical Program is also guided by Clinical Nurse Specialist competencies (Canadian Nursing Association, 2014), while the HSLA field is further guided by competencies from the LEADS in a Caring Environment leadership capabilities framework-LEADS (Canadian College of Health Leaders, 2011).

In addition to national and provincial competencies, the MN fields and PM-NP Diploma fulfill Bloomberg Nursing's eight POs. In preparation for the UTQAP review process, the MN program faculty have initiated the process of drafting updated PLOs that align with the graduate DLEs.

Development of Program Objectives and Program Learning Outcomes

To ensure that the development of our POs and PLOs reflect the wide range of competencies that graduates need to meet across the three fields and the complexities of advanced practice nursing, we drew on inclusive, reflective, and collaborative processes. We positioned principles of equity, diversity, inclusion, and Indigenous Reconciliation as central to advanced practice; therefore, we were conscious of how the development of POs and PLOs aligned with these values. The process of PO and PLO development included key collaborators such as academic leadership, faculty, students, and university experts and drew upon the curricular recommendations from the Indigenous Health Nursing Working Group and Black Health Equity Working Group. As a result, our POs and PLOs have been thoughtfully aligned with both the broader professional standards of advanced practice in Canada and the principles of equity, diversity, inclusion, and Indigenous Reconciliation in advanced practice.

In 2022 a research assistant conducted a comprehensive review of the course descriptions and objectives of all MN syllabi to develop a map of curricular themes. This thematic map was presented at Master Program Committee (MPC) meetings for feedback. Faculty collectively decided that these themes should be conceptually mapped to the two key guiding frameworks: 1. CNO (2019)'s Advanced Practice Nursing Framework, and 2. CASN (2022)'s National Nursing Education Framework as well as the Graduate Degree Level Expectations (Tables 15 & 16).

This fall, draft PLOs (listed below in Table 16) were developed that reflected a synthesis of these initial steps and were circulated to faculty via an online survey and discussed further at an MPC meeting. In addition, academic leadership sought consultation through several faculty focus groups, which included representation from the three MN fields. Student consultation was elicited through a series of focus groups that actively sought representation from all years and fields. Students were invited to share their perspectives on meaningful course content and opportunities

to enhance the curriculum and learning experiences. Once the POs and PLOs have been more finalized, the MN program faculty will update the aforementioned POs and map the PLOs to the MN courses.

Table 15. Graduate Degree Level Expectations

Master's degree This degree is awarded to students who have demonstrated the following:
Depth and breadth of knowledge - A systematic understanding of knowledge, including, where appropriate, relevant knowledge outside the field and/or discipline, and a critical awareness of current problems and/or new insights, much of which are at, or informed by, the forefront of their academic discipline, program field, or area of professional practice.
Research and scholarship - A conceptual understanding and methodological competence that: enables a working comprehension of how established techniques of research and inquiry are used to create and interpret knowledge in the discipline; enables a critical evaluation of current research and advanced research and scholarship in the discipline or area of professional competence; and enables a treatment of complex issues and judgments based on established principles and techniques; and, On the basis of that competence, has shown at least one of the following: development and support of a sustained argument in written form; or originality in the application of knowledge.
Level of application of knowledge - Competence in the research process by applying an existing body of knowledge in the critical analysis of a new question or of a specific problem or issue in a new setting.
Professional capacity/autonomy - The qualities and transferable skills necessary for employment requiring: exercise of initiative and of personal responsibility and accountability; and decision-making in complex situations; the intellectual independence required for continuing professional development; The ethical behaviour consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; and The ability to appreciate the broader implications of applying knowledge to particular contexts.
Level of communications skills - The ability to communicate ideas, issues and conclusions clearly.
Awareness of limits of knowledge - Cognizance of the complexity of knowledge and of the potential contributions of other interpretations, methods, and disciplines.

Table 16. Mapping Graduate DLEs to Updated MN Program POs and PLOs

Graduate Degree Level Expectations	MN Program Objectives (POs)	MN Program Learning Outcomes (PLOs)
Depth and Breadth of Knowledge	PO #1 Formulate a complex understanding of current and anticipated health trends. PO #2 Develop into healthcare leaders who utilize critical thinking and multiple forms of knowledge to create and work towards a strong vision for nursing and healthcare.	PLO #1 Draw on the empirical, historical, philosophical, theoretical, and socio-political foundations of nursing knowledge to advance critical thought about health and healthcare. PLO #2 Understand and integrate a complex understanding of multiple forms of evidence in clinical, organizational, and health system level decision making.
Research and Scholarship	PO #3 Play an active role in formulating, translating, and disseminating new knowledge.	PLO #3 Critically appraise, evaluate, synthesize, and utilize current research and other relevant forms of knowledge to inform advanced practice. PLO #4 Initiate and lead scholarly inquiry into gaps in care and other barriers to health at the micro, meso, and macro level. PLO #5 Develop expertise in knowledge translation to facilitate the application of relevant evidence to clinical practice, program development, policy, and leadership.
Level of Application of Knowledge	PO #4 Initiate and lead systems-level innovations in practice, policy, research, scholarship, and education that produce positive impacts.	PLO #6 Utilize theories of leadership, management, negotiation, and conflict resolution to lead individuals, teams, and organizations towards positive change. PLO #7 Fully participate in the development, implementation, and evaluation of policy, standards of care, guidelines, and programs to improve the quality of nursing and health care. PLO #8 Facilitate evidence-informed practice by acting as educators and knowledge brokers for clients, nurses, other healthcare providers, and other stakeholders. PLO #9 Develop a strong foundation in advanced clinical practice, including

		diagnosis, assessment, diagnostics, intervention, and safe prescribing.
Professional Capacity/Autonomy	PO #5 Enact ethical leadership across client, organizational, and disciplinary levels. PO #6 Acquire a professional identity that is deeply committed to life-long learning, growth, and responsiveness to rapid changes in healthcare.	PLO #10 Identify and critically reflect on ethical issues in advanced practice, leadership, and research, and enact appropriate strategies to navigate these issues through education, practice, and policy. PLO #11 Exercise autonomy, accountability, integrity, justice, and relationality as a clinical, team, and/or organizational leader.
Level of Communication Skills	PO #7 Engage, lead, and collaborate with multiple stakeholders in healthcare and beyond to foster positive partnerships.	PLO #12 Communicate logically, coherently, with a sustained argument, and using a synthesis of knowledge and/or research findings in writing, speaking, and presenting. PLO #13 Articulate and advocate for nursing knowledge and perspectives in interprofessional and intersectoral collaborations.
Awareness of Limits of Knowledge	PO #8 Integrate the awareness and practice of social justice, inclusion, and anti-oppression for equity deserving groups.	PLO #14 Identify sources of injustice, structural inequality, marginalization, and oppression, and enact strategies to address their impact on people, groups, and communities. PLO #15 Appreciate the limitations of professional knowledge and practice and draw on other perspectives and client centered approaches to care. PLO #16 Understand the historical and ongoing effects of colonialism and settlement on Indigenous Peoples and incorporate Indigenous knowledges and perspectives in direct practice and health systems design.

3.2.1.2 Key Features

High Impact Practices

Residencies - Students in all MN fields and the PM-NP Diploma engage in residency periods at some point during the program. During these on-campus events, students have an opportunity to learn directly from established nurse leaders in the field, network with colleagues and industry leaders, and engage in hands-on practice related to their program field.

Over the past several years, students have highlighted challenges in securing time away from employment and family life to attend these sessions. Since the HSLA and NP fields, and the PM-NP Diploma are primarily offered online, some students must travel to campus from outside of the GTA to attend in-person. Some evaluative data suggests that students do not find value by attending in-person, other data suggests that students value the learning experience of in-person residencies, particularly to build social and professional connections to those who feel isolated through online learning. In response to course evaluation data, residency length has been kept the same or reduced and attention to format has been to emphasize interactive rather than didactic learning to ensure the value of in-person attendance. In addition, the dates of residencies are widely publicized to all students' months in advance so they can make accommodations with their places of employment.

Capstone Projects - All fields of study have a final "capstone" practice scholarship course (NUR1169/1179 Practice Scholarship in the MN-HSLA and MN-Clinical Nursing fields; NUR1221/1223Y Nurse Practitioners: Roles and Issues in the MN-NP field and the PM-NP Diploma) wherein students integrate program learning and begin to enact the advanced practice nursing role appropriate to their program field.

LEADS - The MN HSLA Curriculum was mapped on to the Canadian College of Health Leaders LEADS in a Caring Environment leadership competencies framework as part of the new Certified Health Executive (CHE) Select Program. This process enabled us to secure a strategic alliance with CCHL which provides students with credit towards achieving their CHE designation after graduation. The CHE designation is the only certification program for Canadian health leaders which offers individual leaders professional benefits including support for lifelong learning in health services leadership; assistance with career advancement; peer recognition and serves as an essential career designation.

> "Bloomberg Nursing has a legacy of educating and developing nurse leaders who respond to the shifting landscape of healthcare in Canada. Now more than ever, the healthcare sector needs effective, dynamic leadership who will participate in the transformation and improvement of our healthcare system. Our continued collaboration with CCHL strengthens our ability to meet the ongoing need for the development of health leaders"
>
> Linda Johnston, Dean, Bloomberg Nursing Announcement of the Strategic Alliance with CCHL the LEADS Certification

Curricular Innovations

MN Clinical

Flipped Classrooms - During the pandemic, the MN Clinical shifted to online delivery. While courses are back in-person now, some instructors are experimenting with the use of flipped classrooms. During class, students are given the opportunity to clarify information prior to working on individual and group learning activities aimed at promoting application of course theory. Student feedback in course evaluations suggests that they found this approach helpful.

Shadowing Placements - In their first course with a practicum placement (NUR1170), students complete a shadowing placement. To strengthen the application of knowledge and theory to practice, students engage in two in-class stimulations where they develop skills associated with the consultation and collaboration Advanced Practice Nurse (APN) competency and the leadership competency through the application of the Participatory, Evidence-informed, Patient-centred process for APN role development, implementation, and evaluation [(PEPPA) framework](PEPPA) for individualizing APN roles to meet the unique needs of settings.

MN HSLA

Synchronous Discussion Sessions and Learning Pods - Student feedback indicated that students would like more opportunities for engagement given the online nature of the MN HSLA field. While faculty have historically leveraged asynchronous discussion boards, in 2020, synchronous discussion sessions were introduced where students meet with leaders and engage in real-time discussions related to relevant nursing leadership issues. In 2021, learning pods were added to one course and have been integrated in other. Students are assigned to smaller groups (learning pods) at the start of the course where they collaborate on case studies, learning activities, and discussions about the material throughout the semester. Since introducing the learning pods, most students have had the opportunity to contribute to a virtual community of learners and have expressed appreciation for the opportunity to collaborate with peers.

Hybrid Placements - During the pandemic, most clinical placements shifted to a virtual format. Students found the flexibility of the virtual option to be highly beneficial and allowed them to continue to work during their placements. As we have transitioned back to the original in-person format, we have continued to allow hybrid placements where students spend part of their time in-person at the placement site while also attending some meetings virtually. This approach enables students to benefit from being able to engage with the team, as well as informal conversations with their preceptors. Having the option to attend some meetings virtually further permits flexibility over the term.

MN-NP & PM-NP

Assessment Modules - NP faculty continue to introduce innovative ways to assess student learning in a hybrid program. For example, in collaboration with faculty and subject matter experts, four Gynecological Assessment modules and an associated online textbook was developed and posted on an open-source publishing platform, eCampus Ontario. Students taking NUR1101/1114 in their

first year in the NP field use the e-textbook and complete the modules which include virtual knowledge checks to prepare students to demonstrate examination techniques while identifying and diagnosing disorders and developing an evidence-based plan related to gynecological assessment.

Exam Prep Courses - To help prepare graduating students for their NP licensure exams, in 2020 the Faculty of Nursing started providing the Faculty's Centre for Professional Development (CPD) exam prep course for students with associated costs included in ancillary fees. The virtual CPD prep course includes practice exams and ongoing assessments of learning.

QUESTIONS FOR REFLECTION

How do we build opportunities in online learning environments to further support a community of learners, partnership between colleagues, and opportunities for collaboration, which are important in a professionally focused program?

How we ensure that students have the most current and relevant knowledge base and skill to respond to the ever changing and dynamic field of advanced practice nursing?

3.2.2 Admission Requirements

The admission requirements for the MN program are clearly aligned with selection of applicants who have the capacity to successfully achieve program objectives/outcomes. Applicants to all fields in the MN program must demonstrate superior academic ability and potential, evidence of strong clinical or professional practice, commitment to the profession, and evidence of leadership.

Applications are assessed based on undergraduate transcripts, academic and professional references, Curriculum Vitae, and applicant's expression of professional goals. Each application is reviewed by at least 2 faculty/adjunct faculty members. Given the competitive nature of NP admissions, these files are also reviewed by a third reviewer, normally the NP Program Coordinator or Emphasis Lead.

The MN-NP and Post-Master's Nurse Practitioner Diploma applicants must also have a minimum of 3,900 hours (equivalent to 2 years full-time experience as an RN) of hands-on clinical practice before entering. In 2023, a minimum of 3,900 hours was added as an admission requirement for applicants to the MN HSLA program. This change was implemented to ensure that students have a clear understanding of the RN role and some understanding of the factors that impact nursing practice in healthcare organizations, given that students are being prepared for formal leadership of RNs in roles such as nurse manager or professional practice lead.

For the 2023-2024 admission cycle, there was a decline in the number of applicants to the MN HSLA field, as seen in Table 21. There were 47 applicants who applied to the HSLA field in 2023-24, versus 70 who applied in the 2022-2023 cycle (Table 17).

Table 17. MN Clinical & HSLA 2023 Applications, Offers, Acceptance and Registrations

Program	Cycle	Appl.	Offers	Offers Accepted	Accepted Then Declined	Registered	Target
Clinical	2022-23	106	81	30		30	42
	2023-24	75	60	36	7	29	36
HSLA	2022-23	70	53	31		31	34
	2023-24	47	37	29	3	26	30

While there were new clinical practice requirements implemented, this decrease may also be attributed to the current reality faced by nurse managers. Since the beginning of the pandemic, nurse managers have had to contend with changing models of care, increased staff turnover and general challenges in supporting a struggling workforce. In previous years, students often wanted to progress into management roles to move away from challenges associated with point-of-care nursing. However, in the current context, the position of nurse manager may not be the most desirable given the complexities of the role. Currently, many healthcare organizations are struggling to recruit nurse managers.

QUESTIONS FOR REFLECTION

How do we support the admission of academically strong, professionally engaged, and diverse students to our program, given the work force constraints faced by nursing?

3.2.4 Program Structure

The MN program is comprised of foundational courses common to all fields, specialized courses based on students' field of study, and preceptored advanced practice placements. The usual MN program length is 2 years over 6 semesters, full-time. The usual program length for the PM NP diploma program is 22-months and is offered on a part-time basis only.

For all MN fields, students are cohorted, and students follow a structured program that scaffolds learning to support students to master increasingly complex professional, theoretical, and practical knowledge and skills. Practicum placements are integrated with course content to enable students to contextualize and apply knowledge and skills (see Appendix 12 for course descriptions). The program structures and usual course progression for each of the 3 fields are outlined in Tables 18, 20, 22 &23 below.

Master of Nursing Clinical Nursing Field

The MN-Clinical Nursing field is designed to enhance students' clinical and professional backgrounds to prepares graduates for a variety of advanced practice roles such as clinical nurse

specialist, nurse educator, professional practice leader, and other related clinical setting roles that require graduate preparation. The program is offered in an on-campus, in-person classroom format. Students complete a total of 9 courses over 6 terms. During two of the courses, students engage in practicum placements, including a 30-hour observational practicum with a Clinical Nurse Specialist or Advanced Practice Nurse in year 1 and 160-hours of supervised practicum with an Advanced Practice Nurse in the final term of the program.

Students in the Clinical field can take two elective courses that they select based on their professional and scholarly interests. One of the courses must be a NUR-level course that is offered by our Faculty. Examples of recent NUR electives include: NUR1038 (Social Determinants of Health in a Global Context), NUR1057 (Intervention to Enhance Health, Abilities, and Well-Being of Older Adults), and NUR1059 (Technology, Digital Health and Informatics for Advanced Practice Nurses). The other elective can be a graduate level course from another University of Toronto Faculty in a related field. Students have historically taken electives from public health, social work, health education, and health policy.

Table 18. Program Structure: Master of Nursing − Clinical Nursing Field

	Fall Semester September - December	Winter Semester January - April	Spring/Summer Semester April - June
Year 1	**NUR1176** History of Ideas in Nursing Practice **NUR1170** Introduction to Advanced Practice Nursing 30 clinical hours	**NUR1174** Research Design, Appraisal and Utilization 1 Clinical Field Elective Course	**NUR1171** Topics in Advanced Practice Nursing
Year 2	**NUR1175** Introduction to Qualitative Research: Methodologies, Appraisal and Knowledge Translation	**NUR1177** Program Planning and Evaluation in Nursing 1 Clinical Field Elective Course	**NUR1179** Advanced Practice Scholarship 160 clinical hours

Note: Students can take one elective field of study course outside of the Faculty in fall Y2 instead of in the Faculty winter Y3.

Table 19. Mapping of DLEs and Program Objectives to MN Clinical Required Courses

DLE	Program Objectives	Year 1 Courses	Year 2 Courses
Breadth and Depth of Knowledge	PO#1 Formulate a complex understanding of current and anticipated health trends.	NUR1170; NUR1176; NUR1171	NUR1177; NUR1179
	PO#2 Develop into healthcare leaders who utilize critical thinking and multiple forms of knowledge to create and work towards a strong vision for nursing and healthcare.	NUR1170; NUR1176; NUR1171	NUR1177; NUR1179
Research and Scholarship	PO#3 Play an active role in formulating, translating, and disseminating new knowledge.	NUR1170; NUR1176; NUR1174; NUR1171	NUR1175; NUR1177; NUR1179
Level of Application of Knowledge	PO#4 Initiate and lead systems-level innovations in practice, policy, research, scholarship, and education that produce positive impacts.	NUR1170; NUR1176; NUR1174; NUR1171	NUR1175; NUR1177; NUR1179
Professional Capacity/Autonomy	PO#5 Enact ethical leadership across client, organizational, and disciplinary levels.	NUR1170; NUR1176; NUR1171	NUR1179
	PO#6 Develop a professional identity that is committed to life-long learning, growth, and responsiveness to rapid changes in healthcare.	NUR1170; NUR1176; NUR1171	NUR1177; NUR1179
Level of Communication Skills	PO#7 Engage, lead, and collaborate with multiple stakeholders in healthcare and beyond to foster positive partnerships.	NUR1176; NUR1171	NUR1077; NUR1179
Awareness of Limits of Knowledge	PO#8 Integrate the awareness and practice of social justice, inclusion, and anti-oppression for equity deserving groups.	NUR1176; NUR1170	

Master of Nursing Health Systems Leadership and Administration (HSLA) Field

The MN-HSLA field prepares graduates for administrative, operational, and policy leadership roles in health care organizations and related systems in Canada and internationally.

The MN-HSLA field is offered in a hybrid delivery format that includes asynchronous online courses, 2 on-campus residencies [3 days in Winter of year 1 and 2 days in Spring of year 2], and 2 preceptored practicum placements. Students complete a total of 9 courses over 6 terms. During two of the courses, students engage in practicum placements, including a 30-hour observational practicum with a nurse manager in year 1 and 160-hours of supervised practicum with a nurse leader at the director or executive level during the final term of the program.

Table 20. Program Structure: Master of Nursing − HSLA Field

	Fall Semester September - December	Winter Semester January - April	Spring/Summer Semester April - June
Year 1	**NUR1156** History of Ideas in Nursing Practice **NUR1027** Integrated Approaches to Research Appraisal and Utilization Part 1	**NUR1151** Theories and Concepts in Nursing Leadership and Administration **NUR1127** Integrated Approaches to Research Appraisal and Utilization Part 2	**NUR1152** Leading and Managing Effective Health Care Teams 30 clinical hours
Year 2	**NUR1161** Advanced Concepts in Leadership and Administration **NUR1016** Health Systems, Policy and the Profession	**NUR1157** Program Planning and Evaluation in Nursing	**NUR1169** Advanced Practice Scholarship 160 clinical hours

Table 21. Mapping of DLEs and Program Objectives to MN HSLA Required Courses

DLE	Program Objectives	Year 1 Courses	Year 2 Courses
Breadth and Depth of Knowledge	PO#1 Formulate a complex understanding of current and anticipated health trends.	NUR1156; NUR1151 NUR1152	NUR1016; NUR1157; NUR1169
	PO#2 Develop into healthcare leaders who utilize critical thinking and multiple forms of knowledge to create and work towards a strong vision for nursing and healthcare.	NUR1156; NUR1151; NUR1152	NUR1016; NUR1157; NUR1169
Research and Scholarship	PO#3 Play an active role in formulating, translating, and disseminating new knowledge.	NUR1156; NUR1027; NUR1127	NUR1157; NUR1169
Level of Application of Knowledge	PO#4 Initiate and lead systems-level innovations in practice, policy, research, scholarship, and education that produce positive impacts.	NUR1027; NUR1127; NUR1151; NUR1152	NUR1016; NUR1157; NUR1161; NUR1169
Professional Capacity/Autonomy	PO#5 Enact ethical leadership across client, organizational, and disciplinary levels.	NUR1156; NUR1151; NUR1152	NUR1161; NUR1169

DLE	Program Objectives	Year 1 Courses	Year 2 Courses
	PO#6 Develop a professional identity that is committed to life-long learning, growth, and responsiveness to rapid changes in healthcare.	NUR1156; NUR1151; NUR1152	NUR1016; NUR1161; NUR1157; NUR1169
Level of Communication Skills	PO#7 Engage, lead, and collaborate with multiple stakeholders in healthcare and beyond to foster positive partnerships.	NUR1156; NUR1151; NUR1152	NUR1016; NUR1161
Awareness of Limits of Knowledge	PO#8 Integrate the awareness and practice of social justice, inclusion, and anti-oppression for equity deserving groups.	NUR1156	

Master of Nursing Nurse Practitioner (NP) Field and Post-Master's Nurse Practitioner Diploma (PMNP)

The MN-NP field and PM-NP diploma prepares graduates for leadership in the direct care of patients through the application of advanced practice nurse and nurse practitioner competencies. The program is offered in a hybrid delivery format that includes asynchronous online courses, 3 on-campus residencies, and 4 preceptored practicum placements. MN-NP students complete a total of 10 courses and PM-NP students complete a total of 6 courses over 6 terms. The planned changes to the NP field will not change the delivery format, residency days, number of practicum hours or number of courses, but the course codes will change.

During four of the courses, students engage in 775 hours of practicum experience guided by a Nurse Practitioner or Physician preceptor. Students with a Physician preceptor are also supervised by an NP advisor who provides a nursing perspective to clinical learning.

Table 22. Program Structure: Master of Nursing NP Field

	Fall Semester September - December	Winter Semester January - April	Spring/Summer Semester April - June
Year 1	**NUR1140/1142** Pathophysiology and Pharmacotherapeutics I **NUR1094** Research Design, Appraisal and Utilization	**NUR1141/1143** Pathophysiology and Pharmacotherapeutics II **NUR1095** Introduction to Qualitative Research: Methodologies, Appraisal and Knowledge Translation	**NUR1101/1114** Advanced Health Assessment and Clinical Reasoning 75 clinical hours

| Year 2 | **NUR1138** Global Health Topics for Nurse Practitioners

NUR1115/1117 Advanced Health Assessment and Therapeutic Management I
250 clinical hours | **NUR1097** Program Planning and Evaluation in Nursing

NUR1215/1217 Advanced Health Assessment and Therapeutic Management II
250 clinical hours | **NUR1221/1223** Nurse Practitioners: Roles and Issues
200 clinical hours |

Note. Where there are multiple course number codes, this reflects the focused courses in each NP emphasis: NP-Adult and NP-PHC-GH.

The Post-Master's Nurse Practitioner Diploma (PM-NP) is a 2-year part-time diploma program for Registered Nurses who have already earned a Master of Nursing (or equivalent nursing Master degree). Similar to the MN-NP field, PM-NP students select an area of emphasis: NP-Adult or NP-Primary Health Care-Global Health (PHC-GH).

Table 23. Program Structure: Post-Master's NP Diploma Program

	Fall Semester September - December	Winter Semester January - April	Spring/Summer Semester April - June
Year 1	NUR1140/1142 Pathophysiology and Pharmacotherapeutics I	NUR1141/1143 Pathophysiology and Pharmacotherapeutics II	NUR1101/1114 Advanced Health Assessment and Clinical Reasoning 75 clinical hours
Year 2	NUR1115/1117 Advanced Health Assessment and Therapeutic Management I 250 clinical hours	NUR1215/1217 Advanced Health Assessment and Therapeutic Management II 250 clinical hours	NUR1221/1223 Nurse Practitioners: Roles and Issues 200 clinical hours

Note. Where there are multiple course number codes, this reflects the focused courses in each NP emphasis: NP-Adult and NP-PHC-GH. This program is part-time as all students have already completed a Master of Nursing or equivalent master's level graduate nursing degree.

Table 24. Mapping of DLEs and Program Objectives to MN-NP and PM-NP Required Courses

DLE	Program Objectives	Year 1 Courses	Year 2 Courses
Breadth and Depth of Knowledge	PO#1 Formulate a complex understanding of current and anticipated health trends.	NUR1140/1141; NUR1142/1143;	NUR1221/1223; NUR1138

DLE	Program Objectives	Year 1 Courses	Year 2 Courses
	PO#2 Develop into healthcare leaders who utilize critical thinking and multiple forms of knowledge to create and work towards a strong vision for nursing and healthcare.	NUR1140/1141; NUR1142/1143; NUR1101/1114	NUR1115/1117; NUR1216/1117; NUR1221/1223; NUR1138
Research and Scholarship	PO#3 Play an active role in formulating, translating, and disseminating new knowledge.	NUR1140/1141; NUR1142/1143; NUR1101/1114; NUR1094; NUR1095	NUR1115/1117; NUR1212/1117; NUR1097
Level of Application of Knowledge	PO#4 Initiate and lead systems-level innovations in practice, policy, research, scholarship, and education that produce positive impacts.	NUR1094; NUR1095	NUR1221/1223; NUR1138; NUR1097
Professional Capacity/Autonomy	PO#5 Enact ethical leadership across client, organizational, and disciplinary levels.	NUR1101/1114 (+NP ethics short course)	NUR1138
	PO#6 Develop a professional identity that is committed to life-long learning, growth, and responsiveness to rapid changes in healthcare.	NUR1101/1114	NUR1115/1117; NUR1215/1117; NUR1221/1223; NUR1097
Level of Communication Skills	PO#7 Engage, lead, and collaborate with multiple stakeholders in healthcare and beyond to foster positive partnerships.	NUR1101/1114	NUR1138
Awareness of Limits of Knowledge	PO#8 Integrate the awareness and practice of social justice, inclusion, and anti-oppression for equity deserving groups.	NUR1101/1114	NUR1138

When students and faculty members are asked about the strengths of the MN program, and the specific fields, one of the most frequent responses is the type of delivery mode for each field. The hybrid offerings in the MN-HSLA and MN-NP fields and PM-NP Diploma provide flexibility for graduate students who are often balancing multiple, competing priorities including employment and family caregiving responsibilities. These programs also offer opportunities for face-to-face learning in residencies which cannot be replaced by virtual learning (e.g., the development of hands-on skills). The in-person offerings in the MN Clinical field provide a strong sense of connection and community that allow students to engage in meaningful conversations and establish strong professional connections.

> **What would you say are the two most significant strengths of your program's field of study?**
>
> MN Clinical: In-person/cohort- candid discussions, making friends and connections
>
> HSLA: Online - easier to have school/work balance
>
> NP: Online asynchronous - I have two kids, made it very accessible to complete the program
>
> UTQAP MN Student Feedback Sessions

3.2.3 Program requirements

Students in the Master of Nursing program (Clinical and HSLA fields) are required to complete a total of five (5) full time course equivalent (FCE) courses (9 individual courses). Students in the Master of Nursing program (Nurse Practitioner field) are required to complete a total of five and one-half (5.5) FCE courses (10 individual courses). All students in the PMNP diploma program are required to complete a total of 3.5 full- course equivalents (see Appendix 13 SGS Calendar for documentation of MN program requirements).

Prior to the last UTQAP review, students took a set of foundational courses that were common across all fields of study. As a follow up to the 2017 UTQAP review, unique course codes specific to each field of study were developed. This provided opportunities to differentiate the courses and tailor content and assessment methods to reflect the unique knowledge required across the different programs.

We have mapped the recently revised MN Program Objectives to the courses for each field of study as seen in Tables 19, 21, and 24. Our next step is to map the revised PLOs to individual courses as part of an ongoing curricular process.

Changes to the NP Program

Following the 2017 UTQAP external review, the reviewers encouraged the Faculty to review and modernize the MN-NP curriculum. Progress on this recommendation is summarized in the Implementation Status Report (Appendix 5) and section 2.3.2. While the changes since the last review have made a difference, it is clear from the faculty and student UTQAP feedback sessions, Faculty Leadership Committee meetings, and MN Program meetings, there is more work to be done. As stated in section 1.6, Bloomberg Nursing plans to use the CNO shift from an emphasis to generalist model as an impetus to build on the current strengths of the program, while instituting changes that can improve the overall quality.

> **UTQAP NP PHC Feedback Session**
>
> - Weekly lecture not aligned with learning objectives
> - Ensure that lecture content is up to date
> - A lot of self teaching
> - Some objectives not covered in lectures
> - Online courses lacks interactive learning (person and content)
> - Practice quizzes need updating
> - Discrepancy between exam content, presentations, ppts, objectives, and guidance provided during lectures
> - Unclear expectations

Changes to NP Clinical Placements

We anticipate that NP clinical placements in the proposed MN-NP field and PM-NP diploma program will need to reflect the breadth of practice areas and settings that are required to meet the generalist aim of providing care to clients across the lifespan in a variety of settings. We anticipate that the current PHC-GH approach toward clinical education, which already includes all ages, primary care practicum settings, will be a segue into the development of the generalist plan for clinical placement allocation. However, we may need to expand the number of certain placements to reflect the higher number of students who need access to practicum experiences across the lifespan.

The Clinical Education Office at Bloomberg Nursing currently tracks the distribution of practicum placements to ensure that students have appropriate practicum experiences across the 2 years of study. We will continue this practice to ensure that students meet the clinical practicum requirements.

To plan for these upcoming changes, we have formed a Graduate Clinical Education Working Group to strategize about how to maximize our current placement agreements, track student placements more comprehensively, and locate additional practicum experiences in all-ages settings.

Collaborative Specializations

MN students (as well as PhD students) may enroll in any of the 5 collaborative specializations (intra-university graduate field of study that provides an additional multi-disciplinary experience):

1. Aging, Palliative and Supportive Care Across the Lifespan
2. Addictions Studies
3. Bioethics

4. Global Health (added in 2022)
5. Women's Health

The Global Health CS was opened to MN students in 2022 given that many of the MN students have interest in improving the well-being of people beyond Canadian borders. This year, there are 19 MN students enrolled in collaborative specializations.

There is a lead nursing faculty member for each collaborative specialization. Faculty participate in these collaborative specializations because of their research programs, academic interest in the subject matter, and their expertise. Students complete the additional requirements for the specialization and their specialization completion is noted on the student transcript.

> "I really enjoyed the opportunity to complete a collaborative specialization, I think it really added to my experience."
>
> MN Clinical Student, 2021 Two Year Post-Graduation Survey

3.2.5 Assessment of teaching and learning

A variety of methods are used to assess student learning throughout each of the programs. In designing assessments, consideration is given to DLEs, POs and PLOs, the diversity of student learning styles, and professional practice expectations and competencies for advanced practice nurses. Assignment of grades is consistent with the _University Assessment and Grading Practices Policy_ (University of Toronto Governing Council, 2020) for graduate programs. In all graded MN and PM-NP courses, the minimum passing grade is 70%. The mapping of the POs to methods of assessment for each field are included in the tables 25 − 27. This year we will work on mapping the methods of assessment to our new PLOs.

Table 25. Mapping MN Clinical Program Objectives to Methods of Assessment

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
PO#1 Formulate a complex understanding of current and anticipated health trends.	Theoretical exploration paper; Theoretical analysis of healthcare topic; Advance practice intervention paper; Case studies; Group presentations; Small group discussions; Class discussions; Self-reflection on participation	Needs assessment and analysis paper; Proposal paper for scholarly project; Individual presentation and poster for scholarly project; Case studies; Group presentations; Small group discussions; Class discussions
PO#2 Develop into healthcare leaders who utilize critical thinking and multiple forms of knowledge to create and work towards a strong vision for nursing and healthcare.	Personal theory of advanced practice paper; Theoretical analysis of healthcare topic; Case studies; Group presentations; Class discussions; Self-reflection on participation	Needs assessment and analysis paper; Implementation and evaluation plan; Poster presentation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project; Case studies; Group presentations; Small

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
		group discussions; Class discussions; Self-reflection on participation
PO#3 Play an active role in formulating, translating, and disseminating new knowledge.	Practice/research question and search strategy paper; Critical appraisal of research paper; Case studies; Group presentations; Class discussions	Critique of a journal article; Qualitative research synthesis and interpretation paper; Poster presentation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project Case studies; Quizzes; Group presentations; Small group discussions; Class discussions
PO#4 Initiate and lead systems-level innovations in practice, policy, research, scholarship, and education that produce positive impacts.	Theoretical analysis of healthcare topic; Advance practice intervention paper; Case studies; Group presentations; Class discussions; Self-reflection on participation	Needs assessment and analysis paper; Implementation and evaluation plan; Poster presentation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project; Case studies; Group presentations; Small group discussions; Class discussions
PO#5 Enact ethical leadership across client, organizational, and disciplinary levels.	Personal theory of advanced practice paper; Theoretical analysis of healthcare topic; Case studies; Group presentations; Class discussions; Self-reflection on participation	Implementation and evaluation plan; Proposal paper for scholarly project; Individual presentation and poster for scholarly project; Case studies; Group presentations; Small group discussions; Class discussions
PO#6 Develop a professional identity that is committed to life-long learning, growth, and responsiveness to rapid changes in healthcare.	Personal theory of advanced practice paper; Theoretical analysis of healthcare topic; Case studies; Advanced practice intervention paper; Class discussions; Self-reflection on participation	Proposal paper for scholarly project; Individual presentation and poster for scholarly project; Case studies; Group presentations; Small group discussions; Class discussions; Self-reflection on participation
PO#7 Engage, lead, and collaborate with multiple stakeholders in healthcare and beyond to foster positive partnerships.	Personal theory of advanced practice paper; Theoretical analysis of healthcare topic; Case studies; Group presentations; Class discussions; Self-reflection on participation	Implementation and evaluation plan; Proposal paper for scholarly project; Individual presentation and poster for scholarly project; Peer review; Case studies; Group

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
		presentations; Small group discussions; Class discussions; Self-reflection on participation
PO#8 Implement the awareness and practice of social justice, inclusion, and anti-oppression for equity deserving groups.	Theoretical analysis of healthcare topic; Advanced practice intervention paper; Case studies; Group presentations; Class discussions; Self-reflection on participation	

Table 26. Mapping MN HSLA Program Objectives to Methods of Assessment

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
PO#1 Formulate a complex understanding of current and anticipated health trends.	Scholarly theoretical paper; Take home exam; Interview with nurse manager; Asynchronous online postings and discussions.	Briefing note; Policy presentation; Policy position paper; Needs assessment and analysis paper; Online synchronous discussions; Proposal paper for scholarly project; Individual presentation and poster for scholarly project
PO#2 Develop into healthcare leaders who utilize critical thinking and multiple forms of knowledge to create and work towards a strong vision for nursing and healthcare.	Leadership self-reflection paper; Group presentations; Strategic planning and operational analysis paper; Interview with nurse manager; Reflective analysis of enacting nurse manager role; Online synchronous discussions; Self-reflection on participation	Briefing note; Policy presentation; Policy position paper; Online synchronous discussions; Needs assessment and analysis paper; Implementation and evaluation plan; Self-reflection on participation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project
PO#3 Play an active role in formulating, translating, and disseminating new knowledge.	Critique of evidence/translation model; Practice/research question and search strategy paper; Critical analysis of research study; Online discussions; Individual presentation; Research methodology test; Research synthesis paper	Briefing note; Policy presentation; Policy position paper; Online synchronous discussions; Needs assessment and analysis paper; Implementation and evaluation plan; Self-reflection on participation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
PO#4 Initiate and lead systems-level innovations in practice, policy, research, scholarship, and education that produce positive impacts.	Critique of evidence/translation model; Practice/research question and search strategy paper; Critical analysis of research study; Individual presentation; Research methodology test; Research synthesis paper; Leadership self-reflection paper; Groups presentations; Strategic planning and operational analysis paper; Online synchronous discussions	Briefing note; Policy presentation; Policy position paper; Online synchronous discussions; Needs assessment and analysis paper; Implementation and evaluation plan; Self-reflection on participation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project
PO#5 Enact ethical leadership across client, organizational, and disciplinary levels.	Scholarly theoretical paper; Take home exam; Asynchronous online postings and discussions; Online research ethics certificate; Interview with nurse manager; Reflective analysis of enacting nurse manager role; Self-reflection on participation	Proposal paper for scholarly project; Individual presentation and poster for scholarly project Case studies; Quizzes; Group presentations; Small group discussions; Class discussions
PO#6 Develop a professional identity that is committed to life-long learning, growth, and responsiveness to rapid changes in healthcare.	Leadership self-reflection paper; Group presentations; Strategic planning and operational analysis paper; Interview with nurse manager; Reflective analysis of enacting nurse manager role; Online synchronous discussions; Self-reflection on participation	Briefing note; Policy presentation; Policy position paper; Online synchronous discussions; Needs assessment and analysis paper; Implementation and evaluation plan; Self-reflection on participation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project
PO#7 Engage, lead, and collaborate with multiple stakeholders in healthcare and beyond to foster positive partnerships.	Interview with nurse manager; Reflective analysis of enacting nurse manager role; Asynchronous online postings and discussions	Briefing note; Policy presentation; Policy position paper; Online synchronous discussions; Needs assessment and analysis paper; Implementation and evaluation plan; Self-reflection on participation; Proposal paper for scholarly project; Individual presentation and poster for scholarly project

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
PO#8 Implement the awareness and practice of social justice, inclusion, and anti-oppression for equity deserving groups.	Scholarly theoretical paper; Take home exam; Asynchronous online postings and discussions	Briefing note; Policy presentation; Policy position paper; Online synchronous discussions

Table 27. Mapping MN NP/PM-NP Program Objectives to Methods of Assessment

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
PO#1 Formulate a complex understanding of current and anticipated health trends.	Scholarly theoretical paper; Take home exam; Asynchronous online postings and discussions; Exam; Weekly case-based learning scenarios	Scholarly paper; Exam; Clinical learning plans with self-reflection; Collaborative clinical communication assignments; Asynchronous discussion board; Quality improvement abstract; Role analysis paper
PO#2 Develop into healthcare leaders who utilize critical thinking and multiple forms of knowledge to create and work towards a strong vision for nursing and healthcare.	Scholarly theoretical paper; Asynchronous online postings and discussions; Exams; Student group facilitated case-based learning; Instructor led case-based analysis	Scholarly paper focused; Exam Clinical learning plans with self-reflection; I Collaborative clinical communication assignments; Asynchronous discussion board; Quality improvement abstract; Role analysis paper; Needs assessment and analysis paper; Implementation and evaluation plan; Poster presentation; Self-reflection on participation
PO#3 Play an active role in formulating, translating, and disseminating new knowledge.	Scholarly theoretical paper; Asynchronous online postings and discussions; Exams; Student group facilitated case-based learning; Instructor led case-based analysis; On campus advanced practice clinical assessment exams; Take home exams; Research/practice question and search strategy paper; Group critical appraisal; Quizzes; Critical appraisal of qualitative	Scholarly paper focused; Exam Clinical learning plans with self-reflection; Collaborative clinical communication assignments; Asynchronous online discussions; Quality improvement abstract; Role analysis paper; Needs assessment and analysis paper; Implementation and evaluation plan; Poster presentation; Self-reflection on participation

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
	study; Thematic synthesis of qualitative studies	
PO #4 Initiate and lead systems-level innovations in practice, policy, research, scholarship, and education that produce positive impacts.	Scholarly theoretical paper focused; Asynchronous online postings and discussions; Exams; Student group facilitated case-based learning; Instructor led case based analysis; Research/practice question and search strategy paper; Group critical appraisal; Quizzes; Critical appraisal of qualitative study; Thematic synthesis of qualitative studies	Scholarly paper focused; Exam; Clinical learning plans with self-reflection; Collaborative clinical communication assignments; Asynchronous online discussions; Quality improvement abstract; Role analysis paper; Needs assessment and analysis paper; Implementation and evaluation plan; Poster presentation; Self-reflection on participation
PO #5 Enact ethical leadership across client, organizational, and disciplinary levels.	Scholarly theoretical paper; Asynchronous online postings and discussions; Exams; Student group facilitated case-based learning; Instructor led case-based analysis	Scholarly paper focused; Exam Clinical learning plans with self-reflection; Collaborative clinical communication assignments; Asynchronous discussion board activity; Quality improvement abstract; Role analysis paper
PO#6 Develop a professional identity that is committed to life-long learning, growth, and responsiveness to rapid changes in healthcare.	Scholarly theoretical paper; Asynchronous online postings and discussions; Exams; Student group facilitated case-based learning/presentation; Analysis of instructor led case-based scenario	Role analysis paper; Needs assessment and analysis paper; Implementation and evaluation plan; Poster presentation; Self-reflection on participation
PO #7 Engage, lead, and collaborate with multiple stakeholders in healthcare and beyond to foster positive partnerships.	Scholarly theoretical paper; Asynchronous online postings and discussions; Exams; Student group facilitated case-based learning/presentation; Analysis of instructor led case-based scenario	Scholarly paper focused; Exam; Clinical learning plans with self-reflection; Collaborative clinical communication assignments; Asynchronous discussion board activity; Quality improvement abstract; Role analysis paper; Group presentations; Needs assessment and analysis paper; Implementation and evaluation plan; Poster presentation; Self-reflection on participation

Program Objectives	Year 1 Methods of Assessment	Year 2 Methods of Assessment
PO #8 Implement the awareness and practice of social justice, inclusion, and anti-oppression for equity deserving groups.	Scholarly theoretical paper; Asynchronous online postings and discussions; Completion of sexual health modules related to trans health, differently abled and under resourced clients	Scholarly abstract related to Global Health; Scholarly paper; Clinical learning plans with self-reflection; Asynchronous discussion board activity; Group presentations

Appropriateness and Effectiveness of the Program

The program curricula for all 3 fields of study are reviewed and updated on an ongoing basis, based on feedback from students, graduates, TAHSN partners, other employers, faculty, and regulatory bodies.

The quality of the program and the achievement of POs and PLOs are assessed by the annual review of the MN-Nurse Practitioner and Post-Master's Nurse Practitioner Diploma Students' Examination Pass Rates, course evaluations and the Committee on Standing review of grade patterns.

3.2.6 Resources
3.2.6.1 MN Faculty

Courses in the MN program are taught by a combination of tenure-stream, teaching-stream faculty members (Table 77) and sessional instructors. The breakdown of the number of instructors for each category varies from year to year based on the number of faculty members on research and study leave and parental leave, but generally the percentages are consistent. Ideally, we would decrease our reliance on sessional instructors. We have been trying, unsuccessfully to recruit both teaching and tenure stream faculty members, as discussed in section 1.7.

The MN Program utilizes Clinical Instructors and Preceptors to support learning in clinical settings. Preceptors normally hold, at a minimum, an MN degree and have several years of experience working as an advanced practice nurse or Nurse Practitioner.

3.2.6 Quality and other Indicators

Faculty & Program Reputation

The Faculty's longstanding reputation as a research-intensive Faculty and a provider of high-quality graduate education enables it to attract high quality applicants to all fields. During UTQAP feedback sessions, the majority of students said that the university and program reputation were the two primary reasons why they selected Bloomberg Nursing and their program.

Quality of Applicants and Admitted Students

The overall number of applications to the MN program (all fields) have increased since 2017 (Table 28). Our offer rates have declined, ranging from a high of 57% in 2017-18 to a low of 40% in 2021-2022 (Figure 12). Of these, between 68% and 77% have accepted the admission offer (Figure 13).

Table 28. MN Applications, Offers, and New Registrants 2017-2021

	2017-18	2018-19	2019-20	2020-21	2021-22
Applications	290	316	456	448	523
Offers	167	181	225	216	207
New Registrants	118	140	170	148	151

Source: SGS Admissions database
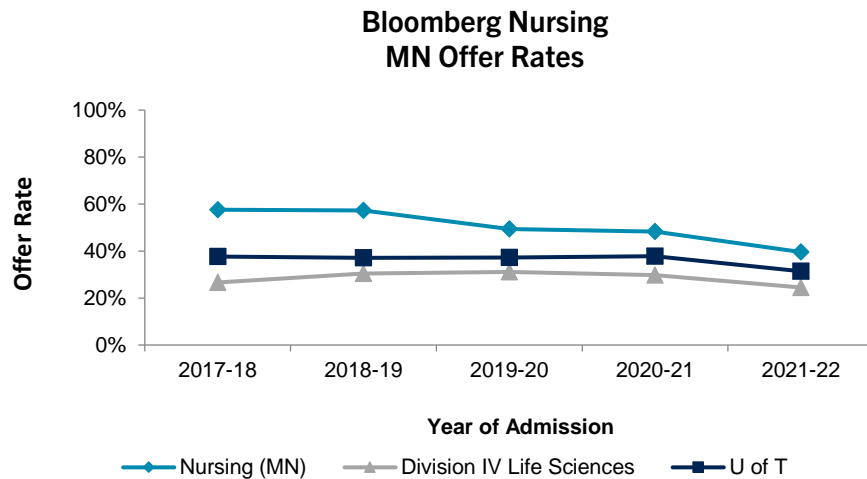
Figure 12. MN Offer Rates 2017-2021
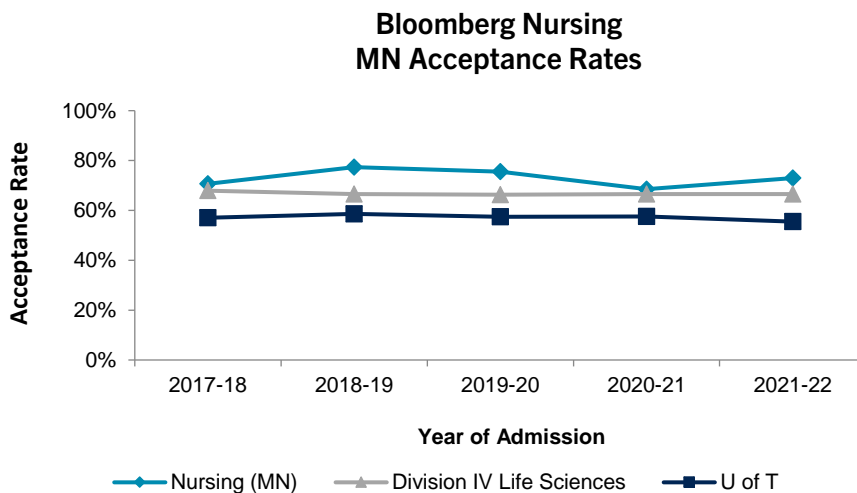
Figure 13. MN Acceptance Rates 2017-2021

Enrolment

While enrolment for the MN Program has continued to increase overall, the enrolment at the field and emphasis level has differed from 2015-2022 (Table 29).

MN Clinical & HSLA — Enrolment in the MN Clinical and HSLA fields increased between 2017-2020 and began to decrease in 2021. Applicants and new registrations for the HSLA field also decreased for 2023 as summarized in section 3.2.2 and Table 17. While enrolment in the HSLA field remains higher than 2017, we will continue to watch the application and enrolment data for the HSLA field.

MN NP — Enrolment in the NP field has continued to grow.

Table 29. Enrolment by MN Program, Field, and Emphasis

Program (Degree)	Field / Emphasis	FT/PT	Fall 2017	Fall 2018	Fall 2019	Fall 2020	Fall 2021	Fall 2022
PM NP	None	PT	12	1	0	0	0	0
	Emphasis: Adult	PT	7	11	15	20	19	14
	Emphasis: Pediatric	PT	1	1	4	4	4	4
	Emphasis: PHC -Global Health	PT	6	6	2	5	7	8
		Total	26	19	21	29	30	26
MN	Field: Clinical	FT	50	60	75	76	62	60
	Field: HSLA	FT	41	58	62	65	61	56
	Field: NP	FT	81	9	3	0	0	0
	Field: NP Emphasis: Adult	FT	28	64	73	76	72	82
	Field: N; Emphasis: Pediatric	FT	12	8	21	22	22	22
	Field: NP Emphasis: PHC - Global Health	FT	27	60	65	79	83	70
		Total	240	260	301	321	300	290

Quality of Teaching and Educational Experience

A number of indicators are used to assess the quality of teaching and the educational experience. These include: exam pass rates; formal and informal student feedback; gradSERU and CGPSS survey data; and feedback from preceptors, practicum host agencies, and employers.

MN-Nurse Practitioner and Post-Master's Nurse Practitioner Diploma Students' Examination Pass Rates

Nurse Practitioner extended class licensure exam pass rates reflect student integration of content or curriculum with competence to practice as an NP. In 2022, 46 adult MN-NP and PM-NP students wrote the American Academy of Nurse Practitioners Certification Program Adult-Gerontology Primary Care Nurse Practitioner exam to gain licensure to practice in the extended class. The pass rate was 100%, and the total program average score (average score for all initial and retake exams by graduate program) and average scores across all categories of assessment, diagnosis, planning and evaluation exceeded the national average in the United States. The exam pass rates have been consistently increasing since 2019 when the MN-NP students had a pass rate of 93% and the PM-NP students had a pass rate of 83%. In 2021, 38 MN NP students wrote the American Academy of Nurse Practitioners Certification Program Family Nurse Practitioner exam. The pass rate was 97.4%, slightly lower than the 100% pass rate for 2018-2020.

Students from the paediatric emphasis also write a US-developed exam, delivered by the Paediatric Nursing Certification Board (PNCB). In 2021, 25 students wrote the PNCB exam with an overall pass rate of 96%. The first-time pass rate was 88%, which exceeded the overall average of 80.03%.

The Canadian Council of Registered Nurse Regulators (CCRNR), the central national body of nurse regulators, will be developing a revised certification exam that is geared toward graduates of the new single emphasis, generalist NP field. These regulatory bodies are currently conducting a national review of NP practice to determine the exam content, which will be later communicated to NP programs for integration into the curriculum. It is anticipated that a single national certification exam for NP entry to practice will begin in 2026. Given our history with supporting a high pass rate and our early preparations for the single-emphasis field, we anticipate that our success in this endeavor will continue in the new exam.

Student Evaluation of Teaching in Courses

All courses in the MN program are evaluated as required by the University of Toronto Provostial Guidelines on the Student Evaluation of Teaching in Courses (2022). Results are reviewed by course instructors and by the Master of Nursing Program Director, the Associate Dean Academic and the Dean. Course evaluations for Nurse Practitioner courses are also reviewed by the Coordinator, Nurse Practitioner field. If evaluation scores for a course are unusually low, the Course Instructor and Associate Dean Academic meet to discuss the instructor's overall impressions of the course's successes and challenges, examine specific feedback that could be built on from the evaluations, and plan for future iterations of the course.

Between the 2015/2016 and 2020/2021 academic years, the response rate has ranged from 54.6% to 62.1%. Table 30 summarizes average scores for all graduate courses delivered during this period. Overall satisfaction with course instruction is high and across all items, scores have been increasing since the last UTQAP review.

Table 30. Student Evaluation of Courses: Institutions Items Mean Scores (2015-2021)

Question		Mean Score
Q1	I found the course intellectually stimulating	3.92
Q2	The course provided me with a deeper understanding of the subject matter.	4.00
Q3	The instructor…created an atmosphere that was conducive to my learning.	4.27
Q4	Course projects, assignments, tests and/or exams improved my understanding of the course material.	3.83
Q5	Course projects, assignments, tests and/or exams provided opportunity for me to demonstrate an understanding of the course material.	3.86
Q6	Overall, the quality of my learning experience in this course was…	3.63

Response Options: not at all (1), somewhat (2), moderately (3), mostly (4), a great deal (5)

Canadian Graduate and Professional Student Survey

The results of the Canadian Graduate and Professional Student Survey (CGPSS), which is administered to our graduate students every 3 years (most recently 2019 and 2022), are shared with all MN faculty and used to review and revise the curriculum and its delivery (Table 34).

Table 31. CGPSS Benchmarks - Professional Master's Students 2013 − 2022

Benchmarks	CGPSS Year	U of T NURS	U15 (NURS[1])	U of T (All disciplines)
Number of respondents	**2013**	136	69	2,411
	2016	94	62	2,121
	2019	80	159	2,721
	2022	83	179	2,164
Quality of Teaching 1. Intellectual quality of the faculty 2. Intellectual quality of my fellow students 3. Relationship between faculty and graduate students 4. Overall quality of graduate level teaching by faculty	**2013**	3.87	3.85	3.88
	2016	3.68	3.73	3.84
	2019	**3.69**	3.69	3.84
	2022	**3.99**	3.61	3.88
Research Training and Career Orientation	**2013**	3.09	3.26	3.23

Benchmarks	CGPSS Year	U of T NURS	U15 (NURS[1])	U of T (All disciplines)
1. Advice/workshops on the standards of writing in your profession 2. Advice/workshops on career options	**2016**	3.28	3.17	3.29
3. Advice/workshops on professional ethics 4. Advice/workshops on job preparation and professional practice	**2019**	**3.23**	3.17	3.31
5. Opportunities for internships, practicum, and experiential learning as part of the program 6. Opportunities for contact (lectures, seminars, discussion) with practicing professionals	**2022**	**3.42**	3.27	3.39

1. U15 values exclude University of Toronto

Notes:

1. U of T (all disciplines), U15 (all disciplines), and Ontario (all disciplines) values only include responses from Professional Master's (Master's without thesis) students.

2. U15 (all disciplines) and Ontario (all disciplines) exclude U of T.

3. U15 includes Alberta, British Columbia, Calgary, Dalhousie, Laval, Manitoba, McGill, McMaster, Montreal, Ottawa, Queen's, Saskatchewan, Waterloo, Western.

Data Source: Canadian Graduate and Professional Student Survey, 2013, 2016, 2019, 2022.

Benchmark Scores - Overall, results of the 2022 CGPSS survey demonstrate improvement in benchmark scores for Quality of Teaching and Research Training and Career Orientation compared to 2019, 2016 and 2013. Bloomberg Nursing results for these items are also above peer and institutional comparators. However, response rates for the 2022 and 2019 surveys were lower than in previous years.

General Satisfaction Scores - Scores related to intellectual quality of faculty and fellow students and teaching, the relationships between faculty and graduate students, availability of courses, and the relationship between the program content and professional goals are all above 90% (Figure 7). Areas with lower scores include the availability of financial support, opportunities to take coursework outside of the department, and opportunities to engage in interdisciplinary work, and range between 60% - 66%. The scores related to coursework outside of the department and interdisciplinary work are not surprising because only MN Clinical students are able to take an elective course outside of Bloomberg Nursing.

Percent selecting 'Excellent', 'Very good' or 'Good' in response to the prompt (NAs excluded):

Please rate the following dimensions of your program.

The intellectual quality of the faculty	Overall	96.1%
The intellectual quality of my fellow students	Overall	98.0%
The relationship between faculty and graduate students	Overall	92.2%
Overall quality of graduate level teaching by faculty	Overall	91.2%
Advice on the availability of financial support	Overall	60.4%
Quality of academic advising and guidance	Overall	85.0%
Support received from non-academic staff members	Overall	90.2%
Availability of area courses I needed to complete my program	Overall	91.2%
Relationship of program content to my research/professional goals	Overall	87.3%
Opportunities for student collaboration or teamwork	Overall	84.3%
Oppourtunities to take coursework outside my own department	Overall	63.7%
Opportunities to engage in interdisciplinary work	Overall	65.7%
Amount of coursework	Overall	80.4%
Overall quality of my relationship with my supervisor	Overall	100.0%

Figure 14. CGPSS 2022 Program Satisfaction

Post-Graduation Surveys

Post-graduation surveys (described in section 3.1.7) are administered to all graduates of the MN programs. Overall, in both the post-graduation and the post-graduation two-year follow up, respondents indicated achievement of the program objectives with responses to most items in the 'a great deal' to 'moderately' range. In 2021, we added a question to assess satisfaction with the overall quality of the experience at Bloomberg Nursing. In 2021, 55% of participants indicated that they were satisfied 'a great deal' or 'mostly' and in the 2022 survey, this increased to 66%.

Of note, two-year follow up survey responses to the most recent post-graduation survey suggest that graduates continue to advance in their achievement of almost all program objectives as they progress in their advanced practice roles. This finding was particularly evident in responses to questions about preparedness to participate in research activities and ability to mentor others in professional settings. In addition, 100% of respondents indicated they were employed in a role that required or preferred graduate education at the time of the survey. This suggests a high level of employability of our graduates in advanced practice nursing roles.

There was some variation in qualitative data results. In terms of providing support, students have consistently commented on the support provided by faculty in post-graduation surveys. Conversely, some respondents did indicate opportunities for improvement particularly in the MN-NP and PM-NP field of study. Comments referred to the amount of self-teaching required, placement-related challenges and the need for more case studies and learning activities reflecting the practice environment. Students in the MN Clinical and MN HSLA fields who were surveyed in 2020 commented on feeling disappointment about missed placement and in-person learning opportunities as a result of the pandemic.

> "Lastly and [definitely] the most important feedback, a HUGE shoutout to each and every professor and faculty member that I had the pleasure to go along on this journey with. Every single one of them was supportive and easy to get in contact with. They all provided exceptional support throughout the program."
>
> NP graduate, 2021 Post-Graduation Survey.

Preceptor Survey

Preceptors that support our graduate students are surveyed every second year. In 2018 and 2020, response rates were 22%, whereas in 2022, they increased to 31%. Overall, qualitative data suggest that preceptors and organization/nursing leaders are very impressed with the level of preparation of MN graduates, noting that they stand out compared to other programs. Preceptors from across all 3 MN fields have identified our students as being keen, well-prepared, professional, enthusiastic, self-motivated, and engaged.

Preceptor Midterm Check-Ins & Debriefs

Since all clinical practicum placements in the MN program rely on the preceptor model, we ensure the quality of clinical learning through closely working with our preceptors. Beginning in 2021, the MN Clinical and HSLA field leads, along with the Director, MN Program meet with preceptors virtually to orientate them at the start of the practicum, at midterm, and upon completion of the placements. Similarly, the NP Program Coordinator meets with NP preceptors at the start, midway point, and end of every term. The purpose of these meetings is to ensure preceptors understand practicum objectives, are equipped with strategies to facilitate learning, and have a forum to explore what is working well and identify opportunities for improvement. Faculty members have synthesized information from these sessions and have started disseminating strategies that can be used to support graduate learners in preceptor handbooks.

CORE Evaluation of Clinical Learning Experiences

To promote continuous improvement in the quality of clinical education, we routinely seek feedback from MN students about their practicum learning experiences via the CORE ELMS platform, learning management software that organizes clinical placements. Learners are asked to evaluate the overall quality of learning from both the preceptor and clinical site after the completion of their practicum. We often provide a synthesis of this feedback to preceptors and our

clinical agency partners to help inform their professional development as clinical educators and to support organizations as they create better learning environments. We are now working on creating Tableau dashboards to generate reports that will enable internal and external audiences to analyze and utilize the data more effectively.

In addition, we use this data to inform our decision making when inviting individual preceptors and locating future clinical learning opportunities. For example, we look for patterns in the types and locations of clinical placements where students have a positive experience to seek out similar clinical learning opportunities.

Examples of recent feedback-informed changes

We collect quantitative and qualitative feedback from our MN students through Town Hall meetings, student experience surveys, course evaluations, collaboration with the Graduate Student Nursing Society (GNSS) and the UTQAP student feedback sessions. We then use the feedback we receive to make informed changes as summarized in Table 32.

Table 32. MN Program - Feedback-informed Changes

Feedback	Change
Workload in fall term is too heavy with the increased demands re: school, work, and family life.	Introduced a Fall Reading Week in the Fall of 2022. Student feedback in response to this change has been very well received.
More opportunities to develop professional connections/support.	Faculty collaborated with GNSS to plan and deliver the GNSS Career Mentorship Event for MN students. 2021 Advancement team launched a student-alumni mentorship program to pair second year students with an alumni mentor to work on the student's personal and professional goals while strengthening confidence in their skills and abilities. Feedback from both mentors and mentees has been very positive
Student frustration with inconsistent communication and coordinating multiple competing demands.	Coordinating timing of assignment due dates, tutorials and office hours across courses and communicating consistently. This coordination is supported by a master calendar of key course dates that are updated by course instructors.
Improve clarity related to the clinical placement process.	Frequently asked questions document was developed to provide students with information about the selection of clinical placements, timelines, and related policies.
Feedback for the future: Development of a community of learners - 35% of	Development of additional collaboration and networking opportunities during in-person events

gradSERU participants indicated that they were able to interact effectively with students outside of their online class and 53% indicated that they were able to interact effectively with other students in their online class	and/or virtual solutions such as virtual communities of practice.

"My mentor acted not only in a mentorship capacity, but also as a sponsor – she gave ne the knowledge and skills to advance myself, but also pointed me in the right direction and gently nudged the doors open for me to get my foot in the door! Most importantly, she believed in my strengths and potential in a way that I hadn't event considered yet!"

Mentee comment from the 2021 Mentee Survey

"Worthwhile experience for me. I found the mentees thoughtful and curious. I was impressed with the strength they demonstrated in balancing work, studies and personal life during the pandemic"

Mentor comment from the 2021 Mentor Survey

QUESTIONS FOR REFLECTION

Students in our online programs (HSLA & NP/PM-NP) are happy with the mode of delivery, but some feel they lack a sense of connection with their peers. How do we continue to build a sense of connection for our students in online programs?

3.3 Doctor of Nursing

3.3.1 Program objectives and key features

In fall 2021, Bloomberg Nursing launched the Doctor of Nursing (DN) program. The program provides a viable option for nursing leaders who want an alternative to the traditional research-intensive PhD. It is designed to respond to the identified need for nurses with strong leadership skills who are academically prepared for executive-level roles in dynamic, fast-paced, technologically advanced and sophisticated health care environments, and leadership roles in nursing education. The DN degree provides a formal academic credential and a competitive edge for nurses.

The addition of the DN degree at Bloomberg Nursing is significant for the nursing profession in Canada because it provides credibility, legitimacy, and the nursing leadership needed to advance nursing careers in healthcare systems and educational settings. The program is also a meaningful

addition to U of T's mission of providing "graduate and professional programs of excellent quality." At the research level, the program aligns with U of T's Strategic Research Plan 2018–23, as the overall strategic objectives of the program include "Ensuring that all our undergraduate and professional students have opportunities to engage in research and innovation experiences."

The DN program focuses on developing skills in translating research into practice, applying research knowledge in decision-making, and developing and implementing clinical innovations to make an impact on the healthcare system, improving care delivery, and advancing nurse education and scholarship. The cumulative knowledge gained from the program courses, internships, residencies, and the DN thesis support students in achieving the DLEs (Table 33), POs and PLOs as seen in Table 34.

Table 33. Graduate Degree Level Expectations

Doctoral degree
This degree extends the skills associated with the master's degree and is awarded to students who have demonstrated the following:
Depth and breadth of knowledge - A thorough understanding of a substantial body of knowledge that is at the forefront of their academic discipline or area of professional practice including, where appropriate, relevant knowledge outside the field and/or discipline.
Research and scholarship - Research and scholarship The ability to conceptualize, design, and implement research for the generation of new knowledge, applications, or understanding at the forefront of the discipline, and to adjust the research design or methodology in the light of unforeseen problems; The ability to make informed judgments on complex issues in specialist fields, sometimes requiring new methods; and; The ability to produce original research, or other advanced scholarship, of a quality to satisfy peer review, and to merit publication.
Level of application of knowledge - The capacity to: undertake pure and/or applied research at an advanced level; and contribute to the development of academic or professional skills, techniques, tools, practices, ideas, theories, approaches, and/or materials.
Professional capacity/autonomy - The qualities and transferable skills necessary for employment requiring the exercise of personal responsibility and largely autonomous initiative in complex situations; The intellectual independence to be academically and professionally engaged and current; The ethical behaviour consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; and The ability to evaluate the broader implications of applying knowledge to particular contexts.
Level of communications skills - The ability to communicate complex and/or ambiguous ideas, issues and conclusions clearly and effectively.
Awareness of limits of knowledge - An appreciation of the limitations of one's own work and discipline, of the complexity of knowledge, and of the potential contributions of other interpretations, methods, and disciplines.

Table 34. Mapping DLEs to DN Program Objectives and Program Learning Outcomes

DLE	DN Program Objectives	DN Program Learning Outcomes
1. Depth and Breadth of Knowledge	PO #1 - Advanced understanding of the theoretical foundations of implementation science, Knowledge Translation and Exchange (KTE) strategies and change theory. PO #2 - In-depth knowledge on how implementation science and change theory is relevant to nursing leadership in healthcare and education. PO#3 A broad appreciation of the relationship between implementation science in nursing, KTE and the scientific basis of other health disciplines.	PLO #1 - Demonstrate an in-depth understanding of Implementation Science frameworks, KTE strategies and change theories. PLO#2 − Identify barriers and facilitators of implementing KTE strategies at individual and organizational levels. PLO#3 - Demonstrate advanced knowledge of nursing leadership to transform healthcare and education as appropriate. PLO #4 - Articulate the system barriers to equity of access to safe and effective care for patients and families with diverse backgrounds within healthcare organizations. PLO #5 - Demonstrate knowledge of how challenges related to diversity, cultural safety and social determinants of health are integrated in healthcare and education. PLO#6 Demonstrate knowledge of how to manage human, financial and material resources in healthcare or education.
2. Research and Scholarship	PO #4 The ability to systematically review and synthesize research, and effectively engage in translating evidence to healthcare or education. PO# 5 Critical thinking skills to promote change and sustain innovative leadership or scholarship in healthcare or education. PO#6 Leadership skills to improve healthcare or education outcomes through strategic thinking, critical appraisal and implementation of varied forms of evidence.	PLO# 7 Critically appraise and synthesize results of research relevant to leadership issues in healthcare or nursing education. PLO#8 Plan, design and carry out a research project that addresses an innovation to transform nursing leadership in healthcare or education. PLO#9 Produce original and quality scholarly outputs to satisfy peer review and to merit publication or presentation targeted at professional and lay audiences.

DLE	DN Program Objectives	DN Program Learning Outcomes
	PO#7 Expertise to create, maintain and evaluate diverse healthcare or education settings. PO #8 Proficiency in advancing leadership and scholarship across healthcare and education. PO#9 Advanced skills to provide exemplary nursing healthcare practice or education evaluation and KTE.	
3. Level of Application of Knowledge	PO#10 Application of research evidence that is relevant and useful to nursing leadership in healthcare and education using implementation science, KTE strategies and change theories/ frameworks.	PLO#10 Conceptualize, design and evaluate a KTE plan to implement/ disseminate research evidence. PLO# 11 Apply Implementation Science theories and frameworks when implementing/disseminating research evidence in complex healthcare and educational situations. PLO#12 Understand relevant change theory applicable to leadership in healthcare or nursing education. PLO#13 Define and develop evidence-informed analytical and tactical strategies for advancing nursing leadership in healthcare and education. PLO#14 Determine effective strategies for addressing leadership issues across healthcare or education organizations and/or systems while engaging relevant stakeholders.
4. Professional Capacity/ Autonomy	PO# 11 A commitment to ethical scholarship and collaboration in furthering knowledge with a critical and objective perspective on research application.	PLO#15 Model a strong commitment to professional ethics when developing solutions to complex healthcare (e.g. equal access to care) or education (e.g. diversity) issues. PLO#16 Explain the impact of KTE on organizational structure, and how context (work environment) influences KTE strategies in healthcare or education.

DLE	DN Program Objectives	DN Program Learning Outcomes
		PLO#17 Understand the importance of consultation and meaningful engagement with relevant stakeholders in healthcare or education contexts.
5. Communication Skills	PO# 12 Clear and effective oral and written communication across varied and complex healthcare and education.	PLO#18 Communicate effectively both verbally and in writing to enable implementation of new knowledge within healthcare or education.
6. Awareness of Limits of Knowledge	PO#13 Displaying an appreciation of the strengths and limitations of their work and its contributions to the greater body of knowledge, being open to multiple interpretations of their work and its impact at various levels of application.	PLO#19 Articulate the strengths and limitations of KTE frameworks and models for implementing and disseminating research in complex healthcare and education settings. PLO#20 Determine limitations of knowledge, multiple interpretations and impact at various levels.

Key Features

Academic Credential for Nursing Leaders — At the time of its inception, the DN at Bloomberg Nursing was the first professional doctorate in nursing in Canada. The program provides additional formal education for Master's prepared nurses who wish to pursue a terminal degree in nursing leadership in health systems or nursing education.

Accelerated Format — The DN program has an accelerated format which provides students with the opportunity to complete the program in 8 terms, over three years. Unlike the PhD program where students aim to engage deeply with research over time, students in this program want to complete the learning objectives efficiently and effectively so they can return to their roles full-time and advance into leadership positions.

> "I am not interested in a PhD - in building and generating research. I am interested in implementation — as an academic I wanted to implement leadership more than conduct research."
>
> UTQAP Feedback Session — Yr 1 DN students

Cohort Delivery Model — The accelerated format is achieved through a cohort delivery model where students advance through each stage of the program together. Even though the courses are delivered online, the model creates a strong community of learners who support each other through the program and who plan on staying connected well past their completion.

LEADS Certification – Last year Bloomberg Nursing mapped the DN curriculum on to the Canadian College of Health Leaders LEADS in a Caring Environment leadership competencies framework as part of the new Certified Health Executive (CHE) Select Program and in March 2023, the DN program became our second program that has received the CCHL LEADS certification (the first was the MN HSLA program as noted in section 3.2.1.2). The CHE designation is the only certification program for Canadian health leaders which offers individual

Bloomberg Nursing News

Doctor of Nursing Program receives LEADS certification from the Canadian College of Health Leaders

leaders professional benefits including support for lifelong learning in health services leadership; assistance with career advancement; peer recognition and serves as an essential career designation.

3.3.2 Admission Requirements

Applicants for the DN program are admitted under the General Regulations of the School of Graduate Studies. Applicants must also satisfy the Graduate Department of Nursing Science's additional admission requirements as stated below:

- Be a Registered Nurse holding current registration in at least one jurisdiction.
- Have a Master's degree in Nursing or a closely related field.
- Have a minimum B+ standing from a recognized University in their Master's degree in Nursing or related field.
- Have a minimum of 2 years of relevant healthcare leadership experience or advanced nursing education teaching experience.
- Have strong letters of support from 1 academic and 2 work-related referees.
- Consistent with the SGS General Regulation 3 English-Language Proficiency, applicants whose primary language is not English and who graduated from a university where the language of instruction and examination was not in English must demonstrate proficiency in English. An interview may be required.

The first intake of the DN program was planned for September 2020, but this was delayed to 2021 because of COVID-19. Ten students started in 2021.

Admissions Pre-Screening Process - In 2022 Bloomberg Nursing introduced a pre-screening process at the doctoral level. We now ask prospective doctoral applicants to reach out to our admissions team *before* emailing potential supervisors. Our Student Services team reviews the credentials for the prospective applicants to ensure they meet the minimum eligibility requirements. Prospective applicants who are deemed eligible (meet or exceeded the minimum eligibility requirements) are asked to proceed with securing a supervisor to be able to apply to the

program. Only those applicants who both meet the eligibility criteria and have a supervisor agreement can submit an application and be reviewed for admission.

The introduction of the screening program explains the drop in applications between 2021-22 and 2022-23 (Table 35).

Table 35. DN Program: Applications, Offers, and New Registrations

	2021-22	2022-23	2023-24
Applications	38	16	15
Offers	11	9	11
New Registrants	9	7	9

3.3.3 Program structure

The DN program is a full-time, cohort-based graduate program with 8 consecutive terms consisting of required and elective courses, internships, seminars, residencies and a thesis (Table 36). The core set of courses support the PLOs and the internships provide experiential opportunities for learning. The development and defense of the DN thesis proposal and final thesis demonstrates the student's ability to engage with a problem and use an evidence-based approach to exploring ways to address it.

The mode of delivery combines on-campus experiences with online coursework. The hybrid delivery model, with a blend of online synchronous and asynchronous courses, onsite intensive residencies, and internships accommodates the schedules of the students. The flexible model is tailored for students who have considerable professional experience and work commitments. Most of the students who are currently enrolled have support from their employers, which enables them to continue to work full-time on a schedule that adapts to the demands of the program. In addition, the cohorted format produces a community of learning for students and facilitates timely completion of the program.

Table 36. Program Structure and Timeline: Doctor of Nursing

	Year 1			Year 2			Year 3	
	Term 1	Term 2	Term 3	Term 1	Term 2	Term 3	Term 7	Term 8
Courses	NUR 1301 Health Services & Educational Leadership	NUR 1302 Implementation Science **Literature Review Paper Completed**		NUR 1303H Health Policy in Clinical Practice and Education	Elective			
Seminar	NUR1311	NUR1312	NUR1313				NUR 1314	
Internship		#1	#1/2	# 2				
Residency		#1			#2			#3 Final Symposium
Thesis				**Thesis Proposal Defended**				FOE

3.3.4 Program requirements

The DN program consists of 3 required courses, one elective course, 2 internships, 4 seminars, 3 residencies and a thesis (Appendix 13). The program compresses the academic content into 3 years through the cohort-based delivery and extensive use of the summer terms. The program is only offered full-time to ensure that students achieve timely completion rates and to provide a collegial cohort to successfully navigate the intricacies of the program. The PLOs are met through the program requirements as summarized in Table 37.

Table 37. Mapping PLOs to Program Requirements

DLE	DN Program Learning Outcomes	How the Program Requirements Cover the PLOs
1. Depth and Breadth of Knowledge	PLO #1 - Demonstrate an in-depth understanding of Implementation Science frameworks, KTE strategies and change theories. PLO#2 – Identify barriers and facilitators of implementing KTE strategies at individual and organizational levels.	PLOs 1, 2 AND 3 are addressed through the 3 required courses and elective courses. PLOs 4, 5 AND 6 are addressed by providing students with the option for specialization in nursing leadership in healthcare or education. PLOs 1-6 are achieved through the residencies associated with the required courses. The

DLE	DN Program Learning Outcomes	How the Program Requirements Cover the PLOs
	PLO#3 - Demonstrate advanced knowledge of nursing leadership to transform healthcare and education as appropriate. PLO #4 - Articulate the system barriers to equity of access to safe and effective care for patients and families with diverse backgrounds within healthcare organizations. PLO #5 - Demonstrate knowledge of how challenges related to diversity, cultural safety and social determinants of health are integrated in healthcare and education. PLO#6 Demonstrate knowledge of how to manage human, financial and material resources in healthcare or education.	residencies consist of 3 intensive on-campus classes where students learn from healthcare leaders or university faculty who provide in-depth and interactive opportunities to explore key topics facing leaders in health care, education, and policy. PLOs 1-6 are achieved through the literature review.
2. Research and Scholarship	PLO# 7 Critically appraise and synthesize results of research relevant to leadership issues in healthcare or nursing education. PLO#8 Plan, design and carry out a research project that addresses an innovation to transform nursing leadership in healthcare or education. PLO#9 Produce original and quality scholarly outputs to satisfy peer review and to merit publication or presentation targeted at professional and lay audiences.	PLOs #'s 7, 8 AND 9 are addressed through the completion of the required and elective coursework as outlined in DLE 1. PLO #7 is addressed through the Literature Review Paper. PLO #8 is addressed in the DN Thesis proposal and the DN Thesis Final Oral Examination. PLO #9 is addressed in the DN Symposium. to be held in the final term of the program.
3. Level of Application of Knowledge	PLO#10 Conceptualize, design and evaluate a KTE plan to implement/ disseminate research evidence. PLO# 11 Apply Implementation Science theories and frameworks when implementing/disseminating research evidence in complex healthcare and educational situations. PLO#12 Understand relevant change theory applicable to leadership in healthcare or nursing education. PLO#13 Define and develop evidence-informed analytical and tactical strategies	PLOs #10, 11 AND 12 are addressed through the required program courses as outlined in DLE 1. PLO #10 is achieved by developing a KTE Plan within healthcare or education. PLOs #13 AND 14 are met though the two required Internships (healthcare) /Practica (education).

DLE	DN Program Learning Outcomes	How the Program Requirements Cover the PLOs
	for advancing nursing leadership in healthcare and education. PLO#14 Determine effective strategies for addressing leadership issues across healthcare or education organizations and/or systems while engaging relevant stakeholders.	
4. Professional Capacity/ Autonomy	PLO#15 Model a strong commitment to professional ethics when developing solutions to complex healthcare (e.g., equal access to care) or education (e.g., diversity) issues. PLO#16 Explain the impact of KTE on organizational structure, and how context (work environment) influences KTE strategies in healthcare or education. PLO#17 Understand the importance of consultation and meaningful engagement with relevant stakeholders in healthcare or education contexts.	PLOs #15 AND 16 are met through the required program courses as outlined in DLE 1. PLOs #16 AND 17are addressed through the 3 Residencies and the Internships.
5. Communication Skills	PLO#18 Communicate effectively both verbally and in writing to enable implementation of new knowledge within healthcare or education.	PLO #18 will be achieved throughout selected written assignments and seminars associated with the required and elective courses, residencies, Internships, the literature review paper, DN proposal and defense.
6. Awareness of Limits of Knowledge	PLO#19 Articulate the strengths and limitations of KTE frameworks and models for implementing and disseminating research in complex healthcare and education settings. PLO#20 Determine limitations of knowledge, multiple interpretations and impact at various levels.	PLOs #19 and 20 are addressed through the required courses Residencies, Internships and the DN Thesis Proposal.

Courses – The program elements total 4.0 full course equivalents (FCE) and include: 3 required doctoral courses (e.g., Health Services & Educational Leadership; Health Policy in Clinical Practice and Nursing Education; Implementation Science in Health Care and Nursing Education) and 1 elective doctoral course relevant to the student's focus (e.g., Scholarship of Teaching and Learning, Quality and Safety in Health Care). See Appendix 12 – Grad Handbook for course descriptions.

Whilst students indicate on their application the path they wish to pursue, i.e., leadership in health systems or leadership in education, there is flexibility in terms of which elective they choose to do. Delivered online, students benefit from the flexibility of asynchronous delivery in terms of managing

their other roles and responsibilities and building a sense of community through participation in synchronous sessions.

Seminars – The CR/NCR seminars are designed to move the student through the thesis development process with specific resources and content relating to library searching, critical appraisal, development of the literature review, and approaches to project design, data collection, analysis, and presentation of findings so that students can meet milestones (e.g., literature review, proposal defense, FOE) in a timely manner.

Internships – Students complete two internships comprised of 50 practicum hours each, normally under the guidance of Master's or Doctorally prepared nurse mentors working in a health systems leadership or educational leadership role in a health care or higher education setting. The internships are offered locally (TAHSN network and nursing faculty in schools and faculties of nursing), nationally and internationally and are coordinated through our Clinical Education Office to ensure the necessary placement agreements are in place. Normally, the two internships will take place with two different organizations or with different mentors in the same organization.

During the internships students use the [LEADS framework](#) to develop realistic goals, learning objectives, and expected outputs (Table 38). Students' internship objectives may contribute to moving their thesis proposal work forward (e.g., developing and understanding networks and relationships with partners that will facilitate the success of their future thesis project) and their future leadership abilities (e.g., understanding the role of advocacy and policy work in their field).

Table 38. DN Internship Framework

Objectives*	Capability	Learning Activities /Strategies/Resources	Achievement Indicators
Objective 1	Lead Self		
Objective 2	Engage Others		
Objective 3	Achieve Results		
Objective 4	Develop Coalitions		
Objective 5	Systems Transformation		

Residencies - Students are required to complete three residencies on campus over the program. The residencies bring all students in the DN program together in the spring term to present their work. This includes findings from their literature review, their research proposal or their DN thesis findings (depending on their year of study). The students also discuss Knowledge Translation and Exchange (KTE) plans for implementing their innovations in practice, policy and/ or education.

In addition to course content delivery and workshops, residencies provide an opportunity for students to meet with each other and faculty and engage with nurse leaders who provide in-depth and interactive opportunities to explore key topics in health care, education, and policy settings.

Literature Review Paper - Students begin work on the literature review paper upon entry into the program; this program milestone is due at the end of April in Year 1. This program requirement serves to ensure students have the requisite background knowledge, as well as knowledge synthesis and writing skills, to be successful in the conduct and timely completion of a thesis project. The literature review paper should have clear relevance to the anticipated substantive topic of the student's doctoral research, but given the accelerated nature of the program, students complete a narrative or integrative review paper (rather than a scoping or systematic review) and there is no expectation of publication, unless that is a professional development goal for the student.

Written Proposal and Oral Defense of the Proposal - Students are normally expected to defend their thesis proposal by the end of January of the second year of their program. The purpose of the examination is to evaluate the student's ability to defend, in writing and orally, the rationale, underlying theoretical concepts/constructs, methods, and implications of the dissertation proposal.

DN Thesis and Final Oral Examination - The final thesis is comprised of original work that includes: the identification and investigation of a practice problem, articulation and application of theory and research to the problem, the design, and strategies for action to address the problem, strategies implemented to address the problem, results, and discussion. The supervisory committee determines that the DN student is ready to proceed to the Final Oral Examination.

QUESTIONS FOR REFLECTION

The relative newness of the professional doctorate in nursing in Canada means faculty may be reluctant to supervise projects. What types of supports and/or incentives are effective in developing faculty readiness to supervise?

3.3.5 Assessment of teaching and learning

A variety of methods are used to assess student learning throughout the DN Program. In designing assessments, consideration is given to Degree-Level Expectations (DLEs), program and course objectives and the diversity of student learning styles.

Table 39. Assessment of Student Achievement Relative to PLOs

DLE	DN Program Learning Outcomes	ASSESSMENT OF STUDENT ACHIEVEMENT, RELATIVE TO PLOs AND DLEs
1. Depth and Breadth of Knowledge	PLO #1 - Demonstrate an in-depth understanding of Implementation Science frameworks, KTE strategies and change theories. PLO#2 − Identify barriers and facilitators of implementing KTE strategies at individual and organizational levels. PLO#3 - Demonstrate advanced knowledge of nursing leadership to transform healthcare and education as appropriate. PLO #4 - Articulate the system barriers to equity of access to safe and effective care for patients and families with diverse backgrounds within healthcare organizations. PLO #5 - Demonstrate knowledge of how challenges related to diversity, cultural safety and social determinants of health are integrated in healthcare and education. PLO#6 Demonstrate knowledge of how to manage human, financial and material resources in healthcare or education.	For PLOs 1, 2 AND 3 students develop and present seminars, submit written assignments, and complete a self-evaluations through reflective practice. The 0.5 FCE elective courses assess student achievement of PLOs 4, 5, and 6 through similar approaches as above, but tailored to the particular subject areas.
2. Research and Scholarship	PLO# 7 Critically appraise and synthesize results of research relevant to leadership issues in healthcare or nursing education. PLO#8 Plan, design and carry out a research project that addresses an innovation to transform nursing leadership in healthcare or education. PLO#9 Produce original and quality scholarly outputs to satisfy peer review and to merit publication or presentation targeted at professional and lay audiences.	For PLO 7 students submit a Literature Review Paper. For PLOs 8 and 9, students design the DN thesis proposal, defend the proposal and undergo the final oral examination of the DN thesis.
3. Level of Application of Knowledge	PLO#10 Conceptualize, design and evaluate a KTE plan to implement/ disseminate research evidence. PLO# 11 Apply Implementation Science theories and frameworks when implementing/disseminating research evidence in complex healthcare and educational situations.	For PLOs 10, 11 AND 12, students demonstrate their skills through the required course assessments and design of their DN thesis proposal, including its KTE plan. For PLOs 13 AND 14, students are engaged in two Internships. Students present to, and dialogue with, their mentors, and use reflective practice to

DLE	DN Program Learning Outcomes	ASSESSMENT OF STUDENT ACHIEVEMENT, RELATIVE TO PLOs AND DLEs
	PLO#12 Understand relevant change theory applicable to leadership in healthcare or nursing education. PLO#13 Define and develop evidence-informed analytical and tactical strategies for advancing nursing leadership in healthcare and education. PLO#14 Determine effective strategies for addressing leadership issues across healthcare or education organizations and/or systems while engaging relevant stakeholders.	demonstrate their understanding and use of analytical and tactical strategies.
4. Professional Capacity/ Autonomy	PLO#15 Model a strong commitment to professional ethics when developing solutions to complex healthcare (e.g. equal access to care) or education (e.g. diversity) issues. PLO#16 Explain the impact of KTE on organizational structure, and how context (work environment) influences KTE strategies in healthcare or education. PLO#17 Understand the importance of consultation and meaningful engagement with relevant stakeholders in healthcare or education contexts.	For PLOs 15-17, students develop and present seminars, submit written assignments, and complete a self-evaluations through reflective practice. For PLOs 15 AND 17, students demonstrate their understanding of appropriate ethical behaviour and decision making consistent with professional and academic integrity and use of appropriate guidelines for applying the results from research in healthcare practice and education. When appropriate, students seek quality improvement approval or research ethics board approval for their DN thesis proposal.
5. Communication Skills	PLO#18 Communicate effectively both verbally and in writing to enable implementation of new knowledge within healthcare or education.	PLO 18 is assessed through: written courses assignments, the literature review paper and the DN thesis proposal; seminar and residency presentations; on-line discussion postings; self- and mentor-evaluations; the final oral examination of the DN thesis.
6. Awareness of Limits of Knowledge	PLO#19 Articulate the strengths and limitations of KTE frameworks and models for implementing and disseminating research in complex healthcare and education settings. PLO#20 Determine limitations of knowledge, multiple interpretations and impact at various levels.	PLOs 19 and 20 are assessed through the DN thesis proposal which includes the student's reflections on the strengths and limitations of their work and its contributions to the greater body of knowledge.

Student performance in the program is assessed through a variety of methods as summarized in Table 39. The project proposal must be approved by the student's supervision committee and

students are required to have at least twice-yearly meetings with their supervision committee to provide project updates and receive guidance and mentoring in relation to the management and successful completion of the project and submission of the thesis product. The final thesis will be consistent with the rigour that is expected with the PhD thesis as specified in the University of Toronto SGS regulation 8.3: Doctoral Final Oral examinations

Tracking Progress

Tools to support student progress and an enhanced tracking system have been revised and developed in the last year.

Progress Tracking Form - A form used to help track student progress was revised and launched this fall. The form records committee meetings and includes a section for professional development goals, progress on thesis work since the last meeting, 'next steps and timelines for completion' to enhance assessment and guide the student's progress, and a rating of progress since the last meeting as "satisfactory" or "unsatisfactory". The form also tracks the achievement of program milestones by recording dates that milestones were achieved. In aggregate, information from this form can help shape program evaluation and delivery. For example, information on students' study methods and course electives chosen may shape course content within Bloomberg Nursing required courses, and guide development of future course offerings. Tracking of student timelines can highlight specific students and cohorts that may need additional support. Information from this form is copied into a master tracking sheet allowing for easier and regular assessment of students' progress across the program.

Gantt Chart - A Gantt Chart was developed for students and supervisors to use in planning and tracking progress, with detailed information on what needs to be done at each stage of the program and throughout the research process to promote timely completion.

Doctoral Student Handbook - A Doctoral student handbook is currently under development. In the past there was a lengthy single handbook across all our graduate programs with a great deal of information not relevant to students outside of a particular program. Having a handbook specific to Doctoral students may increase its relevance and use, thus better supporting students.

Assessment of Progress to Degree Completion

A formal annual review of student progress is held with the Dean, Associate Dean Academic, Doctoral Programs Director, and Registrar. Student committee reports and progress toward milestones are reviewed and students at risk or off-track are identified. The Doctoral Programs Director follows up and offers support to the student and supervisor. This review of progress also occurs informally throughout the year with the Registrar and Doctoral Programs Director regularly tracking student progress and timelines.

The Doctoral Programs Director initiates frequent contact with students nearing completion of the program and their supervisors to advise on the process for securing external examiners, to assess

progress with analysis and writing, and to develop concrete timelines for completion of the thesis and final oral exam. The Director also connects with students approaching the expected date for proposal defense and their supervisors to ask for updates and timelines. When requests for extension to candidacy or program completion are needed, the Doctoral Program Director works closely with the student and supervisor to ensure that a detailed plan for completion of work is developed to support the request for an extension and to provide guidance and accountability while the extension is in place.

3.3.6 Supervision
Supervisor

Applicants to the DN and PhD program are required to apply with a written supervision agreement from their proposed supervisor. Faculty members are encouraged to meet with potential students to learn of their proposed thesis focus and to ensure a mutual understanding of ways of working together. Potential applicants and faculty members are referred to SGS Best Practices documents on choosing a supervisor and supervision of graduate students. These practices ensure that student-supervisor dyads are able to begin work together quickly at the beginning of the student's first year.

At monthly Doctoral Program Committee (DPC) meetings (membership open to all faculty members who can supervise or serve as a doctoral committee member), student cohort progress is presented and updates and issues related to graduate supervision are discussed. At DPC meetings and at the Graduate Curriculum, Teaching and Learning Committee (held every other month for all graduate faculty teaching or supervising students in the MN, PhD, or DN program) speakers provide relevant information and professional development (e.g. Generative AI and graduate scholarship, conflict management from the Centre for Graduate Mentorship & Supervision, Graduate student funding packages, best practices on course handover, inclusive language in teaching and learning).

Supervision Committee

Bloomberg Nursing requires that DN and PhD students have at minimum 2 documented committee meetings each year and more often if needed. While SGS recently changed the requirement for supervisors to have two documented committee meeting per year, having two meetings per year has been an established norm for Bloomberg Nursing. All committees are to include 2 Bloomberg Nursing Faculty members, and pre-tenure faculty are asked to include a Bloomberg Nursing senior faculty member who has seen a student to completion, to provide support and mentorship to the pre-tenure faculty member. A third committee member may be from Bloomberg Nursing or another interdisciplinary department, usually at U of T or an affiliated TAHSN institution.

3.3.7 DN Faculty

Tenure and teaching stream faculty with SGS appointments teach the courses in the DN program and tenure stream faculty are the principal supervisors for the thesis component of the program. Many of the adjunct faculty members at Bloomberg Nursing hold positions as Chief Nurse Executive or Chief Nursing Officer and contribute their expertise in healthcare leadership as supervision committee members, and supervision committees work with students to determine nurse leaders whose contributions would strengthen the DN thesis project.

3.3.8 Quality and other indicators

Since the DN program is new, we do not have standard indicators of quality such as time to completion, graduation rates, etc. We have included what we have learned to date and changes we have made in response to what we have learned and student feedback.

To date, we have found that the small cohorts of highly motivated students - who are already firmly engaged in leadership work - results in tightly knit, supportive cohorts who have progressed well in the program. We are also aware that the workload demands and the short timeline of the program are challenging for the students, given their relatively senior role within their organisation and other time commitments.

Enrolment and Attrition

Because the program is offered in a hybrid format, the pandemic fortunately had little impact on course delivery, but we did experience a higher than expected attrition rate in the first cohort of students. We know that this is partially attributable to pandemic-related, unexpectedly high work demands for several students who left the program. To ensure applicants have considered the level of commitment required and the supports they have in place, we have since added a question to our DN application that asks applicants to describe the resources and supports they will have in place, personally and professionally, for their success in the DN program.

> **What would you say are the two most significant strengths of the program?**
>
> - The flexibility of the program and the responsiveness of the co-hort.
> - I like being connected in person, but I also learning online.
> - I liked residency week.
> - I like that the program is synchronous. People are in different provinces but can join the same class; I like that it is one time a week.
> - It is possible to work full time and participate in the program full time.
> - I like the responsiveness of the faculty. There is a collegial approach as students and colleagues.
> - The pacing and schedule work well with the mix of synchronous and asynchronous requirements.
>
> UTQAP Feedback Session – Yr 1 DN students

Program Changes in Response to Student and Faculty Feedback

In response to feedback from students and faculty and the attrition of several students in the first cohort, changes were made to the program during its second year. These include:

- Applicants now must have an agreement with a supervisor prior to being admitted ensuring a good fit between the student and supervisor.
- Applicants are provided more information regarding the demands of the program, and prior to being admitted are asked to provide a plan regarding how they will manage their time.
- Students now have flexibility in terms of the timing of their internships to maximize learning opportunities and to help them to balance their competing demands.
- A mentorship process was initiated by the students so that more senior students can support new students.
- The literature review expectations have been clarified to promote timely completion.
- In June of 2023 a decision was made to focus the content of Seminar 1 to the literature review to give students more time to complete their literature review which is due April 30th of their first year. Previously Seminar 1 was focused on the critical appraisal of research which will now be the focus of Seminar 2.
- Doctoral Program Committee meetings serve as a monthly opportunity to review progress of students in the DN program and continue discussions with supervisors regarding how the DN and PhD thesis projects are differentiated.
- As Bloomberg Nursing supervisors have only ever previously supervised PhD students, it has been a shift in thinking to work with DN students as they design Knowledge Translation/Implementation projects on a scale that can be easily completed in a 3-year period. We have drawn on advice from colleagues at Johns Hopkins University to support this process, and for exemplars of best practices in DN project work and supervision.

Once the first cohort of students has graduated, the overall effectiveness of the program will be evaluated through:

- tracking of graduates' career paths (destinations, employment before and after graduation);
- formal feedback solicited on satisfaction with the program from students and faculty;
- post-graduation surveys assessing accomplishment of expected outcomes; and
- mentor reports.

3.4 PhD

3.4.1 Program objectives and key features

Bloomberg Nursing's Doctor of Philosophy in Nursing (PhD) degree is designed to prepare scientists and scholars with the analytical and research skills required to expand knowledge of clinical, theoretical, and health systems issues. Guided by outstanding faculty members, PhD students are mentored to design and carry out thesis research projects that address the most pressing issues in their area of health care expertise, be that clinical care, health policy or health care administration. Graduates are leaders in research and scholarship, having developed impressive international networks of colleagues, and occupying positions of influence in academia and education, policy and practice, nationally and internationally.

The PhD program is directed toward achievement of the highest standards of knowledge generation and scholarship to educate graduates who become leaders in nursing research, education, health care and policy. The PhD program is consistent with the University's mission in providing "programs of excellent quality", and it contributes to making U of T an "internationally significant research university". The University's current strategic plan reiterates its mandate to benefit society by continuing its research intensiveness and expanding graduate programs. Similarly, the Faculty's Strategic Academic Plan focuses on leveraging the research and professional expertise among faculty to serve society through generation and utilization of knowledge and provision of excellent nursing education "to create better outcomes in health care - locally, nationally and across the globe."

Important next steps for the PhD program, via consultation and collaboration with students, faculty members and external stakeholders, will be to make explicit the PhD PLOs. The program has operated since the last cyclical review using the POs, (formerly referred to as our Program Outcomes) mapped to the DLEs (Table 40); we now need to expand our understanding and enactment of how we distinguish between our POs and PLOs to ensure all faculty and students are clear on what skills graduates will demonstrate upon completion of a PhD at Bloomberg Nursing.

Table 40. Doctoral Level Expectations and Program Objectives

DLE	PhD Program Objectives
1. Depth and Breadth of Knowledge	PO #1 - Superior understanding of the theoretical foundations of nursing science. PO #2 - A broad appreciation of the relationship between nursing science and the scientific basis of other health disciplines.
2. Research and Scholarship	PO#3 - In-depth knowledge and specialization related to a selected aspect of nursing science.
3. Level of Application of Knowledge	PO#4 - The ability to design and conduct research studies of relevance and importance to nursing science.

DLE	PhD Program Objectives
4. Professional Capacity/ Autonomy	PO#4 - The ability to design and conduct research studies of relevance and importance to nursing science. PO#6 - Commitment to ethical scholarship and collaboration in furthering knowledge with a critical and objective perspective on research
5. Communication Skills	PO# 5 - The ability to contribute to the education of undergraduate and graduate nursing students.
6. Awareness of Limits of Knowledge	PO#6 - Commitment to ethical scholarship and collaboration in furthering knowledge with a critical and objective perspective on research

Key Features

NUR1081 PhD Seminar - All first-year PhD students are enrolled in the PhD Seminar course. It is a full-year course which aims to foster development of a learning community amongst students, creating a cohort that extends across the years of the program and provides an important source of peer support and learning. Through small group discussions, as well as presentations by peers and guest speakers, students are guided in the formation of their literature review methods and development of a rationale for their proposed thesis research. Critical research skills such as presentation skills, manuscript writing, library database searching, critical appraisal and synthesis of literature, and giving and receiving of thoughtful, constructive feedback are emphasized. Students also begin to consider and set goals related to the skills they will need to develop alongside their research skills throughout the program, such as networking, leadership, teaching acumen, time management, and people and project management. Students are also required to attend monthly Bloomberg Rounds (as summarized in Section 8) to promote student engagement and exposure to a wide variety of faculty and research methods.

Annual PhD Symposium - The PhD Symposium includes opportunities for students to present their literature review progress or study rationale (first-year students), research plans (second-year students) and other research accomplishments (upper-year students). The symposium is also an opportunity for students to develop the important skill of responding to critique of their work from peers and faculty. With time for networking and social events built in, the symposium provides opportunities to learn from and engage with peers and faculty who may not be directly involved in the student's thesis work or area of study, allowing students to expand their connections outside of their and their supervisor's expertise. The PhD Research Symposium also includes a variety of professional and career development sessions such as grant writing, writing for publication, postdoctoral fellowships, developing international connections, and networking. During the symposium, students provide peer feedback, including scores for content and presentation style with two "Best Presentation" awards given: one for students who have not yet achieved candidacy and one for those who have completed their proposal defence. The symposium was not held in

2020, 2021, and 2022 due to COVID restrictions, however it was restarted in 2023 with excellent turnout and engagement from the students.

3.4.2 Admission Requirements

Applicants to the PhD program must satisfy the admission requirements of the School of Graduate Studies as well as specific requirements of the Faculty of Nursing. Those requirements are:

- Applicants must hold a master's degree or its equivalent in nursing or related field with at least a B+ standing from a recognized university.
- All English language requirements must be met at the time of application. An interview may be required.

As noted in the DN Admissions Requirements section (3.3.2), Bloomberg Nursing introduced the pre-screening process at the doctoral level. Prospective PhD applicants who are deemed eligible (meet or exceed the minimum eligibility requirements) are asked to meet with potential supervisors to determine a fit and possible thesis topic prior to submitting their application with one of those supervisors.

After meeting with potential supervisors, applicants can proceed with applying for admission. Applicants must demonstrate superior academic ability and potential, evidence of research experience and research outputs, and a commitment to research and scholarship in nursing. These qualities are assessed through the admissions process, which requires submission of undergraduate and graduate transcripts, a sample of scholarly work, academic references, the Curriculum Vitae, and the applicant's statement of research interests and fit with the proposed supervisor's program of research. Each application is reviewed and discussed by at least 3 faculty members.

Applications, Offers and Registrations

As seen in Table 41 and Figure 15, the number of applications, offers, and registrations have varied over the past 8 years (2017-18 through 2023-24). There continue to be challenges in attracting advanced practice nurses to return for PhD education, given the demands of their clinical roles, a desire from the individual and employer to maintain those roles, and the loss of personal income experienced with a return to full-time graduate studies. As such, the yearly number of applications to the PhD program has been decreasing, especially with the impact of COVID-19.

Table 41. PhD Applications, Offers and New Registrations 2017-2023

	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24
Applications	27	28	27	18	21	17*	15*
Offers	12	11	12	9	9	9	11
New Registrations	6	8	10	8	5	9	9
Source: SGS Admissions database							

*The drop in applications in 2022-23 is related to the pre-application screening process as summarized above.
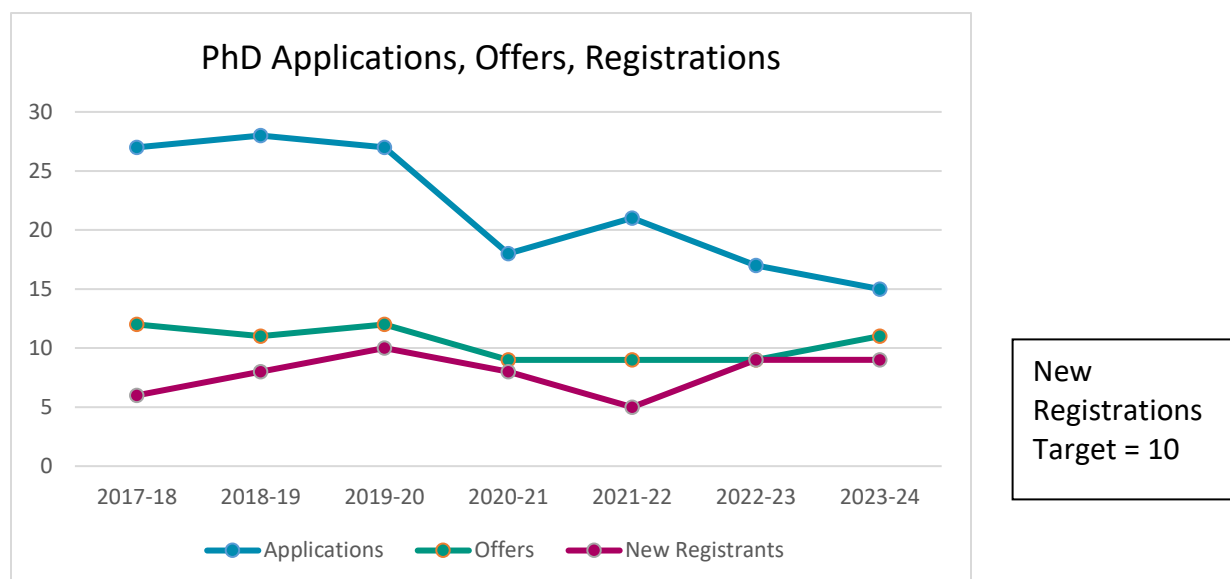
Figure 15. PhD Applications, Offers, Registrations

International Students

Interest in the PhD program from international applicants has been sustained; albeit from a small number of countries including Pakistan, Ethiopia, Ghana, Jordan and Iran (Table 42). Some of the admitted students attain licensure and work as RNs while undertaking their studies, others are supported by scholarships awarded by organisations in their home country. Bloomberg Nursing is acutely aware of the financial challenges our international doctoral students often face and we are in the process of providing detailed information on our website for potential applicants in relation to the cost-of-living in Toronto.

Table 42. Citizenship Status of New PhD Registrants

Year	Domestic	International
2017-18	83%	17%
2018 -19	88%	13%
2019 - 20	70%	30%
2020 - 21	63%	38%

Attracting Prospective Students

The new registration numbers have been consistently below our target of 10 (Figure 15 above) and we are eager to increase enrolment in the PhD program. In response, Bloomberg Nursing has engaged in a number of activities to communicate and market the programs to qualified applicants. Bloomberg Nursing has actively promoted the PhD program through presentations at partner agencies and participation in job fairs and other education events (though there were very few of these events held during COVID-19). In addition, students in the BScN and MN programs are encouraged to think about and potentially prepare for application to the PhD program through informal interactions with faculty and via formal presentations in MN and BScN classes by the Director, Doctoral Programs. The Rosenstadt Research Development Program (summarized in section 8) offers opportunities for both BSN and MN students to gain research experience and exposure to potential future PhD supervisors. Participants attend a session on paths to the PhD program with current PhD students and the Director, Doctoral Programs.   The Director, Doctoral Programs also reaches out to the Lead Teachers of the MN-HSLA, MN-Clinical, and MN-NP fields for a list of top students and students who have indicated an interest in or who have current experience in research, to personally invite them to meet to learn more about applying to the PhD program in the future.

3.4.2 Program Structure

The PhD program is a full-time, in-person program that is structured around courses, the completion of a literature review paper, the successful defense of the thesis proposal and the production and defense of a final thesis (Table 43). The program is designed for students to complete the degree in 4 years and all requirements for the degree must be completed within 6 calendar years from the date of the student's enrolment in the program.

Courses – Students are normally expected to complete all five required courses (3.0 FCEs) by the end of Year 2 (see **Appendix 12** for course descriptions). If all required courses are not successfully completed (with a minimum average standing at the B+ level) by the end of Year 3, the Faculty of Nursing will normally make a recommendation to SGS for termination of registration.

Literature Review Paper - The literature review paper topic as well as type and format of the literature review paper must be approved by the supervisor (with signed documentation by the student and supervisor) by March 1 of Year 1. This agreement should specify the problem statement, the format/type of literature review that is appropriate to the field of study, and to the scholarly traditions within which the student's research is situated. The literature review paper must be submitted by September 30 of Year 2.

Thesis Proposal - Students are normally expected to defend their thesis proposal by the end of Year 2 of their program. Students <u>must </u>successfully defend their thesis proposal no later than the end of the 3rd year. If the student does not successfully defend the thesis proposal by the end of the 3rd year (including a second attempt, if required) the student will no longer be considered in 'good

standing', funding package installments will normally be withheld, and the Faculty will normally recommend to SGS that the student's registration in the PhD program be terminated.

Thesis Defense - The final requirement for the PhD degree is the successful defence of a PhD thesis. Normally, degree requirements are completed in four academic years of full-time study (five years for MN transfer students). All requirements for the degree must be completed within six calendar years (full-time study) and seven years (MN transfer students) from the date of the student's enrolment in the program.

The PhD program is only offered full-time and in-person to ensure that students achieve timely completion rates and to provide a collegial cohort to successfully navigate the intricacies of the program. All elements of the PhD program structure support the acquisition of the POs as demonstrated in Table 44 below.

Table 43. Structure of the PhD Program

Program Structure				
	Year 1	Year 2	Year 3	Year 4
Courses	NUR1081 Seminar NUR1079 Methods 1 substantive	NUR1082 Seminar 1 methods **or** substantive		
Literature review paper				
Proposal writing & defense				
Research Ethics Board approval				
Data collection & analysis				
Thesis writing				
Final Oral Exam				

Table 44. Mapping DLEs to PhD POs and Elements of Program Structure

DLE	PhD Program Objectives	How Program Structure Supports Program Objectives
1. **Depth and Breadth of Knowledge**	PO #1 − Superior understanding of the theoretical foundations of nursing science. PO #2 − A broad appreciation of the relationship between nursing science and the scientific basis of other health disciplines.	Required Seminars and Coursework Elective Coursework Literature Review Paper Thesis writing
2. **Research and Scholarship**	PO#3 - In-depth knowledge and specialization related to a selected aspect of nursing science.	Literature Review Data Collection & Analysis FOE

DLE	PhD Program Objectives	How Program Structure Supports Program Objectives
3. Level of Application of Knowledge	PO#4 - The ability to design and conduct research studies of relevance and importance to nursing science.	Proposal writing & defense Data collection & Analysis Thesis writing
4. Professional Capacity/ Autonomy	PO#4 - The ability to design and conduct research studies of relevance and importance to nursing science. PO#6 - Commitment to ethical scholarship and collaboration in furthering knowledge with a critical and objective perspective on research	Proposal writing & defense Data collection & Analysis Thesis writing REB approval
5. Communication Skills	PO#3 - In-depth knowledge and specialization related to a selected aspect of nursing science. PO# 5 - The ability to contribute to the education of undergraduate and graduate nursing students.	Proposal writing & defense FOE Teaching Assistantships PhD Symposium
6. Awareness of Limits of Knowledge	PO#6 - Commitment to ethical scholarship and collaboration in furthering knowledge with a critical and objective perspective on research	Proposal writing & defense Data collection & Analysis Thesis writing REB approval FOE

3.4.3 Program requirements

The program requirements for the PhD program include the completion of 3.0 Full Course Equivalents (FCE), the successful completion of the literature review paper and the successful defense of the thesis proposal (Appendix 13).

While the program requirements have remained the same since the last review, the required courses have changed. The required courses for our PhD program were reviewed and updated in 2020 and again in 2023 based on faculty reflections, student feedback, and the breadth and depth of knowledge required for graduate nurse scientists in an ever-changing health care environment.

Changes to the Required Courses

Students who began the program prior to 2020 selected from 1 of 3 research fields and completed a research methods course associated with that field.

- *NUR1081 PhD Seminar* (1.0 FCE)
- one field of study course (0.5 FCE) that includes *NUR1085*, *NUR1086*, or *NUR1087*
- one methods course (0.5 FCE) relevant to the field of study and dissertation plans
- one substantive course (0.5 FCE) relevant to the field of study and dissertation plans
- one other methods or substantive area course (0.5 FCE).

However, each course had very few students and tended to focus on either quantitative or qualitative methods. Based on discussion with students and faculty, and in response to greater disciplinary appreciation for competence in multiple research methods, it was felt that all students should take a full year research methods course that included qualitative, quantitative, and mixed method approaches. Feedback also indicated that students should have this content earlier in the program to have wider exposure to potential research methods before plans for their own dissertation work were solidified. Thus, *NUR1079 – Research Methods for Knowledge Discovery (1.0FCE)* was introduced with the cohort that began the program in 2020. This course replaced the field of study course and one of the elective courses focused on methods.

Thus, for students beginning the program in 2020-2022, students were required to complete 3 courses plus the PhD seminar:

- *NUR1081 PhD Seminar* (1.0 FCE)
- NUR1079 *Research Methods for Knowledge Discovery* (1.0FCE)
- one substantive course (0.5 FCE) relevant to the field of study and dissertation plans
- one other methods or substantive area course (0.5 FCE).

In the first two offerings of NUR 1079, students were still focused on their planned dissertation methods for course assignments. As their plans often changed once their literature reviews were completed, students may have placed less focus during the course on other methods which they now found themselves needing to use. Thus, assignments were restructured in the third offering of the course to encourage students to engage more fully with a variety of methods to better prepare them for their dissertation research as well as providing a solid foundation for research they may conduct in their future careers.

Table 44 illustrates the four-year road map for PhD students who began the program prior to 2020 and Table 45 illustrates the program for students who began the program in 2020 or later.

Table 44. Four Year Road Map for the PhD Program

Mapping template for completing the PhD requirements in 4 years (pre-2020)				
	Year 1	Year 2	Year 3	Year 4
Path to Candidacy: 1. **Course work** 2. **Lit Review** 3. **Proposal defense**	*Course Work:* • NUR1081 • NUR1085 for Critical Approaches students • 1 methods • 1 substantive *Proposal development:*	*Course Work:* • 1086H/1087H for HSR/ECHO students • 1 methods or substantive *Literature Paper* **Sept 15** *Proposal Defense*		

Mapping template for completing the PhD requirements in 4 years (pre-2020)				
	Year 1	Year 2	Year 3	Year 4
	-by April 30 set committee membership & problem statement, literature review paper			
Ethics (after proposal defense)				
Data collection (from ethical approval usually max 1 year)				
Analysis (variable depending on method)				
Writing				
Final Oral Exam				

Table 45. PhD Program Requirements Post-Fall 2020

Mapping template for completing the PhD requirements in 4 years (beginning Fall 2020)				
	Year 1	Year 2	Year 3	Year 4
Path to Candidacy: 1. **Course work** 2. **Lit Review** 3. **Proposal defense**	*Course Work:* • *NUR 1081* • *NUR1079* • *1 substantive* *Set committee, problem statement, & literature review topic by April 30*	*Course Work:* • *1 methods or substantive* *Submit literature review paper by September 30* *Proposal Defense*		
Ethics (after proposal defense)				
Data collection (from ethical approval usually max 1 year)				
Analysis (variable depending on method)				
Writing				
Final Oral Exam				

While student and faculty feedback on the new course requirements was positive, the course timing meant that students did not have any required course work within the Faculty in their second year. Students reported feeling "a bit lost" in second year, which was exacerbated by COVID-19, and we noted that only 1 student out of 7 from the 2020 cohort completed their proposal defense before the end of their second year (in keeping with the program map). In 2022, two students sought an extension to Candidacy because they had not successfully defended their proposals by the end of their third year. As well, none of the subsequent cohort completed their proposal defense before the end of year 2. In response, course changes were made for the cohort beginning the PhD program in September 2023 (Table 46) and additional targeted strategies were developed to keep students engaged in the program and working towards milestones in a timely manner.

Table 46. PhD Program Requirements Post-Fall 2023

Mapping template for completing the PhD requirements in 4 years (beginning Fall 2023)				
	Year 1	Year 2	Year 3	Year 4
Path to Candidacy: 1. **Course work** 2. **Lit Review** 3. **Proposal defense**	*Course Work:* • *NUR1081 Seminar* • *NUR1079 Methods* • *1 substantive* *Form committee & identify literature review topic by* **March 1**	*Course Work:* • *NUR1082 Seminar* • *1 methods* **or** *substantive* *Submit literature review paper by* **September 30** *Proposal Defense*		
Ethics (after proposal defense)				
Data collection (from ethical approval usually max 1 year)				
Analysis (variable depending on method)				
Writing				
Final Oral Exam				

Description of Program Requirements − 2023

Courses - Beginning with the incoming cohort for 2023, students now complete 3 courses plus 2 PhD seminars:

- *NUR1081 PhD Seminar 1* (0.5 FCE)
- *NUR1082 PhD Seminar 2* (0.5 FCE)
- NUR1079 *Research Methods for Knowledge Discovery* (1.0FCE)
- one substantive course (0.5 FCE) relevant to the field of study and dissertation plans

- one other methods or substantive area course (0.5 FCE).

The first-year PhD seminar, NUR1081 PhD Seminar 1 will continue to focus on conducting the literature review and the development of the study rationale. To maintain a consistent number of FCE required, NUR 1081 is offered every other week, rather than weekly, throughout the fall and winter term of year 1. The second-year seminar NUR 1082 PhD Seminar 2 will focus on solidifying the study rationale and proposal development and will be offered weekly in the fall of the second year of the program. While the content and format of the NUR1081 PhD seminar course has been consistent throughout the other changes to the program, in 2022, required activities were added for the completion of *NUR1081*. Students are now required to attend monthly Bloomberg Rounds and the annual PhD Research Symposium.

Elective Courses - Across the various changes in course requirements described above, students must take at least two elective courses. These courses are chosen in consultation with their supervisors, and they are based on each student's learning needs related to their thesis proposal development and research project. As of 2019 students must take one of their electives focused on their substantive area. Students may select elective courses that are offered at Bloomberg Nursing (e.g., Coping with Illness, Nursing Ethics, Intermediate Statistics, Doing Qualitative Research), courses in other divisions at U of T, or even at another university.

Students in Collaborative Specializations are typically required to take one or more specific substantive or methods courses as part of the program. These courses may count as the required electives or may be taken as additional electives beyond the two required. Students are expected to complete the two required elective courses in the first 2 years of the PhD program and before candidacy is granted.

Annual PhD Symposium - All students in the funded cohort (Years 1-4) are expected to attend and present at the symposium. Students beyond year 4 are also encouraged to attend and present, with recent graduates invited back to present their work and "lessons learned."

Literature Review Paper - Students begin work on the literature review paper upon entry into the program. This program requirement serves to ensure students have the requisite research knowledge, as well as knowledge synthesis and writing skills, to be successful in the conduct and timely completion of a thesis project. The literature review paper should have clear relevance to the anticipated substantive topic of the student's doctoral research. Students may do a scoping review, a narrative review, a systematic review, a qualitative meta-synthesis or other literature review format. The overall presentation of the literature review paper is like that of a manuscript prepared for publication (approximately 5,000 words in length). This is designed to facilitate the student's publication of the literature review paper in the future. Students are not required to identify a specific journal for publication consideration. An abstract for the paper is not required.

Written Proposal and Oral Defense of the Proposal - The purpose of the oral defense is to evaluate the student's ability to defend, in writing and orally, the rationale, underlying theoretical

concepts/constructs, methods, and implications of the dissertation proposal. The format of the proposal is like that of a modified tri-council grant application.

Options for format of the thesis include both the traditional thesis model and thesis by publication /manuscript format. The student and the supervisory committee members together determine the thesis format by the time of proposal defense (ideally as early as possible in the student's program, and before defense of the proposal. In 2020 Bloomberg Nursing developed detailed guidelines for thesis by publication to ensure both student and supervisor understand what is required.

Final Oral Examination - The supervisory committee determines that the PhD student is ready to proceed to the Final Oral Examination. An examination committee is struck, following School of Graduate Studies procedures. Three supervisory committee members serve as voting members of the examination committee, although if there are more than 3 committee members, they may still attend the examination as non-voting members. An internal examiner who has an appointment at the University of Toronto is suggested by the supervisor and approved by the Doctoral Programs Director. The supervisor also suggests a reviewer external to the University of Toronto who meets criteria set out by the School of Graduate Studies. Once the suggested external reviewer`s curriculum vitae is reviewed and approved by the School of Graduate Studies the defence may proceed.

Collaborative Specializations

Students in our PhD program are able to engage in multidisciplinary academic activities (courses, seminars) while completing their PhD at Bloomberg Nursing (Table 47). The interdisciplinary focus is incorporated into their final research requirements and upon successful completion, students receive a certificate of completion and a notation on their transcripts.

Table 47. PhD Student Enrolment in Collaborative Specializations 2020-23

Collaborative Specialization Enrolment	2023	2021	2020
Addiction Studies (PhD only)	1	0	0
Aging, Palliative and Supportive Care Across the Life Course (MN, PhD)	8	7	12
Bioethics (MN, PhD)	2	0	1
Global Health	7	1	1
Women's Health (MN, PhD)	11	9	3
Other CS programs	1	-	-
Total	**30**	**17**	**17**

3.4.4 Assessment of teaching and learning

The key milestones in the PhD program are designed for students to clearly demonstrate achievement of the PhD level DLEs (Table 33 section 3.3.1) and the POs. Each means of assessment evaluates PhD student writing ability, critical thinking skills, and clarity of oral and written communication. Table 48 outlines how PhD degree-level achievements are assessed with respect to program learning outcomes.

Table 48. Mapping Graduate DLEs to PhD POs and Types of Assessment

DLE	PhD Program Objectives	Assessment of Program Objectives
1. **Depth and Breadth of Knowledge**	PO #1 – Superior understanding of the theoretical foundations of nursing science. PO #2 – A broad appreciation of the relationship between nursing science and the scientific basis of other health disciplines.	Written assessments in coursework Literature Review Paper Thesis
2. **Research and Scholarship**	PO#3 - In-depth knowledge and specialization related to a selected aspect of nursing science.	Literature Review Paper FOE
3. **Level of Application of Knowledge**	PO#4 - The ability to design and conduct research studies of relevance and importance to nursing science.	Written proposal & defense Thesis FOE
4. **Professional Capacity/ Autonomy**	PO#4 - The ability to design and conduct research studies of relevance and importance to nursing science. PO#6 - Commitment to ethical scholarship and collaboration in furthering knowledge with a critical and objective perspective on research	Written proposal & defense Thesis REB approval
5. **Communication Skills**	PO#3 - In-depth knowledge and specialization related to a selected aspect of nursing science. PO# 5 - The ability to contribute to the education of undergraduate and graduate nursing students.	Proposal defense Presentations at PhD Symposium FOE
6. **Awareness of Limits of Knowledge**	PO#6 - Commitment to ethical scholarship and collaboration in furthering knowledge with a critical and objective perspective on research	Written proposal & defense Thesis REB approval FOE

The components of assessment and teaching beyond the PhD POs are the same as the DN program. Please refer to DN section 3.3.5 for the summary on supervision and the ways progress is tracked and assessed.

3.4.5 PhD Supervision: Supporting Student Success and Professional Development

Supporting Student Success

Orientation - All PhD students participate in orientation experiences that emphasize Bloomberg Nursing and campus resources to support their success and wellness. These resources are also highlighted throughout the year at Town Hall meetings.

Mentorship Program - PhD students created and maintain a mentorship program in which students in later years (often matched based on supervisor or alignment with research area) mentor students in early program years. This is a voluntary program and participation rates are high.

Writing Retreat - The Doctoral Programs Director worked with the [Health Sciences Writing Centre](#) to hold a writing retreat on 3 consecutive Fridays (Jan/Feb) for 3 hours each week for PhD students at Bloomberg Nursing. About 5 students attended each week and have continued with student-led writing retreats. Feedback from the students was very positive and we plan to hold these sessions at least yearly within Bloomberg Nursing. The writing centre also holds University-wide writing sessions that students are encouraged to access.

Defined Workspaces - PhD students are provided with a defined workspace with access to individual desktop computers, locked storage space, and printer access. Students are grouped with their cohort to foster a sense of community. The physical spaces are modern, bright, and well-resourced to support student success.

Support for International Students - We recognize the need for additional ongoing supports once students arrive in Canada. Thus far, we connect students with university-wide supports in advance of their arrival, and provide more information about items needed (e.g., a laptop) to be successful in the program. International students are not given TA assignments in the first semester of their program to reduce workload and allow more time for adjustment to living in Toronto and Canada. As we increase the number of international students across programs, we will work to connect incoming international students from across all the programs with peer mentors and group support.

Professional Development

The PhD Research Symposium includes several sessions focused on professional development. Students requested that more sessions be offered throughout the year as a way of bringing students together more regularly and reducing isolation particularly when coursework is complete.

Beginning this fall, all students were invited to a Welcome Back session which included a Town Hall for students to ask questions or raise concerns. The session also provided an opportunity to review the resources that are available, receive program updates, and hear from a panel of recent graduates employed in a variety of roles. Another Town Hall with a guest speaker is planned for

January 2024 and there will be further professional development opportunities in May 2024 at the Symposium.

During the PhD seminar students were encouraged to assess their learning needs outside of those specific to the conduct of their dissertation research and set goals for professional development throughout the program (e.g., writing or presentation skills, networking opportunities, teaching skills, etc). However, these goals were not communicated to the supervisor or supervisory committee and there was no follow-up. Thus, the new committee record includes documentation of a minimum of two professional development goals with a timeline and plan for achievement. Students have many opportunities to meet these goals within Bloomberg Nursing, across the university, and in our many affiliated TAHSN partner institutions.

Teaching Assistantships

All students are given the opportunity to work as teaching assistants in the Faculty. These roles have traditionally been primarily focused on marking assignments and facilitating online discussion boards. Students have indicated an interest in taking on additional roles and greater teaching responsibilities. Additionally, the Doctoral Programs Director met with a group of recent graduates about their transition to independently teaching courses to ask how they could have been better supported as a TA during the PhD program.

> There should be more opportunities to teach/lecture built into the PhD program. Most PhD graduates would like to go on to work in academic environments where teaching will be required and evaluated, however we are only allowed to be Teaching Assistants, which means mostly grading papers.
>
> PhD graduate − PhD Post-Graduation Survey

In 2023, two year 5 PhD students and two year 3 PhD students are being mentored as they take on expanded TA roles that include facilitating tutorials and clinical group debriefs. Additional focus groups are planned with existing students (particularly international students), faculty, and the Centre for Teaching Support and Innovation to develop a pathway for ongoing feedback and increased responsibility for our PhD students and TA roles. Our aim is to develop a "teaching academy" for our PhD students, in which students would be mentored and participate in professional development activities as they engage in increasingly advanced teaching assistant roles.

3.4.6 Quality and other indicators

As reported in section 8 Research, faculty members who serve as supervisors, and supervision committee members, have an excellent success rate in national and international grant funding,

and demonstrated research impact, ensuring that students are exposed to cutting-edge research that affects health care system outcomes.

Applications, Offers and Registrations

Bloomberg Nursing's longstanding reputation as a research-intensive Faculty with a depth and breadth of areas of research expertise, and as a provider of high quality graduate education enables the Faculty to attract high quality applicants to the program.

Offer rates during the review period have ranged from 40% (2018-19) to 50% (2020-21), but acceptance rates have been more variable ranging between 50% (2017-18) and 100% (2022-23). Both offer rates (Figure 16), and acceptance rates (Figure 17) are consistently higher than those of other University of Toronto Division IV departments, and the University of Toronto overall.
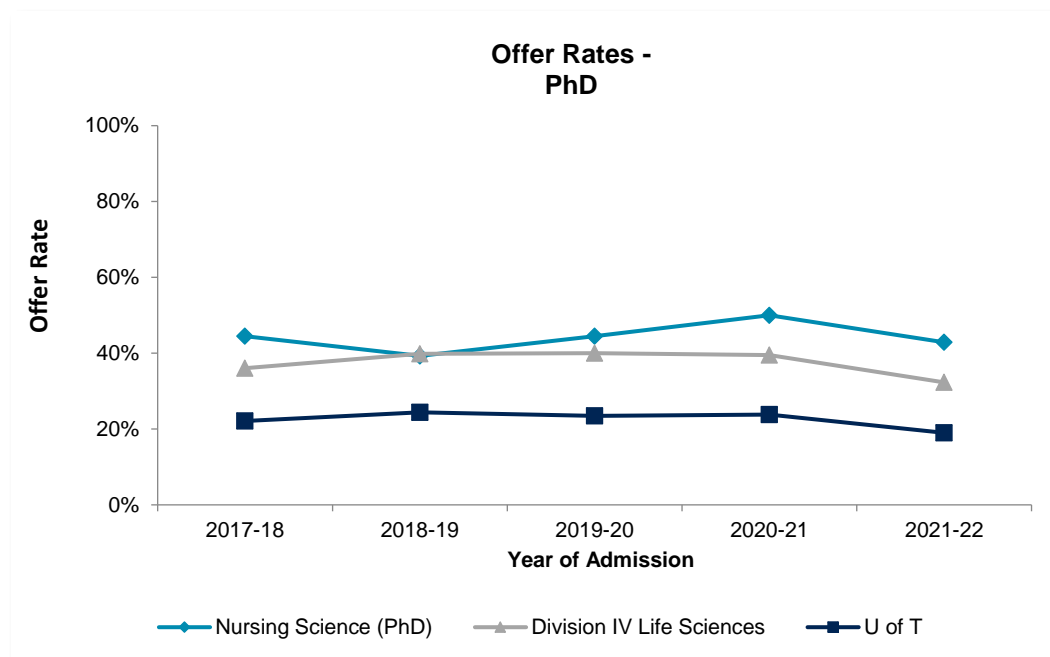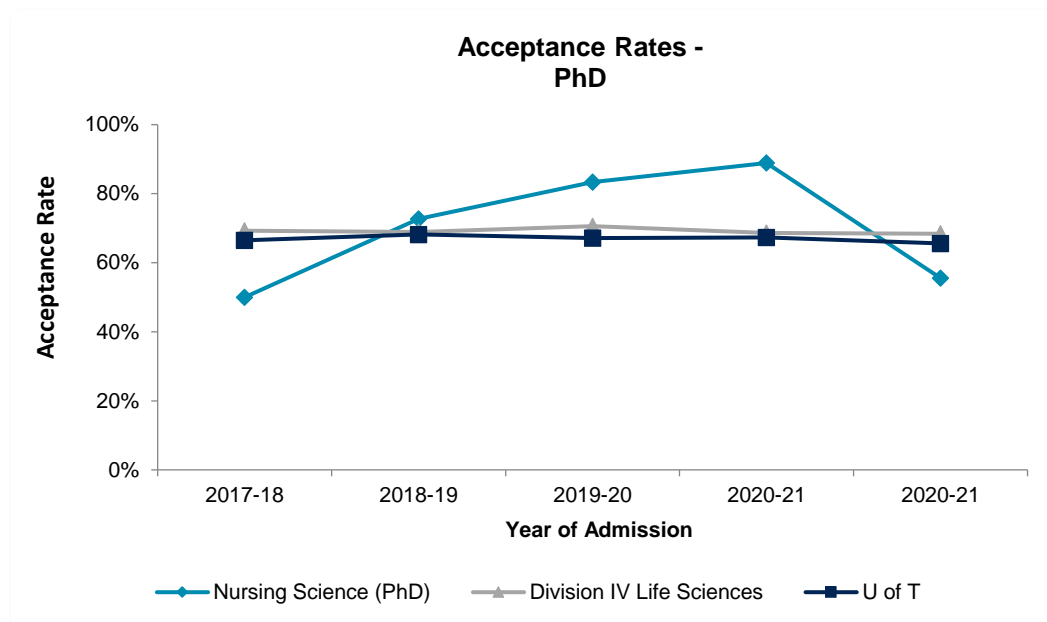

Figure 16. PhD Offer Rates 2017-2021

Figure 17. PhD Acceptance Rates 2017-2021

The results of the Canadian Graduate and Professional Student Survey (CGPSS), which is administered to our graduate students every 3 years (2022 is the most recent report) are reviewed by all faculty and used to review and revise the curriculum and its delivery.

Benchmark Scores - Since 2013, the CGPSS benchmark scores for the quality of teaching, research training and career orientation, and having a supportive dissertation advisor have been steadily increasing. The benchmark scores for Bloomberg Nursing are higher than other U15 Nursing programs, other disciplines at University of Toronto and other Ontario Universities (Table 49).

Table 49. CPGSS Doctoral Student Satisfaction Benchmark Report

Benchmarks - PhD Students
Benchmarks 1 and 2 Means are out of 5 (1=Poor, 2=Fair, 3=Good, 4=Very Good, 5=Excellent)
Benchmark 3 Mean is out of 4 (1=Strongly Disagree, 2=Disagree, 3=Agree, 4=Strongly Agree)

Benchmarks	CGPSS	U of T (NURS)	U15 (NURS[1])	U of T (All disciplines)	U15 (All disciplines)	Ontario (All disciplines)
Number of Respondents	2013	29	76	2,681	10,015	5,585
	2016	24	72	2,253	10,181	6,423
	2019	21	111	2,208	11,686	6,770
	2022	20	115	2,279	12,337	6,565
1. Quality of Teaching	2013	3.92	4.19	3.80	3.74	3.77
	2016	4.14	3.92	3.84	3.77	3.80

	2019	4.22	3.96	3.79	3.78	3.82
	2022	4.35	4.04	3.84	3.85	3.84
2. Research Training and Career Orientation	2013	2.80	2.93	2.81	2.70	2.70
	2016	3.18	2.90	2.83	2.82	2.78
	2019	3.24	2.99	2.89	2.85	2.80
	2022	3.31	2.99	2.95	2.99	2.91
3. Supportive Dissertation Advisor	2013	3.38	3.48	3.30	3.31	3.36
	2016	3.46	3.40	3.33	3.34	3.38
	2019	3.73	3.34	3.31	3.33	3.41
	2022	3.47	3.37	3.36	3.42	3.47

[1]Program comparison group is based on the Classification of Instructional Programs (CIP) code 51.3808 (Nursing science (MS, MSc, PhD)).
https://www23.statcan.gc.ca/imdb/p3VD.pl?Function=getVD&TVD=299355

Note:

1. U of T, U15, and Ontario values only include responses from doctoral students.

2. U15 and Ontario values exclude University of Toronto

3. U15 includes Alberta, British Columbia, Calgary, Dalhousie, Laval, Manitoba, McGill, McMaster, Montreal, Ottawa, Queen's, Saskatchewan, Waterloo, Western.

General Assessment and Satisfaction – Data from the Five General Assessment and Satisfaction Questions show improved scores for Bloomberg Nursing between 2013 and 2022, and higher scores than our U15 peers on the items: Quality of Academic Experience, Quality of Graduate Program, Quality of Overall Experience and Selecting the Same University (Tables 50 - X)

Table 50. CGPSS Q4.2.1.
Overall, how would you rate the quality of your academic experience at this university?

CGPSS	U of T (NURS)		U15 (NURS[1])	
	Total	Mean	Total	Mean
2013	26	4.19	72	4.04
2016	24	4.38	68	3.90
2019	16	4.50	104	3.90
2022	15	4.20	91	3.99

Mean is out of 5
(1=Poor, 2=Fair, 3=Good, 4=Very Good, 5=Excellent)

U15 values exclude University of Toronto

Table 51. CGPSS Q4.2.2.

Overall, how would you rate the quality of your student life experience at this university?

CGPSS	U of T (NURS)		U15 (NURS[1])	
	Total	Mean	Total	Mean
2013	26	3.12	70	3.49
2016	24	3.25	66	3.30
2019	16	3.75	103	3.34
2022	15	3.87	91	3.35

U15 values exclude University of Toronto

Table 52. CGPSS Q4.2.3.

Overall, how would you rate the quality of your graduate program at this university?

CGPSS	U of T (NURS)		U15 (NURS[1])	
	Total	Mean	Total	Mean
2013	26	3.88	72	3.92
2016	24	3.96	67	3.69
2019	16	4.56	104	3.83
2022	15	4.20	91	3.85

U15 values exclude University of Toronto

Table 53. CGPSS Q4.2.4.

Overall, how would you rate the quality of your overall experience at this university?

CGPSS	U of T (NURS)		U15 (NURS[1])	
	Total	Mean	Total	Mean
2013	26	3.96	72	3.93
2016	24	4.00	68	3.76
2019	16	4.50	104	3.78
2022	15	4.20	91	3.81

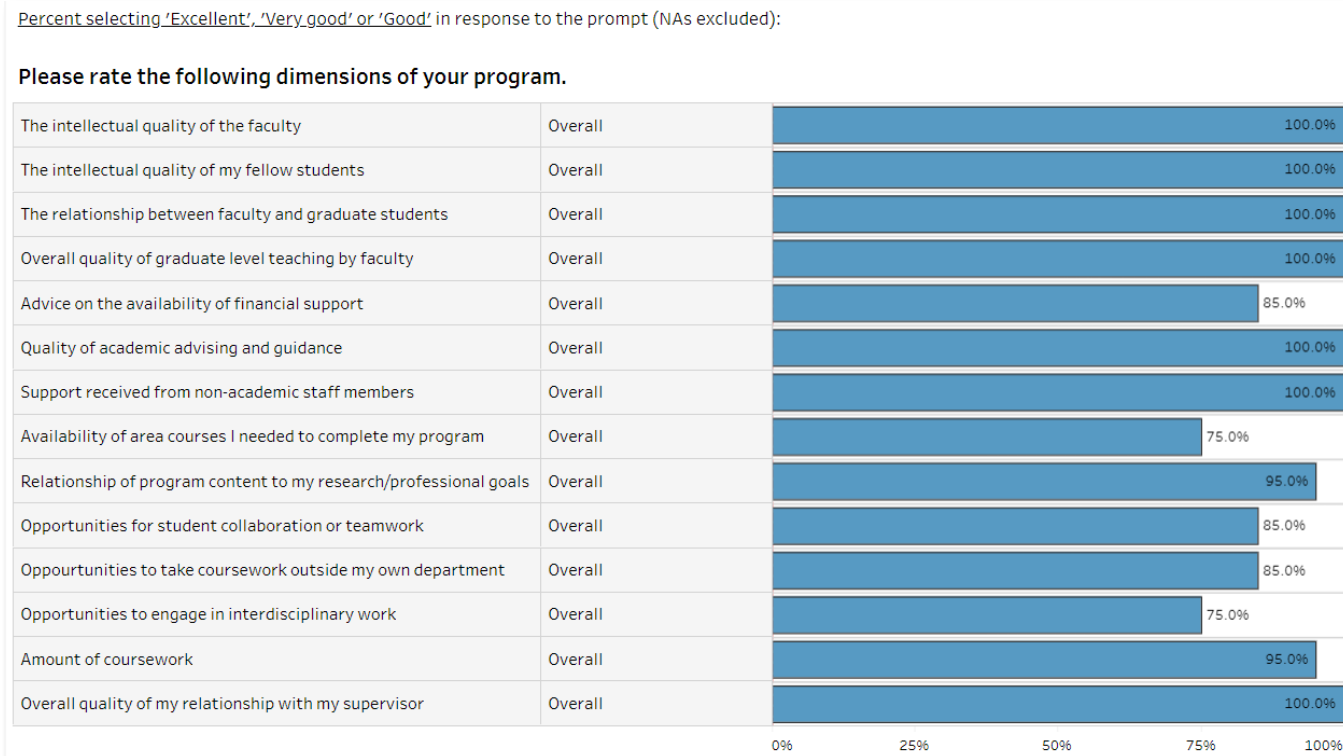U15 values exclude University of Toronto

Table 54. CGPSS Q2.3.1.

If you were to start your graduate/professional career again, would you select this same university?

| CGPSS	U of T (NURS)		U15 (NURS[1])	
	Total	Mean	Total	Mean
2013	29	4.34	76	4.22
2016	24	4.50	72	4.04
2019	21	4.71	111	4.13
2022	20	4.60	115	4.23

U15 values exclude University of Toronto

Program Dimensions - Student ratings of 'Excellent', Very good' or 'Good' were 100% for half of the program dimensions listed in Figure 18 below, but ratings were lower for program dimensions related to the availability of financial support, availability of courses, opportunities for collaboration, opportunities to take courses outside of Bloomberg Nursing, and opportunities to engage in interdisciplinary work. The CGPSS data is consistent with some of the qualitative data collected through the PhD UTQAP feedback session listed below. These are noted as target areas for improvement in the PhD program.

Percent selecting 'Excellent', 'Very good' or 'Good' in response to the prompt (NAs excluded):

Please rate the following dimensions of your program.

The intellectual quality of the faculty	Overall	100.0%
The intellectual quality of my fellow students	Overall	100.0%
The relationship between faculty and graduate students	Overall	100.0%
Overall quality of graduate level teaching by faculty	Overall	100.0%
Advice on the availability of financial support	Overall	85.0%
Quality of academic advising and guidance	Overall	100.0%
Support received from non-academic staff members	Overall	100.0%
Availability of area courses I needed to complete my program	Overall	75.0%
Relationship of program content to my research/professional goals	Overall	95.0%
Opportunities for student collaboration or teamwork	Overall	85.0%
Oppourtunities to take coursework outside my own department	Overall	85.0%
Opportunities to engage in interdisciplinary work	Overall	75.0%
Amount of coursework	Overall	95.0%
Overall quality of my relationship with my supervisor	Overall	100.0%

Figure 18. 2022 CGPSS Program Dimensions Data — PhD Student Responses

Time to Completion

Time-to-completion is better than the University average of 6.10 years, with our 3-year rolling average PhD time-to-completion rate of 5.46 years in 2018-21, 5.30 years in 2019-22, and most recently 5.56 years in 2020- 23 (Figure 16). Strategies introduced over the last 10 years have successfully decreased the average time-to-completion from being among the highest to among the lowest across the university. However, time-to-completion remains an area of focus, particularly as we have yet to see the full impact of COVID-19 in this area. Many research activities (e.g., data collection) were put on hold for long periods of time during COVID-19, recruitment and data collection were typically conducted virtually with lower recruitment rates, and research ethics boards focused on review and approval of COVID19-related protocols which significantly delayed approval of our students' studies. For students earlier in the program, all courses shifted to online learning with fewer opportunities to connect outside of the classroom setting both within and across cohorts of students. In addition, many of our students were working long hours clinically and had COVID-19 themselves multiple times, thus reducing their engagement in the program and their availability to complete aspects of the program in a timely manner.
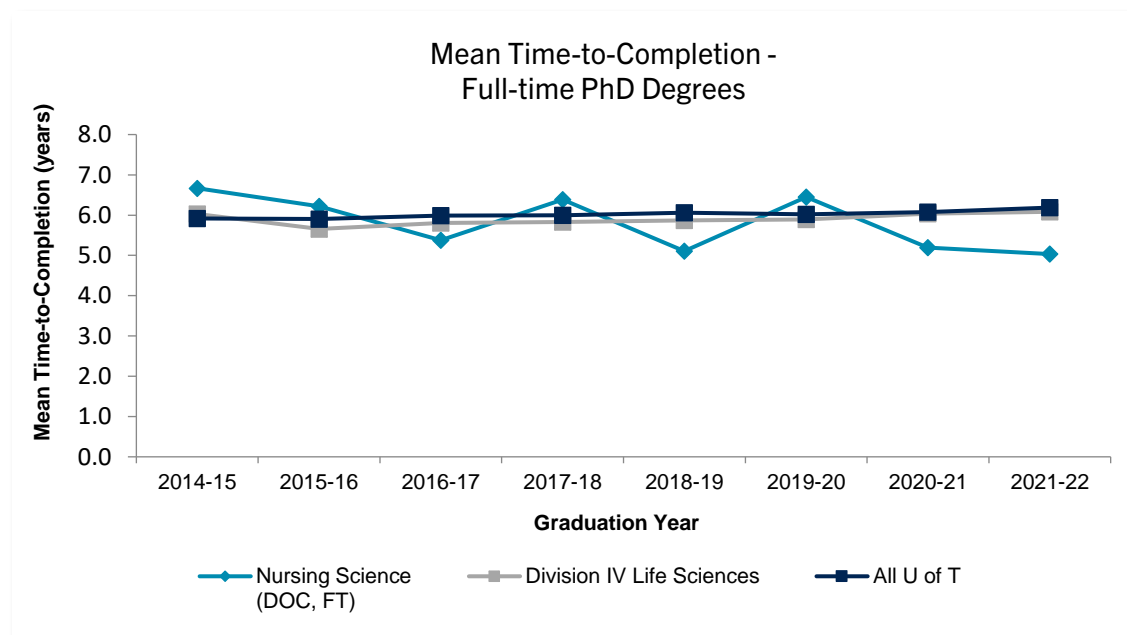
Figure 19. Mean PhD Time-to-Completion

Post-Graduation Surveys

Post-graduation surveys are sent to our graduates about 5-6 months after program completion to ask them about their professional lives since graduation, and to determine our success in meeting program objectives. The mean scores dropped in the combined 2021-22 responses, and we assume that this is due to the impact of COVID on our PhD students. Even though the mean scores have dropped, scores indicate that our PhD graduate respondents feel they have met the program

objectives related to conducting research. Respondents are "committed to ethical scholarship and collaboration in the furthering of knowledge, with a critical and objective perspective on research" and they "can design and conduct research studies of relevance and importance to nursing science." The mean scores also indicate that our PhD graduates feel less prepared to "contribute to the education of undergraduate and graduate nursing students." The qualitative responses indicate that this is related to the type and quality of their works as teaching assistants.

Table 55. Post-Graduation Survey Q1.
I have a superior understanding of the theoretical foundations of nursing science.

Note: Due to the low number of graduates each year, the PhD Program Post-Graduation Survey responses are reported as aggregated data over two years.

	Response	2015-2016 #	2015-2016 %	2017-2018 #	2017-2018 %	2019-2020 #	2019-2020 %	2021-2022 #	2021-2022 %
(4)	A Great Deal	2	40%	1	20%	3	60%	1	14%
(3)	Mostly	2	40%	3	60%	1	20%	3	43%
(2)	Moderately	1	20%	1	20%	0	0%	3	43%
(1)	Somewhat	0	0%	0	0%	1	20%	0	0%
(0)	Not at all	0	0%	0	0%	0	0%	0	0%
	Total	5	100%	5	100%	5	100%	7	100%
	Mean (out of 4)	3.20		3.00		3.20		2.71	

Table 56. Post-Graduation Survey Q2.
I have a broad appreciation of the relationship between nursing science and the scientific basis of other health disciplines.

	Response	2015-2016 #	2015-2016 %	2017-2018 #	2017-2018 %	2019-2020 #	2019-2020 %	2021-2022 #	2021-2022 %
(4)	A Great Deal	2	40%	3	60%	2	40%	1	14%
(3)	Mostly	2	40%	1	20%	2	40%	4	57%
(2)	Moderately	1	20%	1	20%	1	20%	1	14%
(1)	Somewhat	0	0%	0	0%	0	0%	1	14%
(0)	Not at all	0	0%	0	0%	0	0%	0	0%
	Total	5	100%	5	100%	5	100%	8	99%*
	Mean (out of 4)	3.20		3.40		3.20		2.71	

Table 57. Post-Graduation Survey Q3.
I have in-depth knowledge and specialization related to a selected aspect of nursing science.

	Response	2015-2016 #	2015-2016 %	2017-2018 #	2017-2018 %	2019-2020 #	2019-2020 %	2021-2022 #	2021-2022 %
(4)	A Great Deal	5	100%	3	60%	5	100%	1	14%
(3)	Mostly	0	0%	2	40%	0	0%	3	43%
(2)	Moderately	0	0%	0	0%	0	0%	1	14%

		2015-2016		2017-2018		2019-2020		2021-2022	
(1)	Somewhat	0	0%	0	0%	0	0%	2	29%
(0)	Not at all	0	0%	0	0%	0	0%	0	0%
	Total	5	100%	5	100%	5	100%	7	100%
	Mean (out of 4)	4.00		3.60		4.00		2.43	

Table 58. Post-Graduation Survey Q3.

I can design and conduct research studies of relevance and importance to nursing science.

		2015-2016		2017-2018		2019-2020		2021-2022	
	Response	#	%	#	%	#	%	#	%
(4)	A Great Deal	4	80%	4	80%	5	100%	2	29%
(3)	Mostly	1	20%	0	0%	0	0%	4	57%
(2)	Moderately	0	0%	1	20%	0	0%	1	14%
(1)	Somewhat	0	0%	0	0%	0	0%	0	0%
(0)	Not at all	0	0%	0	0%	0	0%	0	0%
	Total	5	100%	5	100%	5	100%	7	100%
	Mean (out of 4)	3.80		3.60		4.00		3.14	

Table 59. Post-Graduation Survey Q4.

I am committed to ethical scholarship and collaboration in the furthering of knowledge, with a critical and objective perspective on research.

		2015-2016		2017-2018		2019-2020		2021-2022	
	Response	#	%	#	%	#	%	#	%
(4)	A Great Deal	5	100%	5	100%	5	100%	5	71%
(3)	Mostly	0	0%	0	0%	0	0%	2	29%
(2)	Moderately	0	0%	0	0%	0	0%	0	0%
(1)	Somewhat	0	0%	0	0%	0	0%	0	0%
(0)	Not at all	0	0%	0	0%	0	0%	0	0%
	Total	5	100%	5	100%	5	100%	7	100%
	Mean (out of 4)	4.00		4.00		4.00		3.71	

Table 60. Post-Graduation Survey Q5.

I am able to contribute to the education of undergraduate and graduate nursing students.

		2015-2016		2017-2018		2019-2020		2021-2022	
	Response	#	%	#	%	#	%	#	%
(4)	A Great Deal	2	40%	2	%	4	%	1	14%
(3)	Mostly	2	40%	3	%	0	%	3	43%
(2)	Moderately	1	20%	0	%	1	%	1	14%
(1)	Somewhat	0	0%	0	%	0	%	1	14%
(0)	Not at all	0	0%	0	%	0	%	1	14%
	Total	5	100%	5	100%	5	100%	7	99%
	Mean (out of 4)	3.20		3.40		3.6		2.29	

4. FUNDING & FINANCIAL AID

Securing adequate funding is an essential component for ensuring successful completion of a degree at Bloomberg Nursing. The University of Toronto's policy on student financial support states, "No student offered admission to a program at the University of Toronto should be unable to enter or complete the program due to lack of financial means." Bloomberg Nursing has put various funding mechanisms in place to reach this goal, including approximately 200 awards and bursaries disbursed each year to undergraduate and graduate students. The following section outlines the financial support options available to students in each program.

4.1 BScN

Ontario Student Assistance Program (OSAP)

The Ontario Student Assistance Program (OSAP) is the largest funding opportunity for students in our undergraduate program. During academic year 2022-23, there were 299 BScN applicants to the OSAP program, of which 293 received some form of funding (Table 61). Of the 376 students enrolled in the BScN program, 78% access funding through the OSAP program, a significant number when compared to the 48% of students who access funds through OSAP across the University of Toronto as a whole. We believe this is related to the fact that our BScN students have already completed on undergraduate degree and now they are paying for an additional two years of undergraduate education.

Table 61. BScN Student OSAP Data 2017-23

Year	Value	# of recipients	% of students receiving OSAP	Average amount
2017-2018	$4,903,780	282	81%	$17,389.30
2018-2019	$5,009,249	293	85%	$17,096.40
2019-2020	$3,950,280	264	76%	$14,963.00
2020-2021	$3,920,762	268	78%	$14,629.70
2021-2022	$4,074,387	283	82%	$13,764.80
2022-2023	$4,271,270	293	78%	$13,958.40

University of Toronto Advanced Planning for Students Program (UTAPS)

As part of the University of Toronto's policy on student financial support, the University of Toronto Advanced Planning for Students Program (UTAPS) program is designed to help offset some of the unmet financial need experienced by students accessing funds through provincial and territorial student financial aid programs. It is the University of Toronto's largest needs-based financial support program, providing bursary and grant funding to undergraduate students across the

university. In academic year 2022-23, 211 undergraduate nursing students received funding through this program totalling over $400,000 in financial aid.
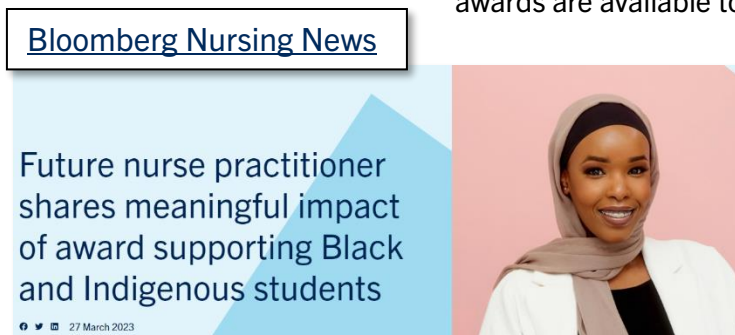
Emergency Grant Assistance

It is often the case that students experience unforeseen financial difficulties while enrolled in the program. The University Registrar's Office (URO) has set up a central hub for students who are experiencing unforeseen financial difficulties to apply for emergency support. Bloomberg Nursing has pledged $20,000 per year (beginning in academic year 2023-24) to help fund these emergency bursaries. Any large bursaries are escalated to the URO so that they may supplement bursaries which exceed $4,500.

4.2 MN

Students in professional programs such as our Master's program, typically "self-fund" their expenses through a variety of means including student loans, lines of credit and employment income. Approximately 40 graduate awards are available to Bloomberg Nursing Master of Nursing (MN) and Post-Master's Nurse Practitioner Diploma (PMNPD) students. In addition, numerous sources of financial assistance are available, including the Ontario Student Assistance Program (OSAP), the Professional Master's Financial Aid (PMFA)

Bloomberg Nursing News

Future nurse practitioner shares meaningful impact of award supporting Black and Indigenous students

27 March 2023

Bursary and internal bursaries and awards, many of which are need-based.

Ontario Student Assistance Program (OSAP)

The Ontario Student Assistance Program (OSAP) offers grants and loans to help students pay for university and over 50% of MN students at Bloomberg Nursing receive OSAP funding. While the funding rate is higher than the University of Toronto overall, the average OSAP amount is often lower for our MN students (Table 62). MN students typically receive lower OSAP amounts as they are entering the program from established careers and OSAP considers the prior year's employment when calculating allowances.

Table 62. OSAP data for MN Students 2017-2023

Year	Value	Number of recipients	% of students receiving OSAP	Average amount
2017-2018	$1,180,865	143	65%	$8,315.50
2018-2019	$2,422,250	167	69%	$14,504.50
2019-2020	$2,527,798	180	60%	$14,043.30
2020-2021	$2,511,385	153	49%	$16,414.30
2021-2022	$2,222,806	192	59%	$9,158.52
2022-2023	$2,146,159	168	58%	$9,078.05

Professional Master's Financial Aid Bursary (PMFA)

In 2016-17, the University of Toronto Advanced Planning for Students Program (UTAPS) was phased out for graduate students in professional programs. In response, Bloomberg Nursing created a bursary program for MN students to fill the gap in funding availability. The Professional Master's Financial Aid (PMFA) Bursary is awarded to students in the fall and winter terms dependent on the amount of unmet financial need (as demonstrated in their OSAP application). The Bloomberg Nursing Awards Committee identifies the amount of unmet financial need for each student and funds a standard percentage of said need across all students depending on the availability of funds. The amount of unmet financial need that is covered is generally between 25-30% per year (Table 63).

Table 63. PMFA data for MN students 2020-23

Academic Year	Funding Commitment	Funding Provided through PMFA	# of Recipients	% of unmet need funded
2020-2021	$100,000	$86,988.25	34	25%
2021-2022	$200,000	$189,338.40	98	29.5%
2022-2023	$200,000	$202,981.39	98	26.5%

It is important to note that each year the Awards Committee reserves a portion of this funding for what is termed the PMFA Contingency Fund. This fund (usually around $10,000) is utilized in emergency situations wherein students require immediate financial assistance. As with emergency bursaries for undergraduate students, this fund is meant to be general and agile enough to respond quickly to emergency requests across a wide scope of situations including, but not limited to, unforeseen rental increases, medical emergencies, significant relocation costs, or caregiving obligations. If contingency funds are not used, they become available in the following year to be disbursed through the normal PMFA process, which is why the total funding provided in 2022-23 exceeds the funding commitment from the Faculty.

Employment Income

Master of Nursing students are eligible to apply to work at the University of Toronto as a teaching assistant (TA). Graduate students also have the opportunity to work in a clinical setting as a clinical instructor (CI) for our BScN students.

4.3 DN

Much like our MN students, our DN students typically "self-fund" their expenses. The majority of our DN students are well into their career and most continue to work full-or part-time. DN students are eligible for provincial student loan programs such as OSAP, but as described above, OSAP is calculated on the previous year's employment and therefore many of our DN students do not qualify for financial assistance. We are aware that the employers of some current DN students have provided dedicated time release and backfill to support students with timely completion.

4.4 PhD

Bloomberg Nursing provides base funding packages for full-time PhD students from years 1-4 of their program of study. All PhD students who are eligible to receive this package are in the "funded cohort" for 4 years. Beyond 4 years students can receive financial support through employment as a TA or applying for internal awards and scholarships. Despite the guaranteed funding package, the rising cost of living in Toronto means that many students work on at least a part-time basis in hospital or community settings. For some PhD students, working during their full-time studies decreases their availability for full engagement in the PhD program and in other research activities.

The base funding package currently consists of $18,250 plus tuition fees and has a total value of approximately $26,000 per year (Table 64). While the base funding amount is lower than many other programs in the life sciences, students can hold both their full funding package and any external awards they receive. This is a notable difference with funding practices in other life science programs where the amount of the funding package is reduced when students receive external awards. Thus, the actual funding received by an individual student may be considerably higher than the minimum funding level.

Table 64. PhD funding package data 2017-24

Academic Year	Base Funding	Domestic Tuition	International Tuition	Guaranteed Funding: Domestic	Guaranteed Funding: International
2016-2017	$15,000	$8,491.69	$22,603.69	$23,491.69	$37,603.69
2017-2018	$17,250	$8,480.14	$23,692.14	$25,730.14	$42,980.14
2018-2019	$17,250	$8,489.52	$9,113.52	$25,739.52	$26,363.52
2019-2020	$17,250	$7,850.90	$8,486.90	$25,100.09	$25,736.90
2020-2021	$17,250	$7,858.65	$8,578.65	$25,108.65	$25,828.65
2021-2022	$17,250	$7,979.99	$8,735.99	$25,229.99	$25,985.99
2022-2023	$17,250	$8,054.28	$8,810.28	$25,304.28	$26,060.28
2023-2024	$18,250	$8,213.96	$8,969.96	$26,463.96	$27,219.96

The PhD funding package is comprised of the following sources of funding:

1. University of Toronto Fellowship funds/internal awards
2. Supervisor Contributions
3. TA Income

University of Toronto Fellowship Funds (UTF) & Internal Awards

The PhD funding package is primarily composed of University of Toronto Fellowship (UTF) funds. UTF funds are derived from Bloomberg Nursing's operating budget but can be offset by internal awards. Bloomberg Nursing has approximately 40 endowed awards that Bloomberg Nursing can award to PhD students and offset the UTF funding from the Faculty's operating budget. As a result, historically, a significant portion of the funding package for our PhD students has been comprised of endowed awards.

More recently, support required via our operating budget for PhD funding packages has grown as we continue to experience challenges with awarding available from the Ontario Student Opportunity Trust Fund Awards (OSOTF). The demographics of our PhD student cohort (mature, partnered, parents, mortgaged and working even casually) will rule them out of meeting the financial need criteria, whilst ironically, they would benefit from funding support to successfully complete their program within an optimal timeframe. We hope to work with SGS to review the financial need criteria to best reflect our student population and improve utilization of these funds.

A Leadership Giving Circle has been established with some dedicated alumni of the Faculty in an Advisory Group with a target of 100 alumni contributing $1000 per year over five years for student awards, to be matched 1:1 by Bloomberg Nursing to create a $1M fund for PhD and DN students.

We hope that this will lessen the burden on Bloomberg Nursing's operating budget while allowing us to continue to meet our student funding obligations.

Table 65 below demonstrates the amount of funds contributed to the PhD funding packages on a yearly basis from internal awards and UTF funding.

Table 65. Funding packages with internal award 2016-24

Academic Year	Internal Awards	UTF Funds	Grand Total
2016-2017	$187,843.36	$289,975.00	$477,818.36
2017-2018	$324,315.72	$262,930.15	$587,245.87
2018-2019	$397,916.12	$236,157.91	$634,074.03
2019-2020	$388,490.36	$155,286.10	$543,776.50
2020-2021	$410,333.34	$99,195.35	$509,528.70
2021-2022	$418,832.74	$148,466.64	$567,299.40
2022-2023	$392,616.41	$109,208.91	$501,825.32
2023-2024	$366,706.38	$108,213.44	$474,919.82

As can be seen from Table 65, the Faculty has worked hard to reduce the impact of the PhD funding packages on the operating budget. This has included streamlining award processes to ensure a larger base of eligible students, earmarking more graduate awards toward PhD students specifically, as well as adding new endowments and expendable funds through the donations of generous donors.

Supervisor Contributions

In a further effort to reduce the impact of PhD funding packages on Bloomberg Nursing's operating budget, mandatory contributions from supervisors toward their students' funding packages were instated for academic year 2021-2022. This contribution enhances the financial health of Bloomberg Nursing but also the supervisor's commitment to the student and to their satisfactory progress and timely completion of the program. This change also brought us in line with several other Faculties that require supervisors to contribute to the funding package.

Table 66. Supervisor Contributions to Funding Packages 2021-24

Academic Year	# of Supervisor Contributions	Total Amount Contributed
2021-2022	3	$15,000
2022-2023	9	$33,500
2023-2024	16	$61,500

As shown in Table 66, the overall contributions have significantly increased year over year. When supervisor contributions were introduced, they were not mandatory for students already in the program; however, supervisors were required to contribute to the funding for any new doctoral student entering the PhD program. As such, we have continued to increase these contributions, diversifying our sources of funding for this integral piece of financial aid at Bloomberg Nursing. Pre-interim review faculty are not required to contribute to their students' funding packages as they work to establish their own successful funding streams.

Employment Income

Employment income as a teaching assistant is a crucial component of the PhD funding package. Teaching assistant (TA) positions are considered both a source of funding and a form of professional training. The base funding package includes $6,600 of TA work (up to 140 hours, paid at $47.64). PhD students who are in years 5 and 6 are guaranteed TA positions at the same number of hours as their 1st or 2nd appointment. Students can decline their TA hours, either due to lack of financial need or external employment obligations, or when the demands of data collection, thesis write-up, etc. preclude their ability to allocate time to this role. Table 67 illustrates the increasing TA portion for each PhD funding package.

Table 67. Teaching Assistant Income 2016-24

Academic Year	TA hourly salary	Amount toward funding package
2016/2017	$42.90	$6,006.00
2017/2018	$43.65	$6,111.00
2018/2019	$44.44	$6221.60
2019/2020	$45.33	$6,346.20
2020/2021	$46.24	$6,473.60
2021/2022	$46.70	$6,538.00
2022/2023	$47.17	$6,603.80
2023/2024	$47.64	$6,666.60

5. INTERNAL & EXTERNAL AWARDS

5.1 BScN

Scholarships, grants and bursaries are an integral part of our financial aid program for undergraduate students. Approximately 100 awards are disbursed each year to our undergraduate students, totalling more than $500,000 in academic year 2023-24 (Table 68). These awards have various criteria, the bulk of which are predicated on financial need and academic merit. Awards range from small bursaries of $1,000 to awards that cover full tuition for the program. Our largest endowment remains the Seymour Schulich Awards in Nursing, of which 22 awards are earmarked every year to attract incoming BScN students.

Table 68. Internal awards data for BScN students 2017-24

Year	# of Awards Disbursed	Value
2016-2017	89	$358,006
2017-2018	91	$359,719
2018-2019	89	$387,237
2019-2020	105	$408,778
2020-2021	95	$400,388
2021-2022	96	$441,410
2022-2023	96	$453,233
2023-2024	107	$565,606

Professional Organization Awards for BScN Students

BScN students are eligible to apply for external funding from the Registered Nurses' Foundation of Ontario (RNFOO). Nine students were recipients of awards in 2022 and five were successful in 2023.

5.2 MN

A number of internal awards have been established for graduate students over the past years through generous gifts from various donors (Table 69). The most significant award is the Schulich Graduate Award, which was established in 2007. Annually, 17 Schulich awards (valued at $9,000 each), half of which are awarded primarily based on financial need, are used to attract outstanding students to the MN program.

While continuing MN students benefit from other scholarships and bursaries provided by the University, almost all the awards our MN students receive are established at the Faculty. Most of the awards for MN students are also need- based.

Table 69. Internal awards data for MN students 2017-24

Year	# of Awards Disbursed	Value
2016-2017	41	$297,663
2017-2018	36	$280,484
2018-2019	155*	$364,638
2019-2020	36	$217,663
2020-2021	33	$213,928
2021-2022	33	$216,845
2022-2023	32	$221,821
2023-2024	37	$298,955

*In 2018-2019, all new incoming full-time MN students who otherwise did not qualify for a merit or needs-based award were awarded a $1,000 MN Admission Award. This was a supplement to the end of the UTAPS program for MN students and a temporary measure until the PMFA was introduced in 2020-2021.

Professional Organization Awards for MN and PhD Students

There are a number of external awards that are provided by professional organizations e.g., Registered Nurses' Foundation of Ontario (RNFOO), Canadian Nurses Foundation (CNF), and the Council of Ontario University Programs in Nursing (COUPN), for which MN, PMNPD and PhD students have been consistently successful (Table 70).

Table 70. MN and PhD External Organization Awards 2018-2022

Agency	2022		2021		2020		2019		2018	
	PhD	MN	PhD	MN	PhD	MN	PhD	MN	PhD	MN
CNF			1		1		2		1	
COUPN*							1			
RNFOO#	0	3	3	5	2	3	2	1	2	3
Other PhD only	3		6		1		4		1	

*No COUPN competition in 2022
#2023 2 DN students were awarded RNFOO awards for the first time.

Major External Fellowships/Scholarships

Table 71 provides information regarding the number of major external student awards received by MN and PMNPD students between 2014 and 2022 from national research council agencies compared to all PMAS students in the Life Sciences division.

Table 71. External Fellowships/Scholarships received by MN and PMNPD students (2015-2022)

Academic Year	Nursing (MN, FT)			Division IV: Life Sciences (PMAS, FT)		
	Students with External Fellowships/ Scholarships	All Students	% with External Fellowships/ Scholarships	Students with External Fellowships/ Scholarships	All Students	% with External Fellowships/ Scholarships
2014-15	2	276	0.7%	80	1,345	5.9%
2015-16	2	277	0.7%	71	1,411	5.0%
2016-17	1	265	0.4%	68	1,509	4.5%
2017-18	0	243	0.0%	75	1,601	4.7%
2018-19	0	262	0.0%	57	1,739	3.3%
2019-20	0	305	0.0%	59	1,938	3.0%
2020-21	0	324	0.0%	53	1,942	2.7%
2021-22	0	303	0.0%	53	1,923	2.8%

5.3 DN

Internal Awards

The Staples Family Graduate Student Award in Nursing was established in 2020 and it provides $5,000 in annual funding for a student who demonstrates financial need and academic merit while also being committed to advancing nursing practice, education, or research. The award is expendable and is currently set to be distributed until academic year 2024-25.

The Rosenstadt Doctoral Research Dissertation Grants Program is an endowed award that provides research funding to support data collection expenses. The program was expanded in 2023 to support DN students with data collection costs. This year 4 grants were awarded to DN students.

External Awards

Since the professional doctoral program requires a thesis, DN students are eligible for Tri-Agency scholarships. However, the recency of the program and the combination of workloads relating to employment and coursework has precluded current students from finding the time to develop a competitive application.

5.4 PhD

Internal Awards

The Rosenstadt Doctoral Research Dissertation Grants Program provided a total of 19 doctoral research grants to our PhD students. The grants range from $1,000 to $1,500 per student.

External Awards

PhD students in nursing face several challenges when applying for external awards. One challenge includes the current national health research funding climate. Over the past 8 years, there has been a reduction in health professional-specific graduate student award opportunities at Tri-Council granting agencies, including Canadian Institutes of Health Research (CIHR), and Social Sciences and Humanities Research Council (SSHRC).

A second challenge is that our students are typically involved with research on human subjects. This type of research has a longer timeline to data acquisition and publication so nursing students are disadvantaged when compared to students conducting research in lab settings.

Thirdly, nursing students typically have course-work master's degrees compared to students in the life sciences who typically have thesis-based masters and resultant publications. Students who have publications from their master's thesis are usually able to publish earlier in their PhD program. Hence, there are relatively modest numbers of federal scholarships awarded to Faculty of Nursing PhD students.

External awards such as the Ontario Graduate Scholarship (OGS), Canadian Institutes for Health Research (CIHR) Fellowships, CIHR and the Canadian Social Sciences and Humanities Research Council (SSHRC) Doctoral Fellowships made up most of the external awards between 2015-2022 (Table 72).

Table 72. External Fellowships and Awards Received by PhD Students (2015-2022) in Comparison to University Division - Life Science Students

Academic Year	Nursing Science (PhD, FT)			Division IV: Life Sciences (DOC, FT)		
	Students with External Fellowships/ Scholarships	All Students	% with External Fellowships/ Scholarships	Students with External Fellowships/ Scholarships	All Students	% with External Fellowships/ Scholarships
2014-15	4	46	8.7%	447	1,900	23.5%
2015-16	4	52	7.7%	440	1,894	23.2%
2016-17	4	45	8.9%	439	1,959	22.4%
2017-18	5	40	12.5%	451	2,047	22.0%
2018-19	5	41	12.2%	474	2,128	22.3%
2019-20	6	47	12.8%	548	2,272	24.1%
2020-21	5	45	11.1%	600	2,447	24.5%
2021-22	9	55	16.4%	597	2,659	22.5%

Notes:
1. The academic year consists of Fall, Winter, Summer terms. For example, 2021-22 academic year consists of Fall 2021, Winter 2022 and Summer 2022 terms.

2. PMAS = Professional Master's Degrees; MAST = Research Master's Degrees; DOC = Doctoral Degrees; FT = Full-time

3. 'Students with Fellowships/Scholarships' data represent the number of full-time students receiving external, merit-based awards in the given year.

4. 'All Students' data represent the distinct student count of full-time students registered in the department in the given academic year.

5. The Student Accounts cube includes all students in all programs for transactions that are processed through ROSI and HRIS. OSAP loans and Grants are excluded.

6. External fellowships/scholarships include: Income - awards grad - Fellowships/scholarships (Federal-CIHR, Federal-NSERC, Federal-SSHRC, Outside-Other, Provincial-Any, Provincial-OCGS) plus Other (Federal-NSERC, Federal-SSHRC, Outside-Any, Province-Other); Award Income Source=External to U of T.

Each year, SGS holds sessions to assist students in preparation of external awards applications. Our Nursing Research Office and staff also support development of student applications and keep students aware of upcoming application deadlines via a monthly research newsletter.

Doctoral Completion Awards

PhD students who are outside of the funded cohort can apply for a Doctoral Completion Award. These awards are given to students who are in Year 5 or 6 and who have a tangible plan to complete the program in the year the award is disbursed (Table 73).

Table 73. Doctoral Completion Award data 2017-2024

Academic Year	# of Recipients	Total Funds Disbursed
2016-2017	2	$54,000.00
2017-2018	2	$32,000.00
2018-2019	2	$16,500.00
2019-2020	3	$23,837.80
2020-2021	7	$37,500.00
2021-2022	2	$27,933.20
2022-2023	3	$47,630.00
2023-2024	4	$39,767.99

Ontario Graduate Scholars (OGS) & Queen Elizabeth II Graduate Scholarship in Science and Technology Awards (QEII-GSST)

The Ontario Graduate Scholarship (OGS) is a provincial program which provides merit-based scholarships to graduate students across the university in various disciplines. Students who apply to the OGS award are also considered eligible for the QEII-GSST award—both awards provide $5,000 of funding per semester in the year that the student receives the award. As our graduate

programs run the length of the academic year, successful applicants typically receive $15,000 of funding for the academic year.

Traditionally, the OGS and QEII-GSST awards have been awarded to PhD students. Although MN students are eligible to apply, the reality of their program being professional in nature hinders their application as there is little in the way of research experience. The recipient numbers listed in Table 74 are comprised entirely of PhD students.

Table 74. OGS and QEII-GSST Awards 2017-2024

Academic Year	# of OGS Awards	# of QEII-GSST Awards	Total
2016-2017	5	4	$135,000
2017-2018	9	5	$195,000
2018-2019	5	5	$140,000
2019-2020	6	4	$150,000
2020-2021	5	4	$135,000
2021-2022	6	4	$150,000
2022-2023	5	4	$135,000
2023-2024	4	4	$120,000

6. RESOURCES TO SUSTAIN THE QUALITY OF SCHOLARSHIP

The following are a list of resources that support our nursing students and our faculty members.

Simulation Education

As stated in section 2.3.1, Bloomberg Nursing has invested significant human and financial resources into the simulation program. Our goal is to increase the investment into simulation education to further enhance what is already a strong program to make it relevant and accessible for students and faculty members across all programs at Bloomberg Nursing.

Instructional Design, Information Technology & Communication Support

Bloomberg Nursing has the support of 4 full-time information technology (IT) experts. The Academic Information & Communication Technology Supervisor and Academic Technology Support Analyst support the planning, coordination, and implementation of academic online courses. The Administrative Information & Communication Technologist and the Technology Support Analyst support technology in the simulation lab and faculty and staff access to, and utilization, of electronic technology in teaching and learning, as well as in research and other scholarship. The unit is overseen by the Director of Technology Services. Our critical mass of faculty have key skills in teaching online; in looking forward, our IT experts could be better utilized to encourage and support innovation in teaching online within our graduate programs and with our faculty who want to develop programs in scholarship of teaching and learning.

Health Sciences Writing Centre and Gerstein Science Information Centre

The Health Sciences Writing Centre (HSWC) provides tutoring to all nursing students with experienced writing instructors. Bloomberg Nursing provides a funding contribution of ~$60K per year to support 900 hours of writing instruction. Students can bring their writing assignments or attend workshops on academic skills that are of specific interest to nursing students. The writing centre also works with students whose first language is not English.

Students can access the Nursing e-Resources Guide through the Gerstein Science Information Centre. The guide provides resources that complement the nursing curriculum. Course instructors have incorporated presentations from Writing Centre staff within the first courses that students take in our programs to make connections and ensure students are aware of available resources (e.g., NUR 1094 MNNP, NUR 1301 DN program).

The HSWC is well utilized by our graduate students because it provides personalized writing instruction and feedback for academic writing. Since the MN is a professional program and students have pursued clinical careers, many have not engaged in scholarly writing for several years. Table 75 shows MN students from Bloomberg Nursing to be the highest users of the service in 2022-23. Having shifted to provision of support online during the pandemic, the HSWC has maintained that mode of delivery with most appointments in the 2022-23 year being in the online synchronous format. Students can meet with a tutor in-person and online, which is beneficial for our graduate students learning in asynchronous courses. The HSWC also facilitates a graduate student writing group − Inked: the HS Writing Collective which offers a collaborative and distraction-free environment where students can work on their current writing assignments, presentations, and/or other professional documents such as proposals.

Table 75. Number of unique students seen by Faculty and ELL status 2022-23

	UG	Masters	Doctoral	Other	Total	ELL%*
DLSPH			27	1	28	45
KPE	98	13	4	1	116	33
Nursing	27	162	8	4	201	19
Pharmacy	25	3	16	7	51	41
Social Work		81	19		100	37
Other	1		3		4	25
Total	151	259	77	13	500	30

*ELL refers to English Language Learner i.e. any student who identifies a language other than English as their first/home language

Nursing e-Resources and Library Consultation− Gerstein Science Information Centre

The Gerstein Science Information Centre is the largest science and health science academic library in Canada (See Appendix 23 for the U of T Library's Report). It has a print collection of over 1 million volumes of journals and books. The library also provides access to over 100,000 online

journals and books. The Nursing e-Resources Guide consists of selected resources that are licensed by the University of Toronto Libraries or are freely available on the web. Its aim is to provide easy access to resources that complement the nursing curriculum. In addition, MN students have access to an Academic Librarian, who is a liaison for nursing from Gerstein, to advise them about the development and implementation of search strategies for the relevant literature. Since the critical appraisal and synthesis of the evidence to inform clinical and leadership decision making is central to advanced practice, this resource is important to student success.

Quercus Bloomberg Nursing Teaching and Learning Resource Hub

Since students are well acquainted with Quercus for their courses, Bloomberg Nursing created a Teaching and Learning Resources Quercus site that provides easy and quick access to student resources and teaching support resources and course design training.

7. FACULTY

7.1 Faculty Complement Plan

The Bloomberg Nursing faculty complement comprises faculty members in the following categories: tenure stream, teaching stream, status-only, and adjunct. In addition, Bloomberg Nursing also works with a large number of clinical instructors and preceptors appointed through the Clinical Education Office.

As of Fall 2023 Bloomberg Nursing had 20.0 FTE tenure stream and 14.05 FTE teaching stream faculty (Table 76) with 11 tenure stream faculty at the highest rank of Professor and 4 teaching stream at the rank of Associate Professor (Table 77). The Fall 2021 Student: Faculty ratio was 18.9:1 compared with the U of T ratio of 25.7:1.

Table 76. Faculty Complement 2018-2024

	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24
Tenure Stream	25.00	24.00 (3 on leave)	24.00 (1 on leave)	23.00 (1 on leave)	23.00 (1 on leave)	20.00
Teaching Stream	18.15	17.10 (1 on leave)	16.10 (1 on leave)	14.10	14.60	14.05

See Appendix 21 for all tenure stream faculty Curricula Vitae. See Appendix 22 for all teaching stream faculty Curricula Vitae.

Table 77. Full-time Faculty Complement 2023-24

Surname	First Name	Stream	Rank	FTE
Dennis	Cindy-Lee	Tenure	Professor	1.00
Hillan	Edith	Tenure	Professor	1.00
Johnston	Linda	Tenure	Professor	1.00
McGillis	Linda	Tenure	Professor	0.50
Metcalfe	Kelly	Tenure	Professor	1.00
Muntaner	Carles	Tenure	Professor	1.00
Nelson	Sioban	Tenure	Professor	0.50
Parry	Monica	Tenure	Professor	1.00
Peter-Hardtke	Elizabeth	Tenure	Professor	1.00
Puts	Martine	Tenure	Professor	1.00
Stremler	Robyn	Tenure	Professor	1.00
Cleverley	Kristin	Tenure	Associate Professor	1.00
Cranley	Lisa	Tenure	Associate Professor	1.00
Dale	Craig	Tenure	Associate Professor	1.00
Gastaldo	Denise	Tenure	Associate Professor	1.00
Mayo	Samantha	Tenure	Associate Professor	1.00
Widger	Kimberley	Tenure	Associate Professor	1.00
Chu	Charlene	Tenure	Assistant Professor	1.00
Grundy	Quinn	Tenure	Assistant Professor	1.00
Jibb	Lindsay	Tenure	Assistant Professor	1.00
Wright	Amy	Tenure	Assistant Professor	1.00
Beekhoo	Zoraida	Teaching	Associate Professor	1.00
Cambly	Erica	Teaching	Associate Professor	1.00
Fegan	Mary Ann	Teaching	Associate Professor	1.00
Mohammed	Shan	Teaching	Associate Professor	1.00
Fairley	Laura	Teaching	Assistant Professor	0.75
Innis	Jennifer	Teaching	Assistant Professor	1.00
Janes	Nadine	Teaching	Assistant Professor	1.00
Johnston	Sarah	Teaching	Assistant Professor	0.50
Knechtel	Leasa	Teaching	Assistant Professor	0.60
Lok	Jana	Teaching	Assistant Professor	0.60
Louis	Joanne	Teaching	Assistant Professor	0.50
Merklinger	Sandra	Teaching	Assistant Professor	0.50
Orava	Briana	Teaching	Assistant Professor	0.60
Trip	Katherine	Teaching	Assistant Professor	1.00
Thomson	Heather	Teaching	Assistant Professor	1.00
Vincent	Leslie	Teaching	Assistant Professor	0.50

Surname	First Name	Stream	Rank	FTE
Wilson	Jean	Teaching	Assistant Professor	1.00
Wilson	Marnee	Teaching	Assistant Professor	0.50

There are 3 status-only faculty who hold a primary appointment with Bloomberg Nursing (Table 78). Two of those appointments are at the rank of Professor, with one holding an endowed Chair at an affiliated hospital. An additional 12 status-only faculty have a primary appointment other than at Bloomberg Nursing and serve on PhD supervisory committees (Table 79).

Table 78. Status-only Faculty with a Primary Appointment at Bloomberg Nursing for 2023-24

Surname	First Name	Rank (Status Only)
McGilton	Katherine	Professor
Stinson	Jennifer	Professor
Colella	Tracey	Associate Professor

Table 79: Status-only Faculty with a Primary Appointment other than at the Faculty of Nursing and Serve on PhD Supervisory Committees for 2022-23

Surname	First Name	Other Faculty
Wheeler	Anne	Faculty of Medicine (Physiology)
Shankardass	Ketan	Dalla Lana School of Public Health
Smith	Peter	Dalla Lana School of Public Health
Miller	Fiona	Dalla Lana School of Public Health (IHPME)
Daftary	Amrita	Dalla Lana School of Public Health
Martimianakis	Maria Athina	Dalla Lana School of Public Health (IHPME)
Firestone	Michelle	Dalla Lana School of Public Health
Alibhai	Shabbir	Dalla Lana School of Public Health (IHPME)
Rodin	Gary M	Dalla Lana School of Public Health (IHPME)
Munshi	Laveena	Dalla Lana School of Public Health (IHPME)
Puchalski-Ritchie	Lisa	Faculty of Medicine
Stephenson	Anne	Faculty of Medicine

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Tenure and Teaching Stream - There is currently a national shortage of nursing faculty with a projected need to hire 543 full-time faculty across Canada. Ontario schools predicted a need to hire 75 full-time faculty in 2022 (Registered Nurses Education in Canada Statistics). There have been seven teaching stream faculty retirements and two tenure stream retirements since the last review, and we are facing a number of additional anticipated retirements over the next three years. We have been actively seeking to recruit both teaching and tenure stream faculty since 2022 without a great deal of success. Recruitment factors include a shortage of NP-, MN- and PhD-prepared faculty seeking academic positions, lower salaries and fewer benefits for faculty

compared with salaries in clinical settings, and post-pandemic burnout. Section 1.7 (Long-Range Planning Challenges) provides additional information about the context for these challenges and the recruitment plans for the future.

> Most significant strengths in the Faculty: "Strengths include our faculty, who are engaged in highly funded and impactful research. In terms of education, we are responsive to student's concerns and needs and have responsive and high-level UG and graduate programs."
>
> Most significant areas for improvement: "stronger commitment to succession planning and hiring of faculty".
>
> UTQAP Faculty and Staff Feedback Session

Despite posting for FTE teaching stream positions, we have been limited in our ability to hire full-time NP-prepared teaching faculty, who are needed to teach in our MN NP and PMNP fields. Most recently, we have posted and successfully filled two 0.6 FTE positions, which may be a more attractive offering to NP faculty wishing to maintain their clinical practice.

Sessional Instructors – Bloomberg Nursing hires sessional instructors to teach primarily NP courses, but also MN HSLA, MN Clinical and BScN courses where needed. Sessional instructors help supplement the course instructors from Bloomberg Nursing and provide valuable clinical knowledge directly from their primary positions in clinical settings.

One challenge with sessional instructors is that while they are strong clinicians and bring current practice-based perspectives to teaching, they are often balancing other full-time and non-academic roles, and therefore need additional supports to deliver content and build on their own educational practice to improve the quality of instruction. To support course instructors and promote consistency between sections, a [Quercus](#) course staging area known as Blueprint has been used throughout the NP field. The Blueprint course provides instructors with a shared area to upload course content and align learning activities. This is in addition to a standard set of lecture template materials developed in follow up to the previous UTQAP review.

Status-only and adjunct appointments – Bloomberg Nursing offers status-only and adjunct appointments only to individuals who are deemed qualified to make a significant contribution to the educational and research activities of Bloomberg Nursing. In return, Bloomberg Nursing makes a commitment to further the academic activities and progress of all Bloomberg Nursing appointees, in recognition of contributions they make to the mission of Bloomberg Nursing in education and research. Generally, status-only and adjunct faculty participate on DN and PhD student committees, teach courses at Bloomberg Nursing, and collaborate with faculty on research projects and manuscripts among other contributions. Status-only and adjunct positions are reviewed annually and are typically 3 years in duration. There is no right to renewal but applications for renewal can be submitted and may be granted at the Dean's discretion.

Clinical Instruction & Practicum appointments - Clinical instructors are recruited through referrals and postings directed at experienced clinical instructors. Similarly, Preceptors within the final

undergraduate integration practicum course (NUR470) normally hold a BScN or equivalent and are recruited within partner health care agencies in collaborations between the agencies and our Clinical Education Office staff in consultation with faculty members.

7.2 Support for Faculty Development

Bloomberg Nursing engages in a number of activities to support faculty development in teaching, research and scholarship, and service. Many of these activities are referred to in other sections of the self-study document. As summarized below, Bloomberg Nursing is committed to a mentoring system to support the success of new hires.

As per article 2.11 of the [University of Toronto Workload Policy and Procedures for Faculty and Librarians](#) (WLPP), Bloomberg Nursing has an approved Unit Workload Policy (Appendix 19). The policy was revised and approved in May 2023 and became effective on July 1, 2023. This document describes workload parameters for teaching and service activities for several types of academic appointments at Bloomberg Nursing.

New faculty members are encouraged to attend orientation events and ongoing faculty development workshops offered through the [Centre for Teaching Support & Innovation (CTSI)](#) and the [Centre for Faculty Development (CFD)](#) to enhance their teaching as well as acquire knowledge of teaching resources including Quercus.

Initiatives to Support Faculty and Faculty Development

Start-up grants - New tenure stream faculty receive start-up grants to support the development of their research programs (see Section 8 Research).

Intentional teaching assignments - The Associate Dean Academic meets with tenure and teaching stream faculty to determine what teaching assignment is best for their continuing development.

Teaching Professoriate Scholarship Awards - These funds are available for teaching stream faculty to complete initiatives demonstrating their scholarship, and assisting them to be even more competitive for accessing funds to continue development of their areas of scholarship.

Teaching awards - Teaching excellence is promoted within Bloomberg Nursing through annual nominations for teaching awards for faculty, clinical instructors, and preceptors. Each year, there is a vigorous nomination period that leads to a competitive panel of nominations.

Graduate Curriculum, Teaching and Learning Committee (GCTLC) — GCTLC was formed in 2021 to build capacity and promote a culture of teaching and learning excellence within graduate nursing programs. Sessions have covered topics including considerations related to course handover, using inclusive language, AI, supporting students with time management and learning how to learn and writing support.

Recording and Editing Suite — A recording and editing suite was opened in 2019 to support instructors in developing high quality media content. This sound-dampened space has a full suite of software and is equipped with LED lights, a microphone, a high-definition webcam, a green screen, a Wacom tablet, and a range of multimedia production software. Instructors in all programs may book this suite.

Teaching & Learning Online in the Faculty of Nursing - For faculty teaching in online programs, the IT team has developed a Quercus based course. The self-paced course contains five modules covering topics such as getting started, benefits and challenges of online learning, teaching strategies and online assessments, communication and interaction in an online environment, and technology-based tools.

Media Training - Faculty are offered media training workshops to help them feel adequately prepared to speak about their research to a general audience, and to encourage them to feel comfortable pitching their research to external media in the form of op-eds or as part of U of T's list of breaking news experts.

Mentoring: New tenure stream faculty members are matched with a senior faculty member mentor to provide advice on the journey to tenure and are also encouraged to seek consultation with any faculty members regarding issues. In addition, the Dean, Associate Dean, Research and Associate Dean, Academic meet with new faculty members regularly to guide and mentor them on the tenure process, funding a program of research, and developing their teaching portfolio.

Professional development for teaching and leadership: Faculty members are supported to enroll in structured learning opportunities to focus on career planning and work-life balance strategies, expand pedagogical approaches, develop or refresh courses and curriculum, and engage with peers and/or mentors around teaching in the academy and the incorporation of best practices related to supporting students and faculty. Funding support is provided for course instructors to attend professional development courses offered through the Centre for Faculty Development and the National Centre for Faculty Development and Diversity. Additionally, many of our instructors leverage learning opportunities offered through the University of Toronto's Centre for Teaching Support and Innovation.

For example, faculty members have been supported to attend the Association of College University and Educators (ACUE) Teaching Development Program, the National Center for Faculty Diversity and Development (NCFDD) Faculty Development, Post-Tenure Pathways, and Teaching Toolkit programs. Two faculty have been supported thus far to complete the Faculty Success Program — a 12 week intensive program with weekly online modules, time-tracking software, coaching and small group support to balance responsibilities for research, teaching and service and maximize productivity — particularly in writing grants and publications. A faculty member has been supported to join the first iteration of the U of T Provost's Leadership Academy and three faculty members have attended the New and Emerging Academic Leadership (NEAL) program through the Centre for Faculty Development at U of T and Unity Health. Our faculty also continue to access program supports through the Faculty Success Alumni Program. Anecdotally, pre-tenure faculty have

reported favorably on the content relating to 'writing for publication' and 'work-life balance' in particular.

8. RESEARCH SCOPE, QUALITY & RELEVANCE

University of Toronto Strategic Research Plan 2018-2023

Five strategic objectives:

1. Demonstrate National and Global Leadership in Research and Innovation
2. Foster Collaborations, Partnerships, and Engagement
3. Advance Equity, Diversity, and Inclusion across Research and Innovation
4. Support Integration of Research and Innovation in Student Curricular and Co-Curricular Experience
5. Strengthen the Institutional Supports that Foster Research and Innovation Excellence

Bloomberg Nursing is producing research findings at the forefront of nursing science — all of which correspond to U of T's Strategic Research Plan thematic areas: PROMOTE, BUILD, ENGAGE, ADVANCE, DISCOVER, and INNOVATE and advance the plan's 5 strategic objectives (enumerated above). Between 2016/17 and 2021/22, research productivity, peer-reviewed grant funding, and research training opportunities increased substantially. As of 2022, nine faculty members held research chairs, and many are Fellows of Academies including the American Academy of Nursing (19), the Canadian Academy of Health Sciences (11), and the Canadian Academy of Nursing (6). Our faculties' research findings inform and impact clinical practice, nursing education, and health policy in Canada and around the world. Our research faculty also have productive relationships with the Toronto Academic Health Sciences Network (TAHSN), with many cross-appointed to the affiliated research institutes. The TAHSN membership enables our researchers to lead and participate in interdisciplinary research teams, ensuring that many aspects of health research have a nursing perspective.

Bloomberg Nursing students are also offered meaningful opportunities to engage in research. Our undergraduate and non-research based graduate students have opportunities to explore their research interests and participate in a research project under the guidance of a faculty member through our Rosenstadt Research Development Program (RRDP) which is described further in the Undergraduate & Graduate Research Activity section. Our PhD students are actively engaged in research through their program of study and go on to become leaders in research, clinical practice, policy, and health care administration.

Taking a Strategic Approach to Research Funding

Since the last review, the Associate Dean, Research & External Relations bolstered the success of our researchers - and increased the amount of research funding - by effectively building and utilizing the Bloomberg Nursing's Office of Research & External Relations (ORE) and incorporating

targeted strategic communications to promote research excellence. The Associate Dean and ORE staff are proactive in identifying funding opportunities, and directly communicating these opportunities to appropriate researchers. Individual Principal Investigator (PI) funding is closely monitored to ensure that PIs are planning for uninterrupted research funding, with the goal of holding and/or applying for multiple research grants simultaneously. ORE is tasked with supporting research endeavors and the research-based needs of faculty members. Under the direction of the Associate Dean, Research & External Relations, this team supports faculty researchers throughout the research project lifecycle. The current team is composed of a Research Manager, Administrative Assistant, Financial & Payroll Assistant, Strategic Research Development Officer, and Research Data Analyst, with two members; the Research Data Analyst and the Strategic Research Development Officer added in 2015 and 2021 respectively. The Research Data Analyst position expanded the scope of the services ORE offered, is unique to Bloomberg Nursing, and is partly funded through a cost-recovery model (funded through PI research grants). The addition of the Strategic Research Development Officer role has enhanced the services ORE has historically offered.

Table 80. Office of Research & External Relations Roles and Grant Application Support Services

Title	Grant Application Support Services
Director of Research Administration	Responsible for the strategic development and efficient oversight and accountable administration of the faculty research portfolio. Provides leadership in managing and overseeing all aspects of research administration for the faculty and facilitates the targeted growth of research activities. Supports the development of research goals, participates in the faculty's strategic planning for research process and provides expertise on all research-related matters.
Administrative Assistant	Responsible for providing high-level administrative support for research activities and acting as the first point of contact for general research-related inquiries. They are responsible for keeping well-informed on research funding programs, application guidelines, policies/procedures and regulations, collating and organizing data for research reports and drafting internal & external research-related communications.
Financial & Payroll Assistant	Supports financial and payroll processing for the faculty's various programs of research.
Research Data Analyst	Supports the research initiatives of Faculty members' research projects by providing methodological and analytic support in developing grant proposals. In the post-award period, undertakes complex data analyses on a cost-recovery model. Also provides methodological and statistical consultation to PhD Students.

Strategic Research Development Officer	Advises faculty members in grant strategy and grant-writing and the development of plans that support proposal development strategies. Implementing process improvements that enhance and expand research funding activity and effectiveness. Supports faculty nominations for awards and honours by identifying known and new opportunities, proposing nominees to an internal committee, drafting content and letters of support.

The team of 5 build the capacity, and a breadth of skills, to effectively advance a strategic plan for ORE. The strategic plan includes multiple approaches to increase research productivity and funding. One approach involved expanding the scope of grant applications to go beyond the traditional health sciences funding sources. The majority of Tri-Agency funding Bloomberg Nursing receives is from the Canadian Institutes of Health Research (CIHR), as much of the research conducted by our faculty members is health-related. In order to increase the number of funding opportunities available for our researchers to apply to, the ORE helped researchers reframe research questions in order to be eligible to apply to other Tri-Agency funding bodies including the Social Sciences and Humanities Research Council (SSHRC) and the Natural Sciences and Engineering Research Council of Canada (NSERC). A second approach involved encouraging faculty to apply for fewer grants with higher value as they advance in their research career. Since ORE supports a lot of the administrative work in the grant application process (including budget preparations), faculty members were able to focus on larger, higher value grant applications.

8.1 Research Funding

Sources of Research Funding

Since the last self-study, the composition and proportion of research funding sources has changed. While Tri-Agency (CIHR, SSHRC, NSERC) and Not-for-Profit agencies remain the two main sources of funding, government funding has decreased, Tri-Agency funding has increased, and private sector funding has been re-introduced (Figure 19).

> Feedback from faculty members regarding the internal research supports available was gathered during a faculty meeting in May 2023. Overall, there was overwhelming acknowledgment of the impact that the staff in the ORE are offering faculty members regarding awards application development, grant development, funding management, and statistical services.

Prior to 2017, a significant source of funding came from other government sources ("Government, Other" in Figure 19) such as the Ministry of Health and Long-Term Care (MOHLTC). However, the MOHLTC no longer offers applicable grants, and as a result, our last such grant ended in 2016. Despite the reduction in MOHLTC funding, during this self-study period, Bloomberg Nursing saw an

increase in total funding from $6.162 million in 2017 to $8.612 million in 2022. This is a 40% increase in research funding, which is higher than the 21% increase in research funding across all Life Science Departments over this time (Figure 20).
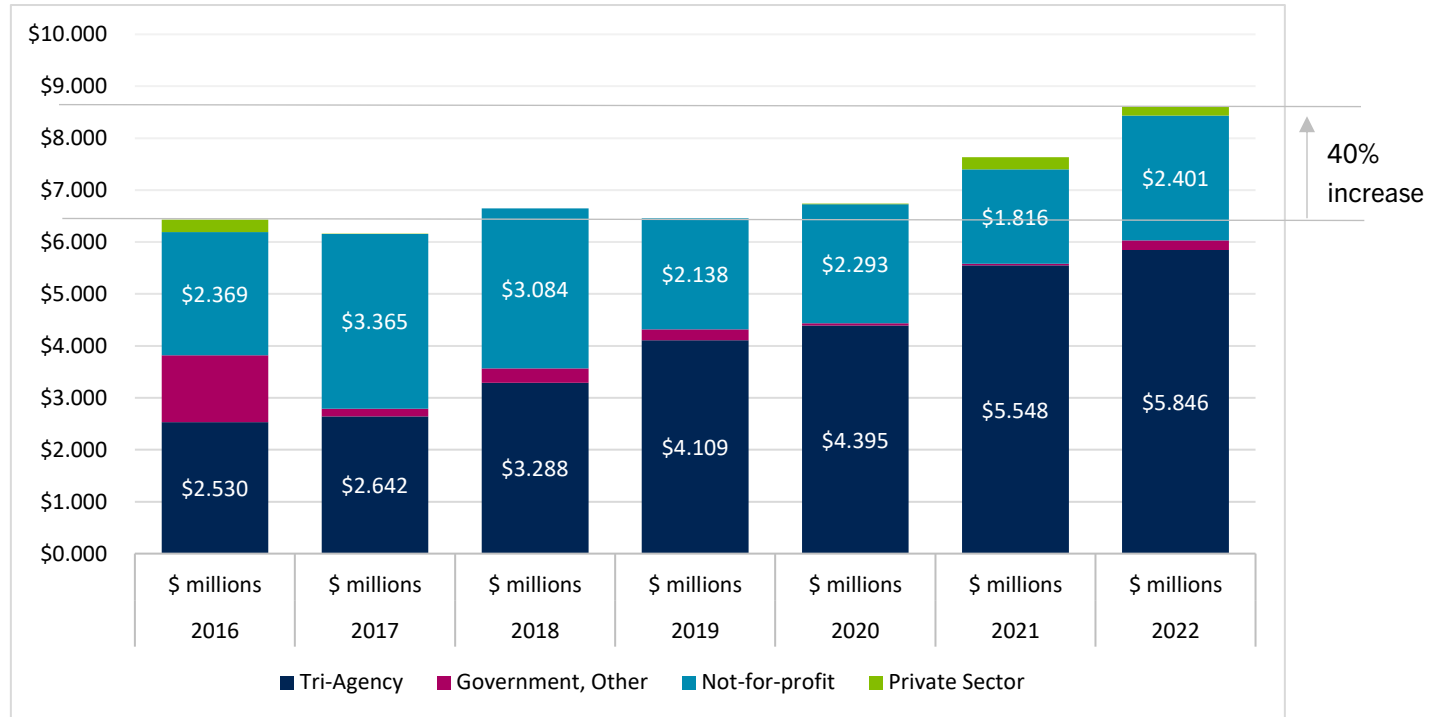
Figure 19. Bloomberg Nursing Budget Installment Amount by Grant Year (April − March)

Please note that the data used to populate Figures 19, 20 & 21 were standardized data provided by the University of Toronto's Office of the Vice Provost, Academic Programs.
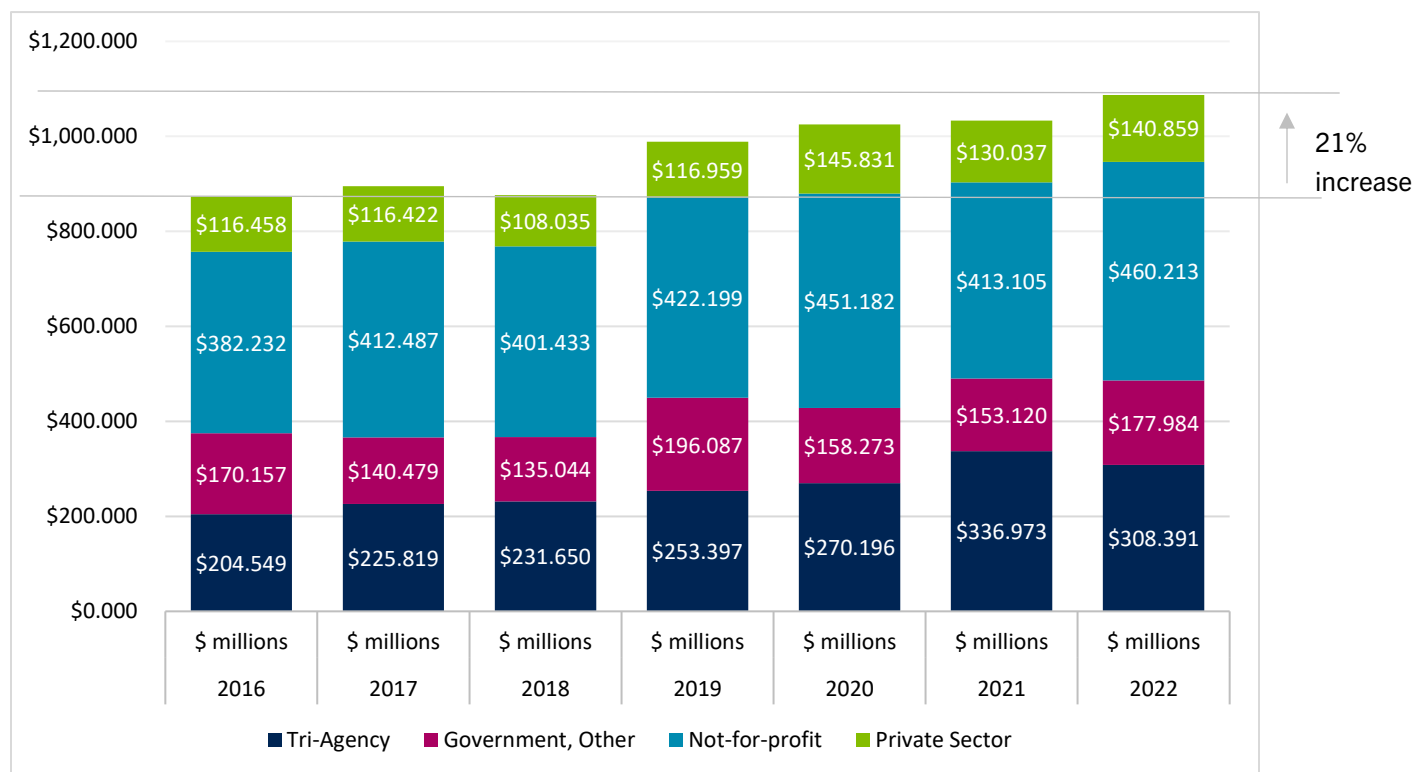
Figure 20. Life Sciences Budget Installment Amount by Grant Year (April − March)

Notably, the amount and proportion of Tri-Agency Funding has changed dramatically for Bloomberg Nursing since 2017. As of 2022, Bloomberg Nursing Tri-Agency funding comprised 68% of total funding for the year, which is significantly higher than the 28% for all Life Science Departments (Figures 19 and 20). This increase is due to numerous factors: five tenure-stream Assistant Professors were hired early in this self-study period (2018-2019); the ORE strategic plan to expand beyond CIHR and leverage other funding opportunities including SSHRC; and working strategically with researchers to ensure that budgets were adequate to fund the proposed research, resulting in larger budgets awarded.

As noted previously, ORE has strategically worked with faculty members to highlight the connections to social sciences in their research to develop funding applications for larger SSHRC competitions. Between 2011 and 2016, faculty had only held two SSHRC grants totalling $1,603, but during this self-study period, the number of grants - and amount awarded - has increased to eleven SSHRC grants totalling $501,319. Notably, in 2022-23 one of our faculty members received a Discovery Grant from the third Tri-Agency, Natural Sciences and Engineering Research Council (NSERC) for a 5-year term.

While Bloomberg Nursing receives a high number of Not-for-Profit grants compared to the number of Tri-Agency grants (Figure 21, Grants Count), Not-for-Profit grants are generally smaller in value than Tri-Agency grants. The Not-for Profit grants typically come from universities, hospitals and nursing or disease - specific societies or organizations (e.g., Canadian Cancer Society).
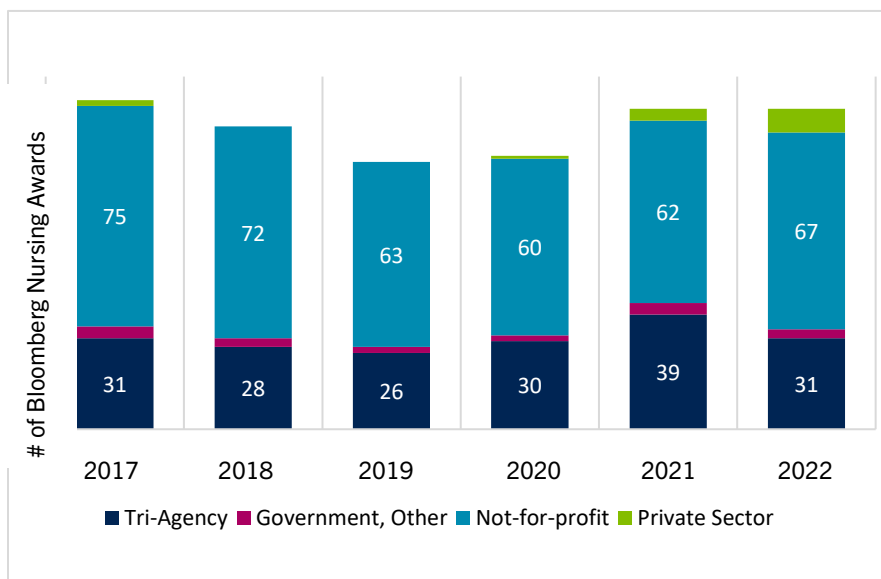
Figure 21. Bloomberg Nursing Awards Count by Grant Year (April — March)

8.2 Tri-Agency Eligibility and Participation

The increased capacity and strategic approach of ORE has impacted Bloomberg Nursing Tri-Agency participation rates. Table 81 shows the number of faculty members who are 'eligible' to apply for research funding, as well as the number of faculty members that are 'participating' (actively submitting grants), and the percentage of those applying vs. eligible (Percent Participating). The percentage of participating faculty in 2020-2021 was 68%, which is comparable to that for all U of T departments (69%), but less than all Life Science departments (81%). Our Percent Participating has increased from 57% in 2016-17 to 68% in 2020-2021.

We do have a small number of faculty members who are nearing retirement, and they are no longer applying for external funding, which is impacting the participation rate. This will eventually impact the Tri-Agency grant funding amounts if we are not able to hire strong research faculty who can help maintain (or increase) our Tri-Agency grant funding, an awareness that will be noted in the 'Looking Forward' section.

Table 81. Number of eligible, number of participating and percent participating in Tri-Agency funding competitions

ELIGIBLE	2013	2014	2015	2016	2017	2018	2019
Faculty of Nursing	17	17	21	20	24	22	22
All Division IV: Life Sciences	456	454	470	480	478	463	502
All UT Departments	1,973	2,003	2,029	2,054	2,175	2,127	2,319

PARTICIPATING	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21
Faculty of Nursing	8	9	12	13	16	15	15
All Division IV: Life Sciences	334	334	355	370	390	382	405
All UT Departments	1,270	1,327	1,398	1,437	1,543	1,448	1,593
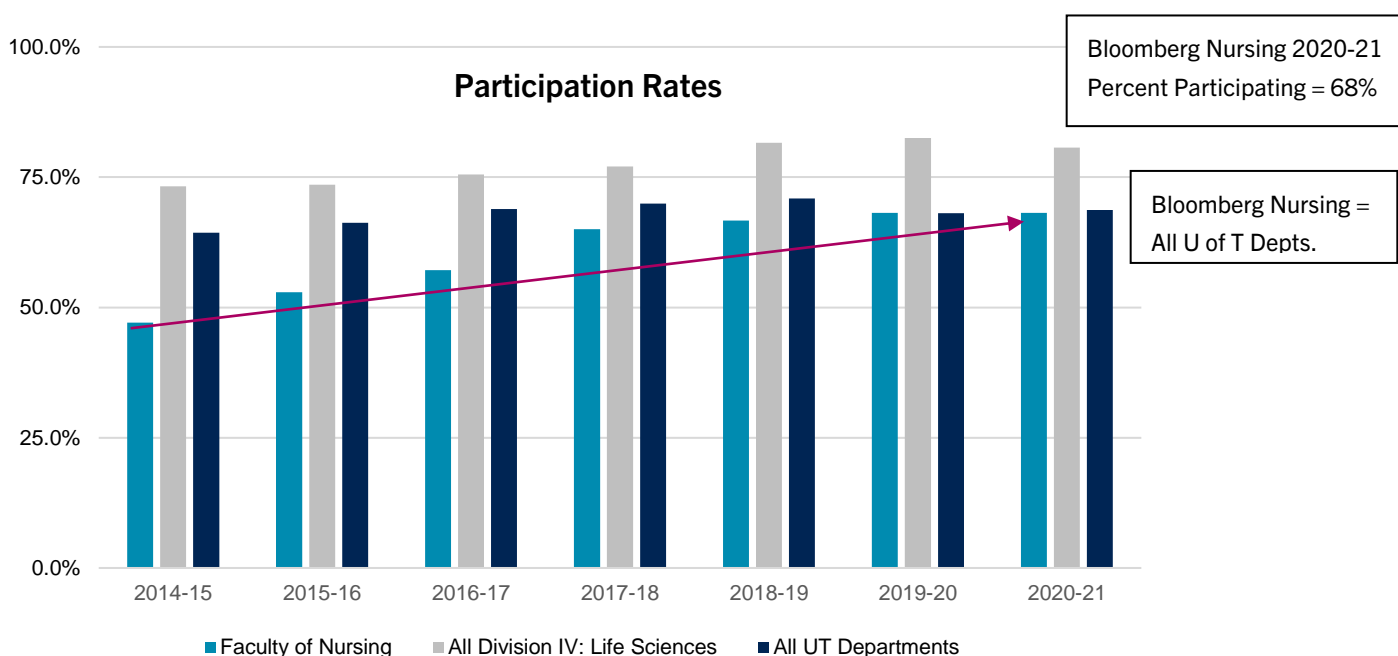
Data source: Research & Innovation Dashboards: Tri-Agency Market Share Dashboards: Participation in CRC-Eligible Tri-Agency Programs (last updated September 7, 2022)

Figure 22. Tri-Agency Participation Rates

8.3 Tri-Agency Applications and Success Research Funding

Although Bloomberg Nursing CIHR Project Grant success rates are not calculated in Table 82 because of the small numbers, our own calculations of Bloomberg Nursing's success rates were generally within ±10% of the U of T and national success rates from 2017 to 2022. With the strategic approach of the ORE, Bloomberg success rates from 2020 to 2022 have been higher than the U of T and national success rates. Notably, in 2021 Bloomberg Nursing's success rate was 22.6% higher than the national success rate (45.5%, vs. 22.9%) and 25.5% higher than the U of T success rate (45.5%, vs. 20.0%). The number of applications submitted and awarded per year is variable, in part, because once faculty receive adequate multi-year funding for their research there is a period of a few years where there is less need to apply for funding.

Table 82. Nursing, University of Toronto and national Tri-Agency research funding grant success example: CIHR Project Grant

CIHR Project Grant		2016 (March, Oct)	2017 (Sept)	2018 (March, Sept)	2019 (March, Sept)	2020 (March, Oct)	2021 (April, Sept)	2022 (March)
Faculty of Nursing	Successful	1	2	2	1	5	5	2
	Unsuccessful	7	7	6	10	12	6	5
	Total Applications	**8**	**9**	**8**	**11**	**17**	**11**	**7**

CIHR Project Grant		2016 (March, Oct)	2017 (Sept)	2018 (March, Sept)	2019 (March, Sept)	2020 (March, Oct)	2021 (April, Sept)	2022 (March)
U of T	Applications	369	198	310	266	259	260	127
	Awarded	83	32	47	46	55	52	28
	Success rate	**22.5%**	**16.2%**	**15.2%**	**17.3%**	**21.2%**	**20.0%**	**22.0%**
National	Applications	6,697	3,415	5,117	4,628	4,488	4,395	2,095
	Awarded	1,214	544	811	872	810	1,008	468
	Success rate	**18.1%**	**15.9%**	**15.8%**	**18.8%**	**18.0%**	**22.9%**	**22.3%**

Limited to grants administered by U of T (i.e. not including grants administered by hospitals).
Data source: Research & Innovation Dashboards: Tri-Agency Market Share: Success: CIHR Project (Data as at Sept. 6, 2022)

8.4 Technology Transfer Indicators

During the period 2017 to 2022, Bloomberg Nursing had a total of: four new invention disclosures; one priority patent application; two new start-ups; and one new commercialization project. Although these numbers comprise a very small percentage of overall U of T technology transfer numbers, it should be recognised that Bloomberg Nursing faculty represent 0.95% of the total U of T faculty and yet accounted for 5.9% and 5.0% of new start-ups in 2019 and 2020 respectively.

8.5 Awards and Honours

Our faculty are consistently recognized for their research excellence by external organizations through awards and honours. There were a total of 72 honours and awards received between 2015 and 2022. Our success is due in part to the addition of the Strategic Research Development Officer who supports faculty nominations for awards and honours by identifying known and new opportunities, proposing nominees to an internal committee, drafting and editing content, and supporting letters of reference and submissions.

Highlights of our awards and honours success during this self-study period include fellowship into the Canadian Academy of Health Sciences (CAHS), the Canadian Academy of Nursing (CAN), and the American Academy of Nursing (AAN). Faculty also received the Marcé Medal from the Marcé Society for Perinatal Mental Health,

Bloomberg Nursing News
Three Nursing researchers named as 2023 Fellows to the Canadian Academy of Nursing

Lifetime Achievement Awards (Canadian Association of Nurses in Oncology, Canadian Association of Psychosocial Oncology), and an Order of Merit for Nursing Research from the Canadian Nurses Association (Table 83).

Table 83. Bloomberg Nursing Awards and Honours Received, 2015-2022

Award	Organization	Number of Awards Won in Bloomberg Nursing	Number of Awards Won at U of T
Agnes Dillon Randolph Award	University of Virginia	1	1
Award for Strategic Contribution to Nursing Education (with Nursing Health Services Research Unit)	Council of Ontario University Programs in Nursing	1	1
Best Essay, History Lessons for Managers Coping with the Impact of COVID-19	Zeitschrift für Unternehmensgeschichte / Business History Journal	1	1
Charter Fellow	Canadian Academy of Nursing	1	2
CIHR - Institute for Cancer Research CAPO Research Excellence Award	CIHR - Institute for Cancer Research / Canadian Association of Psychosocial Oncology	1	1
College of New Scholars, Artists & Scientists	Royal Society of Canada	2	45
Distinguished Fellow	Canadian Academy of Health Sciences	1	1
Dorothy M. Pringle Award of Excellence for Nursing Research	Sigma Theta Tau International - Lambda-Pi-at-large Chapter	6	6
Emerging Nurse Researcher Award	Sigma Theta Tau International Honour Society of Nursing	1	1
Ethel Johns Award	Canadian Association of Schools of Nursing	1	1
Fellow	American Academy of Nursing	15	15
Fellow	Canadian Academy of Health Sciences	5	73
Fellow	Canadian Academy of Nursing	5	5
Fellow	Canadian Nurse Educator Institute	1	1

Gwendolyn Puryear Keita Award	American Psychological Association and NIOSH	1	1
Honorary Degree	Dalhousie University	1	1
International Nurse Researcher Hall of Fame	Sigma Theta Tau International Honour Society of Nursing	2	2
Interprofessional Research Excellence Award	University of Toronto Critical Care Medicine Training Program	1	1
Leadership Award in Nursing Research	Registered Nurses' Association of Ontario	6	6
Lecturer Award	Society of Reproductive and Infant Psychology	1	1
Lifetime Achievement Award	Canadian Association of Nurses in Oncology	1	1
Lifetime Achievement Award	Canadian Association of Psychosocial Oncology	1	1
Marcé Medal	The Marcé Society for Perinatal Mental Health	1	1
Mary Adelaide Nutting Award for Exemplary Historical Research and Writing	American Association for the History of Nursing	1	1
Mid-Career Investigator Prize in Research in Aging	Canadian Institutes of Health Research Institute of Aging	1	1
Order of Merit for Nursing Research	Canadian Nurses Association	1	1
Pat Griffin Scholar Award	Canadian Association of Schools of Nursing	1	1
Paul Calabresi Award	International Society of Geriatric Oncology	1	1
Pediatric Award of Excellence	Canadian Hospice Palliative Care Association	1	1
Pfizer Award for Excellence in Nursing Research	Canadian Association of Nurses in Oncology	1	1
Research Award	Nursing Leadership Network of Ontario	1	1
Scholarship into Practice Award	Council of Ontario University Programs in Nursing	6	6
Wendy Lack Women of Action Scientific Award	Israel Cancer Research Fund	1	1
	Total	**72**	**184**

Data Source: Awards & honours Database (Office of Vice-President, Research and Innovation).

8.6 National and International Comparators — Publications and Citations

Bloomberg Nursing publication and citation rankings are among the top twenty of North American institutions conducting nursing research (Table 84). Bloomberg Nursing is 13th for publications and 8th for citations across North America in the field of Clarivate Analytics Research field of Nursing and 1st for both publications and citations within U15 Canadian rankings (Table 84). However, it should be noted that some of our

> "For over a century Bloomberg Nursing has been a leader in nursing research because we do not shy away from the hard questions, we meet them and set out to solve them, boldly."
>
> Dean Linda Johnston- Celebrating Research Excellence Research Report 2020-2022

faculty members publish in journals that are not included in the definition of Nursing (Clarivate Analytics Research definition), and these numbers may be an under-estimation of our metrics.

Faculty also publish in the following areas for which U of T ranks 1st for both publications and rankings within U15 Canadian peers: Health Care Sciences & Services; Oncology; Psychiatry; and Public, Environmental & Occupational Health.

Table 84. Publication and citation rankings among top twenty North American peers for Nursing field

PUBLICATIONS RANKINGS				CITATIONS RANKINGS			
Institution Short Name	All North Am. Peers	North Am. Public Peers	Cdn U15 Peers	Institution Short Name	All North Am. Peers	North Am. Public Peers	Cdn U15 Peers
U Penn	1			U Penn	1		
Duke	2			Johns Hopkins	2		
Johns Hopkins	3			Duke	3		
Harvard	4			Harvard	4		
Ohio State	5	1		Ohio State	5	1	
Pittsburgh	6	2		N Carolina - Chapel Hill	6	2	
N Carolina - Chapel Hill	7	3		Michigan	7	3	
Michigan	8	4		TORONTO	8	4	1
Emory	9			Calif - San Francisco	9	5	
Calif - San Francisco	10	5		Emory	10		
Columbia	11			BRITISH COLUMBIA	11	6	2
New York U	12			Pittsburgh	12	7	
TORONTO	13	6	1	U Washington	13	8	
Rutgers State	14	7		ALBERTA	14	9	3
Vanderbilt	15			Minnesota	15	10	
Yale	16			Vanderbilt	16		
U Washington	17	8		Case Western Reserve	17		
Case Western Reserve	18			Columbia	18		
Minnesota	19	9		New York U	19		
Iowa	20	10		Yale	20		

Data Source: InCitesTM, Clarivate Analytics (2023). **Data Source**: Web of Science®. Report Created: January 27, 2023. Includes Web of Science content indexed through Dec. 31, 2022. This data is reproduced under a license from Clarivate. Additional information on institution classification: University of Toronto Undergraduate & Graduate Student Research Activity.

Research Publications and Strategic Communication - Bloomberg Nursing publishes bi-annual research reports as part of the strategic communications strategy to promote our research and researchers. The [2020-2022 Research Report, Celebrating Nursing Excellence in Research — This is Nursing in Action](#) highlighted ways research at Bloomberg Nursing seeks bold solutions to health care's complex challenges. Bloomberg Nursing also proactively markets faculty members' research excellence by promoting successful applications, research topics and key findings, and awards. This promotion included earned and owned media and the adherence to a strategic planning calendar which promotes faculty research expertise in accordance with health focused recognition and awareness months (i.e. Breast Cancer, Women's Heart Health). Published studies for which Bloomberg Nursing faculty are first or senior authors as well as award recipients, are publicized through digital news stories and press releases, as well as active media pitching to national, international, and regional media outlets.

8.7 Integrating Research into Teaching & Learning

As a leader in nursing research, students at Bloomberg Nursing have meaningful opportunities to engage directly with our faculty members on a broad range of leading research topics. During this self-study period the Associate Dean of Research initiated monthly Bloomberg Rounds in which faculty members present on their research programs. These hybrid rounds (in-person and virtual) are attended by faculty members, staff, alumni and students. All PhD students in year one are required to attend all rounds as a component of the first year PhD seminar. In addition, the [Rosenstadt Research Development Program (RRDP)](#) was initiated during the self-study period. ORE aims to encourage an interest in research and facilitate research success for undergraduate and graduate students at Bloomberg Nursing through this program. The ORE also provides research application support and methodological and analytic support to undergraduate and graduate students and postdoctoral fellows.

Undergraduate & Masters - Student Research Activity

The Bloomberg Nursing Undergraduate Summer Student Research Program provided undergraduate nursing students with the opportunity to explore their research interests and participate in a research project under the guidance of a faculty member, while earning a stipend (Table 85). The 2017 UTQAP review referenced the small numbers of BScN students participating in the Summer Undergraduate Research Program and the potential to grow this cohort and contribute to a pipeline of future faculty members.

In 2020-21, the COVID-19 pandemic created unprecedented challenges for all members of the research community, and we had to cancel the Undergraduate Summer Student Research Program. To offset the lack of opportunity for undergraduate research training, we developed the [Rosenstadt Research Development Program (RRDP)](#) for the Fall/Winter 2021-22 term. This program has leveraged the work study program at the University of Toronto which provides partial funding for each student. The remaining funding is provided through endowments allocated to Bloomberg Nursing annually from the [Bertha Rosenstadt Fund](#) at the University of Toronto. As a result, there is no cost to the faculty member to supervise a RRDP student.

As part of the RRDP, students are embedded within a faculty member's program of research throughout the academic year. In addition, students are required to attend monthly workshops to assist them with the research projects and to provide them with the opportunity to explore future graduate studies in nursing science. Through the research experiences, students can gain first-hand experience conducting research alongside a professor, learn various research methods and aspects of the research process and potentially presenting research findings at scientific conferences and/or co-authoring on peer-review manuscripts.

In 2022, we expanded the program to include Master of Nursing (MN) students; a group of students that previously had very few research training opportunities. Through this expanded program, 16 Bachelor of Science in Nursing (BScN) and Master of Nursing (MN) students undertook research training with a faculty member (Table 85). In 2023, we expanded the program further, and the number of students participating almost doubled to 29 with the majority of tenure stream faculty members supervising at least one student through RRDP. Overall, there were 110 nursing students who applied to the program, with a 26% hiring rate.

> **"I believe research is imperative for a career in health care. It allows you the chance to innovate and provide better care for populations."**
>
> Larkin Davenport Huyer (BScN student and Rosenstadt Program participant)

Table 85. Undergraduate Student Research Development Program Activity, 2017-2023

Year	Number of Students in Program	Number of Faculty Supervisors
2017	29	18
2018	17	11
2019	11	8
2020	12	11
2021	Canceled due to Covid-19	
2022	16	16
2023	29	16

NOTE: * As of 2022, MN students began to participate in the research development program.
** Data on graduate registration from Registrar's Office, Bloomberg Nursing; accurate as of July 2023.

Undergraduate student research programs may contribute to student interest in furthering their nursing education. During the period 2017 to 2022, approximately one quarter of participants in these programs have returned to Bloomberg Nursing for graduate studies (Table 86). Other students may have gone on to graduate school at another institution, or graduate school in other U of T Faculties, for which we do not have accurate data. It should also be noted that some students work for a few years prior to returning to graduate school. Thus, the low percentage of returning students from our 2022 research program may increase in the future.

Table 86. Research program participation and graduate study enrolment 2017-22

Year	Number of Undergraduate Research Program Participants	% who Return to Bloomberg Nursing Graduate Programs**
2017	29	24%
2018	17	29%
2019	11	27%
2020	12	33%
2021	Canceled due to Covid-19	
2022*	16	13%

PhD and Postdoctoral − Student Research Activity

As part of ORE's strategic plan to help facilitate research production, the ORE provides monthly newsletters for all faculty and PhD students alerting them to funding opportunities and deadlines as well as opportunities to present their research and scholarship at upcoming scholarly meetings.

The research-intensive environment at Bloomberg Nursing provides an optimal setting for Postdoctoral Fellows (PDFs) to transition from graduate student to independent researcher. PDFs with Bloomberg Nursing are provided with the opportunity to further their research skills while working with an experienced faculty mentor. Since 2017, 18 PDFs have trained with faculty (Table 87), with many coming from outside Canada, including Brazil, China, Norway, and Spain.

Table 87. Postdoctoral Fellows, 2017-2022

Fellow Name	Faculty Supervisor	Recruitment	Years
Krista Keilty	Robyn Stremler	Local − Toronto	2014-2017
Paola Galbany Estragues	Sioban Nelson	International − Spain	2015-2016
Pnina Mor	Kelly Metcalfe	International − Israel	2015-2016
Saeed Moradian	Doris Howell	Local − Toronto	2015-2018
Maria del Mar Pastor Bravo	Sioban Nelson	International − Spain	2016-2017
Ann Kristin Bjornnes	Monica Parry	International − Norway	2016-2018
Flavia Casasanta Marini	Cindy-Lee Dennis	International − Brazil	2016-2018
Kathryn Birnie	Jennifer Stinson	National − Nova Scotia	2016-2019
Charlotte Angelhoff	Robyn Stremler	International-Sweden	2018-2019

Cara Settipani	Kristin Cleverley (co-supervision)	International — USA	2016-2017
Chantelle Bailey	Lianne Jeffs	National — Ottawa	2017-2019
Marina Wasilewski	Louise Rose	Local — Toronto	2017-2019
Mariana Bueno	Bonnie Stevens	International — Brazil	2018-2020
Rachel Flynn	Bonnie Stevens (co-supervision)	National — Alberta	2018-2021
David Lim	Kelly Metcalfe	National — Quebec	2019-2022
Tieghan Killackey	Jennifer Stinson	Local — Toronto	2020-2022
Justine Dol	Cindy-Lee Dennis	National — Nova Scotia	2021-ongoing
Yao Zhang	Linda Johnston	International — China	2022-2023

8.8 Research & Academic Resources

Bloomberg Nursing Research Grant Programs

Bloomberg Nursing has provided financial resources directed from philanthropic gifts and endowment funds (including the Bloomberg Transformation Agenda, Psychiatric & Addictions Nursing Endowment, RBC Financial Group Endowment in Cardiovascular Nursing, Signy Hildur Eaton Endowment in Paediatric Nursing) to support the development of junior faculty members' research programs. In addition, small seed grants of $5,000, supported by the Bertha Rosenstadt Endowment, provide newly appointed tenure stream faculty with funding for pilot work to be used in preparing for, and submitting, a larger peer-reviewed research grant (e.g., Tri-Agency or other major grant submission). The number and value of financial supports and seed funding has varied given the appointment of new tenure-stream faculty early in the self-study period.

In 2021, the COVID-19 pandemic created unprecedented challenges for all members of the research community and left junior faculty particularly vulnerable during a time when they were in the process of building and establishing their research programs and securing grant funding. In response to this unique situation, a one-time funding opportunity (supported by the Bertha Rosenstadt Endowment) was created to help junior faculty, whose productivity had been impacted by the pandemic, maintain their research programs as planned. The Special Support Awards, valued at $5,000 each, were provided to eight pre-tenure faculty members. The total amount of internal grants and awards to faculty is detailed in Table 88.

Table 88. Total Bloomberg Nursing Internal Funding Awarded to Faculty, 2017-2022

Year	Number of Awards/Grants	Total Award/Grant Amount (CDN $)	Mean Award/Grant Amount (CDN $)
2017	3	$20,000	$6,667
2018	2	$15,000	$7,500
2019	7	$140,000	$20,000
2020	3	$65,000	$21,667

| 2021 | 10 | $80,000 | $6,154 |
| 2022 | 3 | $30,000 | $10,000 |

8.9 Research Chairs and Professorships

Research chairs and professorships are awarded to faculty members who have demonstrated international leadership in their field in both academic excellence and research scholarship. As of 2022, eight research chairs and one professorship are held by faculty members, more than any other nursing Faculty in Canada (Table 89). Most of these are endowed, and in partnership with affiliated academic hospitals. Funding from the Bloomberg Transformation Agenda philanthropic gift was directed towards the creation of two research professorships. Bloomberg Nursing also has two chairholders in the prestigious Canada Research Chair (CRC) program.

Bloomberg Nursing's partnership with TAHSN hospitals is also a contributing factor in our research success. There are endowed chairs at CAMH, SickKids, UHN, Unity Health and Sinai Health with many of those chairs also holding appointments at the associated research institutes.

Table 89. Bloomberg Nursing Faculty Research Endowed Chairs, Professorships, and CRCs, 2017-2022

Title	Term	Faculty
Endowed Chairs		
Centre for Addiction and Mental Health (CAMH) Chair in Mental Health Nursing Research	2015-present	Kristin Cleverley
Heather Reisman Chair in Perinatology Nursing Research	vacant	
Mary Jo Haddad Nursing Chair in Child Health	2014-present	Jennifer Stinson
Ontario Women's Health Council Chair in Women's Health	2016-2023	Cindy-Lee Dennis
RBC Chair in Cardiovascular Nursing Research	2018-2023	Aaron Conway
RBC Financial Group Chair in Oncology Nursing Research & Education	2004-2019	Doris Howell
	2019-present	Samantha Mayo
SickKids Signy Hildur Eaton Chair in Paediatric Nursing Research	2000-2015	Bonnie Stevens
	2019-present	Lindsay Jibb
St. Michael's Hospital Volunteer Association Chair in Nursing Research	2013-2018	Lianne Jeffs
Professorship		
Kathleen Russell Distinguished Professor	2013-2019	Linda McGillis Hall
TD Professorship in Critical Care Nursing Research	2014-2019	Louise Rose

Bloomberg Limited-Term Professor in Cancer Genetics	2015-2021	Kelly Metcalfe
Bloomberg Limited-Term Professorship in Child & Family Health	2018-present	Robyn Stremler
Canada Research Chairs		
Canada Research Chair in Perinatal Community Health (Tier 2)	2007-2018	Cindy-Lee Dennis
Canada Research Chair in Care of Frail Older Adults (Tier 2)	2018-present	Martine Puts
Canada Research Chair in Pediatric Palliative Care (Tier 2)	2019-present	Kimberley Widger

8.10 Looking Forward: Challenges and Opportunities

Bloomberg Nursing has been successful in the years of this self-study and has seen an increase in research funding from various Tri-Agencies, has expanded the research opportunities for BScN and MN students, and has increased opportunities for faculty members to profile their research through the initiation of Bloomberg Rounds and targeted communications. Looking forward, strategic priorities will focus on increasing research funding in a very competitive funding environment, supporting the research activities of new faculty members, and increasing opportunities for students to have research experiences.

Many of the successes observed during the years of this self-study have been possible due to the support provided by staff in the ORE. This includes a Strategic Research Development Officer that has been funded by U of T for three years. In July 2024, Bloomberg Nursing will be responsible for funding this position. Due to the uncertainty of budget constraints in the coming years, creative solutions are being explored, including sharing this position with another single department faculty at U of T.

In addition, with the expansion of research funding applications being submitted, managing grants with larger budgets, and increasing the number of award applications and research applications to all Tri-Agencies, additional resources have been required from ORE in both the pre-grant and post-grant period. As a result, the Research Manager is responsible for overseeing more complicated grants (often national and international grants requiring research contracts and ethics approvals), which is creating a greater workload for the Research Manager. It will be important to reflect on the current staffing model in the ORE to ensure that the capacity exists to increase the research activities at Bloomberg Nursing.

With the expected retirements in the coming years, recruitment of tenure-stream faculty will be critical in continuing to expand research activities and productivity at Bloomberg Nursing. The ORE will be fundamental in supporting new faculty hires. This is especially true for assistant professors where it will be important to provide resources and mentorship to ensure success as they establish their programs of research. It may take several years to establish ongoing funding which could

impact overall Bloomberg research funding amounts. Associate/Full professors with established funding should be a priority for hiring to ensure that there not a decline in total funding amounts. The establishment of the RRDP in 2021 has created opportunities for Bloomberg students to develop research skills and for some, an interest in pursuing graduate education. This program has expanded and in 2023, there were over 400 applications from 110 students for the RRDP positions (students can apply to more than one position). However, based on faculty availability, only 29 students were able to be hired into this program. Expansion of this program will require the addition of tenure-stream faculty members. In addition, this entire program is resourced by the ORE to create minimal workload for faculty members. This includes creating job postings, posting positions, reviewing applications, and forwarding eligible applicants to faculty members, hiring students, HR onboarding, and time sheet management. In order to expand this program further, it will be necessary to monitor increased workload for the ORE.

QUESTIONS FOR REFLECTION

How effective is a "Grow Your Own" approach to developing tenure stream faculty?

What strategies have been shown to be effective in recruiting tenure stream faculty at the senior ranks of Associate and Full Professor?

9.0 RELATIONSHIPS

9.1 Relationships with Cognate Faculties, Academic Departments and Units

Council of Health Sciences

The Council of Health Sciences (CHS) represents leadership within the U of T health sciences sector and facilitates collaboration and enhancement of health science research and education endeavours. All health professional Faculties and programs are represented on the Council.

Through the CHS Chair, the CHS reports directly to the University Provost. The Terms of Reference of CHS were last revised in 2020 with responsibilities including:

- Work collectively on common academic issues and their implementation.
- Identify opportunities for common policies/practices and common management support for education and research across the health sciences sector.
- Promote interprofessional education across all health professional programs and optimize the resources to do so (see Centre for Advancing Collaborative Healthcare and Education; CACHE).

- Ensure the health sciences sector is adequately and appropriately represented at all levels of University governance;
- Communicate with the Provost and relevant structures (e.g., TAHSN) on all matters relating to the health sciences sector and its education and research programs;
- Present an annual forum at which participants (CHS members and selected academic leaders from the seven health sciences Faculties) engage in discussion and best practice exchange focused on topics of relevance and/or concern to health sciences learners; and
- Work collectively on partnership opportunities involving local, national and international organisations of strategic significance to the University.

In response to the pandemic and aligned with the 2008 Influenza Pandemic Planning Guidelines for U of T Health Sciences Faculties, a Working Group on Curriculum and Licensure Alternatives was established in April 2020 to support the re-entry of learners into the clinical environment after a period of closure, and to provide oversight of the development of a mandatory COVID-19 Curriculum for all health sciences learners. That Working Group has subsequently transitioned to the Committee on Health Sciences Professional Practice Education (CHSPPE) with responsibilities including collective advocacy with regards to the following topics:

- How learners achieve essential competencies leading to professional practice;
- Innovative strategies to adapt and use e-learning tools to support professional practice education, particularly clinical skills and patient/client care (including online simulations);
- Shared and unique approaches to admissions / curriculum / awards processes, advocacy and procedures; and
- Problem-solving strategies for shared challenges, such as clinical placement capacity, simulation labs.

Priorities of CHSPPE to date have included addressing learner mistreatment, EDI initiatives and the development and sharing of curriculum relating to planetary health.

Centre for Critical Qualitative Health Research

The Centre for Critical Qualitative Health Research (CQ) was established as an Extra-Departmental Unit C (EDU: C) in the Dalla Lana School of Public Health (DLSPH) in 2016. CQ has two aims: 1) capacity building through graduate teaching, continuing education, and a community of practice; and 2) production of new methodological knowledge, including the development, adaptation, and evaluation of qualitative methods and their utilization in the health sciences. Six health sciences faculties are partners in the Centre including Bloomberg Nursing. Bloomberg Nursing has committed to providing an annual funding contribution of $3,500. A number of Bloomberg Nursing faculty are Fellows of CQ. One hundred and sixteen students from contributing partner departments were enrolled in the CQ shared curriculum in 2022-23. NUR1025 Doing Qualitative Research: Design and Data Generation is Bloomberg Nursing's course contribution to CQ's

academic program offerings, with nine PhD students from DLSPH and Bloomberg Nursing enrolled in 2022-23.

University of Toronto Centre for the Study of Pain

The University of Toronto Centre for the Study of Pain (UTCSP) is a collaborative partnership of the Faculty of Medicine, Bloomberg Nursing, the Faculty of Dentistry and the Leslie Dan Faculty of Pharmacy. Bloomberg Nursing provides $7,500 per year to support UTCSP operating costs and until recently, has provided the office space as a further in-kind contribution. Assistant Professor Lindsay Jibb from Bloomberg Nursing is a UTCSP Scientist currently and Associate Professor Craig Dale is co-Chair of the Education Committee. The UTCSP developed and delivers a 20-hour integrated interdisciplinary pain curriculum (UTCSP-IPC) for pre-licensure health sciences students. Annually, approximately 1,000 students from the Faculties of Dentistry, Medicine, Nursing, and Pharmacy participate in the UTCSP-IPC. Using cases based on real patients, students complete comprehensive assessments of multiple factors that contribute to the pain experience, present comprehensive pain management plans justifying their choices, describe multi-professional and interprofessional strategies for the planning, intervention, and monitoring of pain management outcomes and describe ethical, legal, social, and political issues that may impact on patients' pain management. There is currently some debate on the time commitment required of students for this program, including the potential for a greater reliance on asynchronous, online content delivery.

Sustainable Health System Community of Practice

The Sustainable Health System Community of Practice was established in 2020 in a partnership between the Toronto Academic Health Science Network (TAHSN) and CHS. The current plan is that effective November 2023, the Community of Practice will be supported and strengthened by the anticipated approval of the Collaborative Centre for Climate, Health & Sustainable Care as an Extra-Departmental Unit (EDU) Type C. This new unit will leverage the core strengths of its four founding health science faculties – the Dalla Lana School of Public Health, the Temerty Faculty of Medicine, the Lawrence Bloomberg Faculty of Nursing, and the Leslie Dan Faculty of Pharmacy. With a stated commitment to social justice and innovation in education and research in the Bloomberg Nursing's Strategic Academic Plan, and recognising the critical role nurses must play in sustainable healthcare, Bloomberg Nursing has committed an initial investment of $50,000 annually for three years. These invested funds will be used to support the unit's core administrative staff; funds will also be used to support trainee engagement and the execution of core functions.

Scarborough Academy of Medicine and Integrated Health

As mentioned in section 1.5, SAMIH received final approval from U of T's Governing Council in February 2023. A SAMIH Steering Committee was established in 2022 to provide oversight of the development and operation of SAMIH by coordinating planning and activities between U of T units partnering in SAMIH. The SAMIH Academic Planning Table, also established in 2022, operates under the authority of the Steering Committee and is co-chaired by the Dean of Bloomberg Nursing

and the Dean of UTSC. Six Working Groups, representing participating health sciences Faculties and departments at UTSC, are tasked with development of academic programs, clinical partnerships, operation of clinics (nurse practitioner, psychology and pharmacy), outreach and admissions, research and knowledge translation, and student wellness and experience. SAMIH received funding in 2022 from the Ontario government for expansion of academic programs and $25M from the Orlando Corporation to support the construction of a new building at UTSC. Bloomberg Nursing had previously committed $120,000 to equip the NP-led clinic in the 2022-23 budget and a further $400,000 in the 2023-24 budget. SAMIH is slated to open Fall 2026 with 30 NP students undertaking simulation and clinical placements at the new site annually.

Joint Fundraising Initiatives

Nursing has been engaged in the development and submission of fundraising proposals with Temerty Faculty of Medicine and the Dalla Lana School of Public Health for a number of U of T-wide marquee initiatives and Institutional Strategic Initiatives (ISIs) including Mental Health for Students and Youth, the Novartis Network for Chronic Care at the University of Toronto, and the Institute for Healthy Aging in Community.

9.2 Partnerships with Other Universities and Organizations to Foster Research, Creative Professional Activities and Teaching Programs

Toronto Academic Health Sciences Network

The Toronto Academic Health Sciences Network (TAHSN) comprises the University of Toronto and 14 affiliated healthcare organisations participating in health and biomedical research and in the teaching of undergraduate and graduate health sciences students. The strategic objectives of TAHSN are based on shared leadership in defined areas of research, education, and patient care that: fosters collaboration for increased capacity and output in health and biomedical research and health professions education research; builds an integrated learning environment for patients, staff and learners; develops a regional culture that promotes and enables evidence-based care for all health professions; and stimulates partnership in interprofessional education and care delivery. Four committees are tasked with undertaking work deemed relevant to all TAHSN partners: TAHSN Research, TAHSN Education, TAHSN Practice and TAHSN Medical Affairs. The Dean of Bloomberg Nursing is Co-Chair of TAHSN Practice, a member of TAHSN Education and represents Bloomberg Nursing at the TAHSN CEO table. Strategic priorities for TAHSN Practice in the past year have included undertaking a qualitative research study to understand staff perspectives of adaptive models of care employed in intensive care units during

> The Dean's relationship with the Committee very strong. I have seen this as a leader through two hospital relationships. There is open communication and a spirit of continuous improvement.
>
> - UTQAP TAHSNp Feedback Session

the pandemic, and development of a toolkit and orientation handbook for hospitals for the scope of practice and utilization of clinical externs across TAHSN hospitals.

The partnership with TAHSN was critical during, and subsequent to, the COVID-19 pandemic, particularly in relation to provision of clinical placements for both undergraduate and graduate students. In 2020 the Toronto COVID-19 Hospital Education Table (T-HET) was established under the auspices of the TAHSN Education committee with membership expanded to include other academic institutions that had clinical placement agreements with TAHSN hospitals. T-HET was responsible for supporting learners through coordination of placements, identifying, developing, scaling and adopting guidelines and tools, and facilitating and promoting equity in learning opportunities across the Toronto region. Products of this Table included guidance on PPE and mask fit testing, policies on mandatory vaccination, integration of learners in virtual care, and the gradual re-introduction of group placements in nursing programs at clinical sites. T-HET transitioned in 2021 to deliver on a wider mandate than COVID-19. Most recently a project was commissioned to identify opportunities for improvement of processes relating to nursing placements across the Greater Toronto Area.

Hospital University Nursing Education Committee

The Hospital University Nursing Education Committee (HUNEC) is an educational advisory group (to the Dean) that serves to enhance the educational experience of Bloomberg Nursing students by fostering partnerships between Bloomberg Nursing and its Toronto Academic Health Sciences Network partners as well as other affiliated community agencies. Bloomberg Nursing relies heavily on its clinical agency partners to provide the environment and resources needed to support nursing student achievement. HUNEC members work together to define, understand and enact joint responsibilities for the education and training of undergraduate and graduate students and for the professional development of clinical practitioners and clinical teachers. As well, HUNEC seeks out innovative and collaborative opportunities and partnerships for development of faculty and clinical affiliate staff. This is a productive forum that allows the faculty and its affiliated partners to enable and promote best practices related to clinical teaching and learning for our nursing students.

HUNEC normally meets 5-6 times yearly. The Associate Dean Academic chairs this committee. Academic program directors and the Clinical Education Office staff engaged in student practicum placements within Bloomberg Nursing and key coordinating faculty are members of HUNEC. Each clinical partner agency is normally represented through participation by 1-2 members in the HUNEC forum. While previously limited to partners in downtown Toronto locations, in the last year HUNEC membership has been extended to our partners in community agencies and hospitals in the suburbs to the west, east and north of the city.

Centre for Advancing Collaborative Healthcare and Education

The Centre for Advancing Collaborative Healthcare and Education (CACHE); previously known as the Centre for Interprofessional Education, is a strategic partnership between U of T and TAHSN with the University Health Network as lead hospital and is an Extra Departmental Unit (EDU) Type

C in the Temerty Faculty of Medicine. Participating U of T Faculties, departments, and programs include: MD and post-MD, Nursing, Physical Therapy, Occupational Science and Occupational Therapy, Speech- Language Pathology, Social Work, Pharmacy, Dentistry, Kinesiology and Physical Education, Physician Assistant Program and Medical Radiation Sciences. Nursing contributed approximately $60,000 to overall operating costs of CACHE for 2023-24 based on 230 students participating in CACHE activities. Nursing faculty are members of the InterFaculty Curriculum Committee and elected representatives from the Nursing Undergraduate Society (NUS) participate in the Interprofessional Healthcare Students Association (IPHSA), promoting IPE within Bloomberg Nursing.

Canadian College of Health Leaders

The Faculty of Nursing and the Canadian College of Health Leaders (CCHL) currently have Memoranda of Agreement for the MN HSLA field and DN program. Further detail can be found in the MN and DN sections of the self study.

9.3 Relationships with External Government, Academic and Professional Organizations

Council of Ontario University Programs in Nursing

The Council of Ontario University Programs in Nursing (COUPN) is housed within the Office of Health Sciences in the Council of Ontario Universities (COU). Bloomberg Nursing is one of 14 Schools offering nursing programs in the Province of Ontario and a member of COUPN. COUPN offers a collective voice for university nursing education in Ontario and member universities work together on common issues affecting nursing education and scholarship. The Dean of Bloomberg Nursing is immediate past-Chair of COUPN. The most recent foci of activity have included RN prescribing, expansion of undergraduate nursing programs and clinical placements. Faculty members at Bloomberg Nursing have regularly been recipients of COUPN awards for research and teaching excellence.

Ontario Hospital Association

The Ontario Hospital Association (OHA) established an HHR Working Group in 2022 to address the critical shortage of clinical placements for nursing students. The Dean of Bloomberg Nursing was a founding member of the Working Group. Surveys of both clinical placement providers and academic programs identified limited capacity for clinical placements in the Greater Toronto Area in particular. The OHA continues to lobby the provincial government for a centralised platform to manage nursing clinical placement supply and demand across the province.

Joint Provincial Nursing Committee

The Joint Provincial Nursing Committee (JPNC) is an advisory committee of key provincial nursing organizations and the Government of Ontario. The mandate of JPNC is to advise the government on issues, policy and practice matters, including health human resources aimed at supporting a strong and vibrant nursing workforce to advance the health of Ontarians. The Dean of Bloomberg Nursing is the immediate past Co-Chair with the Chief of Nursing and Professional Practice and Assistant Deputy Minister in the Ministry of Health.

Canadian Association of Schools of Nursing

The Canadian Association of Schools of Nursing (CASN) represents all universities and colleges in Canada that offer part, or all, of an undergraduate or graduate program in nursing. For most of Canada and all of Ontario, CASN is responsible for commissioning and conducting the reviews of academic programs leading to eligibility for the designation of Registered Nurse and Nurse Practitioner. Faculty have been engaged in numerous working groups including Nurse Educator Interest Groups, the Standing Committees on Research and Scholarship and the Board of Directors. Faculty members at Bloomberg Nursing have regularly been recipients of CASN awards for teaching and research excellence. The BScN program is next due for accreditation in 2025.

Canadian Black Nurses Alliance

The Canadian Black Nurses Alliance (CBNA) established a Chapter at Bloomberg Nursing in 2023. Bloomberg Nursing is also a Platinum Plus member of CBNA to co-create a new equity, diversity, inclusion and anti-racism strategy and develop action plans for recruiting and retaining diverse faculty, staff and students. In Nurses Week 2023, Bloomberg Nursing sponsored a Black Voices in Nursing (BVIN) event at U of T. Through the activities of the Chapter Bloomberg Nursing aims to connect Black nursing students to Black nursing leaders for guidance and mentorship. Bloomberg Nursing aims to build an environment in which Black nursing students can connect, network, and thrive in their academic program and emerge as strong nursing leaders.

Canadian Black Nurses Alliance launches U of T chapter at Lawrence S. Bloomberg Faculty of Nursing

'The ultimate goal is to foster a sense of community, growth and education'

U of T News

9.4 Social Impact and Outreach

The fifth pillar of the Bloomberg Nursing's Strategic Academic Plan 2017-2022 is "Engaging with our community of friends, alumni and donors to contribute to, and advocate for, our success as an internationally recognized leader in health higher education." The Research and Advancement Offices of Bloomberg Nursing, with the support of the Senior Communications and Media Relations

Officer, regularly promote the activities of the Faculty to the public. These activities include Bloomberg Rounds (see Section 8 Research), the annual public Splane Lecture, and Nurses Week.

The Verna Huffman Splane Lecture is made possible through a generous gift of Dr Richard Splane and the Splane family. Verna attended the School of Nursing at the University of Toronto, obtaining a Diploma in Public Health Nursing in 1939 and became Canada's first Chief Nursing Officer at what is now Health Canada. Splane lecture topics have included:

- 2017: Politics and Policy in Global Health: Lessons Learned from Verna Splane;
- 2018: The Social Epidemiology of Gun Violence and the Role of Public Health;
- 2020: Youth Homelessness and Equitable Socioeconomic Inclusion: A Critical Walk Through the Social Determinants of Health;
- 2021: Nursing Leadership in the Age of Climate Action: Health Impacts of Vector-Borne Infectious Diseases; and
- 2022: We are Nurses: A Global Perspective on Nursing, Healthcare and the Economy.

The 2022 Splane lecture was delivered by Professor Annette Kennedy, the former President of the International Council of Nurses and the first nursing recipient of a U of T Honorary Degree.

Bloomberg Nursing utilizes celebrations of Nurses Week every year to promote the achievements of Bloomberg Nursing and to showcase the impact of the profession on health nationally and internationally. Public lectures have focused on the opioid epidemic, ending hallway healthcare, primary care and public health nursing, the nursing workforce and the pandemic and global health challenges. Attendees have included faculty, staff, students, alumni, clinical partners, donors and the public. Print and social media are routinely utilized to promote education and research achievements in the Faculty.

QUESTIONS FOR REFLECTION

What metrics should be used in the next Faculty Strategic Academic Plan to demonstrate our societal impact?

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10. ORGANIZATIONAL STRUCTURE

10.1 Governance Structure

The Bloomberg Nursing Faculty Council and its Standing Committees make decisions about academic policies that impact student learning, and student, faculty and staff working experiences. Academic policy sets out the principles for, general directions of, and/or priorities for the teaching and research activities of Bloomberg Nursing. The Council also acts in an advisory capacity, tendering advice to the administration of Bloomberg Nursing on operational matters.

Council's specific responsibilities include determining the standards of student admission, awarding scholarships and bursaries, policies related to student progress and standing, and approving proposals of new academic programs and major modifications to existing academic programs (the latter 2 subject to approval by the University's Governing Council).

Faculty Council is composed of all teaching staff, one administrative staff member elected by and from the administrative team, 2 undergraduate students elected by the Nursing Undergraduate Society, 5 graduate students (3 MN and 2 PhD) elected by the Graduate Nurses' Student Society, 2 alumni representatives from the Faculty Alumni Association, and up to 2 Emeritus Professors appointed by the Dean. The Council also has 15 ex-officio voting members, 3 of which are external stakeholders appointed by the Dean.

The membership and terms of reference for each Committee are defined in the Council By-Laws. (See Appendix 14 for the Faculty Council Constitution and Appendix 15 By-Laws of the Faculty Council.

The Council elects annually, at its final meeting of the year and from among its members, a Chair and Vice-Chair for the succeeding year. Administrative and alumni representatives are elected for a 2-year term. All other constituencies elect/appoint their representatives each year, except for teaching staff, who are all members of Faculty Council if they hold an academic appointment of 50% or more. There are normally 4 regular meetings of the Council each academic year.

The Constitution was last amended and approved by the Faculty Council in 2017 and approved by the Executive Committee of the University of Toronto Governing Council in 2018. The by-laws were last amended and approved by Faculty Council in 2021 and do not require Governing Council approval. The records of Faculty Council meetings are maintained by the Secretary of Faculty Council and are publicly available on the [Faculty's website](#).

10.2 Organizational Structure

Bloomberg Nursing is a single department Faculty. The Dean is a full-time academic member of Bloomberg Nursing and has ultimate responsibility for the overall direction of Bloomberg Nursing and for the allocation and management of its resources, in particular authority over the budget, appointments, and promotions. The senior management team is comprised of the following:

- Dean
- Associate Dean, Research and External Relations
- Associate Dean, Academic Programs
- Director, MN Program
- Director, Undergraduate Program
- Director, Doctoral Program

- Chief Administrative Officer
- Director, Office of the Dean
- Director, Advancement
- Executive Director, Centre for Professional Development
- Director, Technology Services
- Director, Clinical Education Office

The strength of this current leadership team is a shared understanding of the goals of Bloomberg Nursing. There is a strong sense of commitment and collegiality from within this group towards fulfilling the Faculty's mission. As flagged in other relevant sections of this self-study there may be challenges ahead as Bloomberg Nursing commences the search for a new Dean and considers the structures that may be required to support the expansion of programs beyond the St George campus.

10.3 Administrative Staff

Bloomberg Nursing's appointed administrative complement includes 9 Professional & Managerial (PM) non-unionized staff members (Chief Administrative Officer; Assistant Dean & Registrarial and Student Services; Director, Office of the Dean; Director, Clinical Education Office; Finance Director; Director, Technology Services; Research Manager; Director of Advancement and Dean's Executive Assistant), and 34 unionized staff (equivalent of 33.5 FTE) including part-time and full-time members of the 1998 United Steelworkers of America (USW) bargaining unit (Table 90).

In 2018 an administrative staff review was undertaken by Human Resources to improve staff alignment and to better manage resources based on the changing needs in the Faculty. After the review, 5 of 8 administrative manager positions were altered but the overall headcount remained unchanged. Over the past 5 years, the administrative staff complement has grown by 30.5%, or 9.95 FTE, to respond to divisional needs. Additional complement was added to our Clinical Education Office to support the growing number of clinical placements that need to be secured due to increased enrolment and the added complexity in securing those placements in the COVID-19 pandemic context and its aftermath. Additionally, staff were added to support faculty members with their research grant applications and our advancement activities. In 2021 the faculty: staff ratio was 1:1.02 whilst the average across the institution was 1:0.96. Table 90 provides a summary of the staff complement between 2018-19 and 2022-23. Appendix 20 illustrates the Faculty of Nursing's Organizational Chart.

Table 90. Staff Complement: Full-Time Equivalent (FTE)

	2018-19	2019-20	2020-21	2021-22	2022-23
Administrative FTE					
PM FTE	7.00	8.00	9.00	9.00	9.00
USW FTE	25.55	23.50	24.90	28.20	33.50
Total	32.55	31.50	33.90	37.90	42.50

10.4 Advancement Office

The Advancement team at Bloomberg Nursing is tasked with leading and managing Bloomberg Nursing's advancement programs with the goals of increasing fundraising revenues and alumni engagement. The Advancement team works closely with academic leadership to:

- Translate academic priorities into compelling funding and alumni engagement propositions to advance Bloomberg Nursing's academic, institutional and strategic priorities;
- Represent Bloomberg Nursing's mission and vision to external constituents; and
- Identify opportunities for engagement and philanthropy.

Bloomberg Nursing and DUA - The University of Toronto operates a decentralised system supported by a central Division of University Advancement (DUA). DUA provides support to Faculties in the form of prospect research, campaign collateral materials, legal advice, preparation of donor agreements, and talent management. Bloomberg Nursing is responsible for hiring their Advancement staff in consultation with, and with assistance from, DUA.

Director of Advancement - The Director of Advancement is responsible for the development and execution of advancement plans and strategies to accomplish campus fundraising and alumni engagement goals, as well as related personal and team results, in close consultation with the Dean and the Vice President, Advancement. The Director is accountable to the Dean on the development and fulfillment of advancement plans and strategies that support the Bloomberg Nursing's academic mission. The Director has a functional reporting relationship to the Vice-President, Advancement, or delegate (typically the AVP Divisional Relations) that ensures alignment with, and accountability to, University-wide standards, guidelines, and procedures that protect academic integrity and promote best practice, excellence, and equity in advancement.

Advancement Team – Bloomberg Nursing has 3.0 FTE in the Office of Advancement; the Director of Advancement, Advancement Coordinator, and Alumni Relations, and Annual Development Fund Officer. Appointment of a Senior Development Officer (Leadership Annual Giving and Planned Giving) has been on hold for 2 years due to Faculty budget constraints and frequent turnover in the Director of Advancement role that would impact onboarding of new staff.

Student Awards - Student awards remain critical to Bloomberg Nursing's recruitment of the best and the brightest, with $1.5M in funds awarded every year to both undergraduate and graduate students. Bloomberg Nursing's commitment to recruiting students from equity-deserving populations is supported by specific Black and Indigenous student awards in both the undergraduate and graduate programs.

Advancement Campaigns and Bloomberg Nursing – University leadership and the DUA set university- wide fundraising goals and DUA creates campaign themes to advance those goals. Bloomberg Nursing works with DUA to set fundraising goals for Bloomberg Nursing and aligns our advancement campaign with the U of T campaign.

- Boundless Campaign - The previous *Boundless* campaign began in May 2005 and ended in December 2018 with Bloomberg Nursing pleased with the achievement of our overall philanthropic gifts and grants totalling $28M. Bloomberg Nursing received the largest gift from Dr. Lawrence S. Bloomberg for whom the Faculty was named in 2007.
- Defy Gravity Campaign - The current *Defy Gravity* campaign launched in 2019. The campaign seeks to raise $4B for the University's highest priorities and Bloomberg Nursing has an ambitious goal of raising $48M by campaign close in 2029.

Our campaign priorities are approved by the Provost and student support continues to be a focus with a goal of raising $5M in endowed funds to attract students; in particular those from underrepresented groups. Bloomberg Nursing has also drawn on our core values of scholarship and critical inquiry, innovation and creativity, interdisciplinarity and collaboration, and social justice, in committing to raising endowed funding for a Centre for Social Justice in Nursing and research chairs in the fields of Health Services and Artificial Intelligence.

Alumni Engagement - The University-wide campaign includes a goal for alumni engagement; seeking 225,000 alumni to get involved in various activities. With 11,000 alumni, Bloomberg Nursing has always been successful in recruiting alumni volunteers to act as mentors to our students and serve as ambassadors for Bloomberg Nursing. We have been developing several strategies to mobilise that community to invest in the future of nursing leadership, including the newly established Bloomberg Nursing Leaders Circle who will engage alumni to create a $1M endowed award for PhD and DN students with matching funding from Bloomberg Nursing.

11. FINANCIAL STRUCTURE

12. LONG RANGE BUDGET PROJECTIONS: CHALLENGES AND OPPORTUNITIES

The continuation of a tuition freeze, a flat operating grant and escalating costs due to inflationary pressures presents financial challenges for Bloomberg Nursing moving forward. In the past five years, enrolment and UF allocation growth were instrumental in offsetting downward pressure on our two main revenue streams. As we move into the next five-year budget cycle, it will be challenging to continue to rely on enrolment and UF allocation growth to fund activities and objectives of Bloomberg Nursing.

Over the longer term, enrolment growth cannot be relied on to offset the stagnant domestic tuition rates and operating grant. There are limits to the amount of enrolment growth Bloomberg Nursing can absorb. Challenges with recruiting new faculty and availability of clinical placements are key

factors limiting enrolment growth. Other factors that also limit growth are competition in the market from other universities and colleges and the cost of living in the Toronto area.

The Blue Ribbon Panel on Financial Sustainability in the Post-Secondary Education Sector is charged with providing advice and recommendations to the Ministry of Colleges and Universities to improve the financial sustainability of the post-secondary education sector in Ontario. The Blue Ribbon Panel report was published on November 15, 2023, and we are awaiting the government's response to the Panel's recommendations. It is hoped that the recommendations of the Panel would provide new opportunities for universities to generate the revenue needed to advance their academic missions by lifting the tuition freeze and increasing government investment in universities.

There are some opportunities on the horizon to raise new revenue from fundraising. A portion of our budget surpluses have been set aside to provide matches to endowed gifts for Chairs and student financial aid. Endowments for Research Chairs will support faculty recruitment efforts and supplement faculty salary and benefits costs. Endowments that generate student aid funding will help support students in financial need so that funding does not present a barrier to access to the nursing profession.

Finally, expansion to the Scarborough campus presents an exciting opportunity to reach new student populations and communities while, also introducing some level of financial risk. Strengthening the relationship with Scarborough Health Network and building a clinic at SAMIH with a teaching and learning space that facilitates the development of advanced health assessment, physical examination, and therapeutic planning in an interprofessional environment will help reduce some pressure we are experiencing with securing clinical placements. At the same time, deciding on the optimal business model for the operation of the clinic will be essential to ensure future self-sustainability. The lessons learned from the Scarborough expansion can hopefully be leveraged to help inform a possible future expansion to the Mississauga campus.

13. INTERNATIONAL COMPARATORS

Bloomberg Nursing has ranked in the Top 10 Nursing Faculties (QS Rankings by Subject) between 2017 and 2023, apart from 2021, when we were ranked 12th (Table 93).

Table 93. Lawrence Bloomberg Faculty of Nursing QS Ranking by Subject 2017-2023

Ranking Criteria	Year (Rank)						
	2017 (6)	2018 (2)	2019 (7)	2020 (8)	2021 (12)	2022 (10)	2023 (7)
Overall Score	89.8	92.9	89.2	89.5	89.3	88.8	89.9

Academic reputation	85.9	91.8	78.1	82.3	80	79.8	81.1
Employer Reputation	78.6	83.9	92.1	86	81.6	89.7	90
H-Index Citations	93.7	96.4	97.4	99.2	97.2	90.4	91.1
Citations per Paper	93.4	93.6	91	88.3	93.1	95.95	97.3

The position of Bloomberg Nursing relative to the top 10 nursing faculties in the world according to QS Rankings by Subject is shown in Table 94. Three of the faculties in the top 10 are at private universities in the US; University of Pennsylvania, Johns Hopkins University and Yale University, with Bloomberg Nursing the 4th ranked Faculty at a public institution, and 2nd in Canada after University of Alberta.

Table 94. Ranking and scores of Top 10 Nursing Faculties in the World 2019-2023 (QS)

University		Rank	Overall Score	H-Index Citations	Citations Per Paper	Academic Reputation	Employer Reputation
University of Pennsylvania	2023	1	97.2	97.3	93.5	100	100
	2022	1	96.1	95.2	92.8	100	96.8
	2021	1	95.5	97.2	94.5	100	79.9
	2020	1	95.3	99.6	90.7	100	81.6
	2019	1	95.4	100	92.4	100	76.3
King's College London	2023	2	97.1	100	96.5	96.7	91.3
	2022	2	94.7	96.2	95.7	96.4	82.1
	2021	2	95.5	97.2	97.1	96	96.8
	2020	2	94	98.4	91.1	97	80.3
	2019	2	91	94.7	93.9	86.8	83.6
Johns Hopkins University	2023	3	94.2	98.3	91.4	91	99.7
	2022	3	94.3	100	91.5	89.9	98.8
	2021	3	95.5	99.4	93.5	89	74.6
	2020	3	91.6	100	88.5	85.9	85.9

University		Rank	Overall Score	H-Index Citations	Citations Per Paper	Academic Reputation	Employer Reputation
	2019	4	90.5	99.3	87.5	86.4	85.2
University of Washington	2023	4	91.3	93.2	91.5	95.1	73.8
	2022	4	91.6	94.8	92.4	93.6	73.7
	2021	4	93.2	99.1	96.8	90.1	73.8
	2020	4	91	98.4	92.2	87.9	74.9
	2019	7	87.4	88.1	93.5	88.3	71.3
University of Alberta	2023	5	90.7	93.6	97.4	83.9	81.9
	2022	9	89.3	92.3	95.4	81.3	86.2
	2023	6	90	91.2	98.1	86.8	71.2
	2022	5	91.3	91.5	98	89.3	76.6
	2021	9	90.8	92.5	98.7	89.2	67.1
	2019	5	90.5	92.8	93.1	89.6	78.3
	2019	5	90.4	90.5	94.9	89.9	77.6
University of Toronto	2023	=7	89.9	97.3	91.1	81.1	90
	2022	10	88.8	95.9	90.4	79.8	89.7
	2021	12	89.3	97.2	93.1	80	81.6
	2020	=8	86	99.2	88.3	82.3	86
	2019	7	89.2	97.4	91	78.1	92.1
The University of Manchester	2023	=7	89.9	88.6	93.9	87.4	88.9
	2022	6	91	90.8	93.7	89.2	88.9
	2021	5	92.3	91.7	95.2	91.8	87.1
	2020	=8	89.5	88.2	89.5	91.1	88.7
	2019	3	91.2	90.5	91.4	92.6	88
UNC Chapel Hill	2023	9	89.7	94.4	94.6	82.9	81.4
	2022	8	89.6	95.5	97.3	79.1	79.9

University		Rank	Overall Score	H-Index Citations	Citations Per Paper	Academic Reputation	Employer Reputation
	2021	8	99.5	100	99.	77	81
	2020	10	89.4	99.6	94.2	77.8	79.
	2019	Not in top 10					
Yale University	2023	10	89.5	92	92.4	81	98.7
	2022	7	90.7	91.9	96.9	80.2	100
	2021	7	91.2	94	97.5	80.5	96.1
	2020	6	90.1	94.2	91.8	82.4	96
	2019	9	93.9	94.6	99.9	95.8	89.4

Bloomberg Nursing has a total of ~750 students which is smaller than that of our comparators where the student body ranges in size from 1,200 (Alberta) to 2,000+(Manchester). We have a commensurately smaller faculty complement than our peers; ~40 faculty vs ~60 (Washington), ~95 (JHU), and upwards. We deliver a similarly diverse range of programs to that of our peers; an entry−to-practice BScN, Master's programs including Nurse Practitioner and specialty practice, and the PhD and professional doctorate (DN) programs. It is important to note that unlike our US peers, our DN program is not designed as a terminal degree for nurse practitioners and hence the student cohort is much smaller.

The Blue Ridge Institute for Medical Research provides annual rankings of NIH funding to individual researchers and academic institutions. 2022 rankings for NIH funding awarded to US peer Schools of Nursing and comparable Tri-Council funding to Bloomberg Nursing are shown in Table 95.

Table 95. 2022 QS Rankings and NIH funding awarded to US peer institutions and Tri-Council funding to Bloomberg Nursing

Institution	QS Rank 2022	BRIMR Rank 2022	Research Funding (USD) Millions
University of Pennsylvania	1	2	18.2
Johns Hopkins University	3	11	5.8
University of Washington	4	6	8.8
University of Toronto	10		4.3*
UNC Chapel Hill	8	19	4.1
Yale University	7	34	1.6

*CAD5.846M = USD4.302M 1CAD=0.735USD

Taken together, the comparator data presented here, together with the publication and citation data presented in the Research section of the self-study, suggests Bloomberg Nursing, although smaller than peer institutions, is highly productive in terms of research outputs and funding awarded, and delivers academic programming desired by both graduates and future employers to support the profession.

Appendices

Appendices
Previous review report, administrative response(s), and Final Assessment Report and Implementation Plan
Appendix 01_2017_Lawrence Bloomberg Faculty of Nursing Self Study Final
Appendix 02_2017_Provostial Review of the Lawrence Bloomberg Faculty of Nursing Report
Appendix 03_2017_Lawrence Bloomberg Faculty of Nursing Administrative Response to Review
Appendix 04_2017 Lawrence Bloomberg Faculty of Nursing Final Assessment Report and Implementation Plan
Appendix 05_Lawrence Bloomberg Faculty of Nursing 2017 UTQAP Status Report - April 2022
Documents required to provide context for the evaluation of "Program objectives and key features"
Appendix 06_Strategic Plan 2017-2022 Shaping Tomorrow's Leaders Today
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Appendix 08_Black Health Equity WG Report and ToR 2022
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Appendix 17_LBFON Doctor of Nursing - New Program Proposal
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Appendix 20_LBFON Org Chart 2023

Appendix 21_CV Tenure Stream Faculty

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Service Statements

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Appendix 24_Student Services Statement

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