

History of BC Practical Nursing Curriculum

- **1949-1970's** - practical nursing education program offered in B.C. emphasized skills acquisition and instructors administered final exams for PN students. (CLPNBC website). Twelve month program.
- **1973** Program shortened to 10 months
- **1977 – onward** – graduates of PN programs have been required to successfully complete a national examination in order to be registered in B.C. Previously called the Canadian Nurses' Association Testing Services (CNATS) the exam is now called the Canadian Practical Nurses Registration Exam or CPNRE.(CLPNBC website)
- **1989** – A major project assessing the future of LPN's in the province of BC was launched. The results of this report strongly supported a broader role for LPN's in the health-care system. AS a result of the suggestions in the report, a provincial curriculum was developed to incorporate the themes, trends, and issues that are reflective of the current healthcare system in BC. (CLPNBC website)
- **1993** - New Caring Curriculum was introduced to Cranbrook and VCC, followed by adoption of at Okanagan College and Malaspina University College (now Vancouver Island University). At that time there were only 4 colleges offering PN programs. The curriculum was created to be 15 months but lengthening the program was not supported by the Ministry so the 15 month curriculum was squeezed into 12 months.
- **1997**- Layton Report commissioned by Ministry predicted that LPN utilization would decrease and that utilization in acute care was not expected so it was recommended that the curriculum be scaled back to be 12 months so jt was more manageable for students.
- **1998** - Content was reorganized, clinical time was decreased but no content was removed.
- **2000** -CLPNBC published a small booklet of the entry-level competencies which indicated a need to revise the curriculum and lengthen the program. Ministry refused to fund revision.
- **2002** –PN Articulation Committee identified several areas not being covered in enough detail. Not all colleges (now there were 7 public colleges offering programs) are in support of lengthening the program. Discussion begins re lengthening.

- **2003** – Now 9 public programs and 7 private for-profit programs and 3-4 more private programs coming on board. The 1997 predictions have not proved to be accurate. There is an increased demand for LPNs and increasing acuity of the patient in both acute and long term care. Other provinces have revised and lengthened their programs, .Sask, Man, Ont, Que are all longer than 12 months.
- **2004** -The Nursing Directorate convenes a meeting of educators, practitioners and CLPNBC to align what is happening in the workplace to the written entry-level competencies. At that meeting the CLPNBC booklet containing the entry-level competencies is criticized as being too vague. CLPNBC promises to issue a clear entry-level competency document. The employers really want a “skills list”.
- **2005** - CLPNBC invites small subcommittee from Articulation Committee to meet and develop a clear entry-level competency document. A document is created using the Standards of Practice as a framework. However, it is not published as entry-level competencies in a standards framework but just as standards of practice and indicators document. No one realizes that this is an entry-level competency document with many indicators.
- **2005** -The national licensing exam’s (CPNRE) new blueprint is available. The articulation committee is concerned about the gaps in BC curriculum against the new national licensing exam competencies. The Health Sciences Deans fund a small revision to help BC curriculum meet the national exam competencies. The program remains the same length.
- **2005** -The CLPNBC purchases a document “Continuing Competencies” from Alberta Ministry of Health. Focus meetings are held around the province with practitioners to confirm that these continuing competencies are a reflection of current practice. The flaw that no one seems concerned about is that these are continuing competencies not entry-level competencies. A focus group of educators is also consulted but most of the focus group members are new faculty from the private colleges with little experience in curriculum development and knowledge of competencies. A draft of the Alberta continuing competencies are distributed to the schools. The schools find many gaps and conclude that they can not meet these competencies with the existing curriculum. Funding for revision is again requested. However, the Ministry of Health does not feel that these are true entry-level competencies and there are implications that changes will be needed to the Health Professions Act. CLPNBC is reluctant to change the document even though it is not an entry-level competency document.

- **2006** - A meeting of schools, employers, LPNs, and Ministry of Health and Advanced Education is facilitated to discuss the competency model that the CLPNBC wishes to use (the Alberta Continuing Competencies). There is much criticism of the document at this meeting. Key issues are identified and the Alberta “Continuing Competencies” document is to be revised.
- **2007** - Revision of Alberta document is distributed to employers and schools but the project is put on hold as Health Professions Act is not being opened. CLPNBC does not recall the ones that have been distributed to employers. Curriculum revision still not approved by the Ministry of Advanced Education. A continuing struggle for a clearly worded entry-level document. . By now all provinces are using a longer curriculum. BC is the only 12 month program. However, BC grads are successful in the new 2007 national licensing exam. This works against the request for revisions and lengthening the program.
- **2008** – McKnight Report commissioned by Ministry of Health to compare current curriculum with the Alberta “Continuing Competency document” and see what the gaps were. The report stated that there were gaps and recommends a revision to current curriculum. However, there is no action on the report as in the same time CLPNBC experienced a change in management and the competency document is found to be in need of a major change and another version of entry-level competencies is drafted.
- **2009** - New entry-level competencies are at Ministry of Health , the HPA still needs to be updated and the question of a longer program I still debated due to financial implications for Ministry of Advanced Education

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