

TEMPLATE for EXPEDITED REVIEW

Faculty: Faculty of Health

Department: School of Nursing

Degree Designation: Post Master's Diploma

Program: Primary Healthcare Nurse Practitioner

Location: School of Nursing; Health, Nursing, and Environmental Studies Building

Intended Start Date: September 1, 2025

The Expedited Approval process should be used where there are proposals for:

- A new for-credit graduate diploma (Types 2 and 3 only)
- A new standalone degree program arising from a long-standing field in a master's or doctoral program that has undergone at least two Cyclical Program Reviews and has at least two graduating cohorts (See Guidance).

Universities may also choose to use this Template if they opt to submit a Major Modification to the Quality Council for review. While not required, this option might be helpful should a university wish to promote the fact that it has received the Quality Council's approval for the proposal and/or for a university that wishes to benefit from the external oversight this Protocol provides. If doing so, the Template may require further adaptations accordingly, but minimally should address the following criteria:

- Proposed major modifications should provide a brief rationale for the changes, as well as:
 - An assessment of the impact of the proposed modification on the program's students;
 - Input from current students and recent graduates of the program considered as part of the development of the proposal;
 - A statement on the way in which the proposed major modification will improve the student experience; and
- When changing the mode of delivery to online for all or a significant portion of a program previously delivered in person, it is strongly recommended that the criteria detailed as part of the Process for the Protocol for Major Modifications (Program Renewal and Significant Change) additionally be addressed.

1. Program Overview

1.1 Provide a brief description of the proposed program.

Nurse Practitioners (NPs) are Registered Nurses (RNs) who have completed a Bachelor of Nursing or a Bachelor of Science in Nursing and have completed a certain number of years of providing clinical care, who then go on to complete additional training. Being registered with our Ontario regulatory body (College of Nurses) allows NPs to complete additional “controlled acts,” which include ordering and interpreting diagnostic testing, and prescribing medication and other treatments. Over the last few decades, the scope of NPs has expanded tremendously, and NPs now function autonomously in environments such as primary care/primary health care¹, hospitals, and long-term care, across all specialities, caring for patients of all ages. NPs do not need to be overseen by other types of clinicians unless practicing outside of their scope with medical directives (which is rare). Like family physicians, but unlike most physician specialities, NPs trained in primary healthcare can care for all populations, in any practice environment.

In 1995, The Council of Ontario University Programs in Nursing first established the Primary Health Care Nurse Practitioner (PHCNP) program. Currently, York University delivers the PHCNP program as a part of a consortium of nine University Schools of Nursing in Ontario (<https://np-education.ca/about/program-overview/>). In Canada, new NPs must be master’s prepared. The School of Nursing at York University currently offers the Master of Science in Nursing (MScN)-Primary Health Care Nurse Practitioner (PHCNP) Program as a combined program (combined as two components: 1. A master’s degree and 2. The NP component). However, to allow for applicants with previous master’s degree to pursue the NP program in Ontario (without needing to repeat a second master’s degree), several Schools of Nursing, which are a part of the nine-school consortium, began offering a Post-Master’s Diploma. **Thus, we propose to introduce a Post-Master’s Diploma with the identical curriculum, content, and learning objectives of the current NP program that York already delivers as a part of the MScN-PHCNP program, but without the MScN courses. The PHCNP curriculum is developed as a part of the consortium, and as a member of that consortium, York University School of Nursing participates in, but does not solely create or modify its content.**

2. Objectives of the Program (QAF 2.1.2.1)

2.1 Describe the program’s objectives (see definition and guidance from Quality Council).

The program objectives are set out by consortium, and are defined as follows:

The PHCNP program is built on a philosophy of practice-based and self-directed learning, rather than on a traditional, didactic approach. Learners can expect to engage in a significant degree of self-guided and peer-supported learning, including working through online learning modules and case studies; navigating, reading, and interpreting online resources and textbooks;

¹ Primary care and primary healthcare/health care should be considered synonymous within this proposal – as the consortium, government, regulatory bodies, and clinicians, all use these terms interchangeably.

developing and monitoring their own clinical learning plans; and preparing for and engaging in seminars and labs with peers and instructors. Students will engage in a total 731 hours of clinical placements as they progress through their five clinical courses. Each PHCNP university site has its own clinical placement catchment area, and placement coordinators for each university organize student placements within the university-specific area. Placements include primary care, acute care, long-term care, as well as specialty and sub-specialty medicine. All these activities already occur at York University.

Future applicants must be Bachelor-prepared Registered Nurses with the College of Nurses of Ontario, with 3640 hours of experience as a Registered Nurse in the previous 5 years and have a master's degree in a related field. Ultimately, the program will prepare learners to write a national board certification exam to be registered as Primary Health Care Nurse Practitioners.

We encourage the committee to review an updated recruitment video created by our program as a backgrounder:

<https://www.yorku.ca/gradstudies/nursing/programs/phcnp/>

2.2 Describe the degree nomenclature given the program's objectives.

Post-Master's Diploma - Primary Health Care Nurse Practitioner

2.3 Describe the consistency of the program with the institution's mission and academic plans.²

The Primary Health Care Nurse Practitioner program enables students to provide individuals, families, groups and all types of communities with services such as health promotion, disease and injury prevention, acute and chronic disease management, rehabilitation and support. As such, the goal of this program is to build primary health care professional capacity. The plan is to launch this new Post-Master's Diploma program to respond to a much-needed direction that expands access for potential masters-prepared Registered Nurse applicants to PHC NP education. It is congruent with York's vision to provide a broad sociodemographic of students with access to a high-quality education at a research-intensive university that is committed to enhancing the well-being of the communities we serve and values of social justice and equity. Recent estimates suggest that approximately 2.3 million Ontarians do not have a primary care provider, with a predicted 4.4 million without primary care by 2026. This program will expand the diversity of applicants that can train at York University to become NPs, and ultimately lead to the expansion of the NP workforce one year earlier. These NPs will serve individuals and families by enhancing their access to primary health care—a key determinant of health. The program is also aligned with the Faculty of Health's mission to “positively influence health, wellness, and their determinants through leading-edge education, research, and practice. This program is congruent with the Sustainable Development Goals (SDGs) #3 Health, #4 Quality Education, and #10 Reduced Inequalities. York University already delivers one of the most

² This can include the [2020-2025 University Academic Plan](#), the [2018-2023 Strategic Research Plan](#), the [UN Sustainable Development Goals \(SDGs\)](#), [A Framework and Action Plan on Black Inclusion](#), the [Indigenous Framework for York University](#), and others, along with Faculty plans and frameworks.

diverse NP programs in the consortium and considers self-identification in the application process and funding allocation in line with the Indigenous Framework and Black Inclusion Strategies at York University. By way of the placements being in the York University catchment, clinical placements serve very diverse communities including Black and Indigenous communities, newcomers and Immigrants, people who use drugs, LGBTQ2S+, those experiencing homelessness, the frail, and home-bound elderly, those in long-term care, among others. York University is also entering an exciting partnership with the Government of Nunavut such that York NP students can complete clinical placements in the territory. The funding for these placements is the result of the Federal government's recent investment in recruitment for the territory.

3. Program Requirements ([QAF 2.1.2.2](#)) and Learning Outcomes

3.1 Identify the program requirements.

The PHCNP curriculum is mapped to the competencies as outlined by the College of Nurses of Ontario. The program consists of seven courses delivered through the consortium, with educators in the role of facilitators. The program is delivered synchronously and draws largely on self-directed case-based learning. This is the most appropriate for learners at this level who not only already have a graduate degree, but who will need to utilize self-directed learning for the entirety of their clinical career. All courses are graduate-level courses, and there is no research option. Of the seven courses, two are delivered at the provincial level with instructors who are not employed through York, and five are delivered on campus, by York educators. This model has been used since the inception of the consortium. As the format is not didactic, students are responsible to determine which specific content they would like to cover in class, as much of the content also needs to be learned independently, so students are asked to prioritize content for discussion. There is also a significant experiential component where students learn how to complete focused physical clinical exams using simulated patients at the level of a primary care provider. For those who already hold a master's degree, this program will expedite the training of NPs in Ontario and is heavily supported by the Ministry of Health and their desire to increase primary care capacity.

The full-time option for this program will be delivered over 11 months. This is in line with the current delivery of the Post-Master's Diploma program at other institutions, and all course offerings, and evaluations are synchronized across the province. The part-time option will be delivered over 23 months, also in line with pre-existing course options.

3.2 Identify the Program Learning Outcomes.³

³ Ideally, a program would have 8-12 [Program Learning Outcomes \(PLOs\)](#) that clearly reflect how the program meets Ontario's [Degree Level Expectations](#). Support for visioning, defining, and mapping your PLOs can be found in the [Office of the Vice Provost Academic](#).

The program learning outcomes (already developed and identical to the current combined MHS Sc PHCNP program delivered at York) are:

1. Integrate NP practice experience with a Master's level of theory, diagnostic reasoning, and related knowledge, in collaboration with the client and health care team to meet the primary health care needs of residents in Ontario.
2. Apply and disseminate knowledge and collaborative research activities to embed evidence into practice.
3. Practice safely, ethically, competently and with integrity as an entry level NP within the primary health care area of specialty and within NP-PHC role, scope of practice, competencies, standards, and regulatory framework specific to the College of Nurses of Ontario.
4. Show effective communication, collaboration and consultation skills with the health care team and clients.
5. Demonstrate intra- and interprofessional competencies related to practice, teaching and scholarship.
6. Enact PHCNP program's philosophy and concepts including advanced nursing practice, primary health care, scholarship sustained practice, relationship-centered practice, and collaborative practice.
7. Demonstrate advanced nursing leadership competencies such as acting as an agent of change, advocating for primary health care policy and health services changes, resolving conflicts, and acting or addressing professional and client-related ethical issues.
8. Understand and recognize legislative and political forces that drive health policy in order to manage the interaction between clients, systems of care, and primary health care outcomes.

3.3 Describe and/or map how your Program Learning Outcomes map onto Ontario's Degree Level Expectations.

Ultimately, graduates of this program will meet the Entry-to-Practice Competencies for Nurse Practitioners as set out by the College of Nurses of Ontario. Students will also be eligible to write the Family Practice/Primary Care National Nurse Practitioner board certification examination in Canada and the United States. The College of Nurses of Ontario accepts both towards registration as an NP in Ontario.

Master's Degree Level Expectations:

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, field of study, or area of professional practice.

1. Integrate NP practice experience with a Master of Nursing level of theory, diagnostic reasoning, and related knowledge, in collaboration with the client and health care team to meet the primary health care needs of residents in Ontario

Research and scholarship: A conceptual understanding and methodological competence that: a) enables a working comprehension of how established techniques of research and inquiry are used to create and interpret knowledge in the discipline; b) enables a critical evaluation of current research and advanced research and scholarship in the discipline or area of professional competence; and c) 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: a) development and support of a sustained argument in written form; or b) originality in the application of knowledge.

2. Apply and disseminate knowledge and collaborative research activities to embed evidence into practice.

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.

3. Practice safely, ethically, competently and with integrity as an entry level NP within the primary health care area of specialty and within NP-PHC role, scope of practice, competencies, standards, and regulatory framework specific to the College of Nurses of Ontario.

Professional capacity / autonomy: a) The qualities and transferable skills necessary for employment requiring: i) exercise of initiative and of personal responsibility and accountability; and ii) decision-making in complex situations; b) The intellectual independence required for continuing professional development; c) The ethical behaviour consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; and d) The ability to appreciate the broader implications of applying knowledge to particular contexts.

6. Enact PHCNP program's philosophy and concepts including advanced nursing practice, primary health care, scholarship sustained practice, relationship-centered practice, and collaborative practice

7. Demonstrate advanced nursing leadership competencies such as acting as an agent of change, advocating for primary health care policy and health services changes, resolving conflicts, and acting or addressing professional and client-related ethical issues

8. Understand and recognize legislative and political forces that drive health policy in order to manage the interaction between clients, systems of care, and primary health care outcomes.

Level of communications skills: The ability to communicate ideas, issues and conclusions clearly.

4. Show effective communication, collaboration and consultation skills with the health care team and clients.

5. Demonstrate intra- and interprofessional competencies related to practice, teaching and scholarship.

Awareness of limits of knowledge: Cognizance of the complexity of knowledge and of the potential contributions of other interpretations, methods, and disciplines.

3. Practice safely, ethically, competently and with integrity as an entry level NP within the primary health care area of specialty and within NP-PHC role, scope of practice, competencies, standards, and regulatory framework specific to the College of Nurses of Ontario

3.4 Describe how the program's structure and requirements meet the program objectives and Program Learning Outcomes.⁴ Provide a curriculum map as an appendix.

The courses map to both the program learning outcomes as described above and the Entry-to-Practice Competencies for Nurse Practitioners in Ontario (**Appendix A**). The program's structure, as described in 4.1, assess the learner's ability to meet the program learning outcomes and Entry-to-Practice competencies supports learners in acquiring the needed knowledge, skills, and judgement to meet them.

3.5 Describe how your program reflects the current state of the discipline or area of study.

In Canada, new graduate Nurse Practitioners (NPs) must be master's prepared. The School of Nursing at York University currently offers the Master of Science in Nursing (MScN)-Primary Health Care Nurse Practitioner (PHCNP) Program as a combined program. This proposed program would provide a streamlined option for those who have already obtained a BScN and master's degree but would like to pursue the Primary Healthcare Nurse Practitioner program in Ontario.

3.6 Does your program involve any significant innovative or creative approaches to content and/or delivery, especially relative to other such programs in Ontario or Canada? If so, what are they?

No changes will be made to the delivery of these courses, which York already delivers. Two of seven mandatory courses are facilitated in an online, synchronous format by instructors within the provincial consortium, who may or may not have a York affiliation. The other five courses are delivered face-to-face on campus at York University, facilitated by York Faculty or CUPE instructors, which also have a clinical placement component. That said, our Nurse Practitioner

⁴ The proposal should make a clear distinction between Degree Level Expectations, program objectives, and Program Learning Outcomes (See Quality Council's website for [definition and guidance](#) in differentiating these program elements).

program is growing its simulation equipment and capability. This is important to differentiate York from other institutions within the consortium.

As a program that is deeply committed to DEDI principles and practices, it is centrally informed by two seminal documents: 1. The Moving towards a future with health equity for all: Addressing systemic racism through action, accountability, and authenticity (Faculty of Health) and 2. York's DEDI Strategy. While it is beyond the scope of this proposal to demonstrate all the congruencies between the proposed program and these two documents, highlighted is a sample of overlapping concepts/ideas that are of central relevance and applicability to the Nurse Practitioner program. First, the program takes into central consideration *social justice* as a core principle. As such, the (already existing) curriculum is infused with analysis and critical pedagogies that engage the student with such concepts as health equity, social determinants of health, and critical perspectives on health in general. This thread is a major response to the shifting power dynamics in society and the growing income and social gap, particularly for marginalized and vulnerable communities and families, for whom the graduates will be caring. The proposed program will prepare nurses for advanced practice to care for diverse communities and families by equipping students to consider personal experiences, values, and worldviews that arise from difference of culture and circumstance, which also responds to the core principle of *diversity*. Inclusion, antiracism, and Indigenous rights are also of central relevance and are taken up throughout the program, as they are closely linked to the above core ideas in the curriculum. Beyond the program itself and beyond the education of critically informed nurses who are sensitive to the needs of diverse communities, the graduates will be deployed in various areas of care at a time specifically responding to a dire need for primary health care in several communities marginalized by lack of access to care. This is a direct intervention into a societal need and a direct remedy to a health issue (that is growing in need and urgency) that only graduates of a program like this can address.

3.7 Describe how the proposed mode(s) of delivery facilitate students' successful completion of the Program Learning Outcomes.

No changes are being made to the existing format, and these courses are already offered within the MScN-PHCNP program. It is important that the five of seven courses delivered at York are face-to-face, and in fact is the preference of the students. We have already demonstrated as a consortium and a program that the model of delivery matters, and especially during COVID-19 became even more aware of the need for in-person classes, to allow for ad hoc hands-on, and learning opportunities.

Program Requirements for graduate programs only (QAF 2.1.2.3)

3.8 Provide a clear rationale for program length that ensures that students can complete the program-level learning outcomes and requirements within the proposed time period.

No changes are being made to the existing format, and these courses are already offered within the MScN-PHCNP program. Students will be able to take the Post-Master's Diploma in one year full-time or two years part-time.

3.9 Provide evidence that each graduate student is required to take a minimum of two-thirds of the course requirements from among graduate-level courses.

This is not applicable to this program. All seven courses will be mandatory, and all are graduate level courses. There will be no electives as this will be a specialty professional diploma.

3.10 For research-focused graduate programs, provide a clear indication of the nature and suitability of the major research requirements for degree completion.

This is not a research-focused program, and as such, this is not applicable.

4. Assessment of Teaching and Learning (QAF 2.1.2.4)

4.1 Describe the methods for assessing student achievement of the Program Learning Outcomes and Degree Level Expectations and the appropriateness of these methods.⁵

This program will prepare students who already have completed a master's degree and are Registered Nurses to become Primary Health Care Nurse Practitioners in line with the program learning outcomes and the College of Nurses' of Ontario's Entry-to-Practice competencies. Courses in this program are designed for small group, case-based, student-facilitated learning to prepare students to be independent and autonomous practitioners. As the scope of practice of NPs has increased tremendously in the last 10 years, the program also ensures that changes to scope of practice are reflected in the curriculum, with the goal of training safe and competent NPs. The PHCNP curriculum is developed as a part of the consortium, and as a member of that consortium, York University School of Nursing participates in but does not solely create or modify its content. There are seven mandatory courses to complete this program. Two of the seven are run through the consortium and are synchronous virtual courses. The additional five courses are delivered at the individual consortium sites. Each of these courses have both a theory component and a clinical component. The courses are not delivered didactically. Students are expected to present the content on rotating basis each class, and to lead and engage their peers in discussion, and hands-on practice. In the clinical portion of the course, students have a Nurse Practitioner or a Physician as a preceptor and are in clinical practice for a specified number of hours for each course.

4.2 Describe the program's plans to monitor and assess the overall quality of the program.

⁵ Programs should ensure that the plans for monitoring and assessing student achievement provide an assessment of students currently enrolled in the program, as well as post graduation metrics for alumni. Please see guide on [Assessment of Teaching and Learning](#) from Quality Council on how to satisfy these criteria.

The NP program is already embedded in the cyclical review process, and we are currently addressing recommendations that emerged from the previous cyclical program review for all master's level studies in the School of Nursing. At the consortium level, there is a specific structure of quarterly meeting where each institution has a member in the role of either Director of their School or Dean of their faculty. The program coordinators from each site also meet quarterly to discuss shared student concerns and challenges. Each course has a consortium-driven course evaluation completed by students and then course leads for each course delivered also have quarterly meetings where each course evaluations are reviewed, and program coordinator feedback is considered. Students are also able to evaluate their clinical placements at the end of each term. This information is used to evaluate the potential to use the same placement the following term.

4.3 Describe the program's plans to monitor and assess whether the program is achieving in practice its proposed objectives.

The NP program at York University is renewed each year by the College of Nurses. In addition, every 7 years, the program undergoes a full accreditation, and program approval process. Very detailed documentation is required to meet each indicator. Program approval is required and the guidance for program approval can be found at: <https://www.cno.org/globalassets/3-becomeanurse/educators/nursing-education-program-approval-policy.pdf>

4.4 Describe the program's plans to monitor and assess whether its students are achieving the Program Learning Outcomes.

The program uses the following theoretical evaluations: written learning plans, written assignments, oral presentations, and written exams (multiple choice, short answer, prescription writing). Clinical evaluations include Objective Structured Clinical Examinations (OSCEs) which "is an assessment that allows applicants to demonstrate their nursing knowledge, skill, and judgment in a simulated health setting. During the OSCE, applicants rotate between stations, interacting with patient-actors who present with different health issues." (College of Nurses of Ontario), and clinical evaluations from their clinical placement MD or NP preceptor. These courses are mapped to the College of Nurses competencies. In addition, we have access to the pass rates for our students who write the licensing exam and can obtain the time to registration in the NP class with the College of Nurses. This helps determine the extent to which the program is successful in supporting student to meet the program learning outcomes and the College competencies.

4.5 Describe the program's plans for how the resulting information will be documented and subsequently used to inform continuous program improvement.

As stated in 4.3, accreditation occurs every 7 years, and is a submission that allows for reflection on our practices, improvement plans, and a significant amount of documentation supporting processes. In addition, our graduate program will continue to undergo cyclical review.

5. Admission Requirements (QAF 2.1.2.5)

5.1 Describe the program's admission requirements and their appropriateness, given the program objectives and Program Learning Outcomes.

In Canada, new graduate Nurse Practitioners (NPs) must be master's prepared. Thus, all applicants for the proposed program must hold a master's degree to apply to this program. The rest of the requirements are set out by the provincial consortium and are identical to the requirements of our MScN-PHCNP program.

- 1) Holding a Bachelor of Science in Nursing degree (or equivalent Bachelor of Nursing degree from an accredited university program)
- 2) Minimum of a B average in the last 2 years of study (graduate or undergraduate)
- 3) Active practicing registration with the College of Nurses of Ontario as a Registered Nurse
- 4) Evidence of 3640 hours of practice as a Registered Nurse within the past 5 years
- 5) Three letters of reference
- 6) Completion of personal essay questions

5.2 Describe any applicable alternative admission requirements (e.g., minimum grade point average, additional languages or portfolios, and how the program recognizes prior work or learning experience.)

Candidate preference will be given to those who are: Ontario residents, work experience in nursing that has been continuous, evidence of understanding of the role of the Primary Healthcare Nurse Practitioner, work/clinical experience that demonstrates critical thinking, working with clients/patients in a collaborative, holistic, family-centred practice, and/or advancement of evidence-based practice. A CV is required for the application process, and a personal essay is also required. These questions and additional requirements can be found at: <https://www.yorku.ca/gradstudies/nursing/wp-content/uploads/sites/361/2023/10/Supplementary-Application-Form-PHCNP.pdf>

6. Resources (QAF 2.1.2.6)

6.1 Describe the planned/anticipated class sizes.

Graduate program-level classes at the School of Nursing typically do not exceed 15-20 students. However, as 5/7 of the NP program courses are delivered on York campus, face-to-face, and the intention at the provincial level is small group learning. Thus, we currently strive to not exceed 10 students per section. The specific Ministry of Health funding that the School of Nursing receives for the NP program currently reflects these small-group numbers. This would be no different in the proposed Post-Master's Diploma.

Should York University approve this program, the number of seats funded for the MScN-PHCNP from the Ministry of Health, would then be split into both MScN-PHCNP and the Post Master's

PHCNP. However, since both streams of students could be part- or full-time, the streams and students will overlap. This also creates diversity of students from a training and career stage, and clinical experience perspective leading to richer discourse in learning environments.

For example, for 2024, the Ministry of Health will fund 40 students for the MScN-PHCNP program. Should the Post-Master's Diploma be available in 2025, with the same 40 seats funded by the Ministry, the School of Nursing would then accept a total of 40 MScN-PHCNP and PHCNP Post-Master's Diploma students (numbers in both streams will depend on applicant pool). As the Ministry of Health continues to increase the seats in this training program across Ontario, there is an additional advantage to having the Post-Master's Diploma option, as there may not be a growing number of qualified MScN-PHCNP applicants. Thus, having a pool of Master's-prepared applicants allows the School of Nursing flexibility and competitiveness in use of funds to fill all 40 (or increasing number) or seats funded by the Ministry.

6.2 Given the program's planned/anticipated class sizes and cohorts, as well as its Program Learning Outcomes, provide evidence of participation of a sufficient number and quality of core faculty who are competent to teach and/or supervise in and achieve the goals of the program and foster the appropriate academic environment. Note that it may be helpful to create a table or map detailing faculty teaching assignments.

As the program is delivered provincially, at the level of the consortium, the curriculum for this program is not created solely at York. Course leaders can be found at: <https://np-education.ca/about/our-course-developers/>.

All educators in this program must be master's prepared and actively practicing as Primary Health Care Nurse Practitioners. At this time, the only Faculty at York University who meets this criterion is Dr. Mia Biondi, and as such, all other educators in the program are Nurse Practitioners and hired with a CUPE contract for the 5/7 courses delivered on-site at York School of Nursing. As funding is obtained per student, additional educators would be hired to address the need of additional sections. We currently have 4 consistent NP CUPE educators in this program, which due to qualifications and seniority, typically teach each term. However, each term we have other potential educators apply. These applications have been reviewed by the NP Program Coordinator, Dr. Biondi, and meet the qualifications. Thus, should additional sections be required, we do not anticipate difficulty in identifying these highly qualified educators, and importantly, educators must be actively practicing primary care, which is not always conducive to being tenure-stream full-time faculty. However, should this program be approved, we intend to explore hiring two 0.5 FTE NP educators utilizing the funding for the program from the Ministry of Health to the School of Nursing to support the NP program – so they can maintain their clinical practice, while having additional consistency term to term.

6.3 As applicable, and given the program's planned/anticipated class sizes and cohorts, as well as its Program Learning Outcomes, discuss and/or explain the role and approximate

percentage of adjunct/part-time faculty/limited term appointments⁶ used in the delivery of the program, including plans to ensure the sustainability of the program and the quality of the student experience.

The budget for the NP program is separate from the School of Nursing budget. It is based on a per-student increment, which captures all aspects of their time in the program. This includes time for the NP program coordinator, the practicum coordinator, program administrators, instructors, preceptor payments, travel, marketing, etc. In the PHCNP courses, all instructors must be Primary Health Care NPs, and therefore, most are contracted, which is reflected in increases in the budget when increases in class sections are required.

6.4 If applicable, given the program’s planned/anticipated class sizes and cohorts, as well as its Program Learning Outcomes, describe the program’s experiential learning components (this includes classroom-based activities, community-based learning, and internships and placements) as well as the provision of supervision of these components.

In 2023, the Director of the School of Nursing supported the re-assignment of a dedicated computer lab space to become the NP skills lab. This setting supports small group learning, and has specific NP program technology, equipment, and tools. The areas for assessment mirror community primary care settings. Our Nursing Simulation Centre at the School of Nursing already incorporates DEDI through a diversity of training materials such as mannequins with different skin types, for example. The NP program also continues to invest in improving simulation for learners at this level. We recently invested in dedicated optometry and otoscopy to enhance case-based learning and have purchased a 3-D printer to support dermatology assessments using diverse skin types and presentations. We also invite guest speakers who are clinicians of diverse backgrounds practicing in diverse settings. These are just a few examples of how the program is already innovating simulation. The educators hired in the program also work with the preceptor pool of practicing MDs and NPs who are given an honorarium by York University, that is funded within the budget obtained for the program by the Ministry of Health. We are also continuing to expand our preceptor pool in community, long-term care, and acute care settings. We have already needed to do this to increase our seat number in the MScN-PHCNP stream, and since the number of placements will be the same, no change will occur. We have a high-quality preceptor pool, and placement assessment and evaluation are a major portion of our program’s accreditation by the College of Nurses of Ontario.

6.5 Describe the administrative unit’s planned use of existing human, physical, and financial resources, including implications for other existing programs at the university as well as

⁶ For programs in which sessional/adjunct faculty have a large role, provide evidence of a long-term plan to ensure that a sustainable, quality program will be delivered when a large proportion of the courses are to be taught by sessional instructors/adjunct faculty. This should include a rationale for the use of a large number of sessional faculty for program delivery, how and from where sessional instructors will be recruited, concrete plans for how a stable and consistent approach to teaching the Program Learning Outcomes will be ensured, and information regarding how a consistent assessment of the students’ achievement of these learning outcomes will be maintained under these circumstances.

any additional institutional resource commitments to support the program in step with its ongoing implementation.

No additional resources are required. We are already expanded our MScN-PHCNP program independently, and the Post-Master's Diploma will be rolled into those seats.

6.6 Provide evidence that there are adequate resources to sustain the quality of scholarship and research activities produced by students, including library support, information technology support, and laboratory access.

There is not a formal research component to this Post-Master's Diploma program. Students require routine library access for assignments and the consortium provides clinical resources to all NP students through the online portal that all NP consortium students use in Ontario.

6.7 If necessary, provide evidence of additional institutional resource commitments to support the program in step with its ongoing implementation.

No additional resource commitments are required. The entire program including portions of salary for support staff is already built into the NP program budget and increases per student.

Resources for Graduate Programs Only (QAF 2.1.2.7)

6.8 Given the program's planned/anticipated class sizes and cohorts, as well as its Program Learning Outcomes, provide evidence that faculty have the recent research or professional/clinical expertise needed to sustain the program, promote innovation and foster an appropriate intellectual climate.

There is not a formal research component to this Post-Master's Diploma program. Minimum requirements for educators and the training is outlined in 7.2, and the expertise and research experience of the NP Program Coordinator is described in 7.1.

6.9 Where appropriate to the program, and given the program's planned/anticipated class sizes and cohorts, provide evidence that financial assistance for students will be sufficient to ensure adequate quality and numbers of students.

This is not applicable as the number of seats funded will not change, and therefore, the number of admission funding awards also will not be modified.

6.10 Where appropriate to the program, and given the program's planned/anticipated class sizes and cohorts, provide evidence of how supervisory loads will be distributed, in light of qualifications and appointment status of the faculty who will provide instruction and supervision.

This is not applicable as the number of seats funded will not change, and therefore, the workload should not change for anyone involved with the Post-Master's Diploma.

7. Quality and Other Indicators ([QAF 2.1.2.8](#))

- 7.1** Provide evidence of quality of the faculty (e.g., qualifications, funding, honours, awards, research, innovation, and scholarly record; appropriateness of collective faculty expertise to contribute substantively to the program and commitment to student mentoring)⁷ and staff to achieve the goals of the program.

Faculty: In recent years, with interest and additional funding from the Ministry of Health, the MScN-PHCNP program has grown from 21 new admissions (in 2022) to 40 new admissions (2024). This program will be under the graduate program within the School of Nursing and be facilitated in tandem with the current NP program, and therefore, ultimately falls under the umbrella of the Graduate Program Director (GPD) of the School of Nursing. The GDP within the School of Nursing is currently Dr. Simon Adam (Interim), a tenured Associate Professor, and PhD-prepared Registered Nurse (CV attached). Unlike the MScN-generic program within the School of Nursing, the MScN-PHCNP and what is proposed to be the PHCNP Post-Master's standalone program has a specific program coordinator. The coordinator of this program is Dr. Mia Biondi, Assistant Professor in the School of Nursing, a PhD-prepared Primary Health Care Nurse Practitioner. All educators in the PHCNP portion of the program must be trained and registered with the College of Nurses of Ontario as a Primary Healthcare Nurse Practitioner. In addition, to maintain as active licence as a Nurse Practitioner in Ontario, all NPs must continue to actively practice and see patients. Thus, as listed on her CV, Dr. Biondi also maintains clinical practice in both primary healthcare and in three focused practice disease areas. Dr. Biondi also has a well-funded, rigorous, clinical research program and is a clinical, education, and research leader in HIV prevention, and hepatitis B and C clinically in Canada (see attached CV). The program coordinator works with the GPD to evaluate and admit applicants, and the main liaison between the consortium and York University. Other aspects of the role include overall program improvement including pass rates of first attempt of the board exam, student progression, placement safety issues, and exam reviews. The Director of The Nursing Simulation Centre, Dr. Laura Nicholson (CV attached), has a Doctorate in Education. Dr. Nicholson supports the NP program in simulation planning, OSCE planning, and overall space management for in-person course planning for the NP program.

Staff: The Operations Manager for the School of Nursing oversee all staff involved in the program as well as the budget. Our graduate program assistant spends at least 50% of their time supporting the NP program. This includes responding to admission inquires; supporting any program events such as orientation and exams; course registration, switching streams, dropping courses/leaves of absence, as well as appeals and petitions. The Manager of the Nursing Simulation Centre also supports the NP program to assist with sourcing and purchasing equipment, as well as maintaining it.

⁷ This section is distinguished from the section on [Resources](#) (questions 25-31) ([QAF 2.1.2.6 a](#)) in its focus on the quality of the faculty and their capacity to ensure the intellectual quality of the student experience, whereas questions 25-31 ([QAF 2.1.2.6 a](#)) addresses whether sufficient numbers of core faculty are available to cover the program's teaching/supervision duties.

- 7.2** Provide evidence of additional elements of the program and faculty that will ensure the intellectual quality of the student experience.

All educators in this program must be master's prepared and actively practicing as Primary Health Care Nurse Practitioners.

Qualifications Required

- Registration with the College of Nurses of Ontario as a Nurse Practitioner in Primary Health Care (photocopy of your registration certificate must accompany your letter of application);
- Master's preparation in Nursing or a related Master's (i.e. MSc, MPH, Health Policy, Health Administration, Epidemiology);
- Five years of experience as an NP-PHC, with at least two years as an NP where primary care is the focus or integrated;
- Experience in teaching and/or supervising students at the BScN and/or NP-PHC program level in the classroom or clinical setting;
- Experience with facilitating small group learning in person and utilizing digital technologies.

Qualifications Preferred

- PhD;
- Experience in teaching and/or supervising students at the NP-PHC level;
- Previous experience with the Ontario PHCNP Program.

ENSURE THE FOLLOWING APPENDICES ARE INCLUDED:

- **Appendix A:** A curriculum map – all course outlines and the CNO NP entrance to practice competencies provided in lieu of this, as the courses are already developed
- Library Statement – Not applicable, see 6.6
- Dean's Letter of Support

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From: David Peters, Dean

Date: April 26th, 2024

Subject: Post-Master's Diploma – Primary Health Care Nurse Practitioner

This is to acknowledge our support for the *Post-Master's Diploma - Primary Health Care Nurse Practitioner* program to be hosted by the School of Nursing. As proposed, this program will address a critical gap in the health system, where there a great need for Primary Health Care Nurse Practitioners (NP). It also fills an area where there is considerable demand, and creates a rapid pathway for nurses that already have masters degrees to obtain the necessary competencies and credentials to fulfill those roles.

In recent years the scope of NPs has expanded considerably to include all practice environments and populations. In developing a one-year post-masters diploma, York will join six other Universities in Ontario that offer a similar training option (<https://www.cno.org/>), and in so doing will support the Ministry of Health's goal to increase primary healthcare system capacity. The proposed *Post-Master's Diploma* is well aligned with the Faculty of Health's Strategic Plan, particularly in the area of *Creating Opportunity for Student Engagement and Impact*, that calls out for new professional programs in important areas including nursing. It is also supportive of the recently announced York School of Medicine that focuses on primary health care and inter-professional teams, wherein nurse practitioners play leading roles. By improving access to training for nurse practitioners in Ontario, this program supports efforts to diversify and build capacity, and will be aligned with anticipated interprofessional practice opportunities of the School of Medicine and Vaughn Healthcare Precinct.

In summary, the Faculty of Health supports the establishment of the *Post-Master's Diploma – Primary Health Care Nurse Practitioner*. As this diploma makes use of existing infrastructure and personnel, we do not anticipate any overlap or any competing resource implications.

Sincerely,

David Peters, MD
Dean, Faculty of Health

