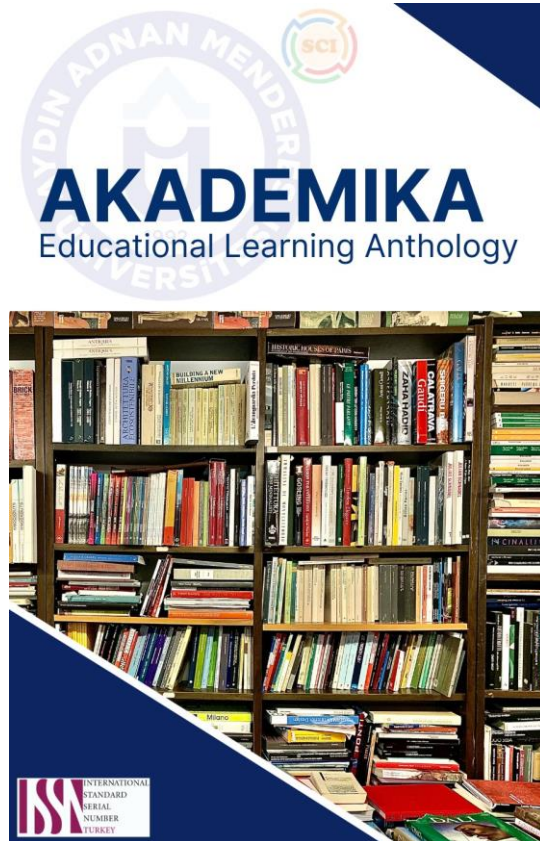# AN ANALYSIS OF CMO NO. 15, S. 2017 (POLICIES, STANDARDS AND GUIDELINES FOR THE BSN PROGRAM): OBE OR NOT?

An Analysis of CMO No. 15, S. 2017 (Policies, Standards and Guidelines for the BSN Program): OBE or Not?

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Abstract

Determining student achievements at the end of an academic program is essential in outcomes-based education (OBE). In the Philippines, significant reforms, including the Philippine Qualifications Framework and the Enhanced Basic Education Act of 2013, have transformed the Bachelor of Science in Nursing (BSN) program into an OBE curriculum. This research evaluates the alignment of the current Policies, Standards, and Guidelines for the BSN Program (CMO 15, s. 2017) with transformative OBE principles. The analysis focuses on key elements of the BSN program, comparing them against the seven attributes of transformative OBE and the curriculum development process. The findings reveal that while CMO 15, s. 2017 generally aligns with the OBE framework, it does not fully incorporate the principles of transformative OBE. Consequently, the objectives of OBE are only partially achieved, indicating that the current CMO's adherence to OBE is inadequate. For stakeholders to realize the full benefits of an OBE approach, a more responsive and adaptable CMO is essential. Such adaptations could significantly enhance educational outcomes and the relevance of the BSN program, ultimately benefiting students and the healthcare system. Strengthening the alignment with transformative OBE principles is crucial for developing a more effective educational framework. By doing so, nursing graduates will be better equipped to address the evolving challenges within the healthcare sector. This research underscores the importance of continuous evaluation and reform in nursing education, advocating for policies that not only meet current standards but also anticipate future needs in healthcare delivery. Enhancing the curriculum in alignment with transformative OBE principles can lead to a more competent and responsive nursing workforce, ultimately improving patient care and health outcomes in the community.

Keywords: *outcomes-based education, Bachelor of Science in Nursing, policies, standards, and guidelines*

Introduction

The enhanced basic education program in the Philippines was designed to align the Philippine basic education with international and global standards. In global contexts, the Curriculum Framework—which uses "outcomes" as its conceptual organizer—is endorsed by the Western Australian Government and is still the only required curriculum for all Western Australian schools (Alderson & Martin 2006). The definition of an "outcomes approach" in the Western Curriculum Framework (Curriculum Council, WA, 1998):

An outcomes approach means identifying what students should achieve and focusing on ensuring that they do achieve. It means shifting away from an emphasis on what is to be taught and how and when, to an emphasis on what is learnt by each student (as cited in Alderson & Martin, 2007).

The OBE in Australia was modeled after the American education system. Willis and Kissane (as cited in Alderson & Martin, 2007), after reviewing the literature on OBE, identified three basic premises of OBE in the USA:

1. Decisions about what to teach should be driven by the outcomes we would like students to exhibit at the end of their education experience.
2. All students can achieve learning outcomes of significance so long as the conditions necessary for their success are met; and
3. Accountability for schools and school systems should be in terms of student outcomes (referred to as outputs) rather than in terms of what is provided by way of curriculum, hours of instruction, staff-student ratios, school buildings, equipment or textbooks or support services (referred to as inputs) (as cited in Alderson & Martin, 2007).

As stated by Mtshali (2005), OBE organizes the whole education system around what is essential for the students to be able to do successfully at the end of the learning experience. According to Spady (1994), OBE defines the process with respect to the outcomes the learners should demonstrate on completion of the program. Forster (as cited in Alderson & Martin, 2007), summarized three broad types of outcomes-based education categorized by Spady and Marshall:

1. Traditional outcomes-based education which was built on the development of desired learning outcomes within pre-existing subject content.
2. The transitional approach which sets out the outcomes that will be required by students when they graduate (exit outcomes) and stresses higher-level competencies such as critical thinking and complex problem solving; and
3. Transformational outcomes-based education is also concerned with exit outcomes of students but defines these in terms of complex role performances that are grounded in real-world contexts.

Both the traditional and transitional approaches were found to have several limitations (Mtshali, 2005). The traditional OBE:

1. Does not give learners or educators an understanding of why this learning is important.
2. Focuses strongly on either doing or recalling content and does not focus on linking or integrating skills, knowledge, and values.
3. Does not change the learning environment much – things carry on just as they did before the outcomes were defined.

In the same vein, the limitations of the transitional OBE include:

1. Irrelevant content remains in the curriculum.

2. Some of the traditional practices (i.e., lecture method) may still dominate.

On the other hand, transformational OBE aspires to change the educational system in order to produce capable future citizens who can aid in the realization of a transformed society (Mtshali, 2005). The emphasis of transformational OBE is on lifelong learning and the demonstration of complex knowledge, abilities, and attitudes. Numerous countries, including South Africa, Australia, the UK, and New Zealand, have adopted Transformational OBE. The present study aims to investigate CMO No. 15 s. 2017 and assess its alignment with the attributes of transformative OBE.

Transformational OBE is characterized by the following:

1. The OBE curriculum is informed by the professional or workplace expectations (specific knowledge, skills, and attitudes needed for entry-level into the world of work); the general knowledge, skills, and attitudes (transferable core skills such as problem-solving, collecting, analyzing and organizing information); and current and future trends in the workplace (e.g. dynamics in the workplace and society).
2. What the learner needs to learn is clearly and unambiguously stated from the beginning of the program and is followed throughout the learning process.
3. The learner is facilitated towards the achievement of the outcomes (by the teacher, who acts as a facilitator rather than a mere presenter or conveyor of knowledge), with the learner being an active and interested participant in the learning process.
4. The learner's progress is based on his or her demonstrated achievement. The focus is on being able to use and apply learned knowledge, skills, and attitudes, rather than merely absorbing specific and prescribed bodies of content.
5. Continuous assessment functions as a tool to help learners learn through experience using authentic learning experiences, with the facilitator facilitating their learning.
6. Each learner's needs are catered for by employing a variety of instructional strategies and assessment tools.
7. Applied competence is emphasized in OBE with the learners demonstrating their ability to perform tasks with understanding and to adapt learned behavior to new situations. Applied competence is further broken down into practical competence (demonstration or ability to do something), foundational competence (understanding or demonstrating ability to describe what one is doing theoretically and why one is doing that in a particular way), and 'reflexive competence' (the ability to pass judgment on a course of action and give reasoned argument on how it could be done differently or better where appropriate).

In the Philippines, OBE's predecessors include CMO No. 46, s. 2012, the Philippine Qualifications Framework, the Enhanced Basic Education Act of 2013, ASEAN integration, and the worldwide push for transformational education (Sana et al., 2015). With the introduction of CMO No. 46, s 2012, the BSN program underwent a transition from a content-based education to a competency-based learning standard and an outcomes-based education. Furthermore, Republic Act No. 10533, also known as the Enhanced Basic Education Act, extended the number of years in Philippine basic education. As to Section 4 of RA 10533, the enhanced basic education program comprises one (1) year of kindergarten education, six (6) years of elementary education, and six (6) years of secondary school. Providing every student with the opportunity to obtain a high-quality education that is internationally competitive based on a curriculum that satisfies international standards and is pedagogically sound is one of the rationales for RA 10533.

Research Questions

This paper aims to examine and evaluate if CMO No. 15, s 2017 adheres to the principles of outcomes-based education. Specifically, it aimed to answer the question, "Does the CMO No. 15, s. 2017 adhere to the principles and attributes of transformational OBE?"

Methodology

An examination of CMO 15, s. 2017 was conducted to evaluate its adherence to the principles of transformative outcomes-based education. The procedure entailed looking at the key elements of the BSN program and contrasting them with the seven attributes of transformational outcomes-based education and curriculum development process. Moreover, this study is a phenomenological study which attempts to set aside biases and preconceived assumptions about human experience, feelings and responses to a particular situations. This is typically conducted through the use of in-depth interviews of small samples of participants (Georgi, 2012).

Results and Discussion

CMO No. 15, s. 2017 was analyzed in two ways: 1) it was compared against the seven attributes of transformational OBE; and 2) in relation to the curriculum process of developing an outcomes-based curriculum.

The Characteristics of Transformational OBE

1. The OBE curriculum is informed by the professional or workplace expectations (specific knowledge, skills, and attitudes needed for entry-level into the world of work); the general knowledge, skills, and attitudes (transferable core skills such as problem-solving, collecting, analyzing and organizing information); and current and future trends in the workplace (e.g., dynamics in the workplace and society).

The program goals of CMO No. 15, s. 2017 emphasizes professional or workplace expectations and that is to be able to "demonstrate competencies to be able to assume entry-level positions in health facilities or community settings". The expected outcomes are stated in very general terms – to be able to assume entry-level positions in health facilities or community settings, and capable of providing safe, humane, quality, and holistic care to individuals of varying ages, gender, and health-illness status, healthy or at-risk families; population groups; and community; singly or in collaboration with other health care providers to promote health, prevent illness, restore health, alleviate suffering and provide end of life care.

The program outcomes for the BSN program present more specific competencies (knowledge, skills, and attitudes/values) expected of BSN graduates. However, some of these program outcomes do not include the criteria and the conditions under which the learner must perform the behavior. For example, in the program outcome "Applying knowledge of physical, social, natural, and health sciences and humanities in the practice of nursing", there are no criteria against which the performance should be measured. It makes compliance with an outcomes-based education incomplete. Current and future trends in the workplace and the field of nursing must drive the expected outcomes, such as the internationalization of nursing education – are we at par with the standards/curriculum set by international nursing schools? For most nursing schools in the country, the answer is still no.

2. What the learner needs to learn is clearly and unambiguously stated from the beginning of the program and is followed throughout the learning process.

The level outcomes of CMO No. 15, s. 2017 states what the learner needs to learn at each level of the BSN program. The level outcomes of the BSN program in the CMO are stated broadly. The specific competencies such as knowledge, skills, and attitudes that the learner needs to demonstrate, and the conditions under which the competence needs to be demonstrated are not stated in the level outcomes in CMO. For example, the level outcomes for First Year are: At the end of the first year, given simulated situations in selected settings, the learners demonstrate basic nursing skills in rendering safe and appropriate care utilizing the nursing process. The basic nursing skills that students in the First Year must demonstrate are not clearly stated. The criteria are also not stated.

This implies that what the learner needs to learn was not clearly and unambiguously stated in the CMO. Although level outcomes were stated in the CMO, the specific skills and conditions were not laid out in detail. One implication of this can be evidenced when developing a syllabus for a certain subject/course. The intended learning outcomes in the syllabus should be clearly and concisely stated.

3. The learner is facilitated towards the achievement of the outcomes (by the teacher, who acts as a facilitator rather than a mere presenter or conveyor of knowledge), with the learner being an active and interested participant in the learning process.

The third paragraph of Section 3 of CMO No. 15, s. 2017 states: Using a learner-centered/outcomes-based approach, the CHED also determined appropriate curriculum delivery methods. Section 11.6 states: (b) Faculty in charge of classroom instruction shall supervise students in their RLE. In the case of team teaching, there should be close coordination and collaboration between the lecturer and the clinical faculty.

This emphasizes supervision, rather than just being a mere presenter or conveyor of knowledge. This is congruent with the third characteristic of transformational OBE. Also, the emphasis on a learner-centered approach indicates that the learner is the focus, and differentiated instruction should be provided to the students. Undoubtedly, the role of the teacher is immense in an outcomes-based education, for it is the teacher who plans for the learning strategies and assessment methods after consideration of the intended learning outcomes. In this case, the CMO is compliant with the third characteristic, in so far as the teachers/professors would assume the role of facilitators to guide the learning process.

4. The learner's progress is based on his or her demonstrated achievement. The focus is on being able to use and apply learned knowledge, skills, and attitude, rather than on merely absorbing specific and prescribed bodies of content.

Section 7 of the CMO presents the Performance Indicators or the competencies that the learners must develop to achieve a specific program outcome. Emphasis on performance indicators indicates that students' progress should be monitored and that they should be able to use and apply learned knowledge, skills, and attitudes. The challenge is for the teachers/ facilitators to monitor the learners' progress and achievement efficiently and accurately. There is also an implication in terms of assessment and evaluation of student's learning. Since a learner's progress is based on his or her demonstrated achievement, assessment tasks should be designed in such a way that what these assessment tasks would be measuring is what the students are intended to learn. Therefore, if performance tasks are to be employed such as role-playing, a well-established rubric should be utilized. For the CMO to become outcomes-based, educators/ academicians/ teachers must make sure that the syllabus is compliant with the fourth characteristic.

5. Continuous assessment functions as a tool to help learners learn through experience using authentic learning experiences, with the facilitator facilitating their learning.

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6. Each learner's needs are catered for by means of a variety of instructional strategies and assessment tools.

In the sample instructional design and syllabus for NCM 119 Nursing Leadership and Management, the Assessment column includes various methods such as vignette, reflection paper, paper and pencil test, program implementation, and case analysis, to name a few. The assessment criteria were not included in the sample instructional design and syllabus for NCM 119. The assessment criteria which should include observable processes and products of learning were not clearly stated. Also, cognitive, affective, and psychomotor domains must be assessed through various methods of assessment for a more holistic evaluation. This implies that the CMO is partial and incomplete in terms of its compliance with the 5th and 6th characteristics of a transformational OBE.

7. Applied competence is emphasized in OBE with the learners demonstrating their ability to perform tasks with understanding and to adapt learnt behavior to new situations. Applied competence is further broken down to practical competence (demonstration or ability to do something), foundational competence (understanding or demonstrating ability to describe what one is doing theoretically and why one is doing that in a particular way) and 'reflexive competence' (the ability to pass judgment on a course of action and give reasoned argument on how it could be done differently or better where appropriate).

The emphasis on applied competence is evident in the development of the curriculum map of the program outcomes. The curriculum map will provide stakeholders with a holistic perspective to see how the desired outcomes will be developed. The curriculum map also ensures the alignment of the program outcomes, course outcomes, and learning outcomes. While this all sounds prolific, the question is on how this will be implemented. It will boil down to how the lessons/ content, intended learning outcomes, and assessment tasks are structured in the classroom. Since OBE allows flexibility, teachers are tasked with designing their syllabus in such a way that these expected outcomes will be achieved, and that their achievement will be clearly and accurately monitored. Another implication is the use of differentiated instruction to cater to the various needs of student-learners so that no student will be left behind.

The second part of the analysis involved comparing the program goals, program outcomes, and assessment and evaluation of learning against the process of developing an outcomes-based curriculum.

Table 1. *Analysis of CMO No. 15, s. 2017 in relation to the process of developing an outcomes-based*

	Developing an outcomes-based curriculum	CMO No. 15, s. 2017	Analysis
Determining graduate competencies	Requires identification of graduates' tasks and expected competencies in performing tasks and determining elements of each competency. The term competence in OBE is not limited to skills only but incorporates knowledge, skills, and values to be demonstrated by graduates when performing a task.	*Program Goals:* The BSN program aims to develop a professional nurse who can assume entry-level positions in health facilities or community settings. The professional nurse is capable of providing safe, humane, quality, and holistic care to individuals of varying age, gender, and health-illness status, healthy or at-risk families; population groups; and community; singly or in collaboration with other health care providers to promote health, prevent illness, restore health, alleviate suffering and provide end of life care. *Specific roles and careers for graduates:* 1. Client care: Utilize the nursing process in the care of Mothers, newborns, children, adolescents, adults, and older persons; Family, community, population groups, and persons with special needs	In the CMO No. 15, s. 2017, the graduate competencies are stated in general terms while the specific roles and careers for graduates are emphasized in a different section. However, the elements of each competency necessary in being able to assume entry-level positions in health facilities or community settings were not established. Also, in stating the specific roles and careers expected of graduates, the expected competencies are not stated clearly. For example, in Client care – *Utilize the nursing process in the care of: Mothers, newborns, children, adolescents, adults, and older persons; Family, community, population groups, and persons with special needs*, the specific competencies in performing the particular tasks in client care were not emphasized. National and international events can drive changes in the education system. While it is clear in the program goals stated in the CMO tries to address employment of nurses in the local setting, it fails to address employment

Developing an outcomes-based curriculum		CMO No. 15, s. 2017	Analysis
		2. Leadership and management: Serve as Managers and Leaders of Nursing service units and health services programs 3. Research: Engage in nursing and health-related research; Evaluate research studies; Apply research process in improving client care The nurse can also pursue any of the following career options: 1. Advanced Practice Nursing 2. Public Health/ Community Health Nursing 3. Nursing Education 4. Leadership and Governance	and opportunities abroad. While it is of utmost necessity and crucial that our nurses be employed in the local setting, most nurses are attracted to and sometimes are forced to find opportunities in international settings, and this fact cannot be avoided. Until the Philippine government implemented policies to improve the plight of nurses in the country, the program goals of the CMO would remain lacking. While the government has not implemented concrete changes, the CMO has to address this by not only limiting the skills to be learned in the local setting but should aiming to be at par with international nursing schools all over the world.
Developing programme outcomes	Programme outcomes are those outcomes that should be demonstrated by learners when they have completed a programme. Programme outcomes should have these three elements: ▪ An observable behavior that will demonstrate that the student knows specified content and/ or can apply/use knowledge ▪ The conditions under which the student must perform the behavior and ▪ The criteria against which the performance will be measured	Program outcomes specific to BSN: A. Apply knowledge of physical, social, natural, and health sciences and humanities in the practice of nursing B. Provide safe, appropriate, and holistic care to individuals, families, population groups, and communities utilizing the nursing process C. Apply guidelines and principles of evidence-based practice in the delivery of care D. Practice nursing under existing laws, and legal, ethical, and moral principles E. Communicate effectively in speaking, writing, and presenting using culturally appropriate language F. Document to include reporting up-to-date client care accurately and comprehensively G. Work effectively in collaboration with inter, intra- and multi-	When the program outcomes specific to BSN in CMO No. 15, s, 2017 is compared to the program outcomes of an OBE curriculum, the three elements that a program outcome should include were not met by some of the program outcomes in the CMO. For example, in the first program outcome of the BSN program, "*Apply knowledge of physical, social, natural and health sciences and humanities in the practice of nursing*", there is an observable behavior (to apply), but the conditions under which the student must perform the behavior and the criteria against which the performance should be measured were not clearly stated. However, in Section 7, Performance Indicators, which include competencies that the learners must develop to achieve a specific program outcome, were included in the CMO. However, in some of these indicators, the criterion against which the performance should be measured was not clearly stated. Therefore, these program outcomes and performance indicators are lacking when analyzed with an OBE format. However, in other performance indicators, such as the case of conducting research with an experienced researcher and participating in preparing a research

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Developing an outcomes-based curriculum		CMO No. 15, s. 2017	Analysis
		disciplinary and multi-cultural teams H. Practice beginning management and leadership skills in the delivery of client care using a systems approach I. Conduct research with an experienced researcher J. Engage in lifelong learning with a passion for keeping current with national and global developments in general, and nursing and health developments in particular K. Demonstrate responsible citizenship and pride of being a Filipino L. Apply techno-intelligent care systems and processes in health care delivery M. Adopt the nursing core values in the practice of the profession N. Apply entrepreneurial skills in the delivery of nursing care	proposal complying with the ethical principles in nursing research, all three components are provided: behavior (participate), criteria (complying with the ethical principles) and condition (in nursing research).
Planning the assessment and evaluation of learning	The assessment criteria indicate in broad terms, the observable processes and products of learning which serve as culminating demonstrations of learners' achievement or competence.	In the sample instructional design and syllabus for NCM 119 Nursing Leadership and Management, the Assessment column includes various methods such as vignette, reflection paper, paper and pencil test, program implementation, and case analysis, to name a few.	The assessment criteria were not included in the sample instructional design and syllabus for NCM 119. The assessment criteria should include observable processes and products of learning. Also, cognitive, affective, and psychomotor domains must be assessed through various methods of assessment. It will then serve as a challenge for educators and academicians to plan and design how to assess and evaluate learning. In OBE, traditional assessments such as quizzes and tests are avoided. Teachers should, therefore, be able to develop or utilize appropriate rubrics for performance assessments to accurately measure what the students are intended to learn.

Conclusions

Is the CMO No. 15, s. 2017 outcomes-based? Although CMO No. 15, s. 2017 adheres to the broad framework of outcomes-based education, but it is far from a transformative OBE. The CMO has not yet fully complied with OBE. Only a portion of OBE's objectives have been achieved. It should be possible for the Philippine nursing curriculum to cover current advancements and trends in the field both domestically and globally. The current CMO is not responsive and adaptable to international needs and trends. Global trends and demands are not being met by the current CMO. Furthermore, it is critical that the curriculum explicitly outlines the knowledge and skills that students should be able to demonstrate within certain guidelines. To effectively evaluate and assess a student's learning

versus what is expected of him/her, attention to observable behavior, circumstances, and criteria should be placed.

Drafting or developing a curriculum is not an end in itself. The real challenge lies in its implementation. Following implementation, an assessment is necessary to ascertain whether the curriculum needs to be revised, modified, or whether a new curriculum will better enhance the educational framework in light of local and global trends and needs. Much work still needs to be done. Making the goal of becoming a transformational OBE a reality is an enormous challenge for facilitators and educators. It is imperative to establish the fundamental elements before designing a program, course, or learning objectives. Demonstrating a specific behavior is not sufficient; learners must also meet the criteria that the behavior is tested against and perform the activity under certain circumstances.

The local curriculum and international BSN programs differ in a number of ways. A number of foreign BSN programs provide courses that are not offered in our local curriculum, have a different course sequence, and have variable unit counts for certain lectures, labs, and RLEs. This is not addressed by the current CMO. However, it is encouraging to know that the focus of our local curriculum is on developing skilled nurses who prioritize the needs of their fellow Filipinos over those of the rest of the globe. Nevertheless, it makes it more difficult for recent nursing graduates to move seamlessly into nursing positions elsewhere. The tough realities of a nurse's work-life force nursing graduates to search for chances overseas, even if we may wish our nurses to stay.

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