Collaborative BScN Program Practicum Handbook

2018-2019
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IMPORTANT NOTE

The Practicum Handbook for the Collaborative BScN Program should be used in conjunction with the UOIT Academic Calendar and is NOT a substitute for the calendar.

The Faculty of Health Sciences reserves the right to make changes to the information contained in this handbook, in its printed or electronic form, without prior notice.

Every effort has been made to make this handbook as accurate as possible at the time of posting. In the event of an inconsistency between this handbook and the regulations and policies established by the Faculty of Health Sciences, Academic Council or UOIT Board of Governors, the regulations and policies established by the Faculty of Health Sciences, Academic Council and Board of Governors will prevail.

It is the responsibility of the student to take the correct courses and ensure all degree and program requirements are met.

June 2017
UOIT-DC COLLABORATIVE BScN NURSING PROGRAM

VISION

The Collaborative BScN Program graduate will enhance the lives of others using an inquiring process that enables, facilitates and empowers individuals, families, groups and communities to achieve their goals.

MISSION

1. To prepare professional nurses who are committed to excellence and innovation in assessing and meeting the health needs of society.
2. To develop and transmit knowledge regarding nurse practice and the human experience of health and healing.
3. To anticipate the changing needs of society and develop the latest
   • empirical,
   • experiential/personal,
   • aesthetic
   • emancipatory, and
   • ethical knowledge

PROGRAM GOALS

1. Practice nursing based on nursing science, Code of Ethics, knowledge and skills to promote health & healing of individuals, families, groups, communities and populations.
2. Actualize professional caring relationships with individuals, families, groups, communities and populations; and, with nursing and interdisciplinary colleagues.
3. Synthesize critical inquiry, scientific inquiry, research and other ways of knowing to develop nursing knowledge and to demonstrate the professional contributions of nursing in healthcare.
4. Champion social justice, in partnership with vulnerable populations; respecting the autonomy of individuals, families, groups, communities and populations.
5. Demonstrate leadership within the domains of practice, policy and quality of work-life for innovation and advancement of healthcare.
6. Commit to critically reflective practice and self-directed learning, within the regulatory context and accountability to the public, to support life-long learning.
SECTION 1: PRACTICUM FRAMEWORK

Nurses are dedicated to serving the health care needs of the public; therefore, obtaining the best possible outcome for the patient is paramount at all times. There is an expectation throughout the program that students will perform competencies that meet the College of Nurses of Ontario (CNO) Professional standards (Revised 2002), so that they are prepared for the clinical environment upon graduation.

There are seven professional standards set out by the CNO that provide a framework for nurses to provide competent, safe and ethical nursing care to the public. As a nursing student, you will be introduced to the Professional standards (Revised 2002) for Registered Nurses and expected to abide by them throughout this program and your future nursing career.

This handbook establishes a set of guidelines which form a framework for behavior in practicum in order to meet professional standards. It has been developed in accordance with the CNO Professional standards (Revised 2002) and National Competencies (2014), and the policies and regulations of UOIT.

1.1 Overriding Principles

The following are overriding principles that all students are expected to consistently follow through their program:

1.1.1 Accountability

Accountability is one of the seven professional standards for nurses. The expectation is that the student is accountable and responsible at all times and this will be developed and nurtured throughout the program.

Over the course of the program, students will be making many decisions that will affect their academic success and ultimately their success in the profession of nursing. While students may look for advice from their family and friends, nursing students enrolled in the Collaborative BScN and RPN-BScN programs are considered adults and are expected to be accountable and responsible for their own choices and actions.

Consistent with this principle, students are expected to:

- Be accountable for his/her own learning and for facilitating the learning of others. In order to maximize valuable learning opportunities consistent participation and preparation is expected.
- Identify the need for and act to obtain appropriate supervision.
- Be honest, even when a mistake has been made. Students must report any error, accident or incident immediately to the practicum professor/preceptor/faculty advisor/co-assigned nurse so that appropriate measures can be taken. A supportive environment within which the practicum professor/preceptor/faculty advisor/co-assigned nurse assists the student to problem-solve is particularly important when a mistake or incident occurs. It is the student’s responsibility to learn from any error and to demonstrate consistent improvement.
• Recognize their own knowledge level, skills and abilities, limits of responsibilities, legislative authority and supervision requirements, and to understand and clarify his/her role in the provision of care with the professor / clinical instructor / preceptor / faculty advisor / co-assigned nurse.

1.1.2 Professionalism and Respect

Students are expected to practice in a manner consistent with CNO Professional Standards (Revised 2002), clinical agencies and the policies and regulations of UOIT, and to use clear, accurate and effective communication skills in all professional interactions.

Everyone is expected to demonstrate respect for self, clients, classmates, faculty, all members of the university and college communities, preceptors, agency staff and the community at large. Mutual respect helps to create a caring environment which supports teaching and learning. Respect for one another is seen as reciprocal through such actions as active listening, authentic communication, caring connections in personal and professional encounters and constructive feedback of one another’s work.

Students are expected to demonstrate behaviour that consistently indicates respect for the worth and dignity of clients and/or families, while accepting responsibility and accountability for all nursing actions consistent within their role.

It is important to remember that the student's primary role is that of a learner. As such students should demonstrate receptivity to feedback, utilizing suggestions and recommendations to facilitate their own learning and growth as a professional.

1.1.3 Safety

To ensure safety for the client, nursing activities must provide a safe physical and psychosocial environment. Safety in the physical environment includes the competent practice of nursing assessments and interventions, knowledge of policies and procedures, knowledge of the client’s experience, and the physical set up of the environment.

Safety in the psychosocial environment includes maintenance of confidentiality; and freedom from racism, sexism, discrimination, harassment, and other non-caring behaviours.

1.1.4 Confidentiality

Confidentiality is of paramount importance. Students are expected to function within the limits of their role and accept responsibilities for which they have been prepared. The privacy of the patients, residents and/or students in all instances must be respected and students are expected to realize the confidential nature of the data that they are privileged to use. As representatives of UOIT, Durham and Georgian Colleges, faculty and students must assist in maintaining the co-operative relationships with the various community agencies throughout Durham Region and other areas utilized in partnerships.

Client information **MUST NOT** be discussed in any public area or with any unauthorized persons. Under no circumstance is information to be given to police or media. All requests for information must be referred to the designated administrative person. Any breach of confidentiality will be
reviewed and may result in a student’s dismissal from the program. Students should have access to medical records only as assigned for educational purposes. Any computer access codes must only be used to access computer data for patients/clients as assigned for patient care. Students should not attempt to access any unauthorized information including information about themselves, family, friends, colleagues, or any other person whose information is not required to perform work duties.

The importance of these overriding principles is affirmed by the requirements for Program Professional Suitability as outlined in the UOIT Academic Calendar (Section 13.6.10). Any student who exhibits behaviour that is inconsistent with the norms and expectations of the program and profession, or that places themselves, clients or others at risk may be immediately suspended from the program and subject to a review and possible sanctions.

1.1.5 Specific Requirements for Registered Practical Nurses

It is essential that students who are Registered Practical Nurses are aware that they are required to practice at all times in accordance with the CNO Practice Standards (Revised 2002).

Recognizing our role in protecting students, patients, and the public from harm, should a student demonstrate practice or conduct that fails to meet these standards, it is the responsibility of the Nursing Program to determine if the behavior or action necessitates reporting to the College of Nurses of Ontario.

1.1.6 Health Care Learning Centre & Interprofessional Centre of Excellence

Learning experiences in the Health Care Learning Centre (SW206) and Interprofessional Centre of Excellence in Simulation (SW207) [“the Lab”] are treated similarly to clinical experiences within the Collaborative BScN Program.

Students are expected to be familiar with, and adhere to, all regulations and procedures that govern practice in the Lab. Additionally, all requirements and expectations outlined in this Handbook related to preparation for practicum learning experiences and behavior will apply to learning experiences which take place in the Lab.
SECTION 2: PREPARATION FOR PRACTICUM

2.1 Assignment of Placements

The Collaborative BScN Program is designed to prepare graduates who are able to meet the challenges of the expanding role of nursing in today's society. These challenges arise both from the increased complexity of health problems, and changes in the nursing profession as a whole. The program is designed to prepare generalists, who can function in diverse settings with clients from a variety of cultures, socio-economic backgrounds, and developmental stages. To this end, we use a number of criteria in selecting practicum placements to facilitate the student’s practicum learning, including:

- Nursing Professional Practice Competencies for the year level
- Learning needs of each student
- Availability of agencies/units
- Experiences the agency/unit is able to provide

The Practicum Office has pre-existing agreements with the affiliated partners for placements and all clinical placements are organized by the Practicum Office. Students MAY NOT arrange their own placements. Agency partners will only accept students for placements that are arranged through the Practicum Office.

2.1.1 Location

Placements are located at various hospitals and agencies throughout the Durham and surrounding regions (up to 1 hour away) and students are expected to be able to attend practicum at any of the Collaborative BScN Programs’ partner sites.

2.1.2 Transportation

Students are responsible for all personal transportation and associated costs while attending placement. Changes to the assigned placement will not be permitted. Placement settings are determined by availability and will vary each term.

2.1.3 Changing Placements

Changes to an assigned placement will not be permitted and students MAY NOT “swap” placements among themselves. Placement settings are determined by availability and will vary each term.

2.1.4 Alternative Placements

Specialized or “atypical” placements may be available for final year of study in NURS4701 Professional Nursing Integrated Practicum.

These are placements which may fall into any one or a combination of the following categories:

- Critical Care (including ICU, CCU, ER, NICU, PACU, L&D)
- Community (Public Health)
• Mental Health

Students will be considered for specialized/atypical placements and placements that are in high demand based on the following criteria as a whole:
• GPA-minimum 2.7 (B-) is preferred. Please note that some agencies may require a higher GPA
• Past practicum evaluations
• Submission of a letter of interest outlining student goals and objectives for the placement

2.1.5 Conflict of Interest
Students are required to self-identify any conflict of interest they may have in their assigned practicum placement. Notification must be made in writing to the Practicum Coordinator if the student has:
• Relatives or friends who are employed or volunteer (in any capacity) at a practicum agency site
• An employment or volunteer relationship at a practicum agency site
• Any other affiliation with a practicum agency site which could place them in a position of conflict of interest while attending practicum.

2.2 Requirements for Safe Practice
Certain protective health measures such as entrance physical examinations, chest x-ray, proper immunization, criminal reference checks, CPR certification and/or special tests are expected of all students, faculty and staff prior to an experience in the agency.

In order to be eligible to participate in placement, students will be required to meet specific requirements for safe practice within established timelines. Students who do not successfully meet the requirements for safe practice will not be approved to participate in their practicum placement and will be required to withdraw from their respective NURS Theory and Practicum course until the next time the course is offered, the requirements are met and a placement site is available.

Any student who does not meet these requirements ANNUALLY by the specified date, will be removed from the upcoming placement, and will be withdrawn from the respective practicum course in which they have registered.

These requirements form an integral component of Program Professional Suitability as outlined in the UOIT Academic Calendar (Section 13.6.10)

2.2.1 Required Documentation
All required pre-practicum documentation must be verified by the SPECIFIED DEADLINE for each year in the program. Students whose documentation expires throughout the year are required to verify and update documentation according to the due dates set out by the Practicum Office. Documentation is considered to be current if it covers the entire duration of the placement.
Deadline dates will be communicated to students through the Nursing Practicum Blackboard course and UOIT.net email. Exceptions to these dates are non-negotiable due to liability and safety regulations.

Specified deadline dates are:
BScN Year 1 students – The 1st Friday in November
All other students – The 1st Friday in December

2.2.1.1 Procedure for Verification of Practicum Documents
Documents to be submitted include the following:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Upon Entry</th>
<th>Every Year</th>
<th>Every 2 Years</th>
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<tr>
<td>Entry Immunization Form with Two-Step TB Test</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>Health and Safety Online Training Module</td>
<td>X</td>
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<tr>
<td>One-Step TB Test</td>
<td></td>
<td>X</td>
<td></td>
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<tr>
<td>Criminal Reference Check with Screen</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Level C or Health Care Provider CPR</td>
<td>X</td>
<td>X</td>
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<td>Respirator Mask Fit Test (N95)</td>
<td>X</td>
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<tr>
<td>WHIMIS Online Training Module</td>
<td>X</td>
<td>X</td>
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<tr>
<td>IPAC Core Competencies (Public Health Training Course) ALL 6 MODULES</td>
<td>X</td>
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<td>X</td>
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<td>Influenza Vaccine (Recommended)</td>
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<td>Consent Forms</td>
<td>X</td>
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<tr>
<td>RPN to BScN Students ONLY: CNO status Verification</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Sign that you have reviewed the Practicum Handbook</td>
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All documentation needs to be verified with the Practicum Office before the deadline, once all available.

The Practicum Office will not collect and store required documentation. Students will be asked to present all required documentation to the Practicum Office for verification by the required due date.

It is the responsibility of the student to keep all documentation for reference or practicum purposes.
2.2.1.2 Reproduction of Student Practicum Documentation

In the event the student requires reproduction of the information in their Practicum File (i.e. Evaluations) they will be subject to a $10 copy fee per document (regardless of document size). The student must submit a request in writing to the Practicum Office for the documents required, a minimum of 24 hours ahead of when the documents are required. Documents must be picked up from the Practicum Office and will not be sent electronically or via fax. Students must pick up their own documentation and identification must be presented.
2.2.2 Immunization

A completed Entry Immunization Form (EIF) is required upon entry to the Collaborative BScN and RPN to BScN Programs. The Practicum Office will submit the form to the Campus Health Centre for approval, and will contact the student when it is ready for pick-up. Each subsequent year students are responsible for providing documentation of a One-Step TB test. All forms can be found on the Nursing Practicum Blackboard or on the UOIT website: http://healthsciences.uoit.ca/undergraduate/programs/bachelor-of-science-in-nursing/pre-practicum-placement-requirements.php

The Immunization Entry Form indicates the immunizations that are legislated as requirements for practicum:

- Measles/Mumps/Rubella
- Diphtheria/Tetanus
- Poliomyelitis
- Hepatitis B
- Varicella (Chicken Pox)
- Two Step Tuberculosis Skin Test
  - Mandatory for all 1st year students. If you test positive proof of a follow-up chest x-ray must be submitted.
  - For returning students one-step TB testing is mandatory each subsequent year of study. For returning students who tested positive no further documentation is required.
- Influenza vaccination
  - Influenza vaccination is not mandatory but highly recommended. If there is an influenza outbreak at the placement facility and you have not been vaccinated you may be denied access to the facility, thus jeopardizing successful completion of the practicum course.

**PLEASE NOTE:** Any practice placement site can make it mandatory to have an annual influenza vaccination prior to approving a placement

2.2.3 CPR

Students in the program require a valid Level C or HCP (Health Care Provider) CPR certification/recertification. As per the recommendation of the Heart and Stroke Foundation, this will be required annually and is valid for one year based on the date indicated on the certification card. The certification must be valid for the entire academic year.

To be eligible to be placed in a practicum setting, it is the student’s responsibility to verify documentation of CPR certification to the Practicum Office.

First Aid is highly recommended as part of the CPR certification process.

CPR and First Aid Training can be obtained formally through Durham College or St. John's Ambulance.
2.2.4 Criminal Reference Check (CRC) with Vulnerable Sector

In compliance with the requirements of our placement partner agencies, all students in the Collaborative BScN Program & RPN to BScN program are required to have a criminal reference check which **MUST** include a vulnerable sector screen, and a check of the Royal Canadian Mounted Police (RCMP) National Canadian Police Information Centre (CPIC) database. Students are encouraged to begin this process as soon as possible. Students should be aware of the following:

- This process of acquiring a CPIC check can take 12 weeks or more to complete
- The cost of the police record check is at the student’s expense
- Advise the police department that you are a student requiring a police record check for placement purposes. Inquire with your local police service as some require a letter or form to be completed by the school.
- Two pieces of identification one of which must be photo ID will be required to complete the CRC process

Students who have not provided appropriate documentation of a completed criminal reference check will not be eligible for placements. The background check is only considered to be current if it covers the entire duration of the placement.

After admission, and at any time prior to completing the program, students charged with a criminal offence, are required to report this information immediately to the Practicum Office. Failure to do so will be considered professional unsuitability or professional misconduct for RPNs currently registered with College of Nurses of Ontario.

When there is an agency policy regarding the current status of a criminal reference check, the student is expected to adhere to this policy and to notify the Practicum Coordinator.

A police check that is not clear (a record has been found) will have implications for student progression.

**2.2.4.1 Specific Requirements for Ontario Shores Centre for Mental Health Sciences**

All students assigned to a practicum placement at Ontario Shores Centre for Mental Health Sciences are required to have a CPIC check conducted within six months of their placement start date. It is the students’ responsibility to obtain the CPIC check and to bring it to Ontario Shores on their first practicum day.

**2.2.4.2 Authorizing Signature**

Students obtaining checks through their local OPP detachment or in Toronto are required to obtain the signature of an authorized University representative prior to initiating the CPIC check.

Students must bring their **COMPLETED** application form (found on the respective police agency website or obtained from the Faculty of Health Sciences reception, UA 3000, or from Blackboard) in person to the Practicum Office (UA 3042) along with two valid pieces of government issued identification, one of which is a valid photo ID (i.e. driver’s license or passport) to confirm the identity of the applicant.
2.2.5 Respirator Mask Fit Test (N95)

Students will be respirator fit tested EVERY 2 YEARS. RPN to BScN students are responsible for their own mask fit and are encouraged to use their mask fit from their employer. Students are responsible for assessing if a respirator (N95) fits properly each time they use it. It is the student’s responsibility to self-identify if they need to be re-tested. Students are responsible to identify in writing to the Practicum Coordinator as soon as possible, if any of the following occur:

- Excess weight gain or loss (increase or decrease of 10 pounds or more)
- Change(s) in facial structure (i.e. due to facial surgery, dental work etc.)
- Change in facial hair status (i.e. facial hair growth/removal)

If a student is not respirator (N95) fit tested, and an outbreak occurs which necessitates that the student be respirator (N95) fit tested, the student’s placement may be jeopardized. In this scenario the student may not be able to meet the practicum learning outcome requirements thereby impinging on their ability to progress in the program.

Students who follow specific cultural or religious practices that have implications related to respirator fit testing are invited to speak directly with the Practicum Office, course professor, or Year Coordinator to ensure that their needs are met within this policy.

Respirator (N95) fit testing dates will be organized annually during the Fall Semester. Students will be notified through the Nursing Practicum Blackboard site and/or their UOIT.net e-mail of appointment dates and times for testing. RPN to BScN bridging students who have been tested though their workplace should ensure their mask fit information is submitted to the Practicum Office with their required documentation.

**Important Note:** Students who fail to attend their assigned testing time will be required to make their own arrangements for testing, at their own expense and must do so prior to attending practicum. Please refer to the mask fit testing folder on Blackboard for approved testers.

2.3 Maintenance of Competence

The student must demonstrate and maintain a consistent level of proficiency in exercising his/her professional responsibilities progressively within each year level in the program.

**Students are expected to maintain a passing level of performance in all areas of the program previously mastered and be evaluated at a passing grade.**

2.3.1 RPN Registration

Students in the RPN to BScN program are expected to maintain their RPN registration throughout the program.
2.4 Pre-Screening for Practicum Experiences

In order to ensure to the best of our ability that students in the Collaborative BScN programs are able to demonstrate necessary competencies in order to be placed in practicum settings, the program reserves the right to pre-screen students prior to entry into a practicum setting. Pre-screening assessments include, but are not limited to:

2.4.1 Math Pre-Screening

All students are required to complete a mathematics screening test prior to each and every practicum experience. Students will be required to attain a grade of 80% in order to pass this assessment. Should a student not achieve a grade of 80% on this screening test, he/she is eligible to write a second assessment. Failure on the second assessment would preclude a student from attending practicum in the given term. A plan for remedial math activities will then be developed with this student in order to support return to practicum the next time the course is offered and a placement is available.

2.4.2 Re-Entry to Practice Following Failure, Withdrawal, or Absence

The nature of the assessment will be individualized to the level of the practicum course that the student is re-entering. Students will be required to meet with their Year Coordinator prior to the beginning of the term to discuss the assessment requirements, which will be based on the pre-requisite knowledge, skill, and judgment required for the course that the student is seeking to begin or repeat.

The purpose of the assessment is to determine if the student possesses the necessary competencies to safely care for clients in the assigned practicum placement. If, during the assessment, gaps in knowledge, skill, or judgment are uncovered, a remedial plan will be implemented.

Depending on the nature of the identified gaps and the required remedial plan, in cases where serious skill deficits exist which would put the student or patients at risk, return to practicum may be delayed until the student is able to demonstrate the required competencies.
To ensure consistent safe and competent care is provided to patients, all students are responsible to maintain competency of nursing skills from semester to semester. Students who have not attended practicum for one semester or more (not including summer break), regardless of the reason, are required to participate in the following assessment process to ensure patient safety.

This mandatory process includes the following steps:

- Students will identify themselves to the practicum office and the Academic Advisor at least 12 weeks prior to the targeted return to practicum;
- Students must successfully complete the Pre-Practicum Assessment as well as mathematics testing at the appropriate year level minimally 4 weeks prior to targeted return to practicum.
- Pre-Practicum Assessments will be arranged by the Year Coordinator.

Students will be assigned a specific date & time to do the Pre-Practicum Assessment. To ensure safe and competent care is provided to patients, students who fail to comply with this process or who are not successful in demonstrating competence at the appropriate year level will not be able to participate in practicum. This could delay the student’s progression through the program.
SECTION 3: EXPECTATIONS FOR PRACTICUM

Students are expected to come to the practicum experiences prepared with the knowledge required to perform the learned skills and required competencies.

When clients seek the assistance of a health care provider, they come expecting expertise, with the understanding that they will suffer no harm in the interchange. The clients’ rights MUST be respected, and ethically and legally protected.

Although recognition is given to the student’s status in the learning process, these standards are still required of the student. The client must not be subjected to a lower standard of care because a student is providing care.

As such, the following section outlines expectations for all students when participating in practicum experiences.

3.1 Agency Requirements

UOIT and the Collaborative BScN programs maintain a signed agreement with each of the partner agencies utilized by students in practicum. This contractual agreement describes the relationship that exists between the parties, as well as their respective obligations and responsibilities. Further, the agreement outlines the terms under which the agency will accept students into its practicum area.

Each agreement recognizes that the agency has its unique policies and regulations and expects both faculty and students to function in accordance with them.

To comply with both education and institutional requirements for placements, the student, in collaboration with the practicum professor, must ensure that he/she is familiar with and follows all agency regulations, policies and procedures relevant to his/her presence in the practicum setting.

Students are expected to:

• Understand that a contractual agreement exists between the institution and the agency
• Familiarize themselves with the specific agencies or institution policies and procedures prior to engaging in direct or indirect client care
• Contact the practicum professor or the Practicum Office in the event that the student does not feel he/she has adequate information regarding the agency requirements

3.2 Attendance

Attendance in practicum is mandatory

Success in the Collaborative BScN programs is dependent on complete attendance and students must be flexible in their schedule to attend either 8 or 12 hour shifts any day of the week.
Practicum experiences and hours are designed to maximize learning opportunities. Students are required to be able to demonstrate that they consistently meet learning outcomes for the practicum.
experience. Missing any practicum shifts puts a student at risk for not being able to meet course requirements consistently. Should this be the case, the student would receive a failing grade in the course and would be required to repeat the entire course when it is next offered and a placement is available.

Further, attendance in the practicum area is also an essential part of accountability to peers, clients, and other health care team members.

In the event of absence or illness, students must follow the guidelines set out in this handbook for validating and reporting absences that may result in a practicum experience being missed.

3.2.1 Mandatory Orientation Sessions

Nursing students must attend their general student orientation in each year of the program. Any student who does not participate in the orientation session for his/her given practicum environment will not be able to continue in practicum as he/she is not prepared to safely care for the clients of that population.

The student must meet with the Year Coordinator as soon as possible to establish a plan of action that will facilitate continuation of the practicum experience and his/her continued success within the program.

3.2.2 Arriving for Practicum Prepared

Students are required to arrive prepared for their practicum experience and to practice in accordance with University, program, course, agency, and CNO expectations.

All students are expected to determine their own fitness for practice and to share any concerns related to this with their clinical instructors.

Students may not work an overnight shift the night before a practicum day and must at all times arrange for a minimum of 8 hours off between employment & a scheduled practicum shift.

Students who fail to abide by this policy will be sent home from practicum and risk a failing grade in their practicum course.

3.2.3 Illness

UOIT has a responsibility to the practicum agencies concerning infection control. Consequently, the Campus Health Centre nursing staff monitors and/or makes medical referrals when the student/staff member’s health status has been assessed as a potential risk to clients in the practicum setting.

The student is responsible for assessing his/her ability to attend practicum placement however the following must be reported to the Campus Health Centre prior to attending a practicum placement:

- Suspected exposure or diagnosed communicable disease contact (i.e. measles, chicken pox)
• Students who suspect they have been in contact with a communicable disease must notify the Campus Health Centre. Depending upon the disease, the student may be recommended or required to notify other sources for preventative reasons (i.e. hospital, public health dept.).
• These situations will be assessed on an individual basis.
• Diarrhea
  o Any staff/student with diarrhea cannot attend a hospital or nursing home placement that day. If symptoms of diarrhea persist longer than 24 hours, follow-up through the Campus Health Centre is required. Situations and the need for stool specimens will be assessed on an individual basis.
• Respiratory symptoms or illness
  o Respiratory symptoms reportable include a fever of greater than 38 degrees and a new or worsening cough or shortness of breath. Reporting through the Campus Health Service of these symptoms is required for clearance to placement facility (Source: Directive to All Ontario Acute/Non-Acute Care Facilities Under Outbreak Conditions, ACO-03-05, Oct. 22, 2003).
• Flu-like symptoms (e.g. gastro-intestinal upset, diarrhea, nausea and vomiting)
• Rashes
• Open or weeping wounds
• Musculoskeletal injury
• Conjunctivitis (pink eye)

Students must also comply with the established policy for each agency regarding reporting of an illness.

3.2.4 Student Reporting an Illness

When reporting an absence due to illness, students must submit to their practicum professor a completed UOIT Medical Statement form, signed by a physician or other health care professional, to address all absent days of practicum. All forms will be submitted to the Student Services office (UA2000) and the appropriate faculty/Clinical Instructor notified. A copy of the UOIT Medical Statement form must also be provided to the Practicum Office by the student for their file.

When the student is unable to attend two or more consecutive days of practicum placement, the student must consult with the Practicum Professor regarding clearance to return to practicum placement.

If illness or injury occurs while in a practicum segment, the professor should be contacted for further direction and Incident Report completed. See Appendix B. This form is also located on Blackboard with the Practicum Handbook.

3.2.5 Key Requirements for Students Returning to Practicum after an Illness

Notes from a physician must state that a student is able to perform all activities related to a practicum placement without limitation or with identified accommodations listed in order for a student to return to practicum. If limitations exist, the student must meet with the course professor and/or year coordinator to determine if he/she is able to return to practicum.
Practicum settings have the right to determine if a student is fit for practice. All student placements require that students are able to provide direct care in accordance with the course requirements.

Information for the Campus Health Centre can be found on the UOIT website: https://uoit.ca/current-students/campus-services/health-centre/index.php

The UOIT Medical statement form can be found on the UOIT website: https://shared.uoit.ca/shared/department/registrar/Records%20and%20Registration/13_medical_statement_form.pdf

### 3.2.6 Student Reporting an Absence to their Assigned Practicum Placement

In the rare case that a student is ill or absent from the practicum area, he/she must notify the agency/assigned nursing unit prior to the beginning of the shift or the scheduled time when the practicum group is normally expected to be on site.

Students must follow the agency policies related to illness and absenteeism in addition to the requirements set out below. Notification is required for each practicum shift that the student is absent from.

When calling to notify the practicum agency regarding absence, students must do the following:

- Provide their name and student level
- Indicate they are from UOIT – DC – GC (as appropriate)
- Provide the practicum professor's name or preceptor’s name
- Indicate which Unit they are assigned to
- Ask for the name of the staff member who takes your message and ask this staff member to make a note of your absence on the practicum professor's assignment sheet

In the event of a **Clinical Instructor illness/absence**, if a replacement Clinical Instructor is not available, students will come to campus for an alternate assignment, unless otherwise instructed by the Clinical Instructor. These hours are considered mandatory practicum hours.

### 3.2.7 Travel Outside Canada

All students/staff travelling outside of Canada and the contiguous United States are expected to comply with any regulations/guidelines that currently exist in regards to outbreak management (i.e. influenza, Ebola, Zika).

Depending upon the destination and physical assessment, you may be required to provide additional documentation verifying your suitability for placement or return to placement.

### 3.3 Continuity of Clinical Learning

Students are required to provide the evaluation documents from their previous clinical semester to their practicum professor/preceptor/faculty advisor in each subsequent semester, for the purpose of establishing effective learning goals.
Students who do not present this documentation to their professor/preceptor/faculty advisor prior to the commencement of practicum may be removed from the clinical setting.

Students who require this documentation to be reproduced from their Practicum File should refer to Section II of this Handbook under 2.2.1.2 Reproduction of Student Practicum Documentation.

3.4 Communication

3.4.1 Email

Email communication should be considered professional communication. It is expected that students will include appropriate greetings/signatures, compose full sentence messages which indicate the purpose of the communication, and demonstrate a respectful, professional tone at all times.

Students should not consider email that they send to faculty members or clinical instructors to be confidential. If, in the potential interest of a student, patient or public safety, correspondence from a student is deemed to be potentially concerning in any way, faculty will be required to share this information with appropriate individuals.

3.4.2 General Communication

All students in the nursing program are expected to conduct themselves professionally at all times. Communication, whether verbal or non-verbal, must reflect the values and principles inherent in the codes of conduct of UOIT, Durham College, and Georgian College (where applicable), as well as the College of Nurses of Ontario. No conversation or exchange, whether specific to your studies or not, should be considered exempt from this expectation. The tone and content of communication, whether face to face or electronic in nature, is expected to reflect the standards of the profession of nursing. It is expected that respect for others, respect for self, and promotion of human dignity in all circumstances will be demonstrated at all times and faculty and staff will address all situations in which this is not the case. Students are expected to request meeting times with staff and faculty with appropriate notice and are expected to request any change to meeting times, including cancelling meetings, with the same courtesy.

3.4.3 Use of Personal Technology and Communication Devices

Nurses, as professionals, are expected to utilize multiple forms of technology to support best possible nursing practice. It is essential that nursing students conduct themselves when using technology in a professional and appropriate manner at all times.

All students are guided by the UOIT Information Technology Acceptable Use Policy which can be found at: https://usgc.uoit.ca/policy/policy-library/policies/legal,-compliance-and-governance/information-technology-acceptable-use-policy.php

In addition to this general policy, the following guidelines apply to the use of any technology in the Collaborative BScN programs (including computers, including laptops, cell phones, tablets and other electronic devices):
• Professional behaviour and proper technology etiquette will be observed at all times when using cell phones, iPods, PDA’s, laptops, or other electronic devices in the classroom, laboratory, or clinical setting.

• Technological devices may be used only when authorized by faculty for clinical or classroom activities, or as an approved accommodation to reduce the impact of a disability. Students seeking the latter will require an Accommodations Notice from the Centre for Students with Disabilities.

• No personal phone conversations or texting is allowed at any time or under any circumstance while in a patient area or during designated clinical hours. All devices must be silenced or turned off during these times. **A formal written warning that will remain in the student’s file will be given for the first violation of using the electronic device for socializing during clinical/lab time. (See Section 4, 4.3.4) A clinical/lab/course failure will be given for the second violation, whether this occurs in the same course or in another course.**

• Students are expected to have all technological/communication devices turned off if agency policy requires it and to go to an area designated for cell phone use when using these devices. Faculty, Clinical Instructors, hospital, or community agency staff may ask to see what programs you are using at any time.

• All students are expected to discuss use of electronic devices with their clinical faculty and to strictly adhere to Program and clinical agency requirements.

• The use of an electronic device allows students to retrieve information quickly and unobtrusively. Students must protect the confidentiality of patient information at all times in accordance with healthcare and privacy legislation. Students are expected to be respectful to the patient at all times and to ensure that their entire attention is focused on the patient when they are in the patient’s room. If a student is using a PDA at the bedside, he or she should be sure to apologize for the interruption in care and explain how this will help in his/her nursing care. Students are expected to keep careful physical control of the device at all times.

Just as other medical equipment may act as a reservoir for microorganisms and contribute to the transfer of pathogens, so may PDAs and other handheld electronic devices. Be sure to disinfect / decontaminate them as needed.

**Students who violate patient privacy with respect to technology may be subject to charges of legal privacy interactions by the clinical agency or client.**

3.4.4 Program Communication with Students

All communication will take place directly with students **ONLY.** It is up to the student to decide how much information they wish to share with their family and support network. Faculty members and staff in the Program will only communicate directly with students.
Email communication with students from the BScN program will be done using the official school email address assigned to the student.

3.4.5 Student Communication with Practicum Faculty

It is expected that students will communicate regularly with their assigned Clinical Instructor/Faculty Advisor via a variety of mediums: direct visits, email or telephone as required.

3.5 Dress Code

We value the spectrum of human diversity, self-expression and experience and strive to foster environments that respect difference and empower students to achieve their potential. Care taken in grooming and dress reflects positive self-esteem and symbolizes the role expectations that clients have of nurses. Therefore, students are expected to comply with the dress requirements of the program and the agency to which they are assigned.

3.5.1 General Requirements

Students are expected to observe the following program requirements AT ALL TIMES whether they are in a simulated practice environment (i.e. the Lab) OR in a practicum setting, students in a community health practicum setting should refer to the agency’s policy on dress codes:

- Student identification badge (or agency identification if applicable) is to be worn on the upper body and be visible at all times
- Maintain hair which is clean, neat and under control. Long hair must be tied back.
- Male students should ensure that facial hair is kept clean and tidy
- All practice settings are to be considered scent-free and students should use scent-free personal products
- Keep nails short and clean with no nail polish. Artificial nails are not permitted (infection control requirement)
- The wearing of ANY jewelry is subject to the safety/infection control policies set by the specific agency
- Carry stethoscopes, if owned, in the pocket and NOT worn around the neck for student safety and infection control
- Wearing of proper footwear that includes a closed toe and heel and is in accordance with agency policy. Shoes should provide good support, be clean, and in good condition
- Appropriate undergarments must be worn and completely concealed at all times
- Hats and other head coverings, including scarves, are not to be worn unless for religious purposes

3.5.2 Lab

Scrubs are to be worn at all times while in the lab, a white lab coat can be worn over scrubs. Due to safety concerns, only registered students are permitted in the Lab and related Lab activities.
3.5.3 Practicum Settings Requiring Uniforms

Students will be placed in practicum settings which require uniforms. When uniforms are worn they are to be:

- Scrubs, that fit properly and are clean
- Navy blue in colour (BScN program requirement) *exception is during the final year practicum placements where students may wear other colours providing they are in accordance with the practicum agency’s dress code

Any garment worn underneath a uniform must be professional and have sleeves no longer than ¾ length. Lab coats may be worn except when giving direct client care.

Uniforms (or any part thereof) should not be worn off hospital property. When there are no facilities available for changing at a specific agency, as per professor’s directions, students must change their shoes and wear a coat covering their uniform when coming and/or leaving the agency.

It is recommended that students have an extra uniform available in the practicum agency.

3.5.4 Practicum Settings Not Requiring Uniforms

Students will be placed in practicum settings where uniforms are not required. In this case, students must follow dress code requirements as per specified by the agency’s policy.

Students who follow specific dress requirements for cultural or religious reasons are invited to speak directly with the lab technologist or their professor/clinical instructor/faculty advisor to ensure that their needs are met within this policy.

Any student whose appearance does not meet the uniform guidelines may be required to leave the practicum area, with the resultant loss of required hours.

3.6 Accident/Incident/Injury in the Practicum Setting

Students on unpaid placement are entitled to Worker’s Compensation type coverage or private insurance purchased through the Ministry of Training, Colleges and Universities (MTCU). All students must review and sign the Student Declaration of Understanding to be eligible for insurance coverage.

3.6.1 Accidents/Injury

Any student/staff sustaining an accident/injury during class, or at a practicum placement, must fill out the Accident/Injury Report. Any accident/injury may result in a Workers’ Compensation Claim. Please discuss this with your Clinical Instructor/Preceptor immediately and provide copies of written documentation to your Year Coordinator within 24 hours of your accident/injury.

In the event of an accident/injury the student must:
i) Notify the Clinical Instructor/Faculty Advisor of the accident/injury immediately (email is acceptable if on a night shift).

ii) Complete the Accident/Injury Report within 24 hours following the injury. The form can be found at: http://healthandsafety.uoit.ca/forms/accident-injury-form.php. The form must be filled out by the injured person.

iii) If accident/injury occurs on a practicum placement, notify the placement agency of the injury, and also follow the agency’s policy for reporting the injury.

3.6.1.1 WSIB Reporting

If it is determined that the accident/injury requires Workplace Safety and Insurance Board (WSIB) notification, the WSIB form “Employers’ Report of Injury/Disease Form 7” will be completed by the Director of Risk Management with the assistance of the student, and submitted to the practicum coordinator the following business day.

The WSIB form is to be completed if the work related injury has caused the student to:

- Be absent from their regular work and/or
- Require modified work and/or
- Obtain Health/Medical Aid
- See Occupational Health Nurse at agency as necessary

The law requires the WSIB form to be completed within 3 calendar days after the injury. If you have any questions about whether a WSIB form should be completed call the Practicum Office.

3.6.2.1 Incidents: Personal Injury to Student

Definition of Exposure: Exposure encompasses situations such as a break in the integrity of the skin due to needle stick injury, scratches, bites, lacerations and contact as a result of splashing blood or other bodily fluids to which standard precautions apply.

If an Exposure occurs then immediately apply first aid:

i) Instruct the person to press cuts or punctures of the skin to make it bleed

ii) Wash the area with soap and water

iii) If eye(s) are splashed, rinse with tap water or saline, with eye(s) open

iv) If mouth is affected, spit out suspected fluid and rinse with water

v) If splashed and contact with skin occurs, wash area with soap and water, then assess the integrity of the skin contacted

3.6.2.2 Reporting and Post-Exposure Management

Students and staff members should report exposures immediately after they occur to ensure any appropriate interventions are put in place in a timely fashion. For example, prophylaxis against Hepatitis B must be initiated promptly to be effective.

The exposed student/staff should:

i) Notify their immediate supervisor (i.e. Faculty Advisor/Clinical Instructor)

ii) Determine if need to see immediate attention or

iii) See a physician within 12 hours of the exposure for initial evaluation, treatment as needed, and/or counselling
iv) Follow all agency policies in which the exposure occurred  
v) Notify the Campus Health Centre  
vii) Complete the Accident/Injury Report within 24 hours following the exposure

**WSIB & Smoking Policies:** If an agency has a no smoking policy on their property and the student chooses to leave the property to smoke, should the student suffer injury during this time, there is no workplace accident coverage.

### 3.6.3 Incidents – Injury to Client/Patient

An incident is an event, which actually or potentially affects the safety of an individual or individuals. **THIS DOES NOT INCLUDE PERSONAL INJURY TO THE STUDENT.** The student must report all incidents immediately to the co-assigned nurse(s), and to the assigned professor. Incident Reports should be seen as valuable learning tools which aid in evaluation of existing policies, procedures, equipment, etc., and help ensure and maintain safety for client, student, visitor and staff. All agencies involved will use the information for quality assurance purposes and to assess trends.

Incidents which are reportable include, but are not limited to:

- Medication and treatment errors  
- Client falls  
- Equipment failures

Incident Reports are required to be completed for all actual errors.

The Incident Report Forms can be found in Appendix B of this Handbook and in the Practicum Handbook folder on Blackboard.

#### 3.6.3.1 Student Responsibilities in an Incident

In the event of an incident the **student** will:

i) Ensure the safety of the client  
ii) Report the incident to the co-assigned nurse or preceptor and the professor  
iii) Follow all agency policies  
iv) Document in the patient’s health record an objective, factual account of the incident with the assistance of the preceptor and/or professor/clinical instructor.  
v) Inform the client of the error if directed to do so in consultation with co-assigned nurse  
vii) Under the direction of the co-assigned preceptor or professor/clinical instructor, complete the factual account of the event on the agency Incident Report  
vii) Complete the **OUIT-DC-GC Incident Report.**

#### 3.6.3.2 Co-Assigned Nurse or Agency Delegate Responsibilities in an Incident

In the event of an incident the co-assigned **Nurse/Agency delegate** will:

i) Ensure the agency policies are followed  
ii) Assist the student to complete the factual account of the incident in the patient’s health record  
iii) Complete the agency Incident Report. The student may be asked to contribute to the factual account of events pertaining to the incident report on the agency’s Incident Report.
Neither the student nor the professor is to complete the “Recommendations” section of the agency Incident Report
iv) Notify assigned Collaborative BScN Program Faculty representative and/or the
v) Practicum Coordinator
vi) Support the student when informing the client of the error

3.6.3.3 Professor Responsibilities in an Incident

In the event of an incident the Professor will:
iv) Ensure the safety of the client
v) Assist the student, as necessary, to contribute to the factual account of the event on the agency Incident Report and support the student when informing the client of the error
vi) Review the agency Incident Report, as necessary. If the professor is reviewing this after the time of the writing of the report, the professor may ask the Unit Leader to see the report. The school will not be given a copy of the agency report
vii) Review the student’s charting of the Incident, as necessary
viii) Forward the Incident Report to the Year Coordinator. A copy of the report will be retained in the student’s file.

In the event of a potential error, based on agency policy the professor may decide to complete an Incident Report only. This provides the student with an excellent opportunity to learn from the event. This report is to be forwarded to the Year Coordinator and to be filed in the student’s file. Any potential error or “near miss” will be considered in evaluating student competence.

Note: It is the responsibility of students, agency staff and professors to identify, to the individuals involved, when a breach of professional conduct or agency regulations is observed. If the situation cannot be satisfactorily resolved, it should then be discussed with the appropriate authority (agency, staff, professors, and coordinators, Director or Dean).
SECTION 4: COMPETENCIES & ASSESSMENTS

4.1 Collaborative BScN Programs Skill Requirements

In nursing practice environments, it is essential that nurses are able, in a timely manner, to complete the following broad scope of activities:

- Appropriately determine what action is to be taken based on analysis of complex contextual information and verbalize this understanding
- Provide clients with appropriate information and opportunity to either consent or not to the proposed nursing action
- Undertake the nursing action safely, competently, and ethically
- Evaluate its effectiveness (if possible)
- Document the action taken

Students can expect that one or more of the evaluation components or criteria for all practicum courses (including lab courses) will involve timed elements. Due to a concern for safe practice, the timed element of the evaluation component or criteria cannot be waived or extended.

4.1.1 Skill Requirements

Within each setting, the specific practice requirements may vary to some degree. The CNO has outlined the Requisite Skills & Abilities required for successfully completing the required activities across the range of practicum settings that students will experience in the Collaborative BScN Program.

CNO Requisite Skills and Abilities can be found in Appendix C of this handbook.

4.2 Regulatory Acts during all Practicum Placements

In nursing practice environments, it is essential that nurses are able, in a timely manner, to complete the following a broad scope of activities.

The purpose of this section is to clarify guidelines for nursing students during practicum. This guideline has been adapted from the CNO National Competencies (2014).

The Regulated Health Professions Act (RHPA) provides for nursing students to perform Controlled Acts under the following exception:

“When, under the supervision or direction of a member of the profession, a student is learning to become a member of that profession and the performance of the procedure is within the scope of the profession’s practice.”
Under the RHPA, Nursing is authorized to perform three of the 13 controlled acts:
1. Perform a prescribed procedure below the dermis or a mucous membrane
2. Administering a substance by injection or inhalation
3. Putting an instrument, hand, or finger:
   a. Beyond the external ear canal
   b. Beyond the point in the nasal passages where they normally narrow
   c. Beyond the larynx
   d. Beyond the opening of the urethra
   e. Beyond the labia majora
   f. Beyond the anal verge
   g. Into an artificial opening in the body
4. Dispensing a drug.

These controlled act procedures must be ordered by a medical doctor, dentist, midwife, chiroprgist, RN (EC) or a general class RN member who is authorized to initiate controlled acts authorized to nursing.

Nursing students cannot initiate or delegate (as defined below) controlled acts authorized to nursing. Nursing students cannot accept delegation of a controlled act authorized to another profession.

When in doubt regarding the performance of a controlled act or practicum procedure, students must familiarize themselves with the agency/institutions policy and procedures prior to engaging in direct or indirect client care.

The following steps must be followed:
• Review the guidelines as outlined in this document
• Review policies of the student’s educational centre
• Consult Practicum Instructor/Preceptor/Advisor, and/or the Level Coordinator of the Collaborative BScN Programs

In general, students should familiarize themselves with the current versions of the following documents:
• The College of Nurses of Ontario, The Regulated Health Professions Act, Control-led Acts Model (2014)
• The College of Nurses of Ontario, Decisions About Procedures and Authority (Decision Tree) (Revised 2014)
• The College of Nurses of Ontario, RN & RPN Practice: The client, the nurse, and the environment (2014)
• The College of Nurses of Ontario, Professional Standards (Revised 2002)

Delegation: Delegation is the transfer of authority established in the legislation to a person not otherwise authorized to perform a controlled act procedure.

Initiation: Initiation refers to the authority from regulations under the Nursing Act to independently decide to order and perform a procedure in the absence of a specific order or medical directive
from a physician. If initiating is within the role and the nurse is competent, the initiating RN may perform the procedure, or may write the order for another nurse to perform. This authority is only granted to those who meet certain conditions outlined in regulations under the Nursing Act.

4.3 Practicum Evaluation Process

Practicum evaluation is used to reflect the expected clinical performance outcomes of Collaborative BScN Programs’ students.

Evaluation is both a formative and summative process. Formative evaluation includes the day-to-day informal feedback that occurs in the form of regular debriefing, providing encouragement, praise and feedback, clarification, teaching and revision of action, values, beliefs, and conceptualizations. It may be provided verbally or in written form [i.e. Reflective Critical Analysis (RCA), Learning Plans (LP), Praxis Progress Record (PPR), Clinical Updates (CU) or other documents]. Summative evaluations are the formal evaluations that take place at midterm and final evaluation meetings.

4.3.1 Relationship to the Caring Philosophy

In keeping with the philosophy of the caring curriculum, the evaluation process will be collaborative and interactive, empowering, and student-centered. It follows that the student is intimately involved with the evaluation process.

The following points are inherent in the evaluation process philosophy:

- A caring approach is fundamental to helping the student achieve success
- The review process must be based in praxis
- Learning outcomes in psychomotor, cognitive and affective domains
- Learning is internalized and is a personal experience unique to every student. However, course competencies must be demonstrated in order for a student to be successful
- What is gained from each learning episode varies from learner to learner
- Recognition of mastery and excellence is as important as recognizing areas that need improvement
- Ongoing feedback is necessary for growth and to reinforce the development of accountability and professionalism

The ultimate goal of the nursing program is to graduate caring, safe, ethical and competent practitioners who are accountable to the CNO Professional Standards (Revised 2002) as well as responsive to the needs of the consumer and society at large.

4.3.2 Evaluation Process

Evaluation is an ongoing process that involves a review of the student’s progress in the practicum in each semester. This includes regular written feedback and/or verbal dialogue between the student and his/her practicum professor specifically about the student’s progress towards achievement of the learning outcomes and leveled competencies for his/her year of study.
In preparation for formal midterm and final evaluation meetings, students are to submit all components of the evaluation tool and the learning plan with appropriate evidences by the assigned due date. This provides the practicum professor (and preceptor where applicable) with the opportunity to consider the student self-assessment when he/she completes the evaluation. The student and practicum professor (and preceptor where applicable) will meet thereafter to discuss the evaluation and the feedback. At both midterm and final evaluation, the preceptor and faculty advisor must sign a copy of the evaluation. A copy of the evaluation, including both midterm and final evaluation feedback will be placed in the student’s file.

4.3.2.1 Basis of Evaluation

The midterm and final evaluation documents used in the Collaborative BScN Programs follow a consistent format, but are modified for each level of the program. The tool is intended for use by students for self-evaluation purposes for each practicum course. The form is also used by practicum professors and preceptors where applicable, to evaluate students in the practicum setting. Contextual Evaluations may also be conducted at any point where there is identified concern about student performance.

Evaluations of practicum performance are based on the following:

- Consistently and safely meeting the practicum course learning outcomes and associated practice competencies as outlined in the associated evaluation document
- Consistently following the overriding principles, outlined in Section 1 of the Practicum Handbook, and other guidelines set out in the Practicum Handbook
- Submission of a learning plan (outlined in the section below), inclusive of personal learning goals related to the practicum area and completing all identified evidences of accomplishment
- Submission of practicum requirements such as PPRs, RCAs, CUs (via email)
- All criteria of the course syllabus have been successfully met
- Expectation that the allotted number of hours for the course have been fulfilled in the final year.

4.3.2.2 Learning Plan

At the beginning of each practicum, students will develop a learning plan and obtain feedback from their Practicum Professor. This learning plan will be developed using the program goals, course learning outcomes and associated practice competencies, and the students’ learning needs. The following are guidelines for preparation of the Learning Plan:

i) Develop a learning plan by identifying what you want to learn from an experience. A good question to ask yourself is “What do I need to learn to think like a nurse in this experience?” You should also identify the attitudes that you would want to develop.

ii) Decide on what kind of feedback you would like from the placement agency and the practicum professor/preceptor. You should request meaningful feedback that will help you grow and progress. Keep in mind that people are busy and may not have time to complete a lengthy feedback form, so specific feedback provided in a convenient way is preferable. If feedback is verbal, you will need to transcribe it and include it with your submissions (i.e. PPR, RCA).

iii) As a caring and competent nurse, it is expected that you will delve into the lived experience of the clients whom you care for. To fully understand their lived experience it is important
to have a good understanding of their health, health challenges, treatments, medications and so forth. When you research the clients whom you will work with, write all of the details that you can obtain from the chart. Visit the clients and talk with them. What are their issues and concerns? What would they like in their care? What are their desired health outcomes?

iv) Once you have the baseline information, research to gain greater understanding and meaning. For example if your client is in rehabilitation for a fractured hip, you will want to research about hip fractures, the treatment, rehabilitation, prevention, possible challenges, and health teaching that may be anticipated. It is also important to look at the medications ordered and laboratory results. Ask the client about his/her home environment – do they live alone? How many stairs? etc. By gaining a full understanding of the challenges, you will reinforce the learning that you have acquired, understand it at a deeper level, and be able to provide better care.

v) To increase your own confidence you may also need to review nursing skills by going back to the Health Care Learning Centre so that you may perform safely and competently. Independent practice review times are available in the Health Care Learning Centre and posted on Blackboard. Being prepared will make experiences more meaningful and assist with your confidence level as well. It is an expectation, as a caring, competent practitioner, that you will provide a safe environment for clients by having knowledge of agency policies and procedures and the client’s experience.

vi) A caring, competent nurse is one who can efficiently work with good time management and organizational skills. Develop a system that will allow you to be organized so that you do not forget or omit important aspects of your care. This is the benefit of developing and utilizing worksheets for practicum.

vii) It is expected that your interest in your chosen experiences will motivate you to learn as much as possible about the agency, the roles and functions of personnel, services, and programs. You need to utilize any opportunity to participate in meetings, conferences, and special groups. Try to figure out or ask how you can contribute while you are also learning.

viii) Take the initiative to meet with your practicum professor/preceptor regularly to reflect on your learning and to get feedback.

ix) At the end of each day, ask yourself what has happened that helped you to accomplish or work towards accomplishing your learning plan. Ensure that whichever way you choose to represent your accomplishment is related to the learning plan/learning objectives/competencies. Collaborate with your practicum professor/preceptor if you are unsure.

x) Be prepared to share the findings from your experiences with your peers in confidence and answer any questions that they may have about your experience.

xi) Always remember you are representing the Collaborative BScN Program in any placement experience. Your enthusiasm and interest in learning helps to guarantee a placement for the next student. Therefore, it is necessary to maintain positive relationships. In addition, the client’s best interests and safety must be protected (e.g., confidentiality).
4.3.2.3 Contextual Assessments

The Nursing Program reserves the right to require that a student undergo an assessment of knowledge, skill, and/or judgment should concern arise as to the student’s performance at any time in the program. Assessments may take the form of simulations, skills, written tests, and Observed Structured Clinical Exams (OSCE) or other timed objective evaluations. If gaps in knowledge, skill, or judgment are uncovered during this assessment, a remedial plan will be implemented. Depending on the nature of the identified gaps and the required remedial plan, in serious cases return to practicum may be delayed until the student is able to demonstrate the required competencies. If the student is not able to demonstrate the required competencies within an appropriate timeframe, it may be determined that the student is not able to pass the clinical course.

4.3.3 Protocol for Addressing Performance-Related Issues

Students, preceptors and faculty advisors should refer to the section of the UOIT Undergraduate Academic Calendar on Program Professional Suitability (Section 15.3.10) for further information on University regulations on addressing issues of unsafe practice.

Every effort will be made to support the success of the student, through a Collaborative Success Plan (CSP), when an issue or problem related to performance or safe practice is raised by:

a) the student
b) the faculty advisor
c) the agency or community partner
d) the preceptor and/or
e) a delegate of that agency at any time during the practicum experience

When concerns are raised, the student must be notified immediately, in person where possible, followed by written documentation. Written documentation is not limited to the evaluation form. It includes emails and typed or written comments/notations shared with the student.

4.3.3.1 Collaborative Success Plan

A Collaborative Success Plan (CPC) is a collaborative tool, initiated by faculty (and clinical instructor) and developed in consultation with the student, with the goal of assisting the student to be successful in the practicum experience. The CSP may be issued in one or more circumstances listed below. The student:

- is not progressing satisfactorily or is failing to achieve learning outcomes
- has not met the required Entry to Practice Competencies for appropriate year of studies within the time frames
- has received more than one or more Professional Practice Alerts
- is at risk for failing to meet the outcomes related to absenteeism

The CSP identifies areas of unresolved difficulty, sets goals for improvement, outlines an action plan to facilitate the student’s learning, and sets a target date to review the student’s progress. A part of the process is mandatory reflection by the student with a due date assigned by the faculty member.

At the time the CSP is issued, the student is considered to be failing the practicum experience.
If the goal(s) are not met, the student will receive a failing grade for that practicum experience. **Please note that in the case of serious/critical safety concerns and/or breaching of overriding principles or policies and in consultation with the Director of Nursing, the student may be removed from the practicum experience.**

Examples of possible problems that may require a Collaborative Success Plan include, but are not limited to:

- Not meeting the learning outcomes of the Practicum
- Difficulty with application of knowledge, skills and judgment
- Professional accountability issues that are not grave

The Collaborative Success Plan is completed collaboratively by the student, practicum professor/faculty advisor and/or preceptor, and may have input from the Course Lead. Please note that a Collaborative Success Plan can be started at any time (by Instructor or Student), not just at mid-term. The intent is to help identify areas of difficulty and to review the options available to address these difficulties. The plan will help the student to clarify responsibilities and direct the learning effort. The student is expected to play an active role in planning and implementing the Collaborative Success Plan. Once completed, the Plan along with the remaining aspects of the course expectations will be used to evaluate clinical performance. Failure to fulfill the Plan may result in a “Fail” grade in the clinical/practicum component of the course.

The Collaborative Success Plan form can be found in Appendix A of this Handbook.

### 4.3.3.2 Success Meeting

When concerns are raised regarding student performance, a formal Success Meeting may accompany the development of the Collaborative Success Plan. The meeting is directed towards resolution of the issues and will involve the student, practicum professor, preceptor and/or Year Coordinator.

These meetings are taped and/or minutes are recorded. The student may receive a summary of the minutes if he or she wishes. Success meeting outcomes normally require development of a contract for resolution of identified concerns within a specific time frame.

### 4.3.3.3 Practicum Progression Requirement Review

During practicum the student's progress in the following areas are assessed on an ongoing basis:

- Achievement of the learning plan
- Meeting the Overriding Principles (see Section I of this Handbook)
- Meeting program learning outcomes
- Achieving year level competencies

If the student is not progressing satisfactorily in any of these regards, the faculty member will identify concerns with the student as they present themselves in the practicum environment and may choose to implement a Practicum Progression Requirement Review.

In the case of a Practicum Progression Requirement Review, the Practicum Professor or Faculty
Advisor, in consultation with the Year Coordinator, will determine if the student is to be removed from the practicum setting until a remediation plan can be developed.

The Practicum Progression Requirement form can be found in Appendix A of this Handbook.

4.3.3.4 Clinical Review

Issues of Program Professional Suitability, identified through a Practicum Progression Requirement Review or as a result of an independent incident, may result in a Clinical Review. Clinical reviews are done in accordance with Section 13.6.10.2 of the Academic Calendar which states:

A student in practicum placement, who has exhibited behaviour that is inconsistent with the norms and expectations of the profession, or that places the student, clients or others at risk, may be immediately suspended from the program and subject to a review and possible sanctions, in accordance with Section 5.16 of the Academic Calendar.

Clinical Reviews will follow the procedures established by the Faculty of Health Sciences.

4.3.3.5 Practicum Failure

Failure in practicum occurs when students, at final evaluation, have failed to perform at a competent level and meet expected course learning objectives and competencies.

Specifically, a practicum failure will occur when a student:

- Demonstrates a level of performance such that on evaluation he/she rates below a PASS on meeting course learning objectives
- Who has received a failing assessment, prior to the final evaluation, does not demonstrate consistent improvements in the areas of concern that were identified and for which a Collaborative Success Plan was implemented
- Receives a failing grade as a result of sanctions applied in accordance with Section 5.16 of the Academic Calendar

In courses with a theoretical component, students must successfully achieve a “pass” grade in both practicum and theoretical components to receive credit in the course. Students who receive a practicum failure will not receive credit for the course. A student who receives a practicum failure at final evaluation will receive an overall grade of F in the course, regardless of the numeric grade received. If the student is provided with the opportunity to repeat the course, he or she must repeat both the practicum and theory components of the course.

4.3.3.6 Professional Practice Alert

The Professional Practice Alert (Appendix D) is a document given to a student who does not meet the overriding principles and thus has put a client, family, peer, member of the inter-professional health team or institution at risk because of breaches in safe practice, which include but are not limited to, the College of Nurses of Ontario Standards/Guidelines, agency policies, UOIT-DC-GC nursing programs’ policies or current best practices and legislation. Depending on the nature of the incident a Collaborative Success Plan and / or contractual learning plan and / or Reflective
Critical Analysis may be initiated and may result in a failing status. Professional Practice Alerts will be issued by the professor/clinical instructor/ faculty advisor/ Year Coordinator for the following types of occurrences. Examples are provided:

- Safety
- Professionalism
- Accountability
- Respect
- Communication
- Consistency
- Confidentiality
- Ethical Practice
- Medication Administration
- Use of technology for personal/social use at Practicum

**Seriousness of Incident:**
Professional Practice Alerts will be classified as:

- **Potentially Harmful**
  Near miss errors for medications, or incidents where client, peers, inter-professional team or institution is unharmed i.e. Failure to assess client in restraints as outlined in agency policy with no harm to client.

- **Significant**
  Medication errors, near miss medication error for high alert medications resulting in no negative/harmful outcome for the client, or incidents in which no medical intervention is required for the client.

- **Critical**
  Medication error with high alert drug and/or a medication error which causes harm or a negative outcome to a client or any incident which causes harm requiring intervention to client, peers, inter-professional team or institution.

The student is expected to provide safe and competent care so that no harm (physical, psychological or material) comes to the client or others. Students are responsible and accountable for their own actions.

Students must

- maintain all previous learning
- ensure they are prepared to carry out the necessary care for assigned clients
- ask for additional help or supervision in situations where they feel inadequately prepared
- comply with the policies of the agency
- comply with the policies and expectations of the UOIT collaborative nursing Programs
Collaborative Success Plan
Form to Address Performance-Related Issues

<table>
<thead>
<tr>
<th>This form is:</th>
<th>☐ Collaborative Success Plan</th>
<th>☐ Practicum Progression Requirement Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Name (Please Print):</td>
<td></td>
<td>Banner ID:</td>
</tr>
<tr>
<td>Course Code:</td>
<td></td>
<td>Date:</td>
</tr>
<tr>
<td>Faculty Advisor:</td>
<td></td>
<td>Course Professor:</td>
</tr>
<tr>
<td>Placement Location:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A. SUMMARY OF LEVEL OF PERFORMANCE:

B. FACULTY ADVISOR’S DESCRIPTION OF SITUATION/PRACTICUM ISSUES/CONCERNS:

i) Areas where student is meeting requirements:

ii) Areas where student is observed to be experiencing difficulty:
C. STUDENT'S DESCRIPTION OF SITUATION/PRACTICUM ISSUES/concerns:

iii) Areas where you believe you are attaining success:

iv) Areas where you perceive you 'need improvement':

D. PLAN FOR SUCCESS (TO BE COMPLETED COLLABORATIVELY)

<table>
<thead>
<tr>
<th>Minimal expectations to demonstrate competency or PASS (Goals)</th>
<th>Actions Required to Meet Course Expectations</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

Referral required for lab: (If yes, complete Lab Referral section below)

☐ Yes ☐ No

Date communicated:

Communication to practicum office required

☐ Yes ☐ No

Date communicated:

Date to Review Progress:

☐ Yes ☐ No
### LAB REFERRAL

<table>
<thead>
<tr>
<th>Referral for:</th>
<th>Recommendation</th>
</tr>
</thead>
</table>
| **Recommended Skill Development** | - Student requires remedial clinical skill development in the lab during IPR time  
|                        | - Student requires remedial clinical skill development at a mutually arranged time |
| **Recommended Lab Assessment** | Student is to be withdrawn from clinical practicum setting until such time that the assigned assessor has approved competency in the skills designated below:  
|                        | - Yes □ No                                                                     |

### A. DESCRIPTION OF CLINICAL COMPETENCY REQUIRING REMEDIAL SKILLS DEVELOPMENT WITHIN THE LAB:

<table>
<thead>
<tr>
<th>Student Signature:</th>
<th>Date:</th>
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</table>

<table>
<thead>
<tr>
<th>Faculty Advisor Signature:</th>
<th>Date:</th>
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<table>
<thead>
<tr>
<th>Course Professor:</th>
<th>Date:</th>
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</table>

### COMPETENCY APPROVAL

*This section to be completed after competencies are practiced, observed, and approved*

<table>
<thead>
<tr>
<th>Student Signature:</th>
<th>Date:</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Assessor Signature:</th>
<th>Date:</th>
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</table>
Durham College/University of Ontario Institute of Technology
Incident Report Form
For use if electronic access not available

<table>
<thead>
<tr>
<th>Student’s Name:</th>
<th>Year:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practicum Area:</td>
<td>Professor:</td>
</tr>
<tr>
<td>Date/Time of Incident:</td>
<td></td>
</tr>
<tr>
<td>Individual Discovering Incident:</td>
<td></td>
</tr>
<tr>
<td>What Occurred (be specific and concise):</td>
<td></td>
</tr>
<tr>
<td>Details of Incident:</td>
<td></td>
</tr>
<tr>
<td>Relevant Doctor’s Orders:</td>
<td></td>
</tr>
<tr>
<td>Patient’s Age and Diagnosis:</td>
<td></td>
</tr>
<tr>
<td>Individuals Notified Regarding Incident: (date &amp; time)</td>
<td></td>
</tr>
<tr>
<td>Agency incident report completed:</td>
<td>☑ Yes ☑ No</td>
</tr>
<tr>
<td>Incident documented on chart:</td>
<td>☑ Yes ☑ No</td>
</tr>
<tr>
<td>Client/family notified of incident:</td>
<td>☑ Yes ☑ No</td>
</tr>
<tr>
<td>Interventions implemented to manage client outcomes:</td>
<td>☑ Yes ☑ No</td>
</tr>
<tr>
<td>Other Recommendations to Student:</td>
<td></td>
</tr>
<tr>
<td>Professor Signature:</td>
<td>Date:</td>
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<tr>
<td>Student Signature:</td>
<td>Date:</td>
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Requisite Skills and Abilities
for nursing practice in Ontario

Introduction
This document is intended to provide information for prospective nursing students, guidance counselors, educational institutions, nursing program admission officers, disability service providers and the public about the general demands and performance expectations of nurses in Ontario. These necessary capabilities are called Requisite Skills and Abilities (RSAs). Information about RSAs in relation to entry to nursing practice may be used to gauge personal fit with the requirements for nursing practice as a career choice.

The College of Nurses of Ontario (the College) is the regulatory body for the province’s approximately 150,000 nurses. It works to protect the public interest by setting entry-to-practice requirements, developing and enforcing standards of practice and providing programs to help nurses maintain competence throughout their careers. Despite its name, the College is not a school and is not involved in students’ admittance to nursing education programs. Upon completion of their nursing program, students apply to the College for membership, which is required of anyone who wants to practise nursing in Ontario.

At the completion of their nursing educational program all student nurses must demonstrate the capacity to meet the College of Nurses of Ontario’s (CNO) Entry-to-Practice Competencies for Ontario Registered Practical Nurses or National Competencies in the context of entry-level Registered Nurse practice and be able to practise within the context of CNO’s nursing practice standards.

1 The seven categories are based on the original work of the College of Registered Nurses of British Columbia (CRNBC), with minor adaptations. Other registered nurse regulatory bodies across Canada have also used CRNBC’s framework to develop their own jurisdictional-specific RSAs [i.e. The College and Association of Registered Nurses of Alberta (CARNA), the College of Registered Nurses of Manitoba (CRNM), the College of Registered Nurses of Nova Scotia (CRNNS) and the Saskatchewan Registered Nurses Association (SRNA)].
CNO recognizes that meeting the entry-to-practice competencies requires certain skills and abilities. Seven categories have been identified by CNO as capturing the components necessary for nursing practice. They are:
1. Cognitive
2. Communication
3. Interpersonal
4. Behavioral
5. Psycho-motor
6. Sensory
7. Environmental

These categories represent reasonable and justifiable skill and ability requirements for entry-level nursing practice in Ontario. They are reflected in the competencies required for registered nurse (RN) and registered practical nurse (RPN) practice as a generalist.

Each requisite skill and ability is listed with examples of entry-level nursing activities that illustrate the skill and ability. The examples provide a snapshot of the nature and kinds of activities expected of a student once they become an RN or RPN and enter into typical entry-level nursing practice.

2. Communication requirements
Ability to express and receive written, verbal and/or non-verbal language and the ability to interact with others in a respectful and professional manner:
- Speak, read, listen and write in the English and/or French language at a level that provides for safe and accurate understanding of words and meanings
- Recognize own non-verbal signals and interpret those received from others while considering individual differences in expression and associated meaning
- Elicit and respond to information from clients, colleagues and others

Examples:
The student: accurately obtains and records client information in the chart; communicates clearly with other health care providers; listens appropriately to clients and demonstrates awareness that each individual’s behavior may have different meanings.

3. Interpersonal requirements
Ability to create good relationships between oneself and other people:
- Develop professional relationships and rapport with individuals and groups
- Recognize the importance of maintaining interpersonal boundaries
- Recognize the needs of clients and colleagues

Examples:
The student: identifies that others have needs and perspectives that might be different from his/her own; recognizes the importance of client perspectives and feelings.

4. Behavioral requirements
Ability to conduct oneself in a professional manner:
- Manage own behavior well enough to provide safe, competent and ethical nursing care
- Engage with self and others to create a safe environment
- Respond appropriately in situations that are stressful or involve conflict
- React appropriately to giving and receiving physical touch and working in close proximity with a full range of clients

Examples:
The student: uses past experiences to inform current decision-making; perceives when situations require further inquiry; performs arithmetic skills to safely administer medication; can make sense of complex information.
• Fulfill responsibility as part of a team
• Manage time appropriately

**Examples:**
The student: responds appropriately in conflict situations; remains calm in stressful situations; recognizes priorities in the face of multiple demands.

**5. Psycho-motor requirements**
Ability to perform each of the following requisites well enough to provide client care and participate in educational activities:
• Stand and maintain balance
• Manual dexterity
• Move within limited spaces
• Push/pull
• Perform repetitive movements
• Perform hand-eye coordination
• Bend
• Reach
• Lift
• Walk
• Climb
• Carry objects

**Examples:**
The student can: help lift, turn and/or transfer clients; climb stairs for a home care visit; enter information into a computer while taking client health history; remove sutures and staples; give injections.

**6. Sensory requirements**
Ability to utilize each of the following senses well enough to provide care and participate in educational activities:
• Sight
• Hearing
• Touch
• Smell

**Examples:**
The student: can see and read lines of demarcation and numbers on a syringe; can hear verbal communication or sounds of a client in distress; can feel a client’s pulse; can detect an odor.

**7. Environment requirements**
Ability to function in the presence of each of the following commonly encountered and unavoidable environmental factors:
• Noxious smells
• Disease agents
• Distractions
• Noise
• Chemicals
• Unpredictable behavior of others

**Examples:**
The student: can tolerate unpleasant odors; can deal with the distraction of a crying baby while providing care to a sibling; can recognize dangers in the client environment.

**Conclusion**
Individuals considering a career as a nurse in Ontario should review this document and assess their ability to meet the criteria. The RSAs serve as a benchmark, outlining the requirements to meet the minimum standard necessary to ensure public safety.

Anyone who has questions about whether or not they have the RSAs for admission or progression through a nursing educational program should contact the educational institution to which they intend to apply to explore the kinds of supports they may require. This may necessitate disclosure and provision of evidence, which must be treated in a confidential and nondiscriminatory manner. Educational institutions are expected to work with prospective students.

Applicants who have questions about whether or not they have the RSAs to be registered as an RN or RPN should contact CNO to explore the kinds of supports they might require. CNO is expected to work with prospective members to determine reasonable accommodation provided that accommodation does not compromise client safety and well-being.
# Appendix D

## Professional Practice Alert

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Student</td>
<td>Date</td>
</tr>
<tr>
<td></td>
<td>Semester</td>
</tr>
<tr>
<td></td>
<td>Agency</td>
</tr>
</tbody>
</table>

Alert number: 1st  2nd  3rd  (please circle number) Other: ________________

### Rationale

- Safety
- Professionalism/Accountability/Respect
- Communication -
  - Client
  - Team
  - Teacher/Faculty
- Consistency
- Confidentiality
- Ethical Practice
- Medication Administration -
  - Potential error
  - Actual error
  - Near Miss
- Personal/social use of technology - computers, phones etc.
- Pre-practicum documentation requirements
- Attendance
- Other (explain)

### Follow-Up

**Seriousness of Occurrence:**

- Potentially Harmful 1st Professional Practice Alert this rotation
- Reflection required.
  - No Collaborative Success Plan is required.

- Potentially Harmful 2nd or more Professional Practice Alert this rotation
- Collaborative Success Plan, revised Learning Plan and Notification to Year Coordinator required.

**Brief Factual Description**  
(Completed by: Faculty/Clinical Instructor/Faculty Advisor/Practicum Office) **Signature:**

---

Agency Incident report completed: Yes  No  Date: ________________

University Incident report completed: Yes  No  Date: ________________  Student Signature: ____________________________

Year Coordinator Notified: Yes  No  Date: ________________