

Faculty of Nursing



# STUDENT HANDBOOK 2022-2023



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# Welcome to the Faculty of Nursing

This Handbook was developed for nursing students to promote a positive learning experience and enhance professional growth and development. It provides a concise resource for information on regulations and policies, with the primary reference being the 2022-2023 University calendar <a href="https://www.mun.ca/regoff/calendar">https://www.mun.ca/regoff/calendar</a>. Hyperlinks to specific sections in the calendar related to nursing, are provided in this handbook.

The Bachelor of Nursing [BSCN] (Collaborative) Program is currently accredited by the Canadian Association of Schools of Nursing (CASN) and approved by the College of Registered Nurses of Newfoundland and Labrador (CRNNL). This approval designation assures both the public and our students that the program prepares ethical entry-level practitioners who provide safe quality health care. Program graduates meet the requirements for licensure and professional practice as registered nurses in Canada and around the world.

The vision of the Faculty of Nursing (FON) is to be responsive and engaging leaders in nursing education and research provincially, nationally, and internationally by developing quality teaching, learning, and research environments. Our nursing graduates will be skillful, caring, knowledgeable nurses who have a clear vision of the nursing discipline and who strive for excellence in health care and the health and well-being of individuals, groups and communities. Graduates will be prepared to collaborate with others, and be responsive to human diversity and equity in an effort to improve health for all.

# 1.0 The BScN (Collaborative) Program

The Faculty of Nursing's Bachelor of Nursing [BScN] (Collaborative) Program is accredited by the Canadian Association of Schools of Nursing (CASN). The BScN (Collaborative) Program is also approved by the Association of Registered Nurses of Newfoundland and Labrador (ARNNL). This approval designation assures both the public and our students that this program prepares ethical entry-level practitioners who provide safe quality health care. The program graduates meet the requirements for licensure and professional practice as registered nurses in Newfoundland and Labrador. The Bachelor of Science in Nursing (Collaborative) program curriculum and characteristics of the graduate are outlined in Appendix A. The recommended sequence for the BScN (Collaborative) program Four Year Option (4YO can be found here <a href="https://www.mun.ca/regoff/calendar/sectionNo=NURS-0948">https://www.mun.ca/regoff/calendar/sectionNo=NURS-0948</a>

## 2.0 Student Associations and Representation on Committees

## 2.1 Nursing Society

The objectives of Nursing Society are:

- to unify the nursing student body
- to liaise between nursing students, faculty, and other organizations, e.g., Canadian Nursing Student Association (CNSA) a national body
- to provide a medium through which students can express their opinions.

The Nursing Society also sponsors many extra-curricular activities throughout the year including socials, mini-conferences, fund-raisers, health promotion activities and a "Peer Mentor Program". Every student becomes a member of Nursing Society and each class has a Representative who attends Society meetings. Students pay an annual membership fee, which also makes them members of the Canadian Nursing Students Association. Meeting times are posted on the Nursing Society bulletin board and everyone is welcome and encouraged to attend meetings.

Nursing Society has an office outside the entrance to the FON and all members receive the key punch combination to enter/access the office through the Executive members of the society. The Society Room is for the convenience of members. There is also an internal mailbox for the Nursing Society and mail can be dropped at the General Office of the FON.

## 2.2 Canadian Nursing Students Association (CNSA)

CNSA represents all students enrolled in nursing programs across Canada. The purpose of the CNSA is to promote professionalism among nursing students, to advance the nursing profession, and to advocate for students all across Canada. CNSA aims to bring issues relevant to nursing to the attention of student nurses and to foster added awareness of the legal, moral, professional, and educational problems in nursing, and avenues for change as applicable. There are two CNSA representatives at MUNFON: the Official Delegate and one Associate Delegate. These students are elected annually by their peers to represent MUN at the regional and national assembly where key issues are voted on by representatives from nursing schools across Canada. The CNSA provincial and national conference dates will be announced by your class representatives.

How does CNSA fulfil its purpose?

- Provides a communication link among nursing students across Canada.
- Acts as the official voice of nursing students.
- Provides a medium through which members can express their opinions on nursing issues.
- Encourages participation in professional and liberal education.
- Maintains a direct link with other organizations concerned with nursing, including:
- Canadian Nurses Association
- Canadian Association of Schools of Nursing
- Provincial Nursing Associations

- National Student Nurses Association in the U.S.
- International Council of Nursing
- Enhances the awareness of need for nursing research.

## 2.3 Faculty of Nursing Committees

Nursing Society annually elects students to serve on committees of the Faculty Council of the FON. The faculty members value student participation on these committees, which are useful forums for promoting channels of communication among students and faculty. The committees and provisions for student representation are:

- Faculty Council Student Representative
- Undergraduate Studies Committee: (Two representatives share this role)
- Undergraduate Studies Student Appeals Committee
- Awards and Scholarships Committee
- BScN (Collaborative) Program Advisory Committee

# 3.0 General Faculty Policies

## 3.1 Fundraising Activities

Students planning to identify themselves as representatives of the FON at public events require prior permission from the Dean of the Faculty via the Associate Dean for Undergraduate Programs. Such events might be career days, blood pressure clinics, health fairs, public speeches, etc.

Any students who plan fundraisers of any type must have these activities sanctioned by the Nursing Society and when necessary, the Associate Dean for Undergraduate Programs. Any group planning fund-raisers must abide by guidelines established by Memorial University, and the city of St. John's and provincial regulations. This information may be obtained through the Council of the Students' Union. The MUN Risk Management Framework is available to provide guidance when engaging the public in fund raising activities <a href="https://www.mun.ca/risk/Memorial\_University\_ERM\_Framework.pdf">https://www.mun.ca/risk/Memorial\_University\_ERM\_Framework.pdf</a>

Fundraising activities conducted for non-charitable or non-professional purposes (e.g., fundraisers for graduation celebrations) shall be governed by regulations set forth by Nursing Society and the Council of Students' Union (CSU) (the latter being the higher authority). Please keep in mind all such activities you are, in your appearance and behaviour, representing not only yourself, faculty, university, and cohort of beginning nurse professionals. It is also the responsibility of all students to follow university policies regarding events where alcoholic beverages are available/may be served. Please consult <a href="https://www.mun.ca/policy/browse-or-search/browse-policies/university-policy/?policy=333">https://www.mun.ca/policy/browse-or-search/browse-policies/university-policy/?policy=333</a> for further information.

#### 3.2 Identification Cards/Badges

All students will receive a name tag and two photo IDs (a MUN Campus card and a Clinical ID badge for Eastern Health Agencies). For all students, the MUN Campus Card ID will be needed for access to buildings, identification when writing exams and access to student resources.

The Clinical ID badge and name tag is to be worn at all times during *clinical related activities* in all areas of Eastern Health and the Health Science Complex, including the Faculty of Nursing, especially between the hours of 5 p.m. and midnight.

If a Clinical ID is misplaced/lost, the student must notify their instructor and the Clinical Program Administrator (CPA) immediately. The Regional Health Authority's procedure for lost IDs must be followed in order to obtain a replacement.

Students are usually asked to return the Clinical ID to their clinical instructor during their N4516 final evaluation or if on a leave of absence for greater that one semesters. Students will be advised if alternate arrangements will need to been made.

In the event that a student is away from clinical for more than one semester (e.g., leave of absence, program delay or withdrawn from the program), the student is *required to return the Clinical ID to the Clinical Program Administrator*.

#### 3.3 Student Contact Information

All students are provided with a @mun.ca e-mail account. For information re: MUN email accounts see <a href="https://www.mun.ca/cio/it-services/email-and-collaboration/memorial-email/">https://www.mun.ca/cio/it-services/email-and-collaboration/memorial-email/</a> Only the official @mun.ca e-mail account will be used for correspondence to and from students. Please check this e-mail frequently and respond as applicable in a timely manner. If students have any questions or problems with setting up or using their @mun.ca e-mail accounts, contact the help desk for Information Technology Services at (709) 864-4595.

All students must keep their contact information (mailing address and phone number) current on MUN self-service. Students' local telephone/cell numbers will also be requested on the first day of classes in September. The information is strictly for internal, administrative use only and will not be released without written permission of the student.

There are a few important points to remember when sending an email, particularly when the email recipient is someone who does not know you. Email etiquette advice can be found here https://owl.purdue.edu/owl/general\_writing/academic\_writing/email\_etiquette.html

## 3.4 Learning Resources Centre (LRC)

The Learning Resource Centre (LRC) is located in room H2909 of the Faculty of Nursing. The LRC staff and faculty conduct regularly scheduled instructional sessions. These scheduled sessions are listed in the course syllabi and posted on the doors to the lab each semester.

The LRC will also be open for practice during evening and weekend hours under the supervision of student assistants These hours will be posted in the LRC and are dependent upon student demand and staffing resources. Room 2911 is normally available to students on a sign-in basis during weekday hours 9-5. During weekdays, the LRC is available for independent practice only when formal teaching, demonstration, set-up, or evaluation sessions are not in progress and with the permission of the lab instructors.

The following are the policies for the LRC:

- Students are expected to be respectful and professional toward self, peers, student assistants, instructors, and faculty.
- Students are expected to come to the lab sessions fully prepared to participate with all assigned readings and videos completed.
- Students must arrive on time for their scheduled lab session.
- Students must notify their LRC instructor and/or course leader if any labs will be missed.
- Every student participates in the lab practicum on the scheduled date and at the scheduled time.
- No coats, knapsacks, cell phones or personal items are to be brought into the LRC at any time.
- Faculty color uniforms and name tag must be worn for final practicums unless otherwise notified.
- For weekly nursing lab sessions, students will wear yoga or sweat pants and a short-sleeved T-shirt which allow for comfortable movement and activity without skin exposure at the torso during movement.
- Proper footwear and socks must be worn in the LRC at all times i.e. closed toe, non-slip shoes or sneakers.
- Food, drink, and gum chewing are prohibited in the LRC at all times. A closed beverage container what be used if necessary, however, it ust be removed at the end of the lab. Any containers left in the lab will be thrown out.
- All students are to wash their hands before and after all lab sessions.
- Students are permitted to sit or lie on beds for instructional purposes only.
- Students must respect the LRC equipment (including mannequins) and report any malfunctioning or broken equipment to the LRC instructors.

- Students must bring their lab kits as applicable for lab and practice sessions.
- Practice stations must be kept tidy at the end of lab sessions and practice times.
- All students must sign the attendance book when practicing.
- Every effort will be made to provide extra practice time during the week prior to skill testing sessions. To avoid congestion in the LRC during these times students are encouraged to practice skills throughout the semester and not wait until the week of skills testing. Required set-up of the LRC for testing will reduce the hours for practice in the week(s) of testing.
- Equipment is not to be removed from the LRC and requests to borrow equipment will only be granted under special circumstances for course related projects and presentations
- Please see lab instructors for special requests. If equipment is lost, damaged or stolen, the student will be financially responsible for its repair or replacement.

#### 3.5 Student Lockers

Lockers will be available to all full-time students. First year students will be assigned lockers during the first week. Lockers are available for double use on the second floor and third floors. All students are responsible for purchasing their own locks and lockers should remain locked at all times. Lockers which do not have locks in place will be reassigned. Locks must be removed at the end of the winter semester for 4YO and summer semester for AO students for cleaning and are reassigned every year. If locks are not removed as required, they will be removed by security and maintenance services. Certain exceptions may apply - please check with the General Office.

## 3.6 Health Sciences Computer Labs

Students will receive information on the computer labs during orientation week. The Health Science Library (HSL) has two computer labs, accessible during library hours. Wireless access is available, please visit <a href="https://www.mun.ca/main/visitors/campus-services/wireless-internet/">https://www.mun.ca/main/visitors/campus-services/wireless-internet/</a>

## 3.7 Study Rooms

Seminar rooms at the FON can be booked out from the General Office for studying or group-work meetings. Rooms can be booked for only two-hour blocks and reservations will only be taken a day in advance. The study room must be vacated by 4:30 pm unless otherwise arranged.

## 3.8 Support of Student Professional Development Activities / Student Organizations

The Faculty of Nursing supports professional development and student activities and encourages students to seek opportunities to attend and present at local, national, and international conferences (e.g., participation in the Canadian Nursing Students' Association [CNSA] activities). The FON is supportive of student efforts to participate in professional development activities and student organization.

The following guidelines have been approved by the FON to clarify how support of nursing students, will be demonstrated.

- Subject to annual budget, funding may be available to support the official CNSA delegate and the associate delegate to travel to the CNSA regional and national conferences. Each year, the Nursing Society will determine how the available funds will be allotted to support student travel to participate in conferences.
- Travel or reimbursement of costs for paper/poster production may also be approved for students who have a paper/poster accepted for presentation at a peer-reviewed conference. Requests for funding support of travel or paper/poster production costs must be submitted to the Associate Dean [Undergraduate Programs] at the Faculty of Nursing at least 30 days prior to commencement of the travel and prior to incurring any related expenditures.
- Requests for travel and conferences will be reviewed by the Dean and Senior Administrative Officer. Students are encouraged to submit requests in writing with supporting documentation and rationale for the conference.
- It is the student's responsibility to ensure that content from missed classes and/or lab's is acquired independently. Students will collaborate, as necessary, with LRC instructors for the purpose of rescheduling lab testing/re-testing.
- Students will collaborate, as necessary, with instructors to determine appropriate rescheduling of dates for the completion of assignments and/or exams. Rescheduled exams will normally occur *in advance* of the student's departure for the conference/activity.
- In accordance with the policy and procedures of Memorial University, travel advances must be submitted to the Senior Administrative Officer at the Faculty of Nursing in sufficient time to be processed and at least 10 working days prior to the date of travel.
- Travel claims must be filed and advances accounted for/repaid within 10 working days after completion of the trip.
- Students will inform their instructors, in writing, of their desire to attend an activity, no later than *four* weeks prior to the activity. (It is recognized that the student may not be able to identify the exact date of the activity in the letter of intent, therefore, it is important to inform faculty of intent as early as possible in the semester).
- Students attending CNSA conference/meetings will normally be excused from clinical during the time period of the CNSA conference without that time being considered missed time. Faculty have the right to refuse a request for excused time from clinical if the faculty member has determined that the student's clinical performance is not strong and would be impacted by the absence. Faculty refusing a request for excused clinical time must provide the student with written documentation which supports this refusal.
- In collaboration with faculty, the learning experience gained by the student as a result of attending such activities, may be incorporated as an evaluation component of the course for that student.

## 4.0. Student Services

## 4.1 Writing Skills

Students of Memorial University are expected to demonstrate reasonably sophisticated and effective communication. For students in the nursing profession, this is particularly relevant. Honest presentation of your own work is also an expectation of any assignment submitted by a student (see Appendix B for specific guidelines regarding expectations for writing, and Appendix C for guidelines regarding penalties for plagiarism).

The Writing Centre can help students develop good writing skill. It is located in SN2053, Science Building; telephone (709) 864-3168. The Centre will assess a student's writing skills and provide guidance for improvement on a one-to-one basis. The Centre does not offer a course in writing, but offers individual assistance. Please note that the Writing Centre works on an appointment basis in order to reduce wait times and guarantee that tutors are available to work with students.

Appointments can last up to 45 minutes. Students are asked to print a copy of the paper prior to the session. Students are welcome to attend at any time during the semester. The Centre also has online resources to help with writing at http://www.mun.ca/writingcentre/resources/

## **4.2 Chaplaincy Services**

These services provide students with spiritual and social enrichment. Chaplains representing most of the major denominations are available. Their offices are located in the University Centre, Room. (UC-4023). https://www.mun.ca/student/student-supports-and-services/supports/chaplaincy

## 4.3 Student Wellness and Counselling Centre

The Student Wellness and Counselling Centre (SWCC) at Memorial University provides counselling, health, and wellness support for students including primary health care, counselling, health promotion, disease prevention, and wellness education. <a href="https://www.mun.ca/studentwellness/about/">https://www.mun.ca/studentwellness/about/</a> Services are available to current registered students, and children and spouses of students.

#### **4.4 Student Health Insurance Plans**

All full-time undergraduate students must have health insurance. Students are expected to purchase health insurance with the MUNSU national student health plan, which covers medications as well as other services. If you can prove that you are covered by an alternative insurance plan, you may opt out of the MUNSU plan by contacting MUNSU. For details on student fees see <a href="https://www.mun.ca/undergrad/money-matters/">https://www.mun.ca/undergrad/money-matters/</a>

## 4.5 Career Development Office

The Career Development Office is a leader in innovative career programs and services. The primary goals of this multidisciplinary team of career planners, advisors, administrative staff, and peer educators are to prepare students for the world of work, to provide experiential learning opportunities, to connect students with employers, and to provide resources for career exploration. The Centre for Career Development and Experiential Learning has an office in Smallwood Centre (University Centre), room UC4002. To obtain more information, telephone (709) 864-2033 or see <a href="https://www.mun.ca/student/about-us/units-and-contacts/career-development-office/">https://www.mun.ca/student/about-us/units-and-contacts/career-development-office/</a>

#### 4.6 Internationalization Office

International students are welcomed to connect with the Office to explore resources available e.g. the Host Family Program, English Conversation program. These programs can help students learn English in a friendly and supportive atmosphere. For more information regarding either of these and other programs, contact the Internationalization Office https://www.mun.ca/international/

#### 4.7 Sexual Harassment Office

If you believe or someone you know may be a victim of sexual harassment, please telephone or see the sexual harassment adviser to discuss your situation in confidence [telephone (709) 864-2015. Earth Science Building room ER-6039, <a href="https://www.mun.ca/sexualharassment/">https://www.mun.ca/sexualharassment/</a>].

#### 4.8 Glenn Roy Blundon Centre

The mission of the Blundon Centre, a division of the University Counselling Centre, is to provide and co-ordinate programs and services that enable students with disabilities to maximize their educational potential, and to increase awareness of inclusive values among all members of the university community. Visit the website at <a href="https://www.mun.ca/student/about-us/units-and-contacts/accessibility-services---the-blundon-centre/">https://www.mun.ca/student/about-us/units-and-contacts/accessibility-services---the-blundon-centre/</a>

#### 4.9 Student Financial Aid

Financial assistance is awarded to students, on the basis of demonstrated financial need, through the Canada Student Loan program and provincial government grants. The Faculty of Nursing does not deal with individual loans for those students who are in student loan program(s) of Memorial University. It is the student's responsibility to know current policies governing funds for which they are eligible.

For full information consult the Student Aid Division, Coughlan College or on the Internet at <a href="https://www.edu.gov.nf.ca/studentaid">www.edu.gov.nf.ca/studentaid</a>.

## 4.10 Scholarships, Bursaries and Awards

There are many scholarships, awards and bursaries available to students in the Faculty of Nursing. Some are designed for those entering their first year (entrance awards); others specifically for students beyond their first year (undergraduate awards).

Some awards are for students who have a particular interest in specific fields, such as heart health, or obstetrics. There are awards for students who want to pursue clinical studies in remote communities, in Labrador, or in a developing country. For further information see here <a href="https://www.mun.ca/nursing/about/scholarships-awards-and-bursaries/">https://www.mun.ca/nursing/about/scholarships-awards-and-bursaries/</a>

#### 4.11 Student Accountability

As a student in the FON, you will be expected to display that you are ready for entry to the profession of nursing. Among the many documents that set the standards for the practice of nursing is the Code of Ethics for Registered Nurses. This code sets out values that the CNA, the CRNNL, and the faculty members of the Faculty of Nursing have endorsed as essential to professional practice. <a href="https://www.cna-aiic.ca/en/nursing/regulated-nursing-in-canada/nursing-ethics">https://www.cna-aiic.ca/en/nursing/regulated-nursing-in-canada/nursing-ethics</a>

Students are expected to display the values set down by the Code of Ethics in the practice setting as well as classroom, seminar, and laboratory settings. To promote the professional development of some of these values (such as accountability, support, and respect for all persons, equity, and fairness) within the classroom, seminar, and laboratory settings the Faculty of Nursing has developed the following expectations of students.

#### 4.12 Assignments, Exams, Tests

Course syllabi outline the requirements for the evaluation components of the course, as well as due dates for assignments and approximate dates of exams, tests, quizzes, and lab practicums. Faculty members expect students to organize their time to meet the due dates and course obligations.

## 4.13 Brightspace / Desire 2 Learn (D2L)

All nursing courses will use Brightspace (D2L) which is a learning management system managed by the Centre for Innovation in Teaching and Learning (CITL) to support both on campus and off campus courses. The Brightspace system is used by nursing faculty as a means of providing PowerPoint presentations, discussion forums, copies of readings, communication, etc., for all students. Please be aware that materials posted on Brightspace are not to be disseminated beyond use in each respective course.

# **5.0 Clinical Experiences**

The FON depends on the cooperation and involvement of a large number of organizations and professional personnel in providing quality clinical placements and instruction to its students. The FON has developed several guidelines to assist students in their clinical placements. Please also note that each organization\clinical agency has policies to guide its functioning and many have specific student policies and regulations. If you have <u>any</u> questions about these policies and practices, consult your clinical instructor for clarification.

#### **5.1 Clinical Hours**

Clinical hours may occur at any time during the 24-hour day, seven days a week including statutory holidays. It is the student's responsibility to identify when the hours for their clinical experience will occur. This information is usually available from the clinical course leader/instructor at the beginning of the semester.

## **5.2 Policies in Clinical Agencies**

Faculty and students follow the policies and procedures of the agency in which clinical experience is being obtained.

#### 5.3 Glucometers

Every student will receive a glucometer access code. When performing a glucometer reading in the clinical setting the student will enter the ID-student number as their access code. All students should be diligent in completing controls and patient tests on a regular basis. However, to remain active users, students must complete a control and patient test at least every three months.

## **5.4** Allergies

Students who indicate they have an allergy to any drug or to a material such as latex, and have not been previously referred to an allergist, should request a referral from their health care provider. If the student has not been referred, they will need to contact Student Health to request a referral to an allergist. Students are expected to follow all recommendations made for their own safety. Students are accountable to inform their instructors if they have allergies to any drug and/or material such as penicillin and/or latex. If students must carry 'rescue meds' for personal use in case of an emergency, they must be carried on the student's person during clinical times. We ask that the instructor(s) be notified of the medications, and where to find them if needed.

## 5.5 Duty to Report

It is the responsibility of the student to notify the course instructor, and preceptor as applicable, of any restrictions imposed by: Allergies, Mask Fit status, Hepatitis B immunization status and Nonreactive and/or indeterminate titres.

## **5.6 Privacy & Confidentiality**

During clinical courses, students will have access to private and confidential information, for example, a patient's health record. This information must be held in the strictest confidence. PHIA training is mandatory and must be completed prior to the first clinical experience.

#### **5.7 Preparation for Patient Assignments**

Students will be required to obtain patient information for the purpose of providing quality care and meeting course objectives. Students will obtain information directly related to their patient assignment. With some exceptions, this information will be only shared with their clinical instructor and/or any health care team member involved in the patient's care; the exception to this rule is that, relevant information from clinical practice may be discussed for learning purposes with the clinical group during clinical conference. If a student wishes to speak with the

clinical instructor about his/her patient information, the discussion must be conducted in a private and confidential area, such as a report room or a nursing station.

When preparing for the patient assignment in a clinical area, no identifiable information should be written on paper that will be taken out of the agency. This may include, but not limited to, patient name, initials, age, hospital number, area of residence, and next of kin. This also applies to any nursing care plans or other assignments submitted to the clinical instructors. If identifiable information is written on paper during clinical, for example, the patient census sheet, it must be disposed in the confidentiality bin located in the agency prior to the student going home.

#### 5.8 Meditech Usernames and Passwords

All students will receive two computer usernames and passwords to be used in their clinical placements during the program to access the Meditech patient information system: one for long term care agencies, and the second for acute care agencies in Eastern Health. Note that you may not be using the second username and password until N2502 in Year 2.

All usernames and passwords must be kept confidential and not shared with anyone.

Students should ensure they are correctly logged out of a computer system when they have completed charting or reviewing patient information.

Students who require re-issuing of usernames or passwords will be required to complete a MUNFON Incident Report in order to have their access to Meditech re-instated. One copy will be kept by the Associate Dean, Undergraduate Nursing Programs, and a copy will be placed on the student's file with the course Nursing Practice Appraisal form.

The following process will be followed:

- Student notifies clinical instructor that they need a new Meditech password
- Student initiates request for a new Meditech password request goes to the Clinical Placement Coordinator.
- The student and clinical instructor complete a clinical incident report (see Appendix D). The instructor will submit a copy to the Secretary to the Associate Dean, Undergraduate Programs and will keep a copy to submit with the student's Nursing Practice Appraisal Form for that particular course.

## 5.9 Electronic Devices

Electronic devices such as cell phones or iPads can be used in the clinical areas, but must be turned off if not being used for learning purposes. Students are not permitted to use electronic devices inpatient's rooms or in the hallways unless given permission by their clinical instructor. Time will be limited on electronic devices and usage will be closely monitored. If a student is found text messaging, making a phone call or using an application not intended for learning purposes, they will meet with the clinical instructor to discuss the situation. If a student demonstrates inappropriate use of electronic devices in clinical practice despite due process from the clinical instructor, then they have the potential to fail the clinical course on the grounds of unprofessional behavior.

## **5.10 Social Networking Sites and Discussion Groups**

Students are not to post or discuss any information related to clinical practice on any social networking site. Topics related to clinical will only be discussed in clinical conference under the direct supervision of the clinical instructor. When Brightspace is utilized for clinical courses, no identifiable information should be used in the postings. Clinical instructors will be responsible to provide detailed instructions if students have an online discussion forum as part of their clinical course.

## 5.11 Attendance in the Clinical Setting

The purpose of clinical courses is to provide the student an opportunity to apply their acquired theoretical knowledge and skills in a clinical setting. For this reason, clinical practice is an integral part of learning how to become a nurse, and any absence from clinical experiences decreases students' learning. Absence from clinical practice may require some form of documentation and missed time is usually made up at the end of the course. Regardless of the evidence provided for clinical absenteeism, the student must demonstrate successful achievement of all of the clinical objectives specified for each clinical nursing course. Failure to demonstrate an acceptable level of clinical competence will ultimately result in failure or withdrawal from the course.

If you are not registered for a clinical course, you are not permitted to attend any portion of the course. Students who miss orientation or key laboratory sessions at the beginning of the course may be prevented from continuing in the course it the content is deemed critical.

## 5.12 Leaving the Clinical Setting

During the clinical day, students must remain on the hospital's or agency's premises for the entire shift. Students are not to leave the premises for breaks or lunch. In extraordinary circumstances, if a student must leave the premises before the conclusion of his/her shift, permission and/or notification of the course instructor (or an agency contact person in the case of NURS 3523, NURS 4512, and NURS 4516) must be obtained.

## **5.13 Storms**

If students and faculty are in the clinical area when the university announces it is closing due to a storm, the clinical instructors use their judgement whether to cancel or to continue with clinical for the day. Faculty should have student cell phone numbers to contact them prior to the clinical day, if needed. If students are in a preceptored experience or co-assigned to registered nurses, they are expected to go to clinical. If students are unable to get into clinical, they cannot be penalized for missing the day but they may need to make up the time. Students do not have to leave campus when it is closed due to a storm.

## **5.14 Make-up Clinical Time**

Students should expect to make up missed clinical time. When clinical time is cancelled due to extraordinary circumstances (e.g. illness, snow, strikes, etc.) that clinical time usually will be made up during the last weekend prior to the end of classes in the semester. In the event of an extraordinary circumstance on that weekend, the last weekend of the semester (i.e. the weekend

after the end of classes) will be used to make up clinical time.

## **5.16 Clinical Preparation**

Clinical preparation is usually done the day before the scheduled clinical shift; therefore, students usually must carry out clinical preparation on Sunday for Monday shifts. Students are expected to be prepared for patient care. If adequate preparation has not been done, the student may be asked to leave the unit.

#### **5.17 Protocol for Clinical Visits**

When visiting a clinical agency to meet assigned patients or review records, a student should seek out the nurse in charge of the unit or client. Introduce yourself, including your name, faculty, course, and purpose of the visit. If there are difficulties in fulfilling the goal for the visit, contact your clinical instructor.

## 5.18 Accountability

Students are responsible and accountable for their own actions in all clinical activities. Faculty will be available for guidance and/or supervision for nursing activities performed for the first time and/or must verify that independent functioning is appropriate in a given situation prior to performing independently.

Students MUST NOT engage in nursing activities for which they have not had adequate preparation. Students will be held legally responsible and accountable for all of their actions in the clinical setting.

## **5.19 Medication Administration Policy**

Students may administer medications at their level of competency as they progress through the program. Determination of competency occurs as outlined in Appendix E.

#### Medication Server Keys

If students are assigned medication server keys for clinical placements, the following clauses will apply:

- Prior to distributing keys to students, the Clinical Instructor will advise students of their professional accountability regarding server keys.
- Each student will *sign out* his/her server key from the Clinical Instructor on a form developed for this purpose.
- At the end of the clinical rotation, students will *sign in* their keys on the appropriate form. Students will return their keys to their Clinical Instructor on the final clinical day or at the beginning of the scheduled meeting to receive the final clinical evaluation.
- In the event of a lost key the student must:
  - o report the missing server key to their Clinical Instructor as soon as

- noted missing. The Clinical Instructor will report the incident to Clinical Program Administrator as soon as possible thereafter.
- o submit to the Clinical Instructor a written explanation of the circumstances around the misplacement of the key, and his/her reflection of the implications of the loss on patient safety and personal accountability (up to one page single-spaced or two double-spaced pages total). The loss of the key will be noted on the Nursing Practice Appraisal (NPA) form. The explanation-reflection document will be attached to the NPA form and kept in the student's file complete a MUNFON Incident Report form with the Clinical Instructor. One copy will be kept by the Associate Dean, Undergraduate Nursing Programs, and a copy will be placed on the student's file. All steps above must be completed prior to replacement of the key.

## 5.20 Co-assignment in the Clinical Setting

Students in institutional settings are usually co-assigned to a Registered Nurse or other nursing staff member of the institution. Students are to consult with, and report to, these staff members during their shifts, at the end of the clinical day and when leaving the unit at any time during the day.

#### **5.21 Transportation Expenses**

Transportation costs associated with clinical course requirements of the program have been a major source of extra expenditure by students. Traditionally, most clinical courses have made use of well- known health care institutions and agencies within the City of St. John's for student placements. FON will continue to use these agencies, however, please note that it is **usual** practice for students to be assigned to shifts which demand arrival to and/or departure from an agency outside the normal operating hours of public transportation. Students are expected to report to clinical on time; therefore, private transportation, car pools and/or taxis may be required.

Metrobus operates in and around St. John's and connects frequently with MUN. Information re: schedules, bus passes and costs can be obtained at (709) 724-9400 or <a href="http://www.metrobus.com">http://www.metrobus.com</a>.

The FON increasingly makes use of clinical placements in non-traditional health care and health related agencies within St. John's and the surrounding communities of Mount Pearl, the Goulds, Bay Bulls, Paradise, Torbay, etc. In many cases, there is no public transportation available to these sites and often taxis or car-pooling are the only available means of transportation.

While the FON extends all efforts to find placements which are easily accessible to students, it is becoming increasingly difficult to find enough placements within St. John's to accommodate the educational needs of all of our students. Therefore, it is likely that community clinical placements for NURS 4512 – Community Health Nursing Practicum will only be found outside of St. John's and throughout the province for most students. Please consider these transportation expenses in your budget.

## **5.22 Insurance Coverage**

If a legal question arises out of a student action in which the student has acted within appropriate parameters, the matter will be referred to the university insurance advisers for action.

## 5.23 Cameras in Clinical Settings

The use of cameras in any clinical setting for study, research or personal purposes is regulated by the agency administration. Written consent to take pictures of clients **must** be obtained from the agency administration and from the clients or their guardians.

## 5.24 Request for Client Records

If a student requires information from charts in the Medical Record Departments of Eastern Health, a written request must be signed by a faculty member before the student will be given access to the file. Most Medical Records Departments will supply the chart 24 hours after the request.

## 5.24 Personal Belongings in Clinical Areas

Students are advised not to bring personal belongings into the clinical area, including more money than they require for that day. In most clinical areas there is nowhere to securely store purses/wallets or backpacks. Money, cheque-books and credits cards should never be left in lockers, whether in a clinical area or in the university facilities.

## 6.0 Evaluation of Clinical Performance

There will be regularly scheduled evaluations of the clinical performance of each student during the clinical courses. Most clinical courses will have a midterm and final evaluation based on a Nursing Practice Appraisal Form (NPAF). Evaluative criteria for the evaluations will be provided at the beginning of the course in the syllabus. Please use these criteria as a guideline to check your progress throughout the semester.

In each clinical course, students are expected to demonstrate growth in clinical practice through the application of knowledge and skills from previous and concurrent courses and applicable to the course and program levelled objectives. Expectations are articulated in relation to the standards of nursing practice and/or competencies for entry level practice in a levelled sequence for each year of the program.

Students are expected to prepare for clinical practice in order to provide safe and competent care. Preparation expectations are detailed in each clinical course outline. Students not meeting the expectations for the course, or at risk for failing the course follow the Policy Regarding the Student at Risk of Clinical Failure or Deemed Unsafe in Clinical Practice (Appendix G).

# 7.0 Approval Criteria for Clinical Placements

The FON depend on the cooperation and involvement of a large number of organizations and professional personnel in providing quality clinical placements and instruction to its students. The Clinical Placement Coordinator is responsible for facilitating appropriate matches among students, preceptors, and clinical settings. Although consideration will be given to all factors affecting the location and type of placement, clinical placements may not be available in the area of students' specific preferences. Criteria have been developed for approval of clinical placements out of town and in specialty clinical settings e.g. ICU, Dialysis (Appendix H). Section 4.2 of the FON section of the University Calendar also provides more information about regulations governing clinical placements

https://www.mun.ca/regoff/calendar/sectionNo=NURS-1621

Clinical placements for faculty led, group courses will be posted on the course Bright Space Site during the first week of the clinical course. Any changes to the clinical schedule must be approved by the faculty and the Clinical Coordinator (or designate).

Clinical placements for 3523, 4512 and 4516 will be posted in HSPnet two weeks prior to the start of the course or when accepted by the clinical agency, whichever is sooner. Any changes to the clinical schedule must be approved by faculty and the Course Lead.Pre-clinical requirements are outlined in the

# **8.0 Pre-Clinical Requirements**

Student Pre-Clinical Requirements document provided to all students upon admission to the program. If you have any questions about pre-clinical requirements please contact the Clinical Program Administrator.

## Basic Life Support (BLS)

#### New Student Admissions

All students who have been admitted to the BScN (Collaborative) Nursing Program (in either option) must provide proof of current certification in completion of a BLS Course. The student must submit a copy of their current certification card to the Clinical Program Administrator as per the dates in the Student Pre-Clinical Requirements Document.

## Re-Certification

BLS re-certification will be required for all nursing students every 12 months while they are registered in the nursing program. Students are accountable to ensure they have completed the BLS re-certification before or during the month of expiration. The student must submit a copy of BLS re-certification certificate to the Clinical Program Administrator before or during the month of expiration. Students who submit documents after the month of expiration will receive a note on their NPAF documenting the delay in submission. Students who have not renewed their BLS before the date of expiry, or submitted the copy of the BLS re-certification certificate card, will not be allowed to attend clinical practice until the BLS requirement is completed.

If a student continues to submit late BLS re-certification certificates in subsequent years, this will be documented on the subsequent NPAF under the program objective of "professionalism" and a letter will be placed on the student's file.

#### Standard First Aid

All students admitted to the BScN (Collaborative) Program in both options, must provide proof of a current Standard First Aid (SFA) certificate. This course is valid for three years. The Faculty of Nursing usually does not require students to update their SFA certification, after admission.

#### NL Student Pre-Placement Immunization and Communicable Diseases Screening Form

The NL Screening Form must be completed by all students, prior to commencing a clinical placement in a Regional health Authority in NL.

## Mask Fit Testing (N95 Respirator)

All regional health authorities require all students to be tested for a special face mask to be used during specific procedures and outbreak of airborne illnesses e.g. COVID-19. This testing will be arranged by the FON before the first clinical course. Retesting is usually completed every 2 years. Students are charged a fee for this testing and expected to respect appointment times.

#### Certificate of Conduct and Vulnerable Sector Check

Clinical agencies require students to have a current Certificate of Conduct and Vulnerable Sector Check that is satisfactory to the clinical agency. These can be requested from the RCMP or RNC. Upon admission, students are required to submit the original documents and keep a copy for their records. A student is also required to submit a new certificate of conduct and vulnerable sector check that is satisfactory to the clinical agency, upon returning to the program following:

- 1. An approved leave of absence.
- 2. Readmission to the Program.
- 3. As per clinical agency requirements.

After admission, and any time prior to completing the program, students charged with or convicted of a criminal offence, or listed on the Child Abuse Registry, are required to report this information to the Dean or Associate Dean.

Failure to report a criminal offence may result in dismissal from the program. Criminal offences will be reviewed by the Administrative Team of the FON for implications of the conviction in view of the professional and ethical mandate to protect the public and the requirements of health agencies and College of Registered Nurses of NL re: conduct standards. A listing on the Child Abuse Registry, or failure to report the listing, will result in dismissal.

#### Personal Health Information Act (PHIA)

Nursing students are expected to maintain privacy and confidentiality in clinical practice at all times. Students in the undergraduate nursing program complete the Personal Health Information Act (PHIA) training to gain knowledge in relation to the Act, and how it applies to the access, use, and security of personal health information in Newfoundland and Labrador.

The Personal Health Information Act (PHIA) training is *mandatory* and is required to be completed *prior* to beginning any clinical placements in Newfoundland and Labrador. Following completion of the course, the *Record of Achievement* must be submitted to the Clinical Program Administrator. Students are required to complete the *Oath/Affirmation of Confidentiality* form, after completion of the PHIA training. The form will be signed in the presence of a Commissioner for Oaths. During the Fall semester, a time will be arranged for witnessing the documents. Original documents must be submitted to the Clinical Program Administrator, MUN Faculty of Nursing.

# 9.0 Professional Appearance Policy

The Professional Appearance Policy has been developed to assist students to identify the boundaries for personal decision making regarding professional dress and grooming in the practice setting (Appendix F). These guidelines recognize that clients' perceptions of the profession of nursing are influenced in part by how nurses display a professional image in all practice settings. These guidelines also reflect the boundaries that are acceptable to agencies that provide clinical placements for students in the BScN (Collaborative), starting with NURS 1520.profession of nursing are influenced in part by how nurses display a professional image in all practice settings. These guidelines also reflect the boundaries that are acceptable to agencies that provide clinical placements for students in the BScN (Collaborative), starting with NURS 1520.

## 10.0 Textbooks and Resources

Most nursing courses require students to have access to one or more required textbooks. Students in all years of the program are able to purchase an e-book package which includes the majority of required textbooks and Nursing Concepts Online RN a learning resource used by faculty in all nursing courses. Some textbooks are not available in electronic format and will be available in the MUN book store. Purchasing used textbooks by the same author that may be the last edition is usually an appropriate alternative to not purchasing a new textbook, but check online or with the instructor for changes between editions. Please also note that many electronic text books and their associated recourses are not transferable from one user to another. All textbooks will serve as sources of reference for future classroom and clinical courses, but more importantly they will help you begin to find the answers to clinical practice issues that you encounter.

## 11.0 Student Files

All documentation of a student's progress through the program is kept in the student's academic file. Students should know that this information is used by the faculty for the following purposes:

- Eligibility for promotion in the program;
- Eligibility or suitability for scholarships or awards;
- Review of clinical performance in relation to requests for clinical placements;

- Assessment of special needs or circumstances relevant to the student's progress;
- References to potential employers, and/or;
- References for admission to graduate studies.

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A student has the right to view his/her file in the presence of a faculty member, Associate Dean or the Academic Program Administrator.

Two types of documents are kept in student files - those of an academic nature and those of a non-academic nature such as documents pertaining to preclinical requirements. Students are advised that some clinical agencies require copies of documentation of certain information kept within your file such as proof of immunizations and results of blood work that show your immune status in relation to certain diseases (i.e., rubella, measles, mumps, TB, varicella, hepatitis B). Some agencies require copies or originals of Certificates of Conduct/Vulnerable Sector Check from RCMP or RNC. Many agencies require proof of successful completion of First Aid and CPR courses. The Faculty of Nursing will provide this information to agencies requesting it without obtaining consent from the individual student. Documents related to a student's academic performance may be viewed by faculty particularly when concerns have been noted regarding a student's clinical performance.

## **12.0 Reference Letters**

Permission should always be obtained prior to submitting the name of any person to provide a reference, whether it is for employment between semesters, after graduation, or for any other reason. A student who requests a reference from a faculty member should expect that person to review his/her file for information regarding academic/professional growth and achievement.

# 13.0 Resource Management

All clinical groups and all LRC labs for every course will operate to maximum capacity if possible. This means that if a lab or clinical group has few students registered and there are sufficient spaces in other sections to accommodate those numbers, there will be consolidation of sections. If this occurs, students will be notified at the beginning of the semester.

# **14.0 Interprofessional Education**

The FON, along with Centre for Nursing Studies, Western Regional School of Nursing, Faculty of Medicine, Faculty of Education, School of Pharmacy, School of Social Work, and the Counselling Centre and other units participate in initiatives to promote interprofessional education (IPE) activities in both education and practice settings. At various points in your program you also will have the opportunity to participate in interprofessional learning experiences.

# 15.0. General Regulations

The Faculty of Nursing is governed by the rules and regulations outlined in the University Calendar. Students should become familiar with academic regulations pertaining to their program, and in particular, "General Academic Regulations (Undergraduate)", "Appeal of Decisions" and "Promotion Regulations of the Faculty of Nursing".

http://www.mun.ca/regoff/calendar/sectionNo=REGS-0474

http://www.mun.ca/regoff/calendar/sectionNo=REGS-0859, and

http://www.mun.ca/regoff/calendar/sectionNo=NURS-0907

## **15.1 Registration for Courses**

Memorial Self-Service is the tool that students use for all enrolment activities. Registration times and course offerings can be viewed through Memorial Self-Service. For help with registration, students can call the help line at (709) 864-4445, or e-mail reghelp@mun.ca from their @mun.ca e-mail accounts.

## 15.2 Program Audit

All Year 3 students in the 4YO and Year 2 Students in the AO are advised to have an official program audit completed to during the Fall semester to ensure that they and the Office of the Registrar are in agreement regarding the courses toward the degree which are yet to be completed https://www.mun.ca/regoff/completing/audit.php. In particular, students should identify any outstanding non-nursing requirements left to be completed so that these courses/requirements can be addressed within the remaining semesters in the program

## 15.3 Surveys and Research Ethics

Students often conduct surveys or questionnaires as part of assignments for undergraduate courses. Under no circumstances are students to distribute any survey or questionnaire that has not been seen by the course instructor.

Once a survey or questionnaire has been approved for use in a course, the following statement MUST appear on the top of the first page:

This questionnaire is part of a course in the F	Faculty of Nursing (name of the course). It is not part of a
research study. Instructor	has reviewed this questionnaire with me and it has been
approved for purposes of this course. The in	nformation collected will be used only for the course and
you will not be able to be identified.	

## 15.4 Examinations and Invigilation Procedures for Exams

The University Senate has approved instructions regarding the conduct of exams in central locations. It is your responsibility to be familiar with the <u>Conduct of Examinations and Invigilation Procedures</u>, including the <u>Examinations and Invigilation Guidelines for the Remote Learning Environment</u>

## 15.5 Use of Student Papers/Projects

There will be times when faculty members may wish to use a student's paper/project as a sample of student work for accreditation purposes. Such papers/projects may be retained for program evaluation purposes providing that all identifying the student information is removed.

## 15.6 Student Assistants Correcting Papers and Examinations

- All material containing confidential information about the students should be corrected by the instructor.
- All material requiring subjective analysis will be corrected by the instructor, a graduate student, or a laboratory instructor.
- Where possible, materials should have names removed before marking occurs. This ensures objectivity in marking.
- The identification of the student marker will be kept confidential.
- Usually, undergraduate students will not be hired as markers for other student papers.
- Laboratory and objective examinations/tests may be considered exceptions to this rule at the discretion of the instructor.
- The course instructor is responsible for orienting any other markers, ensuring that marking criteria are clear and consistent.
- The course instructor will also review corrected materials to ensure all criteria have been maintained by student assistants.

## 15.7 Evaluation of Courses and Teaching

Students may be requested to complete the following evaluations:

Faculty teaching evaluation - 11th week of the semester Course evaluation - 12th week of the semester

These evaluations are meant to be used to improve either the course structure or teaching methodologies. Individual student responses are anonymous. The instructor does not have access to the evaluations until semester after the course is completed.

## 15.8 Appeal of Decisions on Regulations

Every student has the right to appeal decisions resulting from the application of University regulations. Please see here for information on appeals <a href="https://www.mun.ca/regoff/calendar/sectionNo=REGS-0859">https://www.mun.ca/regoff/calendar/sectionNo=REGS-0859</a>

#### 15.9 Dean's List

MUNFON acknowledges the academic success of its students in various ways. One of these is by naming students to the appropriate Dean's list. Annually, every academic unit will name to its list a maximum of 10 per cent of its students, selected on the basis of academic performance <a href="https://www.mun.ca/nursing/directors\_list.php">https://www.mun.ca/nursing/directors\_list.php</a>

## 15.10 Graduation from Memorial University

Students are responsible for ensuring that they have met the requirements of the program. To assist students to determine this, advice may be sought from the Associate Dean of Undergraduate Programs or the Assistant Registrar designated to the Faculty of Nursing. Student must also apply to graduate <a href="https://www.mun.ca/regoff/graduation/steps-to-graduate/">https://www.mun.ca/regoff/graduation/steps-to-graduate/</a>

## **16.0 Faculty of Nursing Policies**

#### 16.1 Application to Write National Council Licensure Examination (NCLEX-RN)

Graduates of the FON must successfully complete the National Council Licensure Examination set by National Council of State Boards of Nursing (NCSBSCN) in order to be employed as a nurse in Canada. Applicants must write at the first scheduled writing following completion of the nursing program. Students who wish to apply for the NCLEX-RN and those who plan to apply and establish initial registration must submit an application to CRNNL.

Applicants will be required to submit:

- Copy of government issued identification [which includes photo and signature]. Examples: Passport or Driver's license
- Copy of Birth Certificate
- Copy of Marriage Certificate or Legal Change of Name Document [if applicable]
- A recent Certificate of Conduct

## 16.3 Challenge for Credit

The Faculty of Nursing offers a limited opportunity for Challenge for Credit within the BSCN (Collaborative) program. Students of the BSCN (Collaborative) program who are also Licensed Practical Nurses (LPNs) will be given the opportunity to Challenge for Credit NURS 1017 and NURS 1520.

Students must apply for the Challenge for Credit as stipulated in the University Calendar: <a href="https://www.mun.ca/regoff/calendar/sectionNo=REGS-0421">https://www.mun.ca/regoff/calendar/sectionNo=REGS-0421</a> Students who choose to apply for the challenge for credit are not required to register for NURS 1017 or NURS 1520. If registered for the courses the student will drop the course if subsequently successful in the challenge.

Students will be advised that if their application for the challenge for credit is accepted (Associate Dean needs to verify that the student is an LPN), the challenge will occur during the first week of classes in the case of NURS 1017 Fundamental Psychomotor Competencies, or during the first 2-3 shifts of NURS 1520 Caring for the Older Adult: Practice.

Students who fail the challenge will be given the opportunity to immediately register for NURS 1017 and to continue NURS 1520 (as applicable). Students will be responsible for paying all fees associated with the challenge process.

#### 16.4 Transfer to Another Site

Students may request a transfer to another site if they are experiencing extenuating circumstances (such as the illness of a family member). The granting of a transfer is dependent on the resources available at the requested site which may not always be immediately available.

- The student makes a request in writing to the Associate Dean.
- The letter of request clearly states the extenuating circumstance and provides appropriate documentation.
- A copy of the student's transcript indicating progress to date should accompany the request.
- The request will be considered at the receiving site as soon as possible. The student will then be notified of the outcomes.

## 16.5 Failing a Nursing Course

Students who fail a nursing course and are eligible for a supplementary exam will be notified by the Associate Dean. The BScN (Collaborative) Program promotion regulations can be found here <a href="https://www.mun.ca/regoff/calendar/sectionNo=NURS-0907">https://www.mun.ca/regoff/calendar/sectionNo=NURS-0907</a>

Students in the 4-Year Option: If your grade is 59% or less you are not eligible for a supplementary exam and will be required to repeat the course. If the failed course is a prerequisite to subsequent course(s) you will not be able to register for those courses. Any student in this situation should immediately make an appointment with the Associate Dean in order to be advised about a new program sequence of plan.

<u>Students in the Accelerated Option</u>: If your grade is 59% or less you are not eligible for a supplementary exam and will be required to withdraw from the Accelerated Option. You may be allowed to resume studies with the 4-year option and are subject to all academic standards. Any student in this situation should immediately make an appointment with the Associate Dean in order to be advised about a new program sequence plan.

## 16.6 Writing a Supplementary Exam

Students who achieve a final course grade of 60-64% in a non-clinical course with a final exam may be eligible to write a supplementary exam as per the FON regulations <a href="https://www.mun.ca/regoff/calendar/sectionNo=NURS-0910">https://www.mun.ca/regoff/calendar/sectionNo=NURS-0910</a>

Students who are eligible to write a supplementary exam will be notified by the Associate Dean. Students must respond to the Associate Dean within the allocated timeline to state their intent to write the supplementary exam.

Information regarding fees for supplementary exams can be found on the Web site <a href="https://www.mun.ca/finance/fees/appeals\_fees\_charges/">https://www.mun.ca/finance/fees/appeals\_fees\_charges/</a>

A student has a right to request a re-read of a final exam. The University regulations for a re-read can be found here <a href="https://www.mun.ca/regoff/calendar/sectionNo=REGS-0628#REGS-0648">https://www.mun.ca/regoff/calendar/sectionNo=REGS-0628#REGS-0648</a> This regulation applies to final examinations only.

For all other examinations and assignments associated with a course, this regulation would not apply. If a student has a concern about an examination that was not a final examination or an assignment, the appropriate action to take is to make an appointment with the relevant course instructor to communicate those concerns at the time the grade is received.

#### 16.7 Re-read of Final Examinations

A student has a right to request a re-read of a final exam. The University regulations for a re-read can be found here https://www.mun.ca/regoff/calendar/sectionNo=REGS-0628#REGS-0648 This regulation applies to final examinations only.

For all other examinations and assignments associated with a course, this regulation would not apply. If a student has a concern about an examination that was not a final examination or an assignment, the appropriate action to take is to make an appointment with the relevant course instructor to communicate those concerns at the time the grade is received.

A formal application must be made to the Office of the Registrar for a re-read of a final exam to occur. Once the Faculty has received a request for a re-read from the Office of the Registrar, the following process will occur:

- 1. The Dean will delegate the responsibility to conduct the re-read to the Associate Dean.
- 2. The Associate Dean will contact the relevant course instructor to request the following:
  - a) Final examination script of the student who made application for the re-read.
  - b) The grading key for the examination; alternatively, a selection of other graded final examination scripts from the same cohort can be obtained which demonstrate an A, B, C, D, F range of awarded grades.
- 3. The script of the student who requested the re-read will remain unaltered but the original will be copied. All comments and marks made by the course instructor will be removed by white-out on copy. That copy will then be recopied, thus resembling as closely as possible the original script submitted by the student. It is this copy that will be given to the instructor selected to re-read the script.

The Associate Dean will contact an appropriate instructor to re-read the

script in question.

- 4. An appropriate instructor will be one who has taught the same or a similar course. That instructor may be another faculty member of the Faculty of Nursing or a faculty member at one of the collaborative partner sites.
- 5. Once a instructor has agreed to re-read the script, (s)he will be given the copy as previously defined, the grading key, and/or a sample of unaltered, original scripts that reflect a range of grades from A through F.
- 6. There will be no collaboration between the course instructor and the re- read instructor during this process.
- 7. The instructor who conducts the re-read will submit his/her evaluation and grade for the script to the Associate Dean and will return all pertinent documents. The instructor will be expected to grade the re- read script within 48 hours.
- 8. The Associate Dean will complete the appropriate change of grade section on the re-read request form, and will return it to the Office of the Registrar.

Students should be advised that the outcome of a re-read may either improve, confirm or lower their original grade. The grade awarded by the instructor designated to re-read the exam will be substituted for the original grade on the same evaluation component. The student's final mark will then be re-calculated. If the mark on the re-read script is higher, thus improving the final grade, that mark will be submitted on the re-read request form. If the mark on the re-read script is lower, thus reducing the final grade, that mark will be submitted on the re-read request form.

#### 16.8 Students at Risk of Clinical Failure or Deemed Unsafe in Clinical Practice

The Faculty and Schools of Nursing recognize the importance of identifying students who are *at risk* of failing a clinical course or who are deemed *unsafe* in clinical practice. Once the student has been identified as *at risk* or *unsafe*, through an occurrence or a pattern of behaviour, a process is put in place to assist the student towards achieving competent and safe practice or, if necessary, remove the student from the course or the program (Appendix G).

#### 16.9 Behavior Deemed Unsuitable for the Profession

Students in the program are professionals-in-progress such that competencies, standards and expectations of professional conduct will be developed and refined during the progression of the program. There may be behaviours demonstrated which are deemed unsuitable to the profession and can be quickly remediated upon bringing them to the student's attention. Behaviours may occur which are significant in themselves or continuing overtime and deemed unsuitable to the profession. These behaviours require more direct intervention and are subject to the policy and procedure for the Student demonstrating behaviour deemed unsuitable for the profession as outlined in Appendix J.

Memorial University of Newfoundland expects that all students will conduct themselves in compliance with University Regulations and Policies, Departmental Policies, and Federal, Provincial and Municipal laws, as well as codes of ethics that govern students who are members of regulated professions. As such, students in the BSCN (Collaborative) program are expected to demonstrate attitudes and behaviors reflective of the codes of ethics, standards, and professional competencies which direct nursing practicing.

Professional behavior is expected in all learning venues including classroom, lab and clinical placement settings.

#### 16.10 Guidelines for Return to the Program After an Absence

Students who have not completed nursing courses or have not completed an acute care placement in the previous two semesters will be subject to the following:

Students who withdraw from a course/semester for medical reasons must provide proof of medical clearance before resuming studies.

Students will meet with the Associate Dean, Undergraduate Programs or Associate Dean at their respective site to create a re-entry plan, including any remediation required to potentiate a successful transition to the roles and responsibilities required of the student commensurate with their entry cohort group.

Returning students may be asked to provide up-to-date documentation, including

- Student information form
- Oath of confidentiality forms
- Certificate of conduct, Vulnerable sector check, or Child protection record check
- Immunization record
- TB skin testing
- Titre reports
- CPR certification
- Standard first aid certification (Year 1 students who have not completed N1017)

All policies outlined in the Academic Standards and Promotion and Supplementary Exam Sections for the BScN (Collaborative) Programwill apply from the time of the students INITIAL admission to the program unless otherwise specified.

If at any time during a period of absence the student decides not to continue with the nursing program, the student must notify the FON in writing.

## 16.11 Acknowledgement of Staff or Faculty Members

Students sometimes want to express their appreciation to staff or faculty members for their helpfulness or guidance, but this is not something that is expected or encouraged. Under no circumstances should students buy a gift for staff or faculty members, no matter how small.

Students are advised to acknowledge teaching effectiveness or staff assistance through a letter identifying characteristics of the person that were most helpful (eg., teaching effectiveness in a clinical, classroom or laboratory setting, their accessibility, skill at encouraging your critical thinking competency, role modeling the competencies of excellent nursing practice, or sensitivity in dealing with a student's special problem). Such letter can be used by the staff/faculty member in performance or promotion evaluations and/or applications for re-employment at the faculty.

## 16. 12 Planning Travel

Classes, labs, clinical, test, assignment or exams are not cancelled to accommodate students who may wish to take extended midterm breaks, long weekends, etc. Midterm exams, lab exams or assignments also are not deferred or changed to accommodate travel plans. Please do not book flights home before confirming your personal exam schedule with the official university examination timetable.

Supplementary exams for the Fall semester are normally scheduled for the day immediately preceding the first day of classes in the Winter Semester; this year's date is Wednesday, January 4, 2023. Take this into consideration when booking your return flight to campus if you want to reserve your opportunity to write a supplementary exam if needed.

## 17.0 Ceremonies

## 17.1 Crest Ceremony

The FON crest is an important source of identification for students who are among many groups doing clinical placements in hospital and community settings. Year 1 students in both the Accelerated and 4-Year options receive a Faculty crest in a ceremony, prior to or at the beginning of, their first clinical semester as an official welcome of students into the profession of nursing. Additional crests area available for purchase at the MUN Bookstore.

## 17.2 Scholarships and Awards Ceremony

The scholarships and awards ceremony occurs during the winter semester and generally includes presentation of undergraduate & graduate scholarships, awards and bursaries and acknowledgement of our donors and consortium partners.

#### 17.3 MUN Convocation

This is the major event during graduation at which degrees are awarded and graduates receive the BScN hoods. All students must inform the Registrar's Office of their intent to graduate. Students must apply online for convocation: https://www.mun.ca/regoff/graduation/apply.php In addition, students must inform the Registrar's Office if they plan on attending convocation. To register for Convocation, use the Memorial Self- Service website.

#### 17.4 Graduation (Pinning) Ceremony

This event is organized by the Undergraduate Team in consultation with the graduating class. Students are encouraged to participate in the decisions around graduation. The ceremony generally includes a presentation of professional pins to BScN graduates by the Dean, acknowledgment of graduates of the Masters of Nursing Program, presentation of awards, valedictory address by a member of each graduating cohort and a reception.

# Appendix A The Bachelor of Science in Nursing (Collaborative) Program

#### Mission Statement

The Bachelor of Nursing (Collaborative) program will prepare entrants to become competent and compassionate nurses to meet health concerns of individuals, families, groups and communities within a rapidly evolving health care system. Through active engagement in a cohesive, integrated, contextually relevant, learner centered curriculum, graduates will demonstrate competence in the delivery of nursing care, including professional accountability, leadership, critical reasoning, communication and self-directed learning.

#### **Educational Philosophy**

Three philosophical pillars (learning in context, professionalization and self-direction) will guide all aspects of the Bachelor of Nursing (Collaborative) Program. The first pillar, learning in context, refers to the opportunity afforded students to develop nursing expertise while addressing real life situations. A comprehensive, integrative design with coordinated clinical, laboratory, and classroom experiences will enable students to actively apply developing knowledge and skills within relevant patient/client care learning environments. Professionalization is the second pillar, and key component from day one. Professionalism (including professional demeanor, conduct and communication) will be consistently demonstrated by program faculty, staff and students, in all classroom, clinical and laboratory settings. The third pillar, self-direction, speaks to the student's responsibility to negotiate his or her own path to success in collaboration with nurse educators.

#### **Conceptual Framework**

The BScN (Collaborative) Program is based on the four Metaparadigm Concepts of Nursing (Person, Health, Environment, and Nursing) and the core concepts for nursing practice as organized by Jean Giddens (2017) under three categories: Health Care Recipient Concepts, Health and Illness Concepts, Professional Nursing and Health Care Concepts (Figure 1).

#### **Metaparadigm Concepts**

#### Person

A person is an integrated, distinct, and unique whole with biological, psychological, social, cultural, and spiritual dimensions. Each person has inherent value, worth and dignity, and possesses the potential for self-determination and self-reliance within that person's own ability. A person has the right to be fully informed and to make decisions and choices. Persons include clients/individuals, families, groups, communities, and populations.

#### Health

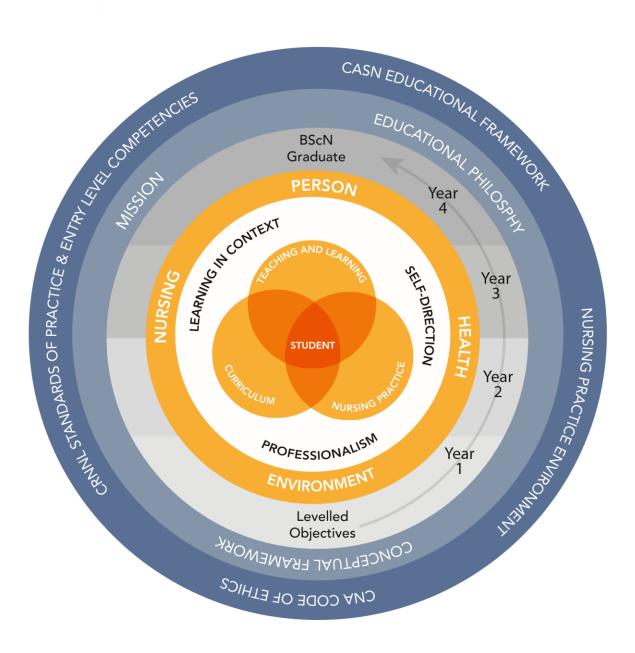
Health is a dynamic process of physical, mental, spiritual, and social well-being. It is a resource for everyday living and is influenced by a person's beliefs, values, attitudes, and the determinants of health. Wellness and illness are dimensions of health. Health is a separate and distinct entity that coexists with illness or injury such that regardless of the seriousness of a person's disease/injury, health is always present in some form.

Health involves the development of person's capabilities, capacities, special gifts and competencies (Gottlieb, 2013).

Figure 1. BScN Conceptual Model



# **BScN (Collaborative) Program** Conceptual Model



#### **Environment**

Environment is dynamic, complex, and multidimensional. It is inclusive of social and physical components; and it is the context, surroundings, setting, foci or backgrounds within which individuals interact. Persons have a relationship with ever changing internal and external environments. These environment systems interact in the ecological, societal, cultural, historical, spiritual, ethical and legal realms and influence the health of person(s).

#### Nursing

Nursing is an evidence-informed practice profession that uses clinical judgement in the provision of care to enable people to improve, maintain, or recover health, to cope with health problems, and to achieve the best possible quality of life. Nurses work autonomously and in collaboration with others to focus on the dynamic interrelationship between persons, environment, and health in achieving health outcomes.

#### Curriculum

Nursing curriculum is defined as: "the totality of the philosophical approaches, curriculum goals, overall design, courses, strategies to ignite learning, delivery methods, interactions, learning climate, evaluation methods, curriculum policies, and resources" (Iwasiw & Goldenberg, 2015 p. 6)

The BScN (Collaborative) Program is a student-centered concept-based curriculum built around an educational philosophy which promotes contextually relevant, learner-centered programing toward professional practice, and the nursing metaparadigm concepts of person, health, environment, and nursing. These concepts provide the foundation and structure of the undergraduate curriculum. The program focuses on foundational principles and concepts that students must apply in the classroom, the skills lab, and during clinical experiences. Students acquire a deep understanding of nursing practice by making connections between concepts and practice across patient settings, the lifespan, and the health-illness continuum.

While nursing knowledge is a major emphasis, the theories of science and humanities enhance the broad knowledge base required. It is informed by evidence and grounded in nursing values, knowledge, theories and practice. The curriculum also fosters commitment to life-long learning.

The curriculum addresses health issues that affect persons across the lifespan and in a variety of practice settings. The initial focus is on the wellness continuum, beginning with health promotion and health protection, then progressing to include health maintenance, rehabilitation, restoration, and palliation. The curriculum prepares the student to understand and work within the dynamic relationships among person, health, environment, and nursing.

Contextually relevant, learner-focused opportunities are provided to enable students to acquire the competencies (knowledge, values, attitudes and skills) required for entry-level practice. Critical inquiry skills including reflection, self-evaluation, ethical decision-making, and clinical judgment are facilitated progressively throughout the curriculum. Technological competence is enhanced through use of information technologies.

The curriculum emphasizes the collaboration among students, educators, and others, e.g., healthcare professionals, throughout the educational process. Interprofessional learning is facilitated through the development of professional relationships with other health team members and other sectors of society.

The program prepares students to apply beginning research skills and utilize knowledge informed by evidence. Students are prepared to advance the profession and to provide leadership in a changing system of health care.

Students will learn to identify and respond to emerging nursing and health issues through advocacy and policy development.

#### **Teaching and Learning**

Teaching and learning are dynamic lifelong growth processes. They are reciprocal and interactive, characterized by creativity and flexibility, and meet the diverse and changing needs of the students, the nursing profession, and health needs of society.

Students, educators, and others are partners in the educational process The educational climate fosters caring, respect for self and others, cultural sensitivity, critical thinking, professionalism, self-direction and a spirit of inquiry.

Throughout the program students are active participants, are responsible for the discovery of knowledge, and are accountable to communicate this with others. Further student responsibilities include availing of learning opportunities, seeking and utilizing feedback throughout their learning process, and integrating competencies required for entry-level practice in nursing. Students internalize the values, ethics, and behaviors endorsed in the ARNNL Standards of Practice, and understand that continued learning is essential for professional nursing practice.

Educators facilitate knowledge discovery and professional socialization by guiding, mentoring, role modeling, and challenging students to be self directed, reflective, and creative. Educators respect student diversity and support individual learning styles. A variety of strategies and supportive structures are used to foster teaching and learning and professional development of the student.

#### **Nursing Practice**

The goal of nursing practice is to assist persons across the lifespan in a variety of practice settings to achieve their perceived optimal health on the wellness continuum. Nurses assist persons to recognize and develop their capacity for self-determination and self-reliance. The provision of safe holistic care to persons requires clinical reasoning, critical thinking, technological competence, effective communication skills, and a commitment to lifelong learning.

Nursing practice requires collaborative relationships and partnerships with persons, health team members, and other sectors of the community in the performance of nursing roles. Nurses also collaborate with persons in the mobilization of communities toward healthy development and capacity building. Nursing roles include direct caregiver, educator, counsellor, advocate, facilitator, coordinator of care, researcher, and leader. These roles require the nurse to be aware of the changing cultural, economic, technological, environmental, and political contexts of health care in Canada and globally. The presence of role models is essential to the professional socialization of students.

Professional standards and competencies, legal standards, and the CNA code of ethics guide nurses' practice. Nurses are accountable to society for safe, ethical, competent, and effective nursing care. Nurses advocate for quality work environments and patient safety. Nurses practice independently and interprofessionally, advancing the profession of nursing and influencing changes in health care.

# **Characteristics of the Graduate**

The Bachelor of Nursing (Collaborative) Program is designed to prepare graduates who will function as beginning practitioners within a variety of health care settings. The graduate is prepared to assume the roles of direct care giver, educator, counselor, advocate, facilitator, coordinator of care, researcher, leader and member of the nursing profession. The program prepares the graduate to develop the entry-level competencies\* required to:

- 1. Integrates in-depth knowledge of the health related need of diverse clients in the provision of promotive, preventive, curative, rehabilitative, and end-of-life nursing care.
- 2. Develops approaches to care of diverse clients which reflect synthesis of concepts and theories of sciences, humanities and nursing.
- 3. Critically appraises a broad range of evidence, methodologies, and practice observations within the profession and across disciplines and relevance to nursing practice.
- 4. Integrates critical inquiry in nursing as a profession, discipline and health science.
- 5. Practices holistic nursing care within a variety of settings, by collaborating with individuals, families, groups and communities with complex health needs to assist them to achieve health and well-being through promotive, preventive, curative, rehabilitative, and end-of-life nursing care.
- 6. Coordinates and provides safe, competent, compassionate, ethical and culturally sensitive nursing care in response to the diverse and dynamic needs of individuals, families, groups and communities.
- 7. Communicates and collaborates with clients, nursing colleagues and other members of the health care team to establish and maintain therapeutic, caring and culturally sensitive relationships within diverse and evolving practice situations.
- 8. Integrates information and communication technologies to plan, and provide evidence-informed nursing care.
- 9. Practices nursing within the context of professional standards of practice, ethical, regulatory and legal codes.
- 10. Incorporates strategies for self-directed personal and professional growth to keep abreast of advancements in technology, knowledge and cultural diversity.
- 11. Critically appraises and assumes appropriate leadership roles to coordinate client health care needs in diverse healthcare environments.
- 12. Advocates for change within health care systems and across sectors to address issues of safety, social justice, health equity and other disparities affecting the health of clients.

\*Competencies refer to the knowledge, skills, judgment and attributes required of an RN to practice safely and ethically in a designated role and setting. (Attributes include, but are not limited to, attitudes, values and beliefs.) (CNA, 2017)

#### References

Giddens, J. (2017). Concepts for Nursing Practice. 2<sup>nd</sup> ed. Elsevier: St. Louis, MO.

Gottlieb, L. (2013). Strengths-based nursing care: Health and healing for person and family. Springer Publishing: New York, NY

Iwasiw, C., and Goldenberg, D. (2015) *Curriculum Development in Nursing Education*. 3rd Edition, Illustrated, Jones and Bartlett Publisher, Burlington, MA.

# **Leveled Objectives**

		Year 1	Year 2	Year 3	Year 4
Knowledge	1	Identifies foundational knowledge of the health related needs of diverse clients in the provision of promotive, preventive, curative, rehabilitative, and end-of-life nursing care.	Explains and applies knowledge of the health related needs of diverse clients in the provision of promotive, preventive, curative, rehabilitative, and end-of-life nursing care.	Applies in-depth knowledge of the health related needs of diverse clients in the provision of promotive, preventive, curative, rehabilitative, and end-of-life nursing care.	Integrates in- depth knowledge of the health related need of diverse clients in the provision of promotive, preventive, curative, rehabilitative, and end-of-life nursing care.
Kno	2	Identifies and describes approaches to care that can be applied to diverse clients which reflect an understanding of concepts and theories of sciences, humanities and nursing.	Demonstrates application of relevant concepts and theories of sciences, humanities and nursing in the approaches to care of diverse clients.	Appraises and modifies approaches to care of diverse clients which reflect synthesis of concepts and theories of sciences, humanities and nursing.	Develops approaches to care of diverse clients which reflect synthesis of concepts and theories of sciences, humanities and nursing.
odologies, Critical Inquiry and Evidence	3	Seeks, locates, and discusses information relevant to nursing practice.	Selects and applies relevant evidence to support nursing practice.	Critically appraises a range of evidence, methodologies and practice observations within the profession and relevance to nursing practice.	Critically appraises a broad range of evidence, methodologies, and practice observations within the profession and across disciplines and relevance to nursing practice.
Research Methodologies, Criti Evidence	4	Identifies the principles of critical inquiry in relation to nursing as a profession, discipline and health science.	Applies the principles of critical inquiry to nursing as a profession, discipline and health science.	Analyzes the principles of critical inquiry skills to support evidence-informed nursing practice.	Integrates critical inquiry in nursing as a profession, discipline and health science.

			Year 1	Year 2	Year 3	Year 4
Nursing Practice	Nursing Practice	5	Practices holistic nursing care by collaborating with individuals to assist them to achieve health and well-being through health promotive and protective nursing care.	Practices holistic nursing care by collaborating with individuals and families with health alterations to assist them to achieve health and wellbeing through promotive, preventive, curative, rehabilitative, and end-of-life nursing care.	Practices holistic nursing care within a variety of settings, by collaborating with individuals, families, groups and communities to assist them to achieve health and well-being through promotive, preventive, curative, rehabilitative, and end-of-life nursing care.	Practices holistic nursing care within a variety of settings, by collaborating with individuals, families, groups and communities with complex health needs to assist them to achieve health and well-being through promotive, preventive, curative, rehabilitative, and end-of-life nursing care.
	6	Participates in the provision of safe, competent, compassionate, ethical, and culturally sensitive nursing care to individuals.	Provides safe, competent, compassionate, ethical, and culturally sensitive nursing care to individuals and families.	Plans and provides safe, competent, compassionate, ethical, and culturally sensitive nursing care for individuals, families, groups, and communities.	Coordinates and provides safe, competent, compassionate, ethical and culturally sensitive nursing care in response to the diverse and dynamic needs of individuals, families, groups and communities.	

		Year 1	Year 2	Year 3	Year 4
Communication and Collaboration	7	Demonstrates beginning competence in communication through self-awareness, use and monitoring of strategies to participate in therapeutic, caring and culturally sensitive relationships with clients and nursing colleagues.	Applies effective communication and collaboration strategies to engage in therapeutic, caring and culturally sensitive relationships with clients, nursing colleagues and other members of the health care team.	Adopts and adapts strategies to establish and maintain therapeutic, caring and culturally sensitive relationships through effective communication and collaboration with diverse clients, nursing colleagues, other members of the health care team, and community partners.	Communicates and collaborates with clients, nursing colleagues and other members of the health care team to establish and maintain therapeutic, caring and culturally sensitive relationships within diverse and evolving practice situations.
Col	8	Discusses the purpose and demonstrates appropriate use of information and communication technologies to provide nursing care.	Uses appropriate information and communication technologies to support engagement with clients and the interprofessional team.	Uses and integrates information and communication technologies to engage with clients and the interprofessional team.	Integrates information and communication technologies to plan, and provide evidence- informed nursing care.

# Appendix B Writing Expectations in the Faculty of Nursing

The expectations for scholarly work are different at undergraduate, master, and doctoral levels. There is, for example, more emphasis on content in undergraduate papers, and more emphasis on developing and defending ideas in graduate work. The transition to higher standards of writing can be frustrating for some students. Writing is an interactive process, taking multiple drafts to work through ideas and write a paper that is really good, not just acceptable. Even the best of writers do not produce a final document in one draft.

We have developed this information sheet to provide students with tips and resources that they may use to improve their writing. Students who have used these suggestions have improved their writing skills. Students who improve their writing skills also improve their grades, because generally papers that are not well written do not receive the grade of A.

### **Improving Writing in General**

- Purchase writing resources prior to beginning course work, and review them
  throughout course work and writing papers/assignments. Two key
  references are identified at this end of this appendix. Make sure you can
  access them easily (e.g., buy the APA manual and bookmark the Purdue
  Owl web page).
- Give yourself adequate time to develop and write your paper. A good paper/assignment cannot be written in a couple of days and is the main reason we give instructions for the assigned paper/assignment at the beginning of the semester. Many papers/assignments require a synthesis or review of the literature. You need to take time to locate, read and think about the literature before you begin to write.
- Always use the spelling and grammar check options of your word processing program prior to submitting a paper/assignment. Many students find that it is more effective to print the paper/assignment and proofread the hardcopy rather than proofreading from the computer screen.
- Prior to submitting work, ask a colleague to review it and provide you with feedback.
- Course instructors will often give extensive feedback on papers. Learn
  from the feedback and apply the lessons to the next paper or assignment,
  whether it is inthe same course or the next course.
- When you are asked to write another draft of a paper/assignment, consider that this is part of the process of developing scholarly work. Even when someone who writes well submits an article to a journal for publication, they usually are asked to revise an argument or change the way something is worded. Good writing is a process.

### **Common Problems**

- Punctuation, especially the use, misuse, or neglect of commas, is a frequentproblem. Consult the resources listed at the end of this section or a reliable grammar text as you write your papers.
- All sentences require a subject, verb and object. "Hence the need for the study." is not a sentence to be used in a scholarly paper/assignment.
- Long sentences are a common problem. If you find yourself using a semicolon to separate clauses, consider redeveloping the clauses into two separate sentences. Similar cautions apply to paragraph length; paragraphs should not be longer than one double spaced page.
- "It's" and "its", and possessives and plurals, are problematic. Learn the difference and when to use each! It is not appropriate to use "it's" in scholarly writing.
- Passive tense can be problematic. Grammar-checking software will highlight passive sentences. Correct these by making the verb tense more active. For example, 'In his study, Smith (2014) found that...' reads better than 'in a study by Smith (2014) it was found that...'.
- Some students have serious writing difficulty presenting a logical flow of ideas in their written work; commonly, one idea or theme is presented in different paragraphs with the paragraphs in-between containing different ideas. This can be corrected by re-organizing sentences so that discussion of a given idea or theme stays together, or by adding bridging sentences to link together several paragraphs. Multiple thoughts in the same paragraph, without building to a conclusion, is another logic problem. You are encouraged to prepare and use detailed outlines of key points to help you identify and develop logical flow of ideas in a paper. Chapter 2 of the APA Publication Manual has some information to help in planning and articulating the various parts of a scholarly paper.
- Use direct quotations rarely. Use of multiple quotations (i.e., frequent use of someone else's words to state your point) often suggests students do not understand the material. State your points in your own words. Remember a quote should be used only to illustrate or clarify a point. When direct quotations are used, be sure to put these in quotation marks and include the page number in your reference. Within the text avoid the use of standalone quotes. (quotes with no referent to the point you are making)
- Avoid beginning each paragraph or sentence with an author's name [e.g., Smith (2014) states ...] or the phrase "According to ...". We are looking for your critical reading or understanding of what these authors say rather than a simplecitation.
- Use personal pronouns appropriately. For example, if you did the experiment say "I collected the data", not "The data were collected". However, watch use of editorial "we". APA encourages authors to write using the first person; an

EXCEPTION is when writing an abstract, write in the third person.

• Avoid anthropomorphism (i.e., attributing human characteristics to inanimate objects). For example, "This article tells us ..." or "The experiment attempted to demonstrate that ..." is not correct phrasing.

### **Academic Integrity**

Honesty and integrity are expected at all times in your written and presented work. Honesty implies that the work you submit is your own work, any source of information is appropriately cited, and you have not resubmitted papers that were written for another purpose without prior agreement with your instructor.

Two of the most serious breaches of academic integrity are cheating and plagiarism (a form of cheating). Choosing to cheat or plagiarize could jeopardize your continuance in the BScN (Collaborative) Program.

# **Cheating**

Cheating includes, but is not limited to, copying, allowing a colleague to copy your work, writing an assignment for another student, or submitting something written by someone else as your own paper. It also usually includes resubmitting a paper written for another course.

# Plagiarism:

Plagiarism is a form of cheating and refers to "the act of presenting the ideas or works of another as one's own". It includes complete failure to acknowledge sources, as well as inappropriate usage of both direct quotations and paraphrasing (See also Guidelines regarding plagiarism outlined in Appendix C).

**Direct Quotations**: Direct quotations need to be placed within quotation marks, and the page number provided. The failure to place direct quotations within quotation marks is plagiarism. Correct Example of Direct Quote: "Phase 1 of the PRECEDE-PROCEED model seeks to define the quality of life of the target population" (McKenzie & Smelter, 2021, p. 17). Incorrect Example of Direct Quote: Phase 1 of the PRECEDE-PROCEED model seeks to define the quality of life of the target population (McKenzie & Smelter, 2021).

This incorrect quote example is incorrect because the writer has not indicated that the author's exact words are used. Thus, while the authors are referenced, this example still demonstrates plagiarism.

**Paraphrases:** When paraphrasing another person's writing, the text needs to be substantially different from the original material. It is not sufficient to simply change a few words. Original Text: "PRECEDE-PROCEED have been the basis for many professional projects at the national level. This model is well received professionally because it is theoretically grounded and comprehensive in nature: It combines a series of phases in the planning, implementation, and evaluation process" (McKenzie, Neiger, & Smeltzer, 2021, p. 17)

Incorrect Example of Paraphrasing: PRECEDE-PROCEED have been used in many professional projects. Thismodelisviewedpositivelyforthefollowingreasons: 1)it is theoretically grounded; 2) it is comprehensive in nature. This model includes a series of phases in the planning, implementation, and evaluation activities (McKenzie, Neiger, & Smeltzer, 2020) Note that in the above example, there are significant portions of the text that use the exact words as the original text. The above attempt to paraphrase is an example of plagiarism.

Correct Example of Paraphrasing: The PRECEDE-PROCEED model has guided the development of numerous health education and health promotion programs, includingnational programs (McKenzie, Neiger, & Smeltzer, 2005). Themodelis valued because it is based in theory and its nine phases thoroughly guide the programdeveloperthroughneedsassessment, program development, program implementation, and program evaluation activities (McKenzie et al.). Note that in the above example, the ideas of the original text are provided, but the ideas have been presented in the student's own words to summarize the key points identified in the original article rather than the cited author's words with a few word substitutions. Citations have been provided to indicate the source of the ideas discussed in this paragraph.

# **Identifying and Addressing Concerns**

A course instructor may return poorly written papers/assignments to students without a grade. If this happens to you, talk to your instructor to identify the problem, then consult Memorial University's Writing Centre, consult one of the resources listed at the end of this section and/or consider seeking the assistance of a writing tutor.

Review feedback on specific drafts or papers and identify how you can improve your writing (e.g., can you improve defending your ideas or is there a specific problem with grammar or logic or understanding content). Then consult appropriate resources and address the issue for the next draft or paper/assignment.

If a course instructor indicates that you have not used APA format correctly and you disagree, contact the instructor and indicate the relevant section of either the *Pocket Guide to APA* or the *APA Manual* to support your point. Remember APA also has comments and suggestions for improvement in writing style.

## **Suggested Resources**

American Psychological Association. (2010). Publication manual of the American Psychological Association ( $6^{th}$  ed.). Washington, D.C.: Author.

Purdue University Online Writing Lab (OWL) https://owl.english.purdue.edu/owl/section/1/

# Appendix C Guidelines Regarding Plagiarism

Plagiarism (a form of academic misconduct) reflects poorly on the individual involved, the Faculty of Nursing, and the nursing profession. It is important for students to learn and understand material, and develop critical thinking and writing skills, so that they can articulate ideas in their own words and not someone else's (which is plagiarism). Students at all university levels are expected to have "reasonably sophisticated and effective communication skills and are expected to demonstrate proficiency in logical organization, clarity of expression and grammatical correctness" as outlined in the University Calendar (Section 6.9.3). Students who have difficulties understanding content required for written assignments, and/or who struggle with their writing skills, should contact their course instructors and/or the Writing Centre. Students may also consult with the Associate Dean for further academic advisement.

The following guidelines refer to the informal resolution process undertaken by the Faculty when plagiarism is identified.

1. Assignments and discussion forums will be assessed for plagiarism

Course instructors may use the following strategies to assess plagiarism in assignments and in Brightspace/D2L discussion forum postings:

- Check samples of references
- Look for changes in writing style, or font
- Search specific passages (e.g. sentences or paragraphs) on an internet website such as Google or other plagiarism detection websites.
- 2. Students are expected to know what constitutes plagiarism and how to avoid it

The FON uses multiple strategies to reinforce key messages about plagiarism. Students also have access to resources to help them avoid plagiarism.

- Students are exposed to information about plagiarism, appropriate referencing, and appropriate academic conduct throughout the program.
- Course instructors may have information regarding plagiarism on their Brightspace/D2L course shell and/or their course outline. Information usually includes:
  - Messages that plagiarism is a serious offence and penalties will be enforced, including potential termination of the student from the program
  - Links to the MUN regulations regarding plagiarism (academic misconduct), including the modules Integrity A/B as applicable
  - Links to resources related to appropriate citation and paraphrasing, as well as ways to avoid plagiarism
- Course outlines that clearly state expectations related to referencing, including use of references in the Brightspace/D2L discussion forum
- Reminders from course instructors at the beginning of the term and/or before students first written assignment that plagiarism is unacceptable

# 3. Procedure for addressing plagiarism offences

All occurrences of plagiarism should be brought to the attention of the Associate Dean.

The course instructor will discuss with the Associate Dean both the nature of the incident and appropriate actions. This discussion should take place as soon as possible after plagiarism is

discovered.

The course instructor should then notify the student that a concern about plagiarism was identified and schedule a meeting with the student within one week to discuss it. The Associate Dean may also attend this first meeting with the student. The course instructor and the student will discuss the recommended actions for plagiarism (see Section 4 below).

If the student is in agreement, the recommended actions will be implemented. The instructor will report back to the Associate Dean and in most cases a letter will be placed on the student's file.

If the student is not in agreement with the recommended actions, then another meeting will be scheduled with the student, the course instructor and the Associate Dean. If a resolution cannot be obtained after this meeting, the matter will be addressed through the formal university processes and referred to the Senate Committee on Undergraduate Studies (SCUGS), as per university regulations 6.12.6 *Procedures for Resolution of Alleged Academic Offences by the Senate Committee on Undergraduate Studies* -

http://www.mun.ca/regoff/calendar/sectionNo=REGS-0748

### 4. Possible actions for plagiarism

Plagiarism includes inadequate paraphrasing, inadequate referencing, or submitting the work of another as one's own. It also includes submission of a paper, assignment or discussion forum posting written for another course or by another person. Penalties vary and will be determined by the Associate Dean and the course instructor.

In most cases, for a first offence, the student will be given a grade of 0 in the assignment. Depending on the nature of the infraction, the student may be given the opportunity to do remedial work and/or rewrite the assignment for a maximum grade of 65%.

5. For a second offence, or for submission of work copied from another student, the student will be given a grade of 0 in the assignment without the opportunity to re-submit the assignment. Depending on the weight of the assignment, this may lead to a grade in the course that is less than 65 and thus result in a course failure.

More severe penalties may be imposed if the nature of the infraction requires referral to SCUGS for investigation.

Note: These guidelines are derived from the MUN Regulations Governing Academic Misconduct <a href="http://www.mun.ca/regoff/calendar/sectionNo=REGS-0748">http://www.mun.ca/regoff/calendar/sectionNo=REGS-0748</a>. Students and faculty members are referred to these regulations as their primary source of information regarding definition and management of plagiarism.

# Appendix D Clinical Incident Report Template

Course:	Date of Incident:
Student Name and ID: Instructor Name: Clinical unit (or other location	on) where incident occurred:
Type of Incident: (check	below)
Drug error	Fall
Student Injury	Other (specify)
sign when reviewed and re (Use back of page as neede	addy forsubmission   ed - Include precise description of the event; patient's gresson advised of the incident; where/how incident
Student signature:	Date:
Instructor signature:	Date:

# Appendix E Medication Administration Policy

Students may administer medications at their level of competency as they progress through the program. Determination of competency occurs as follows:

In clinical courses where there is direct supervision by a clinical instructor from the faculty of nursing, the competency of a student, to independently administer medications, is determined in consultation between the student and the clinical instructor. This consultative process will be revisited when either the student or the clinical instructor deem it necessary.

In clinical courses where there is *no direct supervision by a clinical instructor* from the faculty of nursing, competency of a student, to independently administer medications, is determined in consultation between the student and the preceptor/co-assigned registered nurse. This consultative process will be revisited when either the student or the preceptor/co-assigned registered nurse deems it necessary.

#### **Administration of IV Bolus Medications**

Students in N3532 can administer IV medications via a bolus (direct (push) or via a secondary med bag) under the direct supervision of their preceptor until they are deemed competent and then they can independently administer IV bolus medications as per the unit policy.

Students are accountable for their practice at all times. In 3523 faculty reinforce with students and preceptors that students need to demonstrate competency to their preceptor prior to being independent in the administration of IV push medications. **Students are not permitted to administer medications that require an RN to complete extra education such as chemotherapy and emergency medications** 

## **Administration of High Alert Medications**

In an effort to promote client safety and decrease the likelihood of medication errors, follow the recommendations of the Institute for Safe Medication Practices (ISMP). *High alert medications* are described by the ISMP as "drugs that bear a heightened risk of causing significant patient harm when they are used in error" (ISMP, 2014).

Medications that are designated as *high alert* require an *independent double check* before administration. An *independent double check* is a procedure in which two licensed health care practitioners, who are competent and authorized in medication administration (e.g. Registered Nurse, Licensed Practical Nurse, Physician, Pharmacist), separately check (alone and apart from each other, then compare results) each component of prescribing, dispensing, and verifying the high-alert medication before administering it to the patient. The students' role in independent double checks are as follows:

Students in 3000 level clinical courses prior to NURS3523 **may not participate** in an *independent double check*. However, they can be the third signature as outlined below:

In 3000 level clinical courses prior to NURS3523, when deemed competent (see definition above) to do so, students may be the third check and signature. Students cannot independently double check medications prepared by another student under any circumstances.

Students in NURS3523 and 4000 level clinical courses **may participate** in an *independent double check* and can be the second signature as outlined below When deemed competent (see definition above) to do so, students may perform an independent double check with the registered nurse i.e. *the student will be the second check and signature. Students cannot independently double check medications prepared by another student under any circumstances*.

Students must comply with agency policy regarding medications designated as High Alert Medications. In addition, even if not indicated in agency policy, the following medications must be treated as high alert:

	All Narcotics
	Controlled Substances (as identified in agency policy)
	Insulin
П	All Antithrombotics (including anticoagulants and thrombolytics)

# Appendix F Professional Appearance Policy

The purpose of this policy is to assist the student to understand boundaries for personal decision making regarding professional dress and grooming. A professional image communicates respect and caring and inspires confidence and trust with clients and others. In addition, elements of the professional appearance policy are directly related to infection control principles and safety issues impacting both the student and client. These guidelines reflect recognition that clients' perceptions of the profession of nursing are influenced in part by how nurses display a professional image in all practice settings. These guidelines also reflect the boundaries that are acceptable to agencies that provide clinical placements for students in the BScN (Collaborative) Program. Students are also referred to CRNNL's position statement "Professionalism and the Registered Nurse" at www.crnnl.ca

### **Personal Grooming**

In keeping with principles of infection control and a professional image, the following guidelines apply to personal grooming:

#### Hair

Hair must be neatly groomed. Hair longer than shoulder length must be tied back and secured. Should ponytails be worn they are not to extend beyond shoulder length. Hair ornaments must be small and neutral in color. Whether short or long, hair should not hang in the face or over the eyes when leaning forward. Wide hair bands and head scarves are not permitted unless required for religious/cultural integrity.

#### Make Up

An overall neutral look is permitted. No enhancements or false eyelashes are permitted.

#### Nails

Fingernails must be short and neatly groomed. Artificial nails, nail enhancements and nail polish are prohibited.

#### **Jewelry**

For purposes of infection control and student/client safety, the following guidelines apply:

- o No rings are permitted.
- o Small stud earrings, to a maximum of two per ear only, are permitted.
- o All other visible body jewelry must be removed or replaced with a clear or neutral spacer.
- o Lapel and wristwatch is permitted. Wrist watches must be removed during client care and when hand washing. A lapel watch with a second hand indicator is recommended.
- o Medical Alert Jewelry Please consult with your clinical faculty and Infection Prevention Control Policy

#### **Tattoos**

Visible tattoos and body art with wording or images must be covered (if possible) while in clinical.

#### Perfumes/Scents

The use of scents is not permitted. This policy is strictly enforced and is inclusive of perfume, aftershave and scented products such as lotion, soap, hair spray, deodorant and powder. In the interest of clients and colleagues who experience allergic reactions, students are also asked to use non-scented products and to avoid offensive odors such as cigarette smoke on clothing.

#### Reards

Beards are to be neatly trimmed or netted

### **Identification (ID)**

Students must wear appropriate identification at all times when in the clinical setting. This includes the program issued name tag, a photo identification badge (ID), and program crest on the upper left sleeve of the uniform. The photo ID must be worn at all times when in clinical practice areas (i.e. in hospital and non-traditional clinical settings). The ID must be appropriately attached to clothing and must be visible at all times (placed above the waist). ID badges must be secured by a clip when providing direct patient care.

Note: Regional Health ID badge is to be worn during all clinical related activities and in Regional Health agencies only. Students are asked to note the policy regarding Lanyards (Policy OPS-SC - 040) which states: Lanyards are only to be worn when there is no patient/resident/ client contact.

Clinical ID badges must be returned to the faculty after the final clinical placement.

#### **Clinical Uniform Attire**

Clinical uniforms are required for clinical practice within a hospital or long term care facility. The clinical uniform must be standard uniform apparel and professional in appearance. Students are required to purchase their own uniforms. A minimum of two uniforms is needed to satisfy the usual requirements of most clinical courses. Uniforms should not be worn to and from the clinical area provided they are covered when exposed to outside elements. Uniform selection should be made in accordance with the following guidelines.

#### Uniform

Uniform components may consist of pants/skirt and a top, or a dress and a warm-up jacket. The uniform must be clean, ironed, and in good condition. Tops should extend beyond the top of the leg and provide full coverage during movement.

Long-sleeved shirts under the uniform are not permitted unless required for religious/cultural integrity. The uniform must accommodate the freedom of body movement needed to perform tasks in a manner that will prevent injury. It should be roomy and loose fitting. It should have pockets large enough to hold items such as a small note pad, pen, and scissors.

**CNS** – Navy blue pants and a white top

**WRSON** – Solid color uniform that is either all white, all navy, or combination of white and navy. (ie navy top and white bottom or vise versa)

MUNFON – Burgundy pants and white top

#### Footwear

Footwear is considered part of uniform attire. A standard "duty" shoe or footwear of a sports shoe/sneaker variety is required. Footwear must be primarily white. The shoe must be closed at the toe and heel. Clinical uniform footwear must **NOT** be worn outside the clinical area.

It is recommended that students purchase footwear which satisfies the guidelines established by the Canadian Centre for Occupational Health and Safety.

Footwear should be shaped like your foot i.e., it should not be pointed, it should not crowd your toes (The end of your longest toe should be a thumb's width away from the end of the shoe. You should be able to pinch the leather across the widest part of your foot).

The footwear should have a reinforced heel and should firmly grip your heel. It should be closed at the toes and heel, fit securely, and have a pivot area under the ball of the foot. The footwear should have a good arch support and the soles should be flexible.

Footwear made of fabric or leather is best to allow for cleaning and the foot to breathe.

Some styles of footwear specifically designed for nurses satisfy all these criteria. Some styles of joggers, cross trainers, and court footwear also satisfy these criteria. Clinical uniform footwear will be carried to and from clinical settings and not worn outside the clinical area.

### Lab Coats/Warm-Up Jackets for Clinical Area

When in client care areas for client research only, students are required to wear a lab coat or warm-up jacket over their appropriate/suitable non-uniform attire when not in uniform. Warm up jackets must be white and are not to be worn at the bedside when delivering client care.

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Any hip to or mid-thigh length white warm-up jacket with buttons is acceptable Under no circumstances are students to wear lab coats that are worn for science-based lab courses.

# Clinical Equipment (Required for Winter Semester Year 1)

All students must have their own:

- o Bandage scissors
- o Penlight
- o Stethoscope
- o Watch that enables the student to count off 60 seconds

#### **Professional Non-Uniform Attire**

When assigned to clinical practice in community agencies and within some hospital units, students may not be required to wear the standard uniform. Within these settings, certain types of street attire are appropriate. Students should note that in the case of visits to clinical agencies for patient research, the following guidelines for casual attire should also be followed:

#### **Business Attire**

Within most community agencies the guidelines for suitable casual attire includes casual/dress pants, skirts knee length or longer, non-see-through blouses and casual/dress shirts.

Unsuitable attire includes clothing that is excessively tight, form fitting or excessively baggy. Low necklines are inappropriate. Any attire displaying pictures, names, slogans, logos or inappropriate expressions is not acceptable. Spandex, jeans, and sweatpants are unsuitable.

No other clothing items (e.g. hoodies, fleece jackets, sweaters, etc.) are to be worn in clinical areas (i.e. direct patient care areas and indirect areas such as desk area, medication room, conference rooms, etc.). Suitable footwear includes casual shoes with enclosed toe and heels. Clogs, sandals, high heels or boots are not appropriate.

Students will be required to leave the clinical area if their professional appearance does not conform to this policy.

# Appendix G Student at Risk of Clinical Failure or Deemed Unsafe in Clinical Practice

The Faculty and Schools of Nursing recognize the importance of identifying students who are at risk of failing a clinical course or who are deemed unsafe in clinical practice. Once the student has been identified as at risk or unsafe, through an occurrence or a pattern of behaviour, a process is put in place to assist the student towards achieving competent and safe practice or, if necessary, remove the student from the course or the program.

The procedures outlined below regarding addressing the student at risk of failure (if noted issues continue), deemed to be unsafe, or requiring removal from a course are predicated by acknowledgement that students in the BScN (Collaborative) program are professionals-in-progress. As such, clinical knowledge, competence and judgement will be developed and refined during the progression of each course and the program. These procedures are not applicable to instances of normal knowledge development, teaching moments or normal development in clinical abilities. It is intended that the interventions below provide for timely initiation of remedial activities to maximize a student's clinical progress.

Also, the wording of this document refers to a student and clinical instructor but the same expectations and process apply for those courses in which faculty supervision of students is 'indirect'. Faculty members for N3523, N4512 and N4516 will inform the respective preceptor or cosigned nurse or agency contact that they should notify the faculty member as early as possible if either of the expectations for safe clinical practice outlined below is not met.

## **Expectations for Safe Clinical Practice**

1. In each clinical course, students are expected to demonstrate growth in clinical practice through the application of knowledge and skills from previous and concurrent courses to meet the clinical practice expectations described in the course outline and/or appraisal tool(s) applicable to the course and level of the student. Expectations are articulated in relation to the standards of nursing practice and/or competencies for entry level practice in a levelled sequence for each year of the program.

2. Students are expected to prepare for clinical practice in order to provide safe and competent care. Preparation expectations are detailed in the respective course outline.

#### **Definitions**

At Risk: A student is considered to be at risk for clinical failure if they have consistent difficulty meeting the Nursing Practice Appraisal Criteria or other designated evaluation criteria in clinical courses. If the at risk student's performance is amenable to a learning plan, but does not improve, the student will fail the clinical course.

Unsafe: A student is considered to be unsafe in clinical practice when their performance places themselves or another individual at risk for, or actually causes physical, psychosocial, or emotional harm.

#### Procedure for the at-Risk Student

#### The Clinical Instructor

At any point in the procedure, the course leader may inform or consult with the Associate Dean or designate.

- 1. Identifies the occurrence or pattern of behaviour that places the student at risk of clinical failure and arranges to meet to discuss the same with the student as soon as possible.
- 2. Informs the Course Leader.
- 3. Documents, within 48 hours, specific information about the area of concern (e.g. criteria not being met due to an occurrence or pattern of behaviour). Documentation must include date and time when the student was originally informed of the occurrence or pattern of behaviour and the verbal feedback given to the student.
- 4. Meets with the student as soon as possible to review the concerns and documentation. The meeting outlined in Step 1 and this meeting may be the same meeting.
  - a. Signs and dates the documentation.
- 5. Collaborates with the student to develop a Learning Plan (see Appendix I for template) to address deficiencies noted in progression toward the standards of nursing practice and/or competencies as outlined in the Nursing Practice Appraisal Criteria and/or other course designated evaluation criteria. The plan provides specific details outlining the objectives, strategies (e.g. return to the lab for instruction and review; review specific theory before next clinical day, follow up meetings with faculty, etc.), outcomes, and timelines that the student will have to meet. The consequences of failing to meet criteria will be outlined in the Learning Plan (e.g. removal from clinical unit or failure of the course).
  - a. Informs the student that his/her clinical performance will be evaluated for consistent and sustained improvement in accordance with the Learning Plan.
  - b. Advises the student that the consequences of failing to demonstrate consistent and sustained improvement in nursing practice will result in a failed grade.
- 6. Continues to provide feedback to the student as usual during subsequent clinical days including discussion of progress toward meeting the Learning Plan objectives.
- 7. Meets with the course leader to discuss lack of progress (if applicable).
- 8. Documents supporting evidence of the student's ongoing clinical performance in relation to meeting the standards of nursing practice and/or competencies as outlined in the respective Nursing Practice Appraisal Criteria and/or other course designated evaluation criteria.
- 9. At the end of the placement, determines if the student passes or fails the course inconsultation with the course leader, Associate Dean or designate.

# **The Student**

- 1. Endeavours to be prepared for each clinical day and assigned responsibilities as applicable to their level within program and progression in the course.
- 2. Meets with the faculty member to discuss concerns and review the documentation.
- a. Signs the form to verify they have read the documentation. The student's signature does not mean that they agree with the documentation but that it was discussed with them.
- 3. Collaborates with the faculty member to develop a Learning Plan to address identified concerns/deficiencies in relation to standards of nursing practice and/or competencies for the course.
  - a. Signs and dates the Learning Plan.
  - b. Works toward meeting all components outlined in the Learning Plan.

4. Consults at any point in the procedure with individuals such as the course leader, individuals from counselling service and/or Associate Dean or designate.

#### **Procedure for the Unsafe Student**

#### The Clinical Instructor

- 1. Dismisses the student immediately from the clinical area if the student is deemed to be unsafe, either through one serious event (patient is harmed or judgement used is reflective of non-mastery of competencies to be achieved in [an] earlier course[s]) or a pattern of behaviours which would be unsafe if not remediated by the instructor, staff, or ongoing learning plan, and/or have been brought to the student's attention on prior occasions.
- 2. Notifies the course leader, who will notify Associate Dean or designate of the situation.
- 3. Documents specific information about the unsafe situation/event/behaviour. Documentation must include how the occurrence or behaviour failed to meet the standards of nursing practice and/or competencies as outlined in the Nursing Practice Appraisal Criteria and/or other course designated evaluation criteria. Documentation includes date and time when the student was originally informed of the occurrence or behaviour and the verbal feedback given to the student.
- 4. Meets with the student as soon as possible to review the documentation.
- 5. Signs and dates the documentation with the student.
- 6. Determines whether to proceed by one of two courses of action (6.1 or 6.2) based on the nature of the unsafe behaviour. The student is advised of the pathway to be followed during this meeting or a subsequent one within 24 hours.

# Pathway 6.1

- Collaborates with the student to develop a Learning Plan to address the unsafe
  practice or behaviour. The plan provides specific details about the objectives,
  strategies (e.g. return to the lab for instruction and review; review specific theory
  before next clinical day, follow up meetings with faculty, etc.), outcomes, and
  timelines that the student will have to meet.
- The consequences of failing to meet criteria outlined in the Learning Plan will be clearly discussed; i.e., continuation of the unsafe behaviour will result in a failed grade in the course and/or withdrawal from the program in accordance with implementation of the university calendar nursing promotion regulations (see current University Calendar, Nursing Program Promotion Regulations).
- Informs the student that clinical performance for the placement will continue to be evaluated for consistent and sustained improvement toward all objectives/appraisal criteria as outlined in the course evaluation plan for the respective course.
- The Learning Plan will remain in place throughout the clinical placement.
- Holds periodic meetings with the student to discuss progress toward meeting the Learning Plan objectives.
- Documents supporting evidence of the student's ongoing clinical performance in relation to meeting the standards of nursing practice and/or competencies as outlined in the Nursing Practice Appraisal Criteria and/or other course designated evaluation criteria.
- At the end of the placement, determines if the student passes or fails the course in consultation with the course leader, Associate Dean or designate as necessary.

#### Pathway 6.2

It is acknowledged that there are some situations of unsafe behaviour which cannot be effectively remediated with a Learning Plan. In such circumstances, instructors, in consultation with the course leader, coordinator and Associate Dean, as applicable, will seek the consideration of the Committee on Undergraduate Studies to review the unsafe clinical practice of the student and make a determination as to whether the unsafe practice requires that the student be withdrawn from the nursing course and/or from the program as per the university calendar nursing promotion regulation 7.12.

#### The Student

- 1. Meets with the faculty member to discuss the unsafe behaviour.
  - a. Reviews the documentation.
  - b. Signs the form(s) to verify that they have read the document. The student's signature does not mean that they agree with the documentation but that it was discussed with them.
- 2. If a Learning Plan pathway has been chosen (6.1 above),
  - a. Collaborates with the faculty member to develop a Learning Plan to address unsafe practices and meet the standards of nursing practice and/or competencies.
  - b. Signs and dates the Learning Plan
  - c. Works to meet all components outlined in the Learning Plan.
  - d. Consults at any point in the procedure with individuals such as the course leader, individuals from counselling service, Associate Dean or designate.
- 3. If invocation of the promotion clause is sought permitting the Undergraduate Studies Committee to remove a student from the course or program, the student follows that procedure.
  - a. The student may appeal the decision if it is determined that unsafe behaviour requires them to be withdrawn from the nursing course and/or from the program, as per the calendar regulations (see current University Calendar, General Academic Regulations, Appeal of Regulations.)

# Invocation of Promotion Regulation Clause to Remove a Student From a Clinical Course or the Program

The BScN (Collaborative) Program has a long standing promotion regulation which reads as follows, "A student may be required to withdraw from a nursing course with a clinical component or from the program at any time, on the recommendation of the Committee on Undergraduate Studies, if the student is deemed unsafe in a clinical setting, or if the student's behaviour prohibits achievement of the course or program objectives. This clause could also be applied to a student who displays unethical or unprofessional behavior in classroom, lab or clinical settings. A student who is required to withdraw from the program for any of these reasons will not be eligible for future admission/readmission to the program or the Faculty of Nursing."

Invoking regulation 7.12 is not taken lightly, and when used, has predominantly focused on removal of a student from a course or the program due to "unsafe" behavior in a clinical setting. Unsafe care in a clinical setting is acknowledged to be potentially reflective of professional unsuitability.

All instances of invocation of promotion regulation 7.12 (for unsafe care or unprofessional behaviour) will follow the same procedure, but for clarity are outlined separately.

#### **Invocation of the Clause for Unsafe Behaviour**

#### The Instructor

- 1. If unsafe behaviour reflects a significant breach of standards, agency policy or competencies mandated at a prior level of the program, or a pattern of continued behaviors which have not been resolved after multiple notations of the same, may submit a request in writing for UGSC to invoke the program regulation removing the student from the course at hand or the program.
- 2. In consultation with the course leader and program coordinator (as applicable), determines that no other viable avenue is available to address the issue at hand,
- 3. Meets with the student to advise them that this pathway will be followed.
- 4. Prepares and submits a request in writing for UGSC to invoke the program regulation removing the student from the course at hand or the program (level of withdrawal to be specified in the request). The request must be accompanied by all supporting documentation used by the instructor to make the request.

#### The Student

If advised of a request to invoke Regulation 7.12:

- 1. Responds in writing to the request and documentation provided within 48 hours of receiving the document. It is recommended that the student discuss their perceptions of personal performance and how it relates to the standards of nursing practice and/or competencies as outlined in the Nursing Practice Criteria and/or other course designated evaluation criteria.
- 2. Consults at any point in the procedure with individuals such as the course leader, individuals from counselling service, Associate Dean or designate.
- 3. May appeal the decision directly to the Senate Committee for Academic Appeals if it is determined that unsafe or unprofessional behaviour requires them to be withdrawn from the nursing course and/or from the program, as per the calendar regulations (see current University Calendar, General Academic Regulations, Appeal of Regulations.

#### The Associate Dean

- 1. Upon receipt of a request to invoke the Regulation 7.12 the Associate Dean:
  - a. calls a special meeting of the Site Undergraduate Studies Committee to occur within one week.
  - b. notifies the student of the process in progress, and advises them that they may submit a statement and/or other documentation pertinent to the review.
  - c. provides a copy of the documents to be presented by the instructor and the student to the alternate person. Each is given an opportunity to respond in writing to the other's documents.
- 2. The AD prepares to chair the special meeting of UGSC to determine whether the student's performance as documented in the reviewed package materials requires that the student be withdrawn from the nursing course and/or from the program as per the university calendar nursing promotion regulation.
  - a. The AD coordinates the preparation of the package of materials for UGSC consideration, including the statements and documentation from the instructor and the student (preceptor feedback also would be included as applicable).
  - b. All documents are redacted of the student's name, student ID and gender identification.
  - c. The meeting package is provided via an electronic, password protected file to the committee no later than 48 hours prior to the meeting.

- 3. The AD chairs the review meeting, ensuring that all documentation is presented to the committee, and that all discussion is fair and respectful to both the student and instructor. The AD usually will not participate in the discussion or vote, but may answer points of fact if a question arises. The AD records the decision and articulated grounds for the same, and follows up as applicable in notification to the instructor and student.
- 4. Decisions possible are as follows:
  - a. To be withdrawn from the course.

If the committee determines that, based on the documentation provided and the held within the meeting, the student must be removed from the clinical placement course, the student will not be permitted to return to the clinical placement. The student will be assigned a grade of FAIL in the course. The student is not removed from the program, and may repeat the clinical course when next offered within the program sequence. The student will be invited to meet with the instructor for a final evaluation meeting to discuss any aspect of their clinical performance during the placement, but may choose not to do so. The student may continue in any non-clinical courses for which they are registered in that semester.

#### b. Not to be withdrawn from the course.

If the committee determines that, based on the documentation provided and the discussion held within the meeting, the student does not need to be removed from the clinical placement course, the student will be provided with the opportunity to complete the placement. A different instructor will be assigned and up to two additional clinical days beyond the number remaining at the time of the interruption of the placement will be allocated to facilitate reintegration into the clinical area. The student will be subject to the same roles, responsibilities and expectations as applicable to the respective course. The instructor assigned will determine whether the student has met the objectives consistently and competently and a PASS/Fail grade will be allocated.

# c. To be withdrawn from the Program

If the committee determines that, based on the documentation provided and the discussion held within the meeting, the student must be removed from the program, the student will be advised of the same and dropped from all nursing courses for the semester effective immediately. Notation of "Required to Withdraw RWD" will be allocated to all nursing courses on the students' transcript of that semester. The student is ineligible for readmission to the program.

#### d. Not required to withdraw from the Program.

If the committee determines that, based on the documentation provided and the discussion held within the meeting, the action of immediate removal from the program is not merited, the student may continue in the program. This decision does not preclude the following: i. The student may be removed from the course(s) in which the behavior was noted. The policy outlined in (a) above would be followed.

ii. The committee may include a remedial program to be followed if the student remains in the program. Any remedial activities will be articulated during the meeting and included in the decision letter provided to the student.

# Appendix H Clinical Placement Coordination

### **Nursing Education Program Clinical Experience Responsibilities**

Basic nursing education programs prepare generalists to engage in entry-level nursing practice. The Undergraduate Nursing Program:

- provides students with the opportunities to acquire the knowledge, skills, and attitudes required for entry-level practice and pursue life-long learning(ARNNL, 2006; ARNNL 2013; ARNNL 2019; CASN 2014);
- ensures that student practice learning experiences reflect national and jurisdictional standards and prepares graduates to achieve entry-level competencies (ARNNL, 2013; CASN 2014);
- works in partnership with health care settings to ensure that students haveaccess to quality practice learning experiences (ARNNL, 2013);
- is committed to providing the clinical experiences necessary to prepare students for entry-level scope of practice primarily through the use of medical and surgical clinical areas.

#### Clinical Placements

- Clinical placements will be assigned by the Nursing Program. These placements may be changed at any time due to unforeseen circumstances.
- Group clinical courses will use a variety of clinical areas throughout the program to support learning.
- Students are advised that a balance of medical-surgical experience is required throughout the program.
- Submission of pre-placement requirements is a professional responsibility and a reflection of professional accountability.

# Process for Selection of Placements Outside of City of Study Site or Specialty Area Access The following will be taken into consideration when assigning placements:

- Academic performance in courses completed to date which includes consideration of academic failures, GPA, nursing course average and program average.
- Clinical performance throughout the program, including review of nursing practice appraisal comments, learning plans, missed time and occurrence reports such as med errors or clinical commendations.
- Professional behavior and accountability demonstrated throughout the program, including timely response to emails and submission of pre-placement requirements by the requested deadline.
- Clinical placement history to date.

#### **Process for Submission of Requests**

- Students may submit requests for placements outside St. John's or Corner Brook (city of site of study respectively), and within or outside Newfoundland and Labrador for NURS 3523, 4512 and 4516.
- Students returning from a leave of absence are not eligible for specialty placements, placements outside St. John's or Corner Brook (city of site of study respectively), or outside of Newfoundland and Labrador for NURS 3523, NURS 4512 or NURS 4516 for the next clinical course expected to be completed in their program. Future placements will be considered on an individual basis.

- Students cannot submit requests for unit/hospital-specific placements within St. John's or Corner Brook.
- The primary focus of clinical experiences in NURS 3523 and NURS 4516 will be medical and surgical clinical areas.
- Personal statements All students and a clinical reference WRSON students will be required of students requesting placements in specialty areas.
- Student must have had no previous clinical failures throughout the program.
- Clinical placements for areas outside St. John's or Corner Brook (city of site of study respectively), will be negotiated one at a time. A student can submit 3 requests for areas outside St. John's or Corner Brook (city of site of study respectively). All unanswered placement requests will be cancelled on the last day of classes of the preceding Semester. It is expected that students accept the first confirmed request.
- The deadline date to submit requests for NURS 3523 and NURS 4512 is prior to the last day of classes of the preceding Fall Semester.
- The deadline date to submit requests for NURS 4516 is prior to the last dayof classes of the preceding Spring/Summer Semester.
- The deadline date to submit pre-placement requirements for requests outside St. John's or Corner Brook (city of site of study respectively) for NURS 3523 and NURS 4512 is 6 weeks prior to the last day of classes of the preceding Winter Semester.
- The deadline date to submit pre-placement requirements for requests outside St. John's or Corner Brook (city of site of study respectively) for NURS 4516 is within 6 weeks prior to the last day of classes of the preceding Fall Semester.

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# Appendix I

# **Learning Plan Template**

# BACHELOR OF NURSING (COLLABORATIVE) PROGRAM MUNFON STUDENT LEARNING PLAN

Learning plans are initiated when students are falling behind the expectations for clinical performance for student at a point in the course. They are a feedback strategy used to help students to articulate and focus on strategies to improve and/or address obstacles to their learning and clinical performance so that they may continue to progress toward achievement of solid clinical practice competencies (knowledge, reflection of professional attitudes and provision of care) inherent in the course objectives

Reason(s) for Lear	ning Plan (Instructor initiates usually: Identify clinical performance areas
not being met - cou	ıld be instances or pattern of behavior.)
Learning Plan (Stud	dent designs anddiscusses with instructor; refined until satisfactory to both)
implemented on Student:	
Clinical instructor	<u> </u>
<u>Update Notes</u> :	As applicable, update notes will be added here: please note the date. Student and instructors to sign as this feedback is given and/or the learning plan

changes)

# Appendix J

# Procedure for Students Demonstrating Behavior Deemed Unsuitable to The Profession

This procedure is predicated by acknowledgement that students in the BScN (Collaborative) program are professionals-in-progress such that competencies, standards and expectations of professional conduct will be developed and refined during the progression of the program.

There may be behaviors demonstrated which are deemed unsuitable to the profession and can be quickly remediated upon bringing them to the student's attention. This policy is not applicable to those instances of teaching moments and normal development into the profession.

Memorial University of Newfoundland expects that students will conduct themselves in compliance with University Regulations and Policies, Departmental Policies, and Federal, Provincial and Municipal laws, as well as codes of ethics that govern students who are members of regulated professions. As such, students in the BScN (Collaborative) program are expected to demonstrate attitudes and behaviors reflective of the codes of ethics, standards, and professional competencies which direct nursing practice.

Professional behavior is expected in all learning venues including classroom, lab and clinical placement settings.

Decision to Implement a Learning Plan

The Instructor (Clinical, Class or Lab):

- 1. Brings the unprofessional behaviour immediately to the student's attention by interrupting, and/or temporarily dismissing the student from the situation at hand. The student is dismissed if demonstrating behaviour unsuitable to the profession either through one serious event or a pattern of behaviours.
- 2. Notifies the course leader (if applicable), who will assist the instructor to determine whether a learning plan can be implemented. The instructor or course leader will notify the Associate Dean or designate if further consultation is desired at this time.
- 3. Documents specific information about the situation/event and behaviour demonstrated. Documentation includes date(s) and time(s) when the student was informed of the occurrence or behaviour and the feedback (written or oral) given to the student to-date.
- 4. Meets with the student as soon as possible to review the documentation.
- 5. Signs and dates the documentation.
- 6. If applicable, collaborates with the student to develop a Learning Plan to address the unprofessional behaviour. The plan provides specific details about the objectives, strategies (e.g. review specific documents, reflection assignment, personal goal setting, follow up meetings with faculty, etc.), outcomes, and timelines that the student will have to meet. The consequences of failing to meet criteria outlined in the Learning Plan will be clearly outlined, e.g. result in a failed grade in the course and/or withdrawal from the course/program in accordance with implementation of the university calendar nursing

promotion regulations (see current University Calendar, FON, Promotion Regulations).

- a. Informs the student that performance will be evaluated for consistent and sustained behaviour.
- b. Informs the student that the consequence of failing to demonstrate consistent and sustained improvement will result in a failed grade and potential removal from the course or program
- c. Documents evidence of the student's change or lack of change in relation to the noted unprofessional behaviour.
- d. At the end of the course, determines if the student passes or fails the course based on performance on the evaluation criteria applicable to the course and resolution of the demonstrations of behaviour unsuitable for the profession. The instructor may consult with the course leader, Associate Dean or designate as applicable.
- 7. If demonstrated behaviour reflects a significant breach of professional standards, agency policy or competencies mandated at a prior level of the program, or a pattern of continued behaviors which have not been resolved after multiple notations of the same, the instructor may submit a request in writing for UGSC to invoke Program Regulation 7.10 removing the student from the course at hand or the program (level of withdrawal to be specified in the request).
  - a. The instructor must notify the student that this pathway has been deemed necessary and a request will be submitted.
  - b. The request must be accompanied by all supporting documentation used by the instructor to make the request.

#### The Student

- 1. Meets with the faculty member to discuss the observance of unprofessional behaviour.
- 2. Reviews the documentation.
- 3. Signs the form to verify they have read the document. The student's signature does not mean that they agree with the documentation but that it was discussed with them.
- 4. If applicable, collaborates with the faculty member to develop a Learning Plan to address their deficiencies to meet the standards of nursing practice and/or competencies.
  - a. Signs and dates the Learning Plan
  - b. Works to meet all components outlined in the Learning Plan.
- 5. Consults at any point in the procedure with individuals such as the course leader, individuals from counselling service, Associate Dean or designate.

# **Invocation of Promotion Regulation Clause to Remove a Student from a Course or the Program**

The BScN (Collaborative) Program regulation 6.12 states that "student may be required to withdraw from a nursing course with a clinical component or from the program at any time, on the recommendation of the Committee on Undergraduate Studies, if the student is deemed unsafe in a clinical setting, or if the student's behavior prohibits achievement of the course or program objectives. This clause could also be applied to a student who displays unethical or unprofessional behavior in classroom, lab or clinical settings. A student who is required to withdraw from the program for any of these reasons will not be eligible for future admission/readmission to the program or the Faculty of Nursing.". <a href="https://www.mun.ca/regoff/calendar/sectionNo=NURS-0907">https://www.mun.ca/regoff/calendar/sectionNo=NURS-0907</a>

This regulation is infrequently required, and when used, has predominantly focused on removal of a student from a course or the program due to "unsafe" behavior in a clinical setting. Unsafe care in a clinical setting is acknowledged to potentially be reflective of professional unsuitability. Other behaviors also are unsuitable for the profession. The procedure below is articulated to address behavior deemed unsuitable for the professional, but are not in the category of unsafe care. All instances of invocation of promotion regulation 7.12 (for unsafe care or other behavior unsuitable to the profession) will follow the same procedure, but for clarity are outlined separately.

#### The Instructor

- 1. If demonstrated behavior reflects a significant breach of standards, agency policy or expected professional conduct, or a pattern of continued behaviors which have not been resolved after multiple notations of the same, the instructor may submit a request in writing for UGSC to invoke the program regulation removing the student from the course at hand or the program.
- 2. In consultation with the course leader and program coordinator (as applicable), determines that no other viable avenue is available to address the issue at hand.
- 3. Meets with the student to advise them that this pathway will be followed.
- 4. Prepares and submits a request in writing for UGSC to invoke the program regulation removing the student from the course at hand or the program (level of withdrawal to be specified in the request). The request must be accompanied by all supporting documentation used by the instructor to make the request.

#### The Student

If advised of a request to invoke Regulation 7.12:

1. Responds in writing to the request and documentation provided within 48 hours of receiving the document. It is recommended that the student discuss his/her perceptions of personal professional performance and how it relates to the standards of nursing practice

- and/or competencies.
- 2. Consults at any point in the procedure with individuals such as the course leader, individuals from counselling service, Associate Dean or designate.
- 3. May appeal the decision directly to the Senate Committee for Academic Appeals if it is determined that unsafe or unprofessional behaviour requires them to be withdrawn from the nursing course and/or from the program, as per the calendar regulations (see current University Calendar, General Academic Regulations, Appeal of Regulations.

#### The Associate Dean:

- 1. Upon receipt of a request to invoke the Regulation 7.12 the Associate Dean:
  - a. calls a special meeting of the Site Undergraduate Studies Committee to occur within one week.
  - b. notifies the student of the process in progress, and advises them that they may submit a statement and/or other documentation pertinent to the review.
  - c. provides a copy of the documents to be presented by the instructor and the student to the alternate person. Each is given an opportunity to respond in writing to the other's documents.
- 2. The AD prepares to chair the special meeting of UGSC to determine whether the student's practice/behaviour as documented in the reviewed package materials requires that the student be required to withdraw from the nursing course and/or from the program as per the university calendar nursing promotion regulation.
  - a. The AD coordinates the preparation of the package of materials for UGSC consideration, including the statements and documentation from the instructor and the student.
  - b. All documents are redacted of the student's name, student ID and gender identification.
  - c. The meeting package is provided via an electronic file to the committee no later than 48 hours prior to the meeting.
- 3. The AD chairs the review meeting, ensuring that all documentation is presented to the committee, and that all discussion is fair and respectful to both the student and instructor. The AD usually will not participate in the discussion or vote, but may answer points of fact if a question arises. The AD records the decision and articulated grounds for the same, and follows up as applicable in notification to the instructor and student.
- 4. Decisions possible are as follows:
  - a. To be withdrawn from the course.

    If the committee determines that, based on the documentation provided and the discussion held within the meeting, the behavior requires withdrawal, the student will not be permitted to continue in course activities. At the end of the semester, the student

will be assigned a grade of FAIL in the course if a clinical placement course or a maximum of 59% if a theory or lab-only course. The student is not removed from the program, and may repeat the course when next offered within the program sequence. The student will be invited to meet with the instructor for a final evaluation meeting to discuss any aspect of their performance in the course. If the same behaviors have not been documented in other courses, the student may be permitted to continue in remaining nursing courses for which they are registered in that semester.

#### b. Not to be withdrawn from the course.

If the committee determines that, based on the documentation provided and the discussion held within the meeting, the behavior does not require removal from the course, the student will be permitted to continue in the course activities. The student will meet with the Associate Dean to discuss and address the behaviours noted. Accommodations will be made for missed clinical placement time, lab sessions, evaluated activities, and assignment deadlines (as applicable) during the period of review. The student will be subject to the same roles, responsibilities and expectations as applicable to the course at hand. At the end of the semester, the grade achieved will be allocated.

# c. To be withdrawn from the Program

If the committee determines that, based on the documentation provided and the discussion held within the meeting, the student must be removed from the program, the student will be advised of the same and dropped from all nursing courses for the semester effective immediately. Notation of "Required to Withdraw RWD" will be allocated to all nursing courses on the students' transcript of that semester. The student is ineligible for readmission to the program.

#### d. Not to be required to withdraw from the Program.

If the committee determines that, based on the documentation provided and the discussion held within the meeting, the action of immediate removal from the program is not merited, the student may continue in the program. This decision does not preclude the following:

- i. The student may be removed from the course(s) in which the behavior was noted. The policy outlined in (a) above would be followed.
- ii. The committee may include a remedial program to be followed if the student remains in the program. Any remedial activities will be articulated during the meeting and included in the decision letter provided to the student.