

# BScN Student - Faculty Handbook Policies and Guidelines

2020 - 2021

## **Welcome Message**

Dear Students:

As the Dean of Nursing at Thompson Rivers University it gives me great pleasure to welcome you to the School of Nursing.

Thompson Rivers University has a reputation of delivering quality nursing education programs that include the Health Care Assistant, Practical Nursing, Bachelor of Science in Nursing, and a Master of Nursing Program. Our University provides excellent learning opportunities delivered at our Kamloops and Williams Lake campus locations.

We are excited to welcome you to the TRU School of Nursing program. As your health care journey into a career in Nursing begins, just know that you have so much to look forward to. Our faculty and staff will provide you with excellent learning experiences and supports. We use a variety of diverse learning opportunities for you in the classroom, simulation labs, and clinical practice.

This is a proud time to be a nurse. Classes for the 2020-21 year will have opportunity to be a part of events celebrating the Year of the Nurse 2020. Special events and recognitions will showcase Nursing's importance to the health of populations worldwide. You will be the first class to start your instruction in our new state of the art Nursing and Population Health Building.

You are also starting your professional journey amid a complex public health situation which offers many new challenges, raises ethical issues, and, also creates opportunity for innovation. Professionalism and self-care are essential aspects of Nursing and are needed now more than ever. TRU offers many supports for students, please take some time to familiarize yourself. There are also many opportunities to become involved with student associations, clubs, and organizations on campus, and in the Kamloops community, where you can enjoy a variety of social, physical, and intellectual activities. Your contributions to the School of Nursing, your University, and the community are both enriching and valuable.

Once again welcome and I look forward to seeing you in our new nursing building and on campus!

Sincerely,

Rani H. Srivastava RN, PhD Dean and Associate Professor

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## **BScN Curriculum Framework**

The TRU BScN curriculum is based on beliefs about people, health, health promotion, and registered nurse practice. In being forward thinking, the curriculum is also based upon certain visions for health care, nursing, and registered nursing education at a baccalaureate level.

Our current BScN program follows the Collaboration for Academic Education in Nursing (CAEN) curriculum. As of September 2019, a revised curriculum commenced beginning with semester one students. These revisions are reflective of the changing health care environment, consultation, and feedback from stakeholders, faculty and students. Our revised CAEN-informed curriculum will be fully enacted across all four years by 2022. In the following, the current curriculum is noted as CAEN and any revisions will be referred to CAEN-informed.

#### **Transition to CAEN Informed Curriculum**

Year	Year of Program	Curriculum
2020 – 2021	Year 1 & 2	CAEN Informed
	Year 3 & 4	CAEN
2021 - 2022	Year 1, 2, 3	CAEN Informed
	Year 4	CAEN (last year)
2022 - 2023	Year 1 - 4	CAEN Informed

# Vision, Mission, and Philosophy

#### **Vision statement**

The School of Nursing is a leader in nursing education, advancing nursing knowledge, and preparing nurses to meet current and future realities in healthcare.

#### Mission statement

The School of Nursing promotes excellence, innovation, and creativity in education, leadership, scholarship, practice, and service; through a commitment to engage in critical inquiry and evidence-informed action. The School of Nursing encourages and respects uniqueness and diversity, supporting an open, responsive, learner- centered environment.

#### **Philosophy**

The School of Nursing philosophy is underpinned by our beliefs about the concepts of person, health, environment, and nursing. These concepts are independent and exist in a symbiotic relationship with one another. The School of Nursing's philosophy supports the mission and provides the foundation for the nursing programs' purpose, goals, outcomes, and curricula.

# **CAEN Purpose and Learning Outcomes**

## **Purpose**

Through engagement in teaching and learning, the TRU BScN curriculum provides baccalaureate academic education of nurses. At the completion of their education, graduates will be prepared to meet the entry-level professional practice requirements, as identified by the British Columbia College of Nursing Professionals (BCCNP). Having completed this program nurses will also be prepared to pursue further academic education at the graduate level.

The purpose of the curriculum is to educate people to become nurses to contribute to the enhancement of health for all Canadians and others in the global community. The curriculum fosters critically reflective, independent, and motivated learners and practitioners with an inquiry approach to lifelong learning in their practice. Within this curriculum, learners are prepared to work with individuals, families, groups, and communities in a variety of settings. The curriculum assists students to develop knowledge, competencies, and understanding of their own and others' (individuals, families, groups, populations, communities, society) diverse experiences of health and healing, including care of the sick and dying. By being cognizant of nurses' professional roles and the evolving health care system, students learn to work as partners with clients and other health care providers. Through their understanding of and participation in the evolving health care system, graduates will be active participants and leaders in influencing and contributing to the promotion of health.

## **Learning Outcomes**

The following learning outcomes are achieved by the interaction among students, clients, faculty, and practice partners in a process of life-long learning. At completion of the curriculum, graduates will:

- 1. Practice nursing within a framework of promoting health and healing through the integration of the art and science of nursing within a variety of contexts and with diverse client populations.
- 2. Be accountable practitioners providing care and making decisions based on relationships with others, nursing knowledge, and different ways of knowing.
- Influence the current reality and future of nursing practice and health care at economic, political, social, environmental, and professional levels by anticipating and responding to the changing needs of society.
- 4. Be critically reflective, independent, and motivated practitioners with an inquiry approach to lifelong learning.

## **CAEN-Informed Program Goals**

- 1. Practice nursing utilizing a framework to promote holistic health and healing within a variety of contexts and with diverse client populations.
- 2. Provide safe competent care based on nursing knowledge, ethics, relationships, cultural safety, and ways of knowing.
- 3. Anticipate, respond to, and influence the current and future of nursing and health care at the economic, political, social, environmental, and professional levels.
- 4. Be critically thinking, reflective, and self-directed professionals who engage in inquiry-based, evidenced informed practice.
- 5. Promote health and wellness with Indigenous Peoples.

## Concepts

The curriculum is based on the assumption/belief that the focus of nursing is the promotion of client health and healing through situated, relational, caring practice. Hence, the CAEN curriculum is organized around the key concepts within this assumption/belief: nurse, client, health and healing, relational practice, context, and inquiry. The CAEN-informed curriculum, has four meta-paradigms: human being, health, environment and person. The core concepts and foundational perspectives are woven through all semesters and courses in the curriculum. In the curriculum, core concepts are identified by nursing faculty and are informed by the nursing literature. Each foundational perspective provides a lens through which the concepts can be viewed. The concepts may look different depending on the perspective and these differences embrace diversity and enhances learning.

The foundational perspectives and core concepts of the curriculum are introduced early in the program and are revisited throughout the four years. With each revisiting the perspective or concept is examined in increasing depth and with consideration for the focus of the semester and the increasing complexity of practice expected of the students. The metaphor of the iceberg is useful for developing an understanding for how perspectives and concepts will be examined in the curriculum. The depth of examination of a concept will be like the tip of the iceberg in Semester one with a gradual increase in depth and breadth across the curriculum to Semester eight, when the full size, depth and breadth of a perspective or concept will have been explored.

#### **Course Streams**

The curriculum is organized using four streams of courses. The core concepts guide the focus of each course and direct the choice of sub-concepts and topics to be explored.

The CAEN four course streams are:

- 1. Health and Healing practice
- 2. Relational practice

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- 3. Professional practice
- 4. Health Sciences

The CAEN-informed course streams are:

- 1. Health and Health Promotion
- 2. Communication and Collaboration
- 3. Professionalism and Leadership
- 4. Knowledge and Critical Inquiry

Supporting these four streams of courses, are courses from other disciplines such as Biology and English. All courses contribute to the development of a body of nursing knowledge as demonstrated by students in nursing practice courses and praxis seminars, which occur in every semester.

## **Curriculum Overview and Semester Foci**

#### Introduction

Provided here is an overview of the semester-by-semester curriculum emphasis of the program, and highlights of some of the experience's students will obtain as they progress.

People's lived experience is holistic, and the experiences of family and community play an integral part. Integrated throughout all the semesters is a focus on both families and community in relation to the client. It is critical that students come to acknowledge and understand the client's whole experience in order to provide holistic care.

Family is defined in the curriculum in the broadest sense. That is, any membership, configuration, or connection a person has with another whom that person considers to be family is also considered to be family within the curriculum.

Community is also defined within the curriculum from the broadest perspective. Community can be considered from a relational perspective or from a geographical perspective. From a relational perspective, community is defined as a collection of people who, through their relationships, come together to form a community. This means that the community might not be in the same geographical location, but rather it connects to fulfill a purpose or to form a bond. Thus, community is not necessarily a place, setting, or a set of defined relationships, but rather a lived experience.

#### **Semester Foci**

#### **Semesters One and Two**

Semesters One and Two of the program focus on gaining a beginning understanding of relational practice, an introduction to both the profession and the discipline of nursing, and an understanding of people's (individual, family, community) experiences with health. Students in Semester One and Two are introduced to the concept of inquiry and scholarship and the core concepts of the curriculum as well as the foundational perspectives that will provide the lens to view the core concepts. Students incorporate health-promoting approaches and prevention strategies in their discussions and practice of health assessment. Students practice health assessment across the lifespan, with

individuals and families. Students also get a beginning understanding of what constitutes a community, meanings of community, and working with communities.

In Semester One, students engage with a family as a resource for learning about individuals, families, and health. This contributes to a beginning understanding of individuals, families, health, and nursing work within the community. In this semester, community will be examined as a context for individual and family health. In addition, students begin to learn about the complexities of nursing practice through observing or interacting with nurses in various areas of practice. Students begin to practice holistic health assessments across the life span primarily with adults, seniors, youth, families and communities.

In Semester two, the focus of their practice experience is continuing to gain experience doing holistic health assessments across the lifespan. Students will have the opportunity to work in a variety of settings including older adults in residential care and community child health placements.

#### **Semesters Three, Four and Five**

In Semesters Three, Four, and Five students continue to experience and develop their nursing practice in a variety of settings. Students work with healthy populations such as maternal child health. They work with clients experiencing chronic and episodic health challenges in mental health, community health settings, and in traditional settings of extended and acute care. Students have an opportunity to build on their relational practice skills learned in year one through work with individuals, families, and groups. In Semesters Three, Four, and Five, students gain experience understanding and working with clients with more complex and advanced health challenges. The focus is on providing opportunities for students to develop competence in nursing practice and apply the foundational perspectives and core concepts in a variety of areas rather than focusing on any one particular location of care.

Practice placements in Nursing Practice 3, 4, 5, and Condensed Practice Experience 2 (CPE 2) are in a variety of settings (home care, community, rehabilitation, transitional care, acute care) and occur in practice settings outside of Kamloops / Williams Lake. The focus continues to be on providing opportunities for students to develop competence in nursing practice and apply the foundational perspectives and core concepts in a variety of areas rather than focusing on any one particular location of care.

#### **Semesters Six and Seven**

The focus in Semester Six and Seven is on increasing complexity of nursing practice. Students further develop their understanding of health and healing, focusing their attention on community and societal health, examining global health issues, and the leadership role of nurses with emphasis on the socio-political and economic context of nursing. Students learn more complex assessment skills, including community assessment, develop their competence as leaders, and engage in more advanced explorations of the discipline of nursing and nursing inquiry. The emphasis is on the growth of the student as a professional nurse who is critically reflective and an actively involved in exploring change processes and leadership roles within nursing, health care, and society at large.

Semester Six and Seven practice placements are in a variety of agencies such as government and non-government health care agencies and other community organizations. A range of federal, provincial, and municipal agencies/programs/projects may be selected. Placements could include such locations as hospitals, seniors' organizations, schools, industry, community health centres, as well as many others.

In the Condensed Practice Experience at the end of Year 3 (CPE 3) students, consolidate the knowledge, abilities, and skills learned thus far in a variety of locations of care. Students practice experiences throughout the program are tracked and by the end of CPE 3 all students will have had experience in a variety of agencies/settings (acute care, extended care, community or International) in order that they might develop entry-level competencies required of a registered nurse.

## **Semester Eight**

Semester Eight focuses on nursing practice and attends to the student moving from the student role to that of graduate professional nurse. The nursing practice component of Semester Eight is a semester long placement that attends to the importance of the transition to the workplace and taking on the role of professional nurse. Students will have an opportunity to refine their relational practice, their professional practice, and their leadership abilities in preparation for meeting entry-level competencies as defined by BCCNP.

# **Practice Placement Snapshot**

YEAR 1	YEAR 2	YEAR 3	YEAR 4
Semester 1: Groups in the community assessing health Semester 2: Groups in local residential care and child health	Semester 3, 4, & CPE 2: Community Health, Maternal Health, Mental Health Local and out-of-town	Semester 5: Groups in Medical, Surgical, and Mental Health Semester 6: Community development initiatives CPE 3: Preceptored placements Local, out-of-town, & International	Semester 7: Leadership and Community Health Semester 8: Preceptored placement Local & out-of-town

# **Program Completion Requirements**

The BScN Curriculum requires successful completion of 126 credits some of which may be Transfer Credit (upon approval). To view the curriculum and course outlines visit: The nursing curriculum program grid.

# **Program Grid 2020 - 2021**

	Fall	Cr	Hours /Wk	Winter	Cr	Hours Wk	Spring (May-June)	Cr	Hr/Wk
	Revised (CAEN-Informed Curriculum)								
Yr 1	Semester 1  NURS 1700: Professionalism and Leadership 1  NURS 1170: Communication and Collaboration  NURS 1730: Health and Health Promotion 1  NURS 1740: Nursing Practice 1  BIOL 1592 + 1594 (lab): Anatomy & Physiology  ENGL 1100: Composition	3 3 3 3 3 3 7	(3-0-0) (3-0-0) (3-0-0) (3-1-1L-2P) (3-0-2L) (3-0-0) 24 hrs	Semester 2 NURS 1800: Professionalism and Leadership 2 NURS 1830: Health and Heath Promotion 2 NURS 1840: Nursing Practice 2 BIOL 1692 + 1694 (lab): Anatomy & Physiology PHIL 2310: Health Care Ethics recommended completion prior to year two	3 3 4 3 3 	(3-0-0) (3-0-0) (3-0-0) (3-0-2L-9P) (3-0-0) 			
Yr 2	Semester 3  NURS 2300: Knowledge & Critical Inquiry 2  NURS 2750 Health & Health Promotion 3:  Community Health Nursing  NURS 2740: Nursing Practice 3  NURS 2170: Communication & Collaboration 2  HLSC 2660: Health Science 1: Pharmacology  (part 1)	3 3 4 3 1.5 14.5	(3-0-0) (3-0-0) (3-0-2L-13P) (3-0-0) (1.5-0-0) 28.5 hrs	Semester 4  NURS 2830: Health & Health Promotion: 4  HLTH 2300: Interdisciplinary Indigenous  Health  NURS 2840: Nursing Practice 4  HLSC 2550: Health Science 2:  Pathophysiology 1  HLSC 2660 Health Science 1:  Pharmacology (part 2)  *PHIL 2310: Health Care Ethics	3 3 4 3 1.5	(3-0-0) (3-0-0) (2-0-2L-13p) (3-0-0) (1.5-0-0)	NURS 2380: Condensed Practice Experience (CPE 2)	4	(0-0-22p) Total CPE2 hours: 133 hours 5 weeks
	Current (CAEN Curriculum)								
Yr 3	Semester 5 NURS 3170: Relational Practice 3 NURS 3730: Health & Healing 5 NURS 3740: Nursing Practice 5 HLSC 3550: Health Science 5 Non-nursing Elective -1000 Level	3 3 4 3 3 16	(3-0-0) (3-0-0) (2-0-2L-13P) (3-0-0) (3-0-0) 29 hrs	Semester 6 NURS 3500:Health & Healing 7 NURS 3510: Nursing Practice 6 NURS 3600: Professional Practice-Nursing Research HLSC 3830: Health & Healing-Global Health Perspectives Non-nursing elective -200 level	3 4 3 3 3	(3-0-0) (0-3-6P) (3-0-0) (3-0-0) (3-0-0) 21 hrs	NURS 3380/3390 Consolidate d Practice Experience (CPE 3)	4	(0-3-33P) Total CPE3 hours: 252 hours 7 weeks
Yr 4	Semester 7  NURS 4300 Professional Practice 5  NURS 4380 Nursing Practice 7  NURS 4730 Community Health Nursing: A  Canadian Perspective  Nursing Elective (3000 level)	3 4 3 3 <del>13</del>	(3-0-0) (0-2-14P) (3-0-0) (3-0-0) 25 hrs	Semester 8- NURS 4210 Nursing Practice 8	10 10	(0-3-36P)  39 hrs Sem 432 hrs Practice			

# TRU and SON Policies, Procedures and Guidelines

It is the student's responsibility to be aware of policies, procedures, guidelines, and deadlines in effect during their attendance at the Thompson Rivers University. This includes TRU, SON, and agency policies.

The section on TRU Academic Policies contains excerpts from key TRU policies. Students are referred to the <u>TRU Policy Manual</u> for more details regarding all TRU policies. Students are also referred to the <u>TRU Academic Calendar 2020 -2021</u>.

The School of Nursing has additional guidelines and policies that are outlined in this handbook. In addition to the policies and guidelines set out by the SON, students are responsible and accountable for abiding by the policies and regulations of any agency visited for the purpose of educational practice. These policies, regulations and procedures are set out in the various agency (hospital, extended care facilities, and community agencies, etc.) policy and procedure manuals. A copy of agency policy and procedure manuals is available on request at the agency and/or from the School of Nursing at Thompson Rivers University.

For your information and convenience, links to some TRU Education/Student and Program/ Course related policies are included in the following pages.

## **TRU Academic Policies**

Refer to the TRU Policy Manual for more details regarding all TRU policies.

Education and Student Related Policies	Policy #
Academic Accommodations for Students with Disabilities	BRD 10-0
Academic Achievement Awards	ED 09-1
Academic Recognition	ED 03-4
Academic Renewal	ED 3-10
Alcohol, Cannabis, and Tobacco	<u>ADM 5-3</u>
Animals/Pets on Campus	ADM 28-0
Biosafety and Biosecurity	ADM 25-0
Cancellation of Classes	BRD 14-0
Chaplains	ADM 21-1
Class Scheduling	BRD 14-1

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Confidentiality of Student Information	VDM 2 2
Confidentiality of Student Information	<u>ADM 2-2</u>
Convocation	ED 17-0
Copyright	<u>ADM 3-0</u>
Course Extensions (for Open Learning courses only)	ED 3-12
Course Outlines	ED 8-3
Course and Program Repeaters	ED 3-3
Course Subject Acronym and Numbering	ED 3-8
Entrance Scholarships	ED 9-0
Environmental Policy	BRD 23-0
Examinations	ED 03-9
Faculty Office Hours	ADM 14-1
Firearms and Dangerous Objects	ADM 30-0
Freedom on Information and Protection of Privacy	ADM 2-0
Grading Systems	ED 03-5
Health and Safety	ADM 5-0
Information Disclosure	<u>ADM 2-1</u>
Information Security	BRD 16-1
Integrity in Research and Scholarship	ED 15-2
International Education	ED 12-0
Lost and Found	<u>ADM 16-0</u>
Minors on Campus	ADM 26-0
Orientation	<u>ADM 4-6</u>
Prior Learning Assessment and Recognition	ED 2-0
Records Retention / Destruction	<u>ADM 2-3</u>
Responsible Use of Information Technology Facilities and Services	BRD 16-0
Safety and Security Cameras	ADM 31-0

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Satisfactory Academic Progress	ED 3-2
Semester Schedules	ED 13-0
Sexualized Violence	BRD 25-0
Special Courses	ED 2-1
Student Academic Appeals	ED 4-0
Student Academic Integrity	ED 05-0
Student Admission	ED 1-0
Student Attendance	ED 3-1
Student Off-Campus Safety and Travel Policy	ADM22-1
Submission of Final Grades	ED 3-11
Suggested Procedures for Dealing with At-Risk Students	<u>ADM 17-0</u>
Suspension of Students	ED 7-0
Transferability of University Credits	ED 2-4
Visiting Student Status	ED 1-3
Waitlist	ED 3-7
Whistleblower	BRD 18-0
Withdrawals	ED 03-0

# **Excerpts from Important TRU Academic Policies:**

# **Student Academic Integrity Policy ED 5-0**

Thompson Rivers University (TRU) students have an obligation to fulfill the responsibilities of their particular roles as members of an academic community. They are expected to be honest and forthright in their endeavours. Academic integrity is both highly valued and expected.

Apart from the responsibility of the student in not participating in an act of academic dishonesty, it is the responsibility of the TRU staff to take all reasonable steps to educate students regarding academic integrity and to prevent and to detect acts of academic dishonesty. It is the faculty's responsibility to confront a student when such an act is

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suspected and to take appropriate action if academic dishonesty, in the opinion of the faculty member, has occurred.

Please refer to the <u>TRU Student Academic Integrity Policy ED 5-0</u> for detailed information regarding:

- Regulations and Procedures
- Procedure flowchart
- · Forms of Academic Dishonesty
  - Cheating
  - o Academic Misconduct
  - Fabrication
  - o Plagiarism
  - o Final Exams Role of the instructor

## **Grading Systems Policy ED 3-5**

Two different grading systems are used in the Nursing program. The letter Grade System is used for Nursing Theory Courses. The Competency Based System, which is not counted in GPA, is used for Nursing Practice Courses. Students should refer to the current TRU Calendar for a detailed description of each system. Nursing practice courses are graded as Pass/Fail (COM or NCG). Students are expected to complete a practice self-appraisal during each practice course. Failure to complete the self-appraisal may result in an NCG (No Credit Granted) grade. The completed self-appraisal will become part of the student's ongoing practice performance record.

Letter grades do not become official until they appear on the student's transcript. Instructors may notify students of unofficial course grades, but Divisions and Departments reserve the right to correct or adjust unofficial grades in order to maintain equity among sections and ensure conformity with Divisional, Departmental and TRU-wide norms. (TRU Policy ED 3-5)

For more information on the grading system refer to the current <u>TRU Calendar</u>

# **Student Academic Appeals Policy ED 4-0**

Thompson Rivers University (TRU) recognizes that although most students experience no concerns regarding their education, some occasionally experience problems with interpretations of TRU policy or procedures by TRU staff. While most differences can be resolved by an open and frank discussion with the people concerned, a process is required whereby students may bring forward for formal review, matters that have not been resolved to their satisfaction.

An appeal is an internal hearing for the purpose of reviewing and resolving matters of concern raised by students.

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Students have the right to appeal decisions on grades or application of policies, procedures and regulations, and perceived unethical conduct by TRU staff or other students. Students are referred to the TRU <u>Student Academic Appeals Policy ED 4-0</u>, the current <u>TRU Calendar</u>, and the Student Affairs Department for information on the TRU Appeal Procedures.

## **Student Attendance Policy ED 3-1**

School of Nursing follows the TRU Student Attendance-ED 3-1. This policy should be referred to for more information regarding:

- Attendance at the start of the semester
- General attendance during a course or program

# **School of Nursing Policies**

# **Professional Conduct Policy**

#### **Ethical and Professional Behaviour**

Thompson Rivers University School of Nursing is committed to the protection of the public through our role in both preparing and then graduating students that meet the expected standard of behaviour of safe, ethical and competent nursing professionals.

As a professional practice profession, a BScN degree is one important component of eligibility for registration with the British Columbia College of Nursing Professionals (BCCNP). Additionally, students in the School of Nursing (S0N) BScN program are subject to the ethical, legal, and professional conduct provisions as set out by:

- The Canadian Nurses Association (CNA) Code of Ethics for Registered Nurses (2017);
- The British Columbia College of Nursing Professionals (BCCNP) Professional Standards for Registered Nurses and Nurse Practitioners;
- The BCCNP Practice Standards;
- The BCCNP Scope of Practice for Registered Nurse: Standards, Limits, and the Conditions;
- The Canadian Nursing Student Association Professional Conduct (2015), and
- All relevant Thompson Rivers University policies.

The BScN program has a duty to ensure students adhere to and meet the ethical and behavioural standards of the Profession as set out in the CNA Code of Ethics in the classroom and the clinical practice settings. "Violations of TRU Policy will be reviewed and may result in sanctions up to and including suspension by the President" (TRU Policy ED 7-0).

Behaviours that may result in the student's immediate removal from the clinical practice setting and/or classroom and which also may result in failure of the course, or withdrawal from the BScN program include:

- 1) Any breach of the CNA Code of Ethics, the BCCNP Professional Standards, the BCCNP Practice Standards, and/or,
- 2) Any engagement in behaviour that impairs the performance of professional responsibilities, and/or,
- 3) Acquiring a criminal conviction after being accepted to the program (or a criminal conviction which was acquired prior to admission but became known after being admitted to the program) which prevents or jeopardizes a student's ability to obtain registration as a Registered Nurse.

#### Refer to:

- Canadian Nurses Association. (2017). Code of Ethics for Registered Nurses
- BCCNP Nursing Standards. (2020).
- Canadian Nursing Students Association. (2015). Code of Ethics

A faculty member and/or clinical staff and/or field guides who are of the opinion that students are under the influence of alcohol or drugs will advise the faculty member working with the student. The students will be requested to leave the nursing practice setting immediately and will be referred to the Program Chairperson.

Agency property must not be removed from the premises without the permission of the person in charge of the area and must be used in accordance with agency policies and procedures.

## **Professional Conduct (Classroom and Practice Setting)**

Students are expected to recognize their own limitations and to take responsibility for ensuring their continued competency and learning as it relates to nursing practice competency, ethics and safety of nursing practice. Students are expected to demonstrate professional conduct at all times in instructional settings. Instructional settings include classroom, laboratory, community settings and clinical areas. Professional conduct is defined by the BCCNP (2018) as, "behaving in a way that upholds the profession." This includes, but is not limited to, practising in accordance with relevant legislation to BCCNP Standards of Practice (2020) and Canadian Nurses Association Code of Ethics for Registered Nurses (2017).

The SON provides some general guidelines. As a faculty, we feel very strongly that disruptive behaviour, defined as student behaviour that interferes with instruction and learning, will not be tolerated. Examples of disruptive behaviours include, though are not limited to, the following:

- Failure to respect the rights of other students, faculty, and guest speakers to express their viewpoints by behaviours, such as repeatedly interrupting others while they speak, using profanity and/or disrespectful names or labels for others, ridiculing others for their viewpoints, and any behaviours that demean or threaten the safety and well-being of others;
- 2. Excessive talking to other students or lack of attention while the faculty member or other students are presenting information or expressing their viewpoints, and
- 3. The misuse of electronic devices (i.e., not for classroom purposes).

It is the student's responsibility to meet all professional and educational expectations. Students who behave in a manner that disrupts educational activities and/or fails to abide by Professional Conduct noted above may be:

- Directed to leave the classroom or instructional setting immediately;
- Directed to meet with the SON Chairperson; and/or,
- Referred to TRU Student Affairs and the Behavior Intervention Team and contribute to a behavioral/learning contract outlining their responsibility for behavioral change. The aforementioned will align with the Canadian Nurses Association Code of Ethics for Registered Nurses (2017), the British Columbia College of Nursing Professionals (BCCNP) Professional Standards for Registered Nurses and Nurse Practitioners, BCCNP Practice Standards, and the BCCNP Scope of Practice for Registered Nurse, Standards, Limits, and the Conditions, and the Canadian Nursing Student Association Professional Conduct (2015).
- Referred to the Professional Suitability Policy for the process for a review.

## Responsible Use of Technology and Social Media Policy

This document serves as the official policy for the responsible use of technology and social media for all programs within the School of Nursing at TRU. Refer to the following TRU Policies:

- Respectful Workplace and Harassment Prevention Policy (BRD-17)
- Responsible Use of Information Technology (BRD 16-0)
- Sexualized Violence Policy (BRD 25-0)

The following policy guidelines apply to all students creating or contributing to any kind of social media affiliated with the SON, or their role as a TRU nursing student.

The Canadian Nurses' Association (CNA) defines the term social media as:

"a group of Internet- based applications and technologies that allow users to have the same kind of "real-time" conversation that they might have with friends or neighbours with virtual friends around the globe. Social media technologies allow users to interact and collaborate with each other online in the creation and sharing of information, ideas, and opinions" (CNA, 2012, p.1).

The TRU SON policy encompasses all forms of current and emerging social media platforms, as well as other technology-based conversations.

All SON students are preparing for a profession/health care role, which provides services to a public that expects and requires high standards of behavior. Social media often spans traditional boundaries between professional and personal relationships, and thus it takes additional vigilance to make sure one is protecting personal, professional, and university reputations.

Social media behaviors of students in the SON must be consistent at all times with the following BCCNP and CNA documents:

- BCCNP Social Media Considerations
- International Nurse Regulator Collaborative Social Media Use
- CNA Ethics In Practice

Although these documents are all RN related, they apply to all students in the SON. All SON students must represent TRU, the SON, and the nursing/health care professions in a professional and respectful manner online. Be aware that there are no private sites, comments can be forwarded, copied and printed, and systems can save information even if you delete a post.

#### **Guidelines**

**Professionalism -** SON students must meet all applicable ethical standards, professional standards, and SON policies. Making disrespectful or disparaging comments, or comments which may be interpreted as disrespectful or disparaging, about clinical sites, co-workers, faculty members, and/or students on social media sites, violate the above standards and policies. This includes any comments that are interpreted as bullying, threatening, harassing, obscene, sexually explicit, which target individuals based on human rights protected grounds, or otherwise deemed offensive.

**Association with TRU SON** - If you are identifying yourself as a student, consider how you wish to present yourself. Do not claim nor imply you are speaking on TRU SON's or your classmates' behalf unless you are authorized to do and have this in writing, and in advance. When you post or otherwise participate on a TRU SON Class social media site, you are identifying yourself as a TRU SON student.

**Confidentiality-** Posting any confidential content about clients, including client health information or images on social media, is strictly forbidden even if client identifiers are removed. This prohibition also applies to posting information that may appear to have been based on confidential content. The use of images that refer to clients or images of agencies requires prior written permission and written consent from the client and/or agency.

**Referencing, Copyright, and Branding-** When posting, be aware of the requirements of copyrights and referencing. Use of the TRU and SON logos and graphics for SON sanctioned events must be approved by administration. See the following site: <a href="http://www.tru.ca/marcom.html">http://www.tru.ca/marcom.html</a>

**In Practice -** It is expected that during practice rotations use of devices will be only used as authorized by the SON faculty member while following facility guidelines. It is prohibited to take photographs of charts or any other patient information, even if there are no patient identifiers in the photo. At no time shall patients/clients be videotaped or photographed without prior written permission of the patient/client, and the facility.

**In Class-** Use of technology during class is restricted to notetaking and classroom activities. Do not videotape/audiotape or photograph faculty members or fellow students for any use without prior written permission. This includes taking pictures of material created in class by others. Students must obtain prior consent from the creator of a PowerPoint presentation prior to taking a photograph of in-class materials.

#### Consequences

Violation of this policy may result in the recommendation of suspension or dismissal from the program to the University President. Violation of the policy during a practicum will result in removal of the student from the practice area. If an incident occurs, you must bring it to the attention of the SON immediately. It is your responsibility to know and follow this and all policies of the SON and practice agency policies as well as your duty to report any violation to the SON should you or another student violate this, or any other policy.

## **Undergraduate School of Nursing Progression Policy**

## **Program Completion Requirements**

BScN students must complete all program requirements within 7 years of the date of entry. Prior to graduation, students must ensure all official transcripts from courses taken outside of TRU are submitted directly to the Admissions Department so they are documented on their TRU transcript. This includes courses that require a letter of permission. Failure to provide an official transcript for transfer credit courses at least 5 weeks prior to convocation may result in an inability for TRU to grant the degree for that year's date of convocation.

# **Progression Policy**

Students must achieve a minimum 60% grade in all of the required courses (NURS, HLSC, HLTH 2300, BIOL, ENG, PHIL), and a minimum grade of 50% in the accepted non-nursing elective courses. In order to progress to the next semester of the BScN program, students must maintain a cumulative GPA of 2.33. Students who do not achieve a GPA of 2.33, will meet with the Program Chairperson may be placed on academic probation for one semester. Refer to TRU Satisfactory Academic Progress Policy ED 3-2.

In addition, students must successfully complete all pre-requisites, including practice courses, in order to progress to the next semester of the BScN program.

#### **Course Failures**

In the event of a course failure, a student may repeat a given course (theory or practice) one time. Exceptions for extenuating circumstances require written approval of the Program Chairperson, for NURS, HLTH, or HLSC courses. The Chair of Biology must give permission for students to repeat a BIOL course.

A student who fails a practice or theory course cannot progress in the program until the course is passed. If in repeating the course the student passes, then the student will reenter the program at a subsequent offering of the same semester in which the failure occurred **provided there is an available seat.** If in repeating the practice course the student fails again, then the student will not be able to progress to the next semester and can only re-enter by going through the admission process beginning at Semester One. A student who has already failed a practice course, repeated it and passed, and then fails another practice course will not be able to continue in the program.

Nursing practice course failures are considered across the entire program. Students who have failed two practice courses in the BScN program, including failures prior to transferring to TRU School of Nursing will not be able to progress to the next semester. The student can only re-enter by going through the admission process and beginning at Semester One. Refer to TRU Course and Program Repeaters Policy ED 3-3.

## Withdrawal from BScN Program

There are a variety of reasons why a student may need to leave and re-enter the nursing program. The student may need to withdraw from the program due to medical issues, domestic affliction, and/or course failure.

Students withdrawing from the program are expected to:

- inform the appropriate faculty member(s)
- meet with the Program Chairperson
- meet with a counsellor from Student Services
- meet with TRU academic advising
- terminate relationships with client and community field guides
- refer to the <u>TRU Withdrawals Policy ED 3-0</u> for detailed information regarding procedure and deadlines for withdrawal
- students who leave the program for extenuating circumstances, will need to complete the <u>Medical and Exceptional Withdrawal</u> Request to the Registrar's office. Student Case Managers from the Office of Student Affairs may also assist students in understanding this process.

#### **General Procedures/Policies for Re-entry**

Students seeking re-enter into the BScN program, must meet with the Program Chairperson to discuss readiness for re-entry. This could include a BCCNP Requisite Skills and Abilities review, seat availability, GPA standing, a letter of intent to return to the program, a review of the length of time out of the program, including a professional performance standards of conduct assessment. Students admitted into the BScN program must complete the BScN degree within seven years.

In accordance to <u>BCCNPs</u> requisite skills and abilities for practice, students who have withdrawn due to extenuating circumstances, may be asked to provide a Health Care Provider's note which states that they are physically/mentally fit to return to the program. Students must submit to the nursing office their updated BCCNP Requisite Skills and Abilities form.

#### Re-entry/Transfer to Practice Courses

#### **Process for Re-entry**

- 1. At least four (4) months prior to the date of intended re-entry, submit a Letter of Intent to the BScN Chairperson. The Letter of Intent should indicate the date that the student wishes to re-enter, the year or semester to return, and include steps that the student has taken to ensure their success in the program (if applicable).
- Make an appointment to see the BScN Chairperson for the purpose of advising.
  This interview should be during the month of May for the September re-entry,
  month of September for January re-entry, month of January for May re-entry. If a
  student is offered a seat, prior to starting the semester a student must register and
  pay tuition.
- submit to the nursing office at nursing@tru.ca:
  - o proof of up-to-date immunizations (may include influenza vaccine),
  - BCCNP Requisite Skills and Abilities form,
  - mask fit testing certificate, (for re-entry sem 2-8),
  - o CPR-C re-certification (updated every two years),
  - o SPECO (for re-entry sem 2-8).
- Successfully complete Nursing Skills Assessment (NURS 0610). This assessment (written and psychomotor skills test) demonstrates previously attained competencies for client and personal safety. This testing is booked through the Lab Coordinator and must be completed prior to commencing the semester.
- Students are reminded of the program completion requirements and the policies regarding failures and re-entry, as stated in the Thompson Rivers University Calendar.
- Students who fail a nursing theory course may be required to repeat the corequisite nursing practice course.
- Students who fail a nursing practice course may be required to repeat the corequisite theory course(s).
- A student who withdraws from or receives a failing grade in any nursing practice course may be required to re-enter the program at an earlier level.

• Re-admission to the program may be denied if the student does not provide evidence of the re-entry requirements.

# **Learning Contract Policy**

When a practice faculty member has concerns regarding a student's ability to meet the course competencies and domains, a learning contract **may** be initiated. In conjunction with the practice faculty member, the Program Chairperson and the student, strategies will be developed to support the student in meeting the expected domains and competencies as outlined in the learning contract. If performance is unsatisfactory at the end of the contract period the student will fail the course, receive a grade of No Credit Granted (NCG), and will be required to withdraw from all nursing courses. If there are significant safety concerns prior to the end of the practice rotation, a student may be removed from the practice area, and the student will fail the course. Refer to TRU SON Progression Policy and TRU Progression policy:

 For more information see Appendix D Learning Contracts: Guidelines for Implementation

# **School of Nursing Requirements**

Regulation, policies and guidelines are intended to provide clarity for students in their role as learners in various agencies they are visiting / working during their educational experience. When abided by, they contribute to the safety of students and the people students work with/care for in the process of learning.

Students in the BScN program are responsible for abiding by the regulation, policies and guidelines from various bodies including: the professional regulator (BCCNP), TRU, the School of Nursing, and provincial bodies such as <a href="Practice Education Guidelines of BC">Practice Education Guidelines of BC</a>. In addition, individual agencies will have policies and guidelines which the student must abide by <a href="https://hspcanada.net/features/">https://hspcanada.net/features/</a>

When a student is orienting themselves to a new practice area, they need to familiarize themselves with particular policies and guidelines of that area. When policies of an agency and the school are different, the stricter of the two must be followed.

It is the students responsibility to complete the SON requirements and upload proof/documentation/ certificates to https://www.tru.ca/its/students/moodle.html

## **Workplace Hazardous Material Information System (WHMIS)**

All nursing students are required to obtain WHMIS certification, which they will complete in the first semester of the program.

#### **Criminal Record Check**

The BScN program requires a clear criminal record check (CRC) in order to participate in practice courses. All students must have a clear Criminal Record Check for admission into the BScN program. As student progress into each year, you will be required to sign the TRU Statutory Declaration to declare that: you are a person of good character and that you have not been charged or convicted of any criminal offence since completion of your original criminal record check.

#### **CPR – C Certification**

A current CPR-C level classroom-based certification (internet or on-line course not accepted) is required for all students upon entrance into the nursing program.

It is the student's responsibility to maintain re-certification every two years and to submit a copy of the certificate to <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a> prior to the expiration of the prior certificate. Students cannot be in practice if CPR has expired. If students cannot be in practice, they risk their ability to be successful in the course.

# **Respiratory Mask Fit Testing**

All students are required by Interior Health to have **annual** respiratory mask fit testing completed prior to entering the practice area. This is a provincial mandate with the purpose to ensure all persons providing care to clients with known or suspected airborne

pathogens have properly fitting masks and know how to use them correctly. Respiratory mask fit testing must be completed just prior to entering semester 2.

It is the student's responsibility to maintain updated respiratory mask fit testing every year and to submit a copy of the certificate prior to the expiration of the prior certificate. Students cannot be in practice if their mask fit testing has expired. If students cannot be in practice, they risk success in the course.

## **Nursing Student Practice Orientation Modules**

The School of Nursing has compiled a number of learning modules for students to complete prior to entering practice. These learning modules are determined by the School of Nursing, by Interior Health (IH) and by the province and are updated yearly. Information can be found on the Moodle site - TRU School of Nursing Student Practice Orientation. Students complete these prior to the start of each academic year. Information about how to access the modules will be sent to students (usually in August). Details of which modules to complete are also on the practice course outlines. Modules may include:

- Student Practice Education Core Orientation (SPECO)
- Ilearn modules as necessary for specific practice placements
- Review of select SPECO modules throughout the program

Students are to follow the directions about where to submit proof of completion. These directions are on Moodle and on each practice course outline. Students who have not completed the required nursing student practice orientation modules can not be in practice. If students cannot be in practice, they risk success in the course.

# **Provincial Violence Prevention Curriculum (PVPC)**

The Provincial Violence Prevention Curriculum (PVPC) is a provincial mandated course for health care workers. Its goal is to provide effective violence prevention (VP) education through knowledge and activities to prevent and protect against workplace violence. It is mandatory for all students.

#### **Electronic Mail**

Students will be issued a TRU email account. Electronic communication between faculty and students will occur through the TRU email account. Students are expected to check their TRU account on a regular basis. In preparation for entrance into a profession, students are strongly encouraged to ensure that all email correspondence is respectful and courteous.

#### Student Records

It is the student's responsibility to maintain an updated address and / or phone number through <a href="myTRU">myTRU</a>. We ask that students also notify the Nursing office of changes in address and/or phone number. Phone numbers will be circulated to appropriate nursing faculty and may be given to agencies where students are completing Nursing Practice Courses.

# **Program and Course Process**

## **Elective Requirements**

The BScN program requires that students complete two non-nursing electives (one at the 1000 and one at 2000 level) prior to entering semester 7. Prior to semester 8 students must complete an upper level nursing or health related elective or equivalent. These electives **MUST** be successfully completed before progressing into semester 8. Students may choose when they complete electives. A list of possible electives is posted on the Moodle site. However, this list is not inclusive and it is advisable students confirm electives with the SON advisor if uncertain.

Prior to semester 8 and the final practicum, we strongly suggest all required courses be completed. Failure to complete any of these courses will interfere with the completion of the program, graduation and the writing of the NCLEX exam.

## **Transfer Credit Policy**

To receive transfer credits for any of the required courses in the Nursing Program, students must have a C (60%) minimum grade in that course. Students must request an Official Transcripts be sent directly to the Registrar's Department when applying for transfer credit.

Courses/electives taken at other educational institutions and receiving a Transfer Credit will show as a 'T-course number' on your transcript and is not factored into your GPA.

Most courses are eligible for a Transfer Credit from an Accredited Institution. A TRU Letter of Permission (LOP) MUST be approved by the SON Student Advisor and submitted to Admissions before you register for a course (TRU-OL courses do not require a LOP).

# **Biology Transfer Credits**

Transfer Credit will NOT be given towards the required courses Biology 1592/1594 or 1692/1694 if the Human Anatomy and Physiology course is taken **without** a laboratory component. For example, TRU-OL BIOL1593 and BIOL1693 courses **DO NOT** have a lab component, therefore no Transfer Credit are given for BIOL1592 or BIOL1692. Equivalent Human Anatomy and Physiology courses with a laboratory component will be considered for transfer credit towards Biology 1592 and/or 1692 at the discretion of the chairperson.

Transfer Credit for courses in Human Anatomy and Physiology courses (Biology 1592 and 1692) may not be granted if course(s) are more than 5 years prior to admission to the BScN program. Please consult with the SON Student Advisor re: transferability of Human Anatomy and Physiology Courses.

# **Required English Courses**

All students in the BScN Program are required to obtain 3 credits (one 3-credit English course) of University Transfer English. The English course **MUST** be a Composition or a University Writing course (or equivalent).

In the first year of the program, all students are assigned into one English course: ENGL1100: Introduction to University Writing.

Students **MUST** complete the English course to progress into Year 2. In addition to the option to take this course on campus in the regular academic year, you may complete the English course during the summer session on campus or on-line. If the course is not taken at TRU or TRU-OL, a LOP is required before you register so you receive transfer credit.

Transfer Credit for courses in English courses may not be granted if course(s) are more than 5 years prior to admission to the BScN program.

## **Prior Learning Assessment and Recognition**

TRU recognizes that adult learners acquire knowledge and skills through life and work experience. Through Prior Learning Assessment and Recognition (PLAR), TRU will assess this knowledge and skills and grant credit/recognition for the learning that has taken place. PLAR is the assessment by some valid and reliable means, of what has been learned through formal and non-formal education, training or experience that is worthy of credit in a course or program offered by TRU. PLAR is used to evaluate knowledge, skills and competencies which may have been acquired through, but not limited to, work experience, independent reading, hobbies, volunteer work, non-formal learning, travel and artistic pursuits. The assessment and evaluation of prior learning and the determination of competency and credit awarded will be done by faculty who have the appropriate subject matter expertise, other staff in an institution may have a supporting role in the process. For more information on the TRU PLAR policy ED 2-0 see: TRU PLAR Policy ED 2-0

### Graduation

After completion of all course requirements, students will qualify to graduate. All elective courses must be completed prior to the end of final semester. Failure to provide an Official Transcript for transfer credit courses by **5 weeks prior to convocation** may result in an inability for TRU to grant the degree for that year's date of convocation.

If students plan to practice nursing in BC following graduation, they will need to register with BCCNP. The School of Nursing will submit the graduate's name to BCCNP once all course requirements have been met. This will then qualify the graduate to write the NCLEX examination. More information will be provided to students prior to Semester 8 (final practicum).

#### NCLEX

The BScN degree does not qualify the graduate to undertake employment as a registered nurse, but does qualify the graduate to write the National Council Licensure Examination (NCLEX). Further information on the NCLEX and registration as a new graduate can be found on the BCCNP Website, BCCNP Exam (NCLEX).

Persons with disabilities that may adversely impact their performance on the NCLEX examination may request modifications. These students are asked to contact BCCNP

prior to applying to write the NCLEX to obtain the necessary forms to request modifications.

# **Evaluation Requirements**

# **Conduct During Examinations**

#### Preamble:

The School of Nursing is committed to maintaining a high standard of academic integrity during examinations in accordance with both TRU (<u>Student Academic Integrity Policy ED 5-0</u>) and BCCNP. BCCNP's Professional Standards (Professional Responsibility and Accountability) state that a nurse:

Is accountable and takes responsibility for own nursing actions and professional conduct.

The School of Nursing has developed the following guidelines to maintain academic integrity during examinations.

- The SON follows the TRU Exam Policy: <u>Examinations Policy ED 3-9</u>
- Students **MUST NOT** make arrangements to be away from TRU until the examination schedule is finalized.
- You may not disclose or discuss with anyone, including faculty, information about the items or answers seen in your examination (this includes posting or discussing questions on the Internet and/or any social media platform)
- Personal items are **not allowed** at the desk during the examination. Personal items not allowed include, but are not limited to:
  - Any electronic devices cell, mobile, smart phones, tablets, smart watches,
     MP3 players, fitness bands, jump drives, cameras, PDA, etc.
  - Calculators
  - Bags/purses/wallets
  - Books/study materials
  - Medical aides/devices
  - Coats/hats/scarves/gloves/hoodies
  - o Food, drink, gum, or candy
  - Lip balm
  - Watches
  - Sunglasses
- No food or drink at the desk (except with a medical certificate)
- All personal items must be stored where directed by the exam invigilator
- No bathroom breaks unless you have a note from physician or nurse practitioner
- Faculty may provide you with scrap paper. You may not write on the scrap paper until the exam begins.
- Students may bring and wear earplugs

- Students will not be able to enter the room until the invigilator has completed the setup of the room
- Students will display TRU photo ID on desk and sit in assigned seat (if seats are assigned)
- Once seated, students cannot leave seat until the examination is completed. If you
  have a question, raise your hand.
- Students cannot open examination booklet until told to do so
- Students cannot leave the room within the first 30 minutes
- A student who arrives late is admitted without question during the first 30 minutes
  of the examination session. Students who arrive late for an examination are not
  allowed additional time.
- At the end of the examination, students must hand in all booklets and scrap paper with their name and student ID on it to the invigilator and sign that they have done so
- In the case of a fire alarm sounding, students take examination out of room with them
  - Students are to hold the examination close to their chest and leave building single file
  - Students cannot talk to each other and should move to an area away from other individuals
  - Any student caught talking will be dismissed at that time

#### **Midterm Examination Accommodations**

Students who will miss or have missed a midterm examination due to illness or domestic affliction must contact their faculty member as soon as possible.

In extraordinary circumstances, outside of illness or domestic affliction, students are to email both the faculty member and Chairperson immediately with the understanding that midterm exams will not be rescheduled for vacations or personal situations.

#### **Final Examination Accommodations**

Students who will miss or have missed a final examination due to illness or domestic affliction will be directed to TRU <u>Examinations Policy ED 3-9.</u> Section IV outlines the steps to be taken, that is, students **MUST** apply to seek remedy through the TRU registrar's office.

Final exams will not be rescheduled for vacations or personal situations.

# **Criteria for Written Papers/Assignments**

## **Marking Criteria for Scholarly Papers**

See Appendix A for information regarding the marking criteria used by TRU SON faculty members.

## Format and Style

A scholarly format is to be followed for written papers/assignments based on accepted convention for grammar, punctuation, style, and format. The required scholarly format for the School of Nursing is:

American Psychological Association. (2020). *Publication Manual of the American Psychological Association* (7<sup>th</sup> ed.). American Psychological Association.

See Appendix B for TRU SON Expectations and Guidelines Relating to APA Style for Student Scholarly Papers.

## **Submission of Papers**

Assignments must be submitted prior to 4:30 p.m. on the due date unless otherwise directed by the faculty member.

Due dates are set by individual faculty members and requests for extensions must be made at least 48 hours prior to the due date.

For every day or portion of a day a paper is late, 5% will be deducted. A weekend is considered to be 2 days.

Students who require an extension due to domestic affliction or illness **may** be accommodated. Extensions in these extenuating circumstances are at the discretion of the faculty member and should not extend beyond the semester end date unless approved by the chairperson. Please email your faculty member as soon as possible. Students should know that the educator will inform the Chair who will keep track of potential ongoing patterns, to be able to identify students that might be at risk and in need of support beyond a particular course.

When submitting papers, use student number, unless otherwise directed by the faculty member.

Students should retain copies of all papers submitted as well as retain all graded papers until final transcripts have been issued.

# **School of Nursing Guidelines**

# **Clarifying and Resolving Concerns**

## **Student Concerns Involving Faculty and Courses**

Students are expected to follow the process below should they have concerns with individual faculty members and/or a course. Examples of concerns may be about the content of the course, teaching methods, assignments, issues of fairness, or marking processes.

The following steps are intended to assist and support students in managing or resolving these perceived issues.

**Step 1:** the student should express concern directly to the faculty member by face-to-face discussions, letter, or email.

**Step 2:** if the student perceives that the issue is unresolved or if the student feels unable to approach the faculty then the student should consult the Chairperson for assistance:

- Chairperson will examine the claim and evidence to explore the issue to determine if further action is warranted.
- Chairperson examines options with the student(s) on how to proceed or advise student(s) of other resources.

Step 3: refer issue/student to the Dean of School of Nursing

At any point in the process: during or following discussions with the faculty member or Chairperson, the student may wish to:

- Seek further consultation with the Chairperson
- Consult with the Dean
- Consult with Director of Student Affairs
- Consult with TRU Student Union (Members Advocate)

#### **Feedback Processes**

The School of Nursing has several processes designed to capture, evaluate and act on student, faculty, and other stakeholder feedback about the program.

These processes include, but are not limited to:

- Course evaluations by students
- Faculty evaluation of courses
- Program Completion Questionnaires from graduates
- Graduate Follow-up Questionnaires
- Practice Site Questionnaires
- Surveys from the Program Evaluation Committee (faculty and students)
- BScN Curriculum Committee (faculty and students)

## Student opportunities to provide feedback

Faculty in the School of Nursing value student feedback. We use it to inform our own professional development and curriculum change. Faculty anticipate thoughtful comments that provide constructive ideas. The following information is intended to provide some clarity about evaluation.

- TRU has implemented a directive to evaluate every course, every time it is offered. Student course evaluations are an opportunity for the student to give the faculty member feedback on their experience of learning in the course. Each faculty member receives feedback for each component of the course. This means for some courses you will have more than one evaluation to complete if the course is shared between instructors, or if the course has more than one component such as theory and practice. Students receive a link to the course evaluation in their myTRU account. The evaluation is password protected, faculty member will provide students with the password at the end of the term. Once the first student opens the evaluation form, the evaluation remains open for 48 hours only. The faculty member and the chairperson will review the student feedback after all course grades have been submitted. For more information the Centre for Excellence in Teaching and Learning provides information for students.
- **Semester evaluations** are completed by the program evaluation committee to help direct curriculum changes, including the re-positioning of courses and levelling of content across courses, semesters and years, and to determine how well courses link with one another. The feedback is reviewed after all course grades for the semester have been submitted. The feedback is organized by theme and the information is shared with faculty in that semester and with the Program Evaluation and curriculum committees.

# Gift Giving / Receiving Guidelines

The <u>BCCNP practice standard Boundaries in the Nurse-Client Relationship</u> provides the School of Nursing with principles that may be applied to the relationships that exist between faculty member and students. The faculty member-student relationship is "based on trust, respect... and it requires the appropriate use of power" (BCCNP Practice Standard Nurse-Client Relationships, 2020, p. 1). If gifts are exchanged, there is a risk for professional boundary issues and the inappropriate use of power to arise. Therefore, faculty member and students should not give or accept gifts in the student/faculty member relationship. Instead consider showing your appreciation in other ways such as written comments or nomination for award/scholarship.

# **Confidentiality of Client Information**

Confidentiality is an integral part of the professional Code of Ethics for Registered Nurses and the BCCNP Standards of Practice. The principle of confidentiality flows from a belief in the worth of an individual and the right to privacy.

Students and faculty members must take all reasonable steps to protect all confidential information from inadvertent disclosure to others not authorized to this information. This

includes not discussing clients and clinical events in any public areas (e.g., cafeterias, elevators, public transportation, social gatherings, all forms of social media,

etc.) and using utmost discretion when discussing events within a clinical group for learning purposes. Details of a client's history may be shared discretely when required by the health care team or for educational purposes on a need to know basis only.

Students must use utmost care when collecting and submitting client information for purposes of learning. Students must remove as many personal identifiers as possible to protect client confidentiality. Students cannot take photos of charts or client information. Saving assignments that contain client information to the hard drive on any public or university computer is a breach of confidentiality.

User IDs and passwords to practice agency databases must not be shared.

Students that make home visits and have health records or other confidential documents in their possession must return these documents immediately to the practice agency. Students must comply with agency policies at all times.

All SON students must represent TRU, the SON, and the nursing profession in a professional and respectful manner. Students must use the of utmost care in maintaining the confidentiality of current and past clients outside of clinical experiences. Students practice professional boundaries by not initiating contact with current or past clients in a public setting outside of the requirements for clinical experiences.

Confidentiality and/or privacy breaches are taken very seriously and can result in significant consequences including: the withdrawal of all student privileges; the termination of a clinical placement; other consequences as determined by the agency, the University, and the SON. Breaches of privacy and confidentiality can also result in legal action.

For more information please refer to the Practice Education Guidelines for BC, Confidentiality of Receiving Agency and Patient Information.

# **Confidentiality of Student Information**

In a program of studies such as the nursing program, student performance in academic and/or practice courses may be discussed among particular faculty members under certain conditions. These conditions include situations when:

- Student performance is a concern in relation to maintaining the standards of the nursing program and the nursing profession (e.g. a safety to practice issue)
- Faculty members are monitoring student performance to promote success in achieving the program goals (e.g. discussing strategies to facilitate student learning)

Please note that when accepting an Employed Student Nurse (ESN) position, you may be asked by the employer to sign a release of information form. This form, when

signed, allows the ESN Coordinator to communicate directly with the Nursing program to further support your learning and future development. This position is related but separate from your undergraduate education and thus practice performance information from the ESN is not shared with SON.

Discussions of confidential information will relate to the specific context of student performance and learning needs in the program. Nursing faculty are bound by the same CNA and BCCNP ethical and practice standards to which students must adhere.

## **Requesting Information from Community Agencies**

Many student papers and projects can benefit from the information and expertise available at community agencies. Most people are willing to provide students with information; however, these agencies have busy schedules and need to carry on their business while at the same time assisting students. If you are going to approach a community agency for information or resources for a project or research the following guidelines are provided to facilitate the process for both students and agencies.

Research the topic **FIRST** at the TRU and/or public library - ask the librarians for help. Be specific and know the library basics about your topic - outside agencies do not appreciate students who are vague and unprepared.

- 1. Phone to set up an appointment, do not just drop in. Before phoning to enquire, prepare the following information:
  - \* Who you are and your program of study
  - \* What specific information you are looking for and what it will be used for
  - \* Flexible dates and times you are available for a meeting
  - \* A phone number for the contact person to get back to you
- 3. Phone the agency and ask who could assist you in finding the desired information, and request a meeting. If the person is too busy to meet with you, ask if there is someone else or somewhere else to obtain the information.
- 4.If time permits, an initial letter, or email, including all of the above information is also an appreciated method of professional contact, and may avoid the common problem of telephone tag.
- 5. **Never miss a scheduled meeting**. Phone and cancel or rebook if possible.
- 6. Develop a list of questions for the meeting and do not overextend your welcome by taking more time than originally determined.
- 7. Promptly return any materials that you borrowed.
- 8. Ways to thank others for contributing to your education:
  - Offer to provide a copy of your assignment
  - Send a thank you card or a small memento with a TRU logo
  - Invite the agency contact person to your class or presentation (if applicable)

## **Dress Code and Personal Appearance Standards in Nursing Practice**

Students are expected to maintain an appropriate and professional image and a high standard of personal hygiene and grooming at all times when acting in the capacity of a representative of the TRU SON. Students are required to follow the TRU SON dress code and appearance standards as well as the agency policy in the area in which they are practicing. The dress code and appearance standards are to be followed at all times that students are presenting to practice areas including researching clients prior to clinical experiences. If students, in the opinion of the faculty member, violate TRU SON standards or agency dress code/appearance policies they will be asked to leave the practice setting.

### **Clothing / Uniforms**

- For consistency and clarity, a uniform policy has been implemented in the SON. This change will demonstrate professional appearance and uniformity. Additionally, TRU students and faculty will be recognizable and distinct in practice placements.
- Approved TRU SON BScN uniforms are slate gray for tops and pants. They
  are available for purchase at Bookies in the TRU Bookstore. Uniforms should
  be clean and pressed with scrub ties tucked inside. The top of the uniform
  allows for TRU SON identification to be clearly visible and is to be worn at all
  times as per the policy outlined in the handbook.
- In addition:
  - NO long-sleeved apparel (e.g. shirts, sweaters, lab coat, hoodies), when providing care
  - students change in to and out of uniforms at the workplace. Uniforms are not to be worn in public Uniforms to be hemmed and wrinkle free
- When uniforms are not required, such as in community agencies, mental health practice, or when you are obtaining practice assignments from hospitals/agencies, clothing:
  - O Clean, pressed and professional in presentation
  - Casual business attire is acceptable
  - No jeans, yoga pants, leggings/tights, low cut tops, halter tops, or backless dresses

#### **Footwear**

- As per <u>WorkSafe BC Section 8.22 of the OHS Regulation</u>: "A worker's footwear must be of a design, construction, and material appropriate to the protection required."
- Appropriate hosiery (stockings, tights, socks, etc.) and footwear must be worn
- Closed toes and closed heels with non-slip soles, impermeable material that can be disinfected is required
- Shoes are to be carried to and from the hospital or agency

#### Hair

 Cranial hair must be confined (kept off collar and face). Hair in ponytails or secured otherwise must ensure that the hair is off the collar and secured.  Facial hair should be of a length that can be completely controlled/contained by a mask

### Jewellery

- Wrist watches are not permitted.
- Dangling or hooped jewelry (neckwear, earrings, bracelets, watches, rings or similar articles) must NOT be worn except for medical alert bracelets
- Facial piercings including ears are to be small studs only, with no bars, rings, plugs, etc.
- No rings allowed, including wedding bands

#### **Tattoos**

Some practice agencies may request that you cover a visible tattoo(s)

#### **Fingernails**

- Short, clean nails, no polish
- **No** acrylic or gel nails (implicated in the transfer of microorganisms)

#### Scents

- Perfumes, colognes, after-shave, and other strongly scented personal care products are not permitted in practice or on TRU campus Scents Sensitivities
- Third hand smoke is smoke that is trapped in hair and on clothes; third hand smoke is recognized as containing the same chemicals as second-hand smoke. It is important for students and faculty to recognize the potential dangers of third hand smoke and to reduce exposure to clients, particularly more vulnerable clients such as babies. This includes good hand washing and changing clothes to reduce exposure (as per The Canadian Lung Association).

For students working in Interior Health sites, please see <u>Interior Health AU0800 – Dress Code/Personal Appearance.</u>

## **Student Identification during Nursing Practice Experiences**

All nursing students and faculty are required to wear current TRU SON photo identification (ID) while attending any practice experience (e.g. hospitals, health care agencies, homes visits, community agencies, etc.). The photo ID is to be visible on their person (above the waist) at all times unless indicated by practice setting.

The TRU SON photo ID cards will serve as security identification during SON authorized practice activities (client research prior to practicums, home visits, agency practice, etc.).

Agency security or relevant employees (e.g. nursing personnel) have the right to refuse TRU Nursing students access to the agency or client confidential documents if the student is not wearing the TRU SON Photo ID. TRU SON student identification is not to be worn or seen outside of practice. ie. social media.

#### Consent for Student Involvement in Care

Clients and/or their substitute decision makers have the right to refuse care provided by a student. Students must always introduce themselves as a student. During the first interaction with a client the student should inform the client of who they are, the level of the program to date, and how they are supervised.

For example, "I'm Chris, a 2<sup>nd</sup> year nursing student at TRU, my instructor is Leigh, and Kerry is the nurse who is assigned to you. You can call on Leigh or Kerry at any time if you like. Both will be looking over my work throughout the day." Please note that students are not required to use their last names however may do so at their discretion. Please see <a href="Practice Education Guidelines for BC">Practice Education Guidelines for BC</a> — Consent for Student Involvement in Care

# **Practice Policies and Requirements**

#### **Practicum Placements**

Students in the BScN program will have practicum placements in a variety of settings in Kamloops, Williams Lake, and surrounding areas. **Students can expect to travel to locations other than Kamloops or Williams Lake, starting in Year 2 of the program at their expense**. Students in semesters 1 to 5 are placed in faculty member led practice groups in selected agencies, as predetermined by nursing faculty. The variety of contexts aims to facilitate graduate ability to meet the *Competencies in the Context of Entry-level Registered Nurse Practice in British Columbia* (2009) requirements of BCCNP.

In semesters 3, 4, and 5, practice groups are developed for placements locally <u>as well as surrounding areas</u> within the Thompson Cariboo Shuswap Health Service Area. Students may also have practicums in the evening, weekends, 12-hour shifts, and are expected to adjust their schedules accordingly.

As a student progresses, placements become increasingly diverse and afford a degree of student choice. In particular, students can expect to be placed in practice settings outside Kamloops/Williams Lake during **NURS 3510, 3380, 4380, and 4210** to maximize placement utilization and student development while meeting the entry-level competencies required for a graduate nurse according to BCCNP. Access to Practice Placement information (processes, resources, preference forms for local, provincial, national, and international placements) for Semester 6 and beyond is available on the Moodle Site: NURS Year (x) BScN Communication.

All students are expected to travel to locations other than Kamloops or Williams Lake throughout the program and are responsible for accommodation and travel expenses. Students can expect to be placed in agencies outside their campus of origin at least twice.

## Practice Placements (SEM 6, CPE III, SEM 7, & 8)

Decisions regarding placement outside of Kamloops/Williams Lake by the School of Nursing from Semester 6 onward are based on the following general principles and practical considerations:

- Placement site/healthcare agency is appropriate/available for the course and student level.
- Student practice history and readiness, as assessed by faculty members, for increasingly independent and indirect faculty member supervision.
- Transportation, living costs, and payment of any agency specific fees, additional criminal record checks, immunizations, passports, visas, and additional extended health coverage or out-of-province coverage from BC Medical Service Plan (recommended for national or international practice-education opportunities) or Pacific Blue Cross (http://www.pac.bluecross.ca/) or BCAA (http://www.bcaa.com/insurance) are the responsibility of the student. Out of province placements are normally not covered by Worksafe BC or any other Worker's compensation by another province.
- Student indication of preference (provided placement office can accommodate) in combination with educational goals and supporting evidence when required by healthcare agency (see preference forms).
- Preference forms for practice placement BScN year 3-4 are on Moodle and are to be submitted to <a href="mailto:nursingpractice@tru.ca">nursingpractice@tru.ca</a> as directed on the preference forms.
  - Placement requests within BC need to be submitted 4-5 months ahead of practicum start date
  - Placement requests beyond BC are normally submitted 6-8 months ahead of practicum start date to ensure legal contracts are in place between TRU and the agency.

# **General Information Regarding Placements in BC or Canada**

- When applying for a distance practice placement in CPEs (NURS 3380, 3390) and Semester 8 (NUR 4210) students need to plan ahead to ensure that they meet the guidelines of eligibility listed below. The Practice Placement Coordinator (PPC) is available as a resource for students interested in pursuing this option.
- There is no guarantee that a request to an agency will be filled. Legal contracts must be in place between TRU and the agency.
- To facilitate the learning in this type of placement, the student must have strong practice performance with the ability to work independently with minimal supervision from faculty member.

# Nursing 3390 - FOCUS ON INTERNATIONAL NURSING

- Students will be invited to apply for an international placement normally for CPE 3 (NURS 3390) one year in advance of the possible placement
- Application materials include: Applicant Information and Statement of Interest and a Global Referee Form

- There is a surcharge applied to this International practicum course. Additional financial costs are the responsibility of the student (e.g. passports, visas, immunizations, travel, and accommodation, etc.)
- The SON Global Health Committee Chair will review the applications and will access student files and nursing faculty member for information on student academic and practice performance.
- Students will be informed via email with the decision of the committee. A copy of this email will be placed on the student file.
- Approval may be deferred if there are concerns regarding academic or clinical performance. The student will be notified via email of any change in status.
- Placement approval is contingent on continued strong academic and clinical performance. If at any time the student is not meeting the expected standard, the committee Chair will review the student's status and approval may be revoked.

#### **Missed Practice Time**

Attendance in nursing practice courses must be a priority for nursing students. The planned total numbers of hours in the nursing program is viewed as being the minimum number of hours required to become a competent beginning nurse. Some employers may ask for a record of time missed from nursing practice. Students are expected to attend, and be on time for, all scheduled practice, laboratory, and seminar learning experiences.

Hours absent from Nursing Practice courses (including seminars) will be recorded and documented on the final Performance Summary. See <u>TRU Student Attendance Policy</u> ED 3-1 for additional information.

- 1. Students scheduled for a nursing practice experience who become ill and are unable to attend are expected to telephone the appropriate agency and /or instructor at least one hour prior to the scheduled starting time. Specific instructions will be given by individual faculty member.
- 2. All missed time will be critically analyzed on an individual basis. The student will be assessed and documentation on the student's performance appraisal will include the following criteria:
  - a. amount of time missed from the nursing practice area, seminars, labs and classroom
  - b. the reason(s) for missed time and / or physician/ NP note
  - c. presence or absence of a pattern of missed time
  - d. level of performance.
- 3. Missed nursing practice, lab and seminar time is recorded and will be included on performance summaries.
- 4. Practice absenteeism may result in faculty recommending withdrawal from the program. Students may be required to submit a statement from a physician or other professional. Recommendations will be based on an evaluation of the student's circumstances, nursing practice performance and academic records.

#### Attendance at a Conference as Practice Time

A written request to attend conferences must be submitted to a faculty member and Chairperson prior to committing to attending the conference (booking travel, paying for conference fees, etc.). The request needs to include learning objectives – how does this conference connect to learning in your current practice area and the relevance of the conference, workshop, etc., to nursing practice. The discussion with the faculty member regarding how to "count" time for practice hours needs to be included. Decisions about permission and practice hours will be made as a team, with faculty members, chairperson, and semester leads. Time may not be granted for all requests.

The practice faculty member will base his/her decision on consideration of the following:

- The student's current practice performance
- The potential for missed practice time to threaten the student's ability to successfully complete the practice course/rotation.
- The willingness of the student to share or present their learning from the conference with peers.
- The relationship between the conference and the student's professional activities (e.g., Nursing Undergraduate Society, Canadian Nursing Students' Association, BCCNP, ARNBC)
- The number of previous requests and attendance at conferences or similar activities during the nursing program.
- The current year of the program or practice area the student is in.

## **Transportation and Liability**

Travel is a necessary component of the nursing program, particularly in community practicum placements.

- Each student must take individual responsibility for decisions regarding his/her own safety when required to travel in inclement weather.
- Students must provide their own transportation to the agencies and client homes involved in nursing practice courses.
- Students may travel with their field guide unless prohibited by agency policy.
- Students are not permitted to drive agency vehicles.
- Students are not permitted to transport clients in their own cars.

For more information refer to the Practice Education Guidelines for BC: Vehicle Ride-Along/Use <a href="http://hspcanada.net/docs/PEG/2\_6\_Vehicle\_Ride\_Along-Use.pdf">http://hspcanada.net/docs/PEG/2\_6\_Vehicle\_Ride\_Along-Use.pdf</a>

## Liability

Thompson Rivers University carries liability insurance which covers students engaged in required nursing practice under the supervision of a faculty member. This coverage **does not** include vehicles. If students use a car during practicum, any accidents must be handled under the student's insurance policy.

Students are not permitted to transport clients in their own cars. If a student were involved in an accident causing injury to a passenger who was a client, the driver might be held liable, notwithstanding any insurance coverage which TRU might have.

TRU Student Accident Insurance covers accidental death and dismemberment (AD&D) and some other expenses for the student only; it does not replace medical insurance or vehicle insurance. Coverage is in effect while the student is on TRU property or participating in a TRU approved activity such as a practicum, or while travelling from TRU or a practicum office to another TRU/practicum site. Daily commuting between the student's home and TRU campus or practicum site is **NOT** covered.

### **Practice Guidelines, limits, and conditions**

The following guidelines inform practice as students' progress through the program. The guidelines are in place to support the safety of students and clients. Nursing students are required to familiarize themselves with the necessary policies for each agency they are assigned to during their nursing practicum experiences. Nursing students are required to adhere to the guidelines and polices in this handbook.

# **Provincial Practice Education Guidelines and Interior Health Authority Policies**

The following provincial practice education guidelines are developed with input from health authorities, government, and post-secondary institutions. In addition, each health authority has policies that the student must abide by.

At TRU many of the student's practice sites are within the Interior Health Authority (IHA), as such the student should become familiar with practice policies and guidelines from IHA. The IHA Policy AU1100 Clinical & Practice Education (Student Placements) is available on the IHA Intranet site under the Policies and Procedures Section (search by title of policy).

The Provincial Practice Education Guidelines are available online at <a href="https://hspcanada.net/features/#Guidelines">https://hspcanada.net/features/#Guidelines</a> . At minimum, students need to review the following sections.

Guidelines
re-Placement
acement Process
riminal Record Search (Criminal Record Check)
<u>nmunization</u>
espiratory Protection
rientation - On Site Faculty
rientation - Students
n Site - General
onfidentiality of Receiving Agency and Patient Information
entification entification
opyright/Intellectual Property
ontract Vendor Placements
emuneration/Reimbursement
ehicle Ride-Along/Use
trike/Job Action
tudent Practice Issues
upervision of Students by Staff
n Site - Safety
egative Behaviour in the Practice Setting
dverse Event Reporting
ommunicable Diseases Outbreak -
jury and exposure to Blood/Body Fluids
n Site - Direct Care
onsent for Student Involvement in Care
tudent Scope of Practice

## **Immunizations**

**Documentation by Students** 

All TRU nursing students and faculty members visiting health care service delivery sites are considered health care providers and should be protected against vaccine preventable diseases. They must follow provincial and practice agency immunizations guidelines. Such policies are based on the Communicable Diseases and Immunization

Guidelines from the BC Centre for Disease Control and the Canadian Public Health Agency.

- While only TB Skin test is mandatory, it is strongly recommended that students follow the Health Authority guidelines for required immunizations.
- Proof of immunity status must be available, and the practice agency may request it from students and faculty at any time in preparation for or during a clinical placement.
- If students choose not to follow the set out then they may not be fit for practice at certain agencies.

For more information, refer to: <u>Practice Education Guidelines for BC Immunizations</u>

Annual vaccination against influenza is strongly recommended for all health care providers.

TRU Health Services will arrange for students and faculty to receive free influenza vaccinations annually. Proof of vaccination must be shown to student's current practice faculty member. Students are strongly encouraged to keep a copy of their immunization record with them in practice in the event they are asked for proof. In the event of an influenza outbreak, students and faculty members who cannot provide proof of vaccination to the agency may be denied access to the facility.

Students and faculty members who are not immunized are required to abide by the agency policy for non-immunized health care workers. In the event of an influenza outbreak and / or if a student has a known allergy to eggs, the student may be required to take an antiviral medication. Arrangements for this antiviral medication are to be made on an individual basis between the student and their health care provider.

#### **Blood-borne Communicable Diseases**

TRU nursing students and faculty who have tested positive for a blood-borne communicable disease (i.e. Hepatitis B, C, D, HIV) are responsible to be aware of protective measures and for taking all measures necessary to protect themselves and others.

Students should be aware of the BCCNP practice standard Communicable Diseases: Preventing Nurse-to-client Transmission.

# **Practice requirements**

Upload all of the completed practice requirement certificates/record of completion to Moodle: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a> (Course name and enrollment key supplied in acceptance letter).

Review the following site: <a href="https://www.tru.ca/nursing/programs/bsn/accepted.html">https://www.tru.ca/nursing/programs/bsn/accepted.html</a>

When	What	What to do with evidence of completion:
	TRU School of Nursing Student Practice Orientation (on Moodle) Module 1: Basics for Practice; Dress Code in practice ** will be contacted with a passcode to access the module quizzes	Verify completion with your practice faculty member
	Provincial /Hand Hygiene Basics –PICNet accessed via <a href="http://learninghub.phsa.ca/Learner/Home">http://learninghub.phsa.ca/Learner/Home</a> (you will need to sign up for an account)	Send certificate(s) of completion to:  https://www.tru.ca/its/students/moodle.html  AND verify completion with your practice faculty member
Before start of Semester 1	<ul> <li>Criminal record check (CRC)</li> <li>Current CPR- C (face to face) **Note: the SON requires CPR updating every 2 years**</li> <li>Current mask fit testing **renewed annually**</li> <li>TB Skin Test (part of the TRU Immunization Form)</li> <li>TRU Immunization Form</li> <li>WHMIS</li> <li>IHA Confidentiality Form</li> </ul>	Send certificate(s) of completion to: https://www.tru.ca/its/students/moodle.html  AND verify completion with your practice faculty member

<sup>\*</sup>students must complete the following before being permitted into practice.

When	What	What to do with evidence of completion:
	<ul> <li>HSPNet Form</li> <li>BCCNP Requisite Skills and Abilities Form</li> <li>Student Practice Education Core Orientation (SPECO) Courses.         Accessed via <a href="http://learninghub.phsa.ca/Learner/Home">http://learninghub.phsa.ca/Learner/Home</a>:</li> </ul> <li>Introduction to Student Practice         <ul> <li>Violence Prevention: Introduction to Violence Prevention</li> <li>Violence Prevention: Recognize Risks and Behaviours</li> </ul> </li>	Send certificate(s) of completion to:  https://www.tru.ca/its/students/moodle.html  AND verify completion with your practice faculty member
Before the start of Semester 2	<ul> <li>Violence Prevention: Assess and Plan: Part 1 - Complete Point-of-Care Risk Assessment</li> <li>Violence Prevention: Assess and Plan: Part 2 - Develop Behavioural Care Plans</li> <li>Violence Prevention: Respond to the Risk: Part 1 - Perform De-escalation Communication</li> <li>Violence Prevention: Respond to the Risk: Part 2 - Perform De-escalation Strategies</li> <li>Violence Prevention: Respond to the Risk: Part 3 - Determine When and How to Get Help</li> <li>Violence Prevention: Report and Communicate Post-Incident</li> <li>Infection Prevention and Control Practices for Direct / Professional Clinical Care Providers</li> <li>Provincial Code Red - Fire Safety Training (Acute &amp; Residential Facilities)</li> <li>Waste Management Basics</li> <li>WHMIS 2015 - Provincial Course</li> </ul>	**a copy of the 'learning history' showing courses and completion dates from Learning Hub will suffice
	<ul> <li>Current CPR- C, if necessary</li> <li>Current mask fit testing, if necessary</li> </ul>	Send certificate(s) of completion to <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a>

When	What	What to do with evidence of completion:
		AND verify completion with your practice faculty member
	Personal Safety Course or PSC (your practice instructor will give you more information about this in Semester 1. This is an all-day course that students will complete sometime before the start of Semester 2 practice. It will cost approximately \$60.)	Send certificate(s) of completion to <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a> AND verify completion with your practice faculty member
Before the end of Semester 2	<ul> <li>Respond to IHA access e-mail, approximately 2nd/3rd week of March.</li> <li>Upload Mnemonic, by March 31st</li> <li>Gentle Persuasion Approach (GPA), by March 31st</li> </ul>	Send certificate(s) of completion or information to <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a>
	TRU School of Nursing Student Practice Orientation (Moodle) Basics for Practice Safe Medication Administration ** will be contacted with a passcode to access the module quizzes	Verify completion with your practice faculty member
Before the start of Semester 3	Review of select SPECO modules accessed via <a href="https://learninghub.phsa.ca/Learner/Home">https://learninghub.phsa.ca/Learner/Home</a> Provincial Hand Hygiene Basics – PICNet Code Red - Fire Safety Training (Acute & Residential Facilities)	Verify completion with your practice instructor with a 'learning history' from Learning Hub (completion date within the last 6 months)
	<ul> <li>Current CPR- C, if necessary</li> <li>Current mask fit testing **renewed annually**</li> </ul>	Send current certificate(s) of current completion to: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a> AND verify completion with your practice faculty member

When	What	What to do with evidence of completion:
	Omnicell ilearns (IHA)	Send current certificate(s) of current completion to: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a>
	CRC: Statutory Declaration	Form on and to be submitted to: https://www.tru.ca/its/students/moodle.html
Before the start of Semester 4	See Semester 3 practice requirements	
	Current CPR- C, if necessary	Send current certificate(s) of current completion to:
	Current mask fit testing, if necessary	https://www.tru.ca/its/students/moodle.html  AND verify completion with your practice faculty member
	Renew select SPECO modules accessed via <a href="https://learninghub.phsa.ca/Learner/Home">https://learninghub.phsa.ca/Learner/Home</a> :	Send current certificate(s) of current completion to: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a>
	<ul> <li>Code Red - Fire Safety Training (Acute &amp; Residential Facilities)</li> </ul>	Verify completion with your practice instructor with a 'learning history' from Learning Hub (completion date within the last 6 months)
	Current CPR-C, if necessary	Send current certificate(s) of completion to:
Before the start of CPE 2	Current mask fit testing, if necessary	https://www.tru.ca/its/students/moodle.html  AND verify completion with your practice faculty member
Before the start of Semester 5	TRU School of Nursing Student Practice Orientation (Moodle) Basics for Practice	Verify completion with your practice faculty member

What	What to do with evidence of completion:
Safe Medication Administration  ** You will be contacted with a passcode to access the module quizzes	
Review of select SPECO modules accessed via <a href="https://learninghub.phsa.ca/Learner/Home">https://learninghub.phsa.ca/Learner/Home</a> 1) Infection Prevention and Control Practices for Direct Clinical Care Providers 2) Code Red - Fire Safety Training (Acute & Residential Facilities)	Verify completion to your practice faculty member with a 'learning history' from Learning Hub (completion date within the last 6 months)
<ul> <li>Current CPR-C (face to face) **Note: the SON requires CPR updating every 2 years**</li> <li>Current mask fit testing **renewed annually**</li> </ul>	Send current certificate(s) of completion to: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a>
	AND verify completion with your practice faculty member
CRC: Statutory Declaration	Form on and to be submitted to: https://www.tru.ca/its/students/moodle.html
See Semester 5 requirements	
Current CPR-C, if necessary	Send current certificate(s) of completion to:
Current mask fit testing, if necessary	https://www.tru.ca/its/students/moodle.html
	AND verify completion with your practice faculty member
Renew select SPECO modules accessed via <a href="https://learninghub.phsa.ca/Learner/Home">https://learninghub.phsa.ca/Learner/Home</a> :	Send current certificate(s) of current completion to: https://www.tru.ca/its/students/moodle.html
	Safe Medication Administration  ** You will be contacted with a passcode to access the module quizzes  Review of select SPECO modules accessed via https://learninghub.phsa.ca/Learner/Home  1) Infection Prevention and Control Practices for Direct Clinical Care Providers 2) Code Red - Fire Safety Training (Acute & Residential Facilities)  • Current CPR-C (face to face) **Note: the SON requires CPR updating every 2 years**  • Current mask fit testing **renewed annually**  CRC: Statutory Declaration  See Semester 5 requirements  • Current mask fit testing, if necessary  • Current mask fit testing, if necessary  Renew select SPECO modules accessed via

When	What	What to do with evidence of completion:
	<ul> <li>Infection Prevention and Control Practices for Direct Clinical Care Providers</li> <li>Code Red - Fire Safety Training (Acute &amp; Residential Facilities)</li> </ul>	Verify completion with your practice instructor with a 'learning history' from Learning Hub (completion date within the last 6 months)
Before the start of CPE 3	<ul> <li>Current CPR-C, if necessary</li> <li>Current mask fit testing, if necessary</li> </ul>	Send current certificate(s) of completion to: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a> AND verify completion with your practice faculty member
	TRU School of Nursing Student Practice Orientation (Moodle) Basics for Practice Safe Medication Administration ** You will be contacted with a passcode to access the module quizzes	Verify completion with your practice faculty member
Before the start of Semester 7	Review of select SPECO modules accessed via <a href="https://learninghub.phsa.ca/Learner/Home">https://learninghub.phsa.ca/Learner/Home</a> Violence Prevention (8 modules) Provincial Code Red - Fire Safety Training (Acute & Residential Facilities) Infection Prevention and Control Practices for Direct Clinical Care Provider Waste Management Basics Infection Prevention and Control Practices for Direct Clinical Care Providers	Verify completion with your practice instructor with a 'learning history' from Learning Hub (completion date within the last 6 months)
	<ul> <li>Current CPR-C, if necessary</li> <li>Current mask fit testing ** renewed annually**</li> </ul>	Send current certificate(s) of completion to: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a>

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When	What	What to do with evidence of completion:
		AND verify completion with your practice faculty member
	CRC: Statutory Declaration	Form on and to be submitted to: <a href="https://www.tru.ca/its/students/moodle.html">https://www.tru.ca/its/students/moodle.html</a>
	Current CPR-C, if necessary	Send current certificate(s) of completion to:
Before the start of Semester 8	Current mask fit testing, if necessary	https://www.tru.ca/its/students/moodle.html  AND verify completion with your practice faculty member
	Renew select SPECO modules accessed via <a href="https://learninghub.phsa.ca/Learner/Home">https://learninghub.phsa.ca/Learner/Home</a> :	Send current certificate(s) of current completion to: https://www.tru.ca/its/students/moodle.html
	<ul> <li>Code Red - Fire Safety Training (Acute &amp; Residential Facilities)</li> </ul>	Verify completion with your practice instructor with a 'learning history' from Learning Hub (completion date within the last 6 months

- 1. Mask fit testing is required every two years (instead of annually)
- 2. CPR students can proceed with clinical placements and get certified as soon as training is available. There may be the opportunity in early September to have CPR certifications offered on campus stay tuned for dates and sign up
- 3. TB testing TRU is in the process of arranging on campus testing for students in September

<sup>\*\*</sup> Due to COVID 19 and following directives from the Provincial Health Services Authority, the School of Nursing has **temporarily** adjusted the requirements for upcoming practice courses in the following ways:

# **Safety to Practice**

Nursing students are responsible and accountable for abiding to the guidelines and polices of this handbook, the profession (BCCNP), and the health authority/institution visited for the purpose of educational practice. Agency policies, guidelines and regulations are available, often online, through the Health Authority/agency's website.

In lab theory/practice courses, students must complete the required theory and psychomotor skill practice and pass a quiz with an 80% score prior to performing psychomotor skills in the practice setting.

In practice, all nursing students are advised that it is their ethical and legal responsibility to obtain supervision from their assigned faculty member or designate when carrying out any nursing intervention for which they have not been previously supervised or in which they are not competent. All psychomotor skills must be supervised when performed for the first time in practice setting.

In any new practice setting and/or course, faculty members may require students to demonstrate skills previously performed. A student who at any time throughout the educational experience feels uncertain of his/her ability to practice skills effectively and safely must ask the TRU faculty member for supervision/guidance. If the faculty member is not available, the responsible RN is to be consulted and the situation reported to the TRU faculty member.

Unsafe practice can include things like frequent unusual occurrences / unusual incidents (i.e. medication errors, failure to follow policies and procedures, etc.), inadequate preparation for practice, being under the influence of substances, personal health situations that affect one's ability to practice safely

Students in nursing practice courses who are deemed to be unsafe in the practice area may:

- be asked to leave the practice area immediately
- be required to report to the SON Chairperson
- be required to withdraw from the Nursing Program before the end of the course
- receive a failing grade for the course

Sources: BCCNP Professional Standards, Practice Standards and RN Scope of Practice

#### Restricted and Non-restricted activities, Limits and Conditions

Scope of practice refers to activities that registered nurses are educated and authorized to perform. Within the scope of registered nurse practice there are restricted and non-restricted activities as well as standards, limits and conditions set by BCCNP BCCNP Scope of Practice for Registered Nurses

Restricted activities are clinical activities that present significant risk of harm to the public. As such they are reserved for specific health professions only. Designation of these activities to certain health professions and the presence of limits and conditions help to

ensure public safety. Limits and conditions can apply to both restricted activities that require an order and to restricted activities that do not require an order.

In relation to restricted activities for registered nurses that **do not require an order**, students can only perform these if:

- they have some understanding of their intended action
- they have the guidance of their faculty member and / or preceptor and
- if the action falls within the school and agency policy
- For example: applying and maintaining restraints does not require an order but the student will have consulted their faculty member/preceptor, have some understanding of the implications of restraint use and confirm the agency policy about use of restraints.

In relation to restricted activities that **do require orders**, students may only perform these if:

- They have completed the required theory and psychomotor skill practice (i.e. Intramuscular Injections, blood administration, insertion of Foley catheter)
- They have the guidance of their faculty member and/or preceptor
- If the action falls within the school and agency policy
- For example: students can use preprinted insulin orders if they are made client specific by the health professional ordering them, if the order seems to be evidence based, if the order takes into consideration the individual client characteristics and wishes and if the client has given consent.

# Schedule of Skill Theory and Practice Current Curriculum (for students who entered the program 2018 and earlier)

Students are expected to complete theory and practice of psychomotor skills prior to performing the skill in the nursing practice setting. The following table illustrates which semester the selected psychomotor skills theory and practice are taught.

Skill	Year 1	Sem 3	Sem 4	Sem 5	CPE 3
Personal hygiene	*				
Range of motion	*				
Lifts, Transfers, Positioning	*				
Physical assessment	*				
Elimination needs	*				
TPR, BP, oxygen saturation, Blood glucose monitoring	*				
Principles of Medication Administration  • PO/SL meds, topical agents, inhalers and suppositories	*				
Standard Precautions	*				
Ostomy Care	*				

Skill	Year 1	Sem 3	Sem 4	Sem 5	CPE 3
Additional Precautions (isolation)	*				
Additional Precautions (decision making around)		*			
SC, IM Medication Administration		*			
Principles of Surgical Asepsis  • Simple dressing change, sterile gloving		*			
<ul> <li>Venous Access Devices Level 1</li> <li>Different types PVAD &amp; CVAD</li> <li>Indications, Risks, Site assessment</li> <li>Maintenance of PVADs</li> <li>dressing changes - PVAD &amp; percutaneous CVAD (non-hemodialysis)</li> <li>flushing protocols - PVAD</li> <li>line changes up to extension tubing and needless cap on PVAD &amp; CVAD (percutaneous non-hemodialysis &amp; PICC)</li> <li>removal PVAD</li> <li>accessing capped / locked PVAD short</li> </ul>		*			
Intravenous Infusion  • pumps & gravity, priming lines		*			
Suture and staple removal		*			
Drain Shortening and removal		*			
Oxygenation (delivery methods, nasal & oral airways)		*			
Suctioning – Oral, pharyngeal		*			
Epidural / PCA (assessments and monitoring)		*			
Nasogastric tubes  • maintenance, insertion, medication administration, removal			*		
Enteral feeds – maintenance & medication administration			*		
IV medication administration (minibag, direct)			*		
<ul> <li>Venous Access Devices Level 2</li> <li>Maintenance of CVADs − percutaneous, PICC, Tunneled (non- hemodialysis)</li> <li>Accessing locked / capped lines</li> <li>Flushing protocols: CVAD (PICC &amp; percutaneous non-hemodialysis)</li> </ul>			*		

Skill	Year 1	Sem 3	Sem 4	Sem 5	CPE 3
<ul> <li>Change IV lines: PVAD &amp; CVAD (PICC &amp; percutaneous non-hemodialysis) including extension and needleless cap</li> </ul>					
Urinary catheterization			*		
Complex wounds – (packing, irrigation, VAC, products)			*		
Chest tubes (care & maintenance)			*		
Code Blue			*		
<ul> <li>Venous Access Devices Level 3</li> <li>PICC dressing changes</li> <li>blood draws on CVAD (PICC &amp; percutaneous non-hemodialysis)</li> <li>CVAD removal (PICC &amp; percutaneous non-hemodialysis)</li> </ul>				*	
Blood transfusions				*	
Basic ECG interpretation				*	
Parenteral nutrition				*	
Tracheostomies – (care and suctioning)				*	
Transcribing and Checking orders					*
Intravenous insertion PVAD – short insertions (optional lab. Paid for by students)					*

# Schedule of Skill Theory and Practice –Revised Curriculum (for students entering the program 2019 and later)

Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	CPE 3
*					
*					
*					
*					
*					
	*				
	*				
	*				
	* * *	1 2 * * * * * * * * * * * * * * * * * *	1 2 3  *  *  *  *  *  *  *  *  *  *  *  *  *	1 2 3 4  *  *  *  *  *  *  *  *  *  *  *  *  *	1 2 3 4 5  *  *  *  *  *  *  *  *  *  *  *  *  *

Skill	Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	CPE 3
Principles of Medication Administration  • PO/SL meds, topical agents, inhalers and suppositories			*		J	3
SC, IM Medication Administration			*			
Additional Precautions (isolation)			*			
Principles of Surgical Asepsis  • Simple dressing change, sterile gloving			*			
IV Therapy Level 1  Different types PVAD & CVAD Indications, Risks, Site assessment  Maintenance of PVADs  dressing changes - PVAD & percutaneous CVAD (non-hemodialysis)  flushing protocols - PVAD  line changes up to extension tubing and needless cap on PVAD & CVAD (percutaneous non-hemodialysis & PICC)  removal PVAD  accessing capped / locked PVAD short  Intravenous Infusion  pumps & gravity, priming lines			*			
Suture and staple removal			*			
Oxygenation (delivery methods, nasal & oral airways)			*			
Suctioning - Oral, pharyngeal			*			
Epidural / PCA (assessments and monitoring)			*			
<ul> <li>Nasogastric (NG) tubes / PEG / PEJ</li> <li>maintenance, insertion, medication administration, removal</li> <li>Enteral feeds – maintenance</li> </ul>				*		

Skill	Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	CPE 3
IV therapy Level 2				*		
Maintenance of CVADs – percutaneous,     PICC, Tunneled (non- hemodialysis)						
Urinary catheterization				*		
Complex wounds – (packing, irrigation, VAC, products)				*		
Drain Shortening and removal				*		
Chest tubes (care & maintenance)				*		
Code Blue					*	
<ul> <li>IV therapy Level 3</li> <li>PICC dressing changes</li> <li>blood draws on CVAD (PICC &amp; percutaneous non-hemodialysis)</li> <li>CVAD removal (PICC &amp; percutaneous non-hemodialysis)</li> </ul>					*	
Blood transfusions					*	
Basic ECG interpretation					*	
Parenteral nutrition					*	
Tracheostomies – (care and suctioning)					*	
Transcribing and Checking orders						*
Intravenous insertion PVAD – short insertions (optional lab. Paid for by students)						*

#### **Students are Not Permitted to:**

- Confirm surgical or procedural consents.
- Administer any medications ordered "STAT" including PO, Subcutaneous, IM or IV (with the exception of Naloxone – see guidelines below)
- Complete independent double checks for: insulin, anticoagulants. Students can prepare/draw up the medication then have 2 RN/LPN's complete the double check prior to administration
- Give medications via epidural
- Remove epidural catheters
- Set-up, change syringe /bag, or adjust settings on PCA or Epidural infusion pumps.
- Remove chest tubes
- Interpret obstetrical non-stress tests
- Administer anti-neoplastic medications intravenously
- Initiate IVs for children age 5 and under
- Access renal dialysis ports/shunts/lines. (see exception Sem 8 RDU in RIH)
- Perform BCCNP Section 8 Restricted Activities for Certified Practice.
- Access IVADs
- Take verbal or telephone laboratory reports as related to critical values (IH AU 1100)

#### **Documentation**

- Students are required to document their care according to the practice agency's documentation standards and <u>BCCNP Standards of Practice</u>.
- Students are to use **only the** abbreviations approved by the agency they are working in
- For paper-based documentation student signatures will include their Given name (initial), Surname, SN/BSCN, TRU (for example: D. Smith, SN/BScN, TRU). In agencies that require a "Chart Signature Record", the student will 1) print their full given name and surname, 2) indicate SN/BScN and year of study (e.g. SN/BScN -Yr2), 3) provide a sample signature and sample initials, and 4) the date the form was completed.
- For electronic based documentation, students must use their own user ID and access code.
- For more information refer to the Practice Education Guidelines for BC <a href="http://hspcanada.net/docs/PEG/4\_4\_Documentation\_by\_Students\_Feb272013.pdf">http://hspcanada.net/docs/PEG/4\_4\_Documentation\_by\_Students\_Feb272013.pdf</a> and the BCCNP Practice Standard for Documentation

# **Supervision of Psychomotor Skills Limits and Conditions**

The following chart reflects TRU SON policy and will provide students, faculty, and preceptors/field guides with quick reference regarding the level of supervision required for performance of specific psychomotor skills in the different semesters of the program. Theoretical knowledge about the skill prior to the performance is an expectation.

Key:

X	not permitted									
DS	Direct Supervision (Nurse educator or Preceptor/Field Guide) each time									
SI	At discretion of nurse educator or preceptor may do independently									
DS C	Direct supervision and only after certification (for PVAD short insertions this means a									
	workshop; for needling of dialysis lines this means completion of learning modules as									
	determined by the agency)									
$\Diamond$	Saline & heparin syringes (vials) must be confirmed prior to flushing									
*	Does not include IVADs and / or any VAD for haemodialysis purposes									
$\infty$	Requires an independent double check (IDC) by an RN									
		Sem 3	4	CPE 2	5	6	CPE 3	7	8	
Anticoagu	ılants (Oral & Parenteral)	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	
Insulin		DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	
All meds i	in Labour & Delivery	Х	Х	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	
STAT me	dications	Х	Х	Х	Х	Х	Х	Х	Х	
Student B	Blood Transfusionist	Х	Х	Х	DS	DS	DS	DS	DS	
Fentanyl	patches	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	
Methadon	ne	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	
PVAD sho	ort fluch	DS	SI◊	SI◊	SI◊	SI◊	SI◊	SI◊	SI◊	
F VAD SIIC	ort nusir	D3	Si∨	31 ∨	Si∨	31 ∨	310	31 ∨	310	
IV meds -	- minibags									
	ort locked	Х	DS	DS	SI♦	SI◊	SI♦	SI◊	SI♦	
PVAD & C	CVAD <b>infusing</b>	Х	DS	DS	SI♦	SI♦	SI♦	SI♦	SI♦	
CVAD * Id	ocked	Х	DS	DS	DS	DS	DS	DS	SI◊	
high alert ketamine,	(IV, SC, epidural) on adults-of meds (chemo, heparin, magnesium sulfate, opioids, PCA, 3%NaCl, local cs, insulin	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	
IV meds -	- direct (aka push)									
PVAD Sh	• • •	Х	DS	DS	DS	DS	DS	DS	SI♦	
PVAD & 0	CVAD infusing	Х	DS	DS	DS	DS	DS	DS	SI♦	
CVAD* ca	apped / locked	Х	DS	DS	DS	DS	DS	DS	SI♦	
IV site dr	essing changes									
	<u> </u>									

PVAD short	DS	DS	DS	SI	SI	SI	SI	SI
CVAD (percutaneous non-hemodialysis) *	DS	DS	DS	SI	SI	SI	SI	SI
CVAD (PICC)	Х	Х	Х	DS	DS	DS	DS	SI
IV-line changes								
PVAD & CVAD* tubing changes up to the needless cap	DS	DS	SI	SI	SI	SI	SI	SI
PVAD & CVAD* tubing change including the extension tube & needless cap	Х	DS	DS	DS	SI	SI	SI	SI
Transcribing and checking orders	Х	Х	Х	DS	DS	DS	DS	DS
Renal Lines - needling	Х	Х	Х	Х	Х	Х	Х	DS C
Insert PVAD short	Х	Х	Х	Х	Х	DS C	DS C	DS C

#### **Medication Administration**

#### **Students are Not Permitted to:**

- Verify the dosage or witness a medication administered by a RN, LPN, student nurse, or other health care provider.
- Conduct an independent double check (IDC) of high alert medications
- Witness narcotic wastage.
- Do an official narcotic count.
- Pick up controlled drugs from the pharmacy.
- Administer any medications ordered "STAT" including PO, Subcutaneous, IM or IV
- Give medications via epidural.
- Set up, change syringe /bag, or adjust settings on PCA or Epidural infusion pumps.
- Administer anti-neoplastic medications intravenously.
- Perform <u>BCCNP Section 8 Restricted Activities for Certified Practice</u>

#### **Medication Administration Limits and Conditions**

- Prior to administering the initial dose (ID) of a medication, students are expected to check the original physician's order against the client's Medication Administration Record (MAR) for accuracy and RN /LPN verification (verification dependent on agency policy). ID - is the initial dose the client receives of a particular medication in a hospital/agency, not the first time the student gives a medication.
- Nursing faculty members or RN preceptors must supervise the preparation and administration of all medications, fractional doses, narcotic or controlled drugs, insulin, anticoagulants and other high alert meds as per legislation and IH policy/protocol until the nurse educator or RN preceptor feels the student has successfully demonstrated competency. (IH AU1100)

- Medications dependent on laboratory values must have the dose verified by nursing faculty member or supervising staff member. (IH AU1100)
- A student cannot conduct independent double checks on high alert meds
- Co-signing if required to indicate that an action was done and carried out correctly cannot be done by another student. (IH AU1100)
- With every medication administration, two unique patient identifiers must be used (IH1500). Acceptable patient identifiers are full name, date of birth, personal health number. Room/ bed number is not acceptable. (IH AU1100)
- Students may not routinely carry the narcotic keys when not directly using them. (IH AU1100)
- Students may engage in dispensing medications under the supervision of an RN IH AU 1100)

#### Limits and conditions for specific populations (source: IH Policy AH 1600)

#### **Neonatal Patients**

**Note**: Newborns require specific unique identifiers - see Policy AH1600 - *Identification of Newborns. Students must follow the IDC procedure for:* 

- All medications
- All vitamins
- Expressed breast milk
- Parenteral nutrition

#### **Pediatric Patients**

Students must follow the IDC procedure for:

- all anticoagulants
- all cardiac medications
- all controlled drugs (e.g. opioids, benzodiazepines, ketamine)
- all electrolytes
- all hypoglycemics (insulins and oral hypoglycemics)
- IV medications (prepared by RN)
- parenteral nutrition

#### **Narcotic Administration Limits and Conditions**

- When a fractional dose of a controlled drug is prepared by a student, the discarded portion must be witnessed by a RN or faculty member. Students are not permitted to be the witness
- 'Unofficial' narcotic counts may be done by students, but must be followed by regular endof-shift narcotic counts by agency employees (usually RN or LPN).

## Intravenous Therapy Limits and Conditions

- Students are **NOT permitted** to give stat or urgent medications via IV direct (push)
- Saline & heparin syringes (vials) must be confirmed by the faculty member or RN prior to flushing and cosigned
- For all IV direct (push) medications, the student and the faculty member or RN preceptor will:
  - check the medication administration record to establish the time the last dose was administered
  - o confirm the container from which the medication was drawn and the dosage
  - o go to the bedside and verify the identity of the patient
  - verify the above steps were followed by co-signing the medication administration record
  - The exception to this is in Semester 8 the student may administer IV direct meds independently after the MAR, drug and dose have been verified by the RN and after the RN has assessed the student to be competent.
- IV insertions. Beginning in CPE 3 students:
  - o may insert PVAD short cannulas after they have completed the workshop, successfully passed an IV theory guiz and supervised psychomotor practice
  - o Will be directly supervised by an RN or faculty member for all IV insertions
  - o Are only allowed two (2) attempts at initiating an IV a with each client
  - Students are not permitted to start an IV on children under the age of 5
- Please note agency policy(s) around IV therapy, IV insertions, care of CVADs varies between agencies and health authorities. As such the student must make themselves aware of and follow the policies set out by each agency they practice in.

# **Blood Component Administration – Limits and Conditions**

Beginning in Semester 5, RN students may participate in transfusion practices (i.e. provide general care, monitor vital signs) if they:

- Have completed the theory in their education program
- Have previously practiced the skill in the lab or clinical setting
- Are deemed competent by the RN responsible for regulatory supervision

Student RNs: provided the above conditions are met are permitted to:

- Transport blood components / blood products
- Monitor a stable patient during transfusion

Limitation: student RNs cannot be the 2<sup>nd</sup> person verifier

# Immunizations Given by Student Nurses (Incorporates IH Policy AU1100 – 2015)

Due to limited time in public health practicum settings, the increasing complexity of scheduling and the challenges of administering new vaccines:

Students may provide single dose (containing one or more antigens) immunizations
to adults and children five years of age and older (see limits below) if the student has
been deemed competent (has the knowledge and skill) either by the faculty member

or the clinical practice site. Providing immunization to infants, children less than five years old and special populations involves complex scenarios that require a more inclusive level of competency. Therefore, because of the time required to demonstrate competency for this immunization practice, students will not be permitted to immunize infants, children less than five years old and special populations.

- Students can give single dose immunizations to children in elementary and secondary school settings under the supervision of their PHN preceptor. Students must complete immunization education prior to administering immunizations in the school setting as determined by the health authority.
- For students in Interior Health settings see IH requirements in the conditions below. IH Limits:
  - Students do not provide immunizations to children under five years of age with the exception of BScN students within the IH Promotion & Prevention Program who may provide single dose immunizations to clients four years of age and older.
  - BScN students may provide single dose immunizations to IH Promotion & Prevention program clients identified as Select Populations in Section III -Immunization of Special Populations, item 3.0.
  - Students do not provide immunizations in the IH Workplace Health and Safety (WHS) staff immunization or peer immunization program.

### **IH Conditions:**

- Students must successfully complete the British Columbia Centre for Disease Control Immunization Competency (BCCDC) course prior to providing immunizations to IH Promotion and Prevention Program clients
- Students may provide single dose immunizations to IH Promotion & Prevention Program clients identified as Select Populations in Section III - Immunization of Special Populations, item 3.0.
- Students can give single dose vaccines to adults, such as Td and pneumococcal, with preceptor support.
- o Students can administer and read Mantoux tests, with preceptor support
- Immunizations will be documented on the electronic Panorama documentation system. Students will follow the Interior Health policies for electronic documentation.
- For students in health authorities outside of Interior Health follow the health authority
  policies and procedures for student administration of immunizations. If the policies are
  not available or are not written continue to follow the above TRU SON policy based
  on approved policy from Interior Health.

#### **Miscellaneous Practice Policies and Guidelines**

- Students may witness Admission to Hospital Consents, Privacy of Information Consents as well as Patient Effects and Valuables documents.
- Verbal or Telephone Orders from authorized professionals\* may be accepted beginning in CPE 3 and only in the following circumstances:

- The situation and patient circumstances necessitate it (i.e. there is no other option)
- The faculty member or RN preceptor/field guide hears the order directly as well (via speaker phone, 3-way teleconferencing, or in person).
- The RN verifying the order co-signs the order.
- \* Health professionals listed to give orders to registered nurses under the Health Professions Act are dentists, midwives, naturopaths, physicians, podiatrists, pharmacists, certified practice Registered Nurses and Nurse Practitioners.
- Beginning in CPE 3, students may transcribe and/or check orders when:
  - o they are directly supervised by a nurse educator or RN preceptor/field guide
  - the work is checked for accuracy by the nurse educator or RN preceptor/field guide.
  - o the orders and/or MAR's are checked and initialed as correct by the nurse educator or RN preceptor / field guide.
  - Students must have unit dose medication administration records co-signed as correct.

#### **Naloxone Administration**

Please be advised that in response to the current opioid overdose public health emergency, all School of Nursing students have had the following change in their scope of practice:

All School of Nursing students are permitted to administer STAT naloxone in <u>community</u> practice settings to clients with suspected opioid overdose. Students must have completed the SON approved training and follow practice agency policy and protocol in order to administer naloxone.

#### Of Note:

- This policy has been designed primarily to address student practice in community settings and is therefore not applicable to the acute care setting
- Students in practice settings are to administer naloxone provided by the practice agency only
- Students wishing to obtain a personal THN kit can present their certificate of completion to the Wellness Centre, however; are not to use this kit in the practice area
- SON approved training can be found at: http://www.naloxonetraining.com/training
- ➤ Training takes approximately 15-20 minutes to complete and is to be done on student's own time (clinical time is not granted for this). Please print a certificate of completion at the end.

#### **Student Responsibilities:**

Complete the SON approved training and print off certificate of completion (all current semester 3-8 students)

- Present your certificate of completion to your clinical instructor on your first day of orientation
- > Be informed of all practice agency policies and protocols related to naloxone administration and operate within these policies

#### **Faculty Member Responsibilities:**

- Complete the SON approved training
- Check all students' certificates of completion on the first day of orientation
- Be aware of all practice agency policies and protocols related to naloxone administration and communicate this to students

## **Library/Resources of Practice Agencies**

Students must have the expressed permission of the agency in order to borrow resources and/or use photocopiers.

# **Health and Safety Policies**

## Fire Emergency

In the event of an emergency evacuation/fire alarm DO NOT PANIC. Evacuate the building, following the instructions given by the designated fire warden and/or alternate. More information is available at <a href="https://example.com/TRU Fire Emergency Procedures">TRU Fire Emergency Procedures</a>

## TRU Respectful Workplace and Harassment Policy – ADM 06-0

At Thompson Rivers University (TRU) we believe that all employees and students have a right to work and study in an environment that asserts and supports their fundamental rights, personal worth, and human dignity. Under the B.C. Human Rights Act, every person has the right to freedom from harassment, and TRU acknowledges its responsibility in protecting this freedom. TRU will not tolerate harassment in any form, and considers it to be a serious offence subject to a range of disciplinary measures.

If students, faculty, or staff believe they are being harassed, contact the TRU Harassment Advisor (Local 5800).

More information is available at <u>TRU Respectful Workplace and Harassment Prevention</u> <u>Policy</u>

#### WorkSafe BC

Students enrolled in Nursing Practice courses are covered by WorkSafeBC in British Columbia under the *Worker's Compensation Act*.

Students in practice at agencies located outside of BC are NOT covered by WorkSafeBC. However, each province has the *Worker's Compensation Act* that covers accidents to workers. TRU has a Student Accident Insurance Plan plus you should make

arrangements for additional insurance independently when you have a practicum outside of BC.

# Injury or Incident during Practice or in the Nursing Resource Centre

A work-related injury, incident/disease is one that arises out of and in the course of employment (students in practice courses) or is due to the nature of employment. For a disease, this means that the disease contracted must be caused by the work or the work environment in order to be covered by *WorkSafeBC*. This includes blood borne pathogen or body fluid exposure.

# Reporting an Injury, Incident, Blood Borne, or Communicable Disease Exposure:

Any injury, incident, blood borne pathogen, or communicable disease exposure that results in a worker (student or faculty) receiving medical attention or time-loss from work must also be reported to *WorkSafeBC*.

If a worker (student) is injured on the job (in practice), the worker (student), employer (TRU), and the worker's treating physician **MUST** report the injury or incident to *WorkSafeBC* and TRU Occupational Health & Safety (OHS) within 3 business days.

- 1. An injury, incident, blood borne, or communicable disease exposure needs to be reported to the faculty member immediately
- 2. Seek immediate treatment if necessary. The student can go to the Emergency Department or a physician's office/clinic. Inform the physician that this is a work-related injury, incident, or exposure.
  - \*\*\* A needle stick or blood splash incident must be reported to the Emergency Department ASAP. If there is a high risk of being infected with a blood borne pathogen, treatment must be started within 2 HOURS of exposure\*\*\*
- 3. The faculty is to inform the BScN Chairperson of the incident as soon as possible.
- 4. Forms need to be completed <u>within a specific time frame</u> and submitted to specific personnel. Copies of all forms need to be included in the student's file and forwarded to the BScN Chairperson

# **Blood Body Fluid Exposures (BBFE)**

**Definition:** An employee or student/faculty with:

- A parenteral exposure (e.g., needle stick or cut) or mucous membrane exposure (e.g., splash to eye or mouth) to blood or other body fluids.
- A cutaneous exposure to blood or body fluids when the exposed skin is broken, cracked, abraded or afflicted with weeping or open dermatitis.

In the event of a BBFE students/faculty working in Interior Health facilities are to follow the following steps immediately. Students working outside of IH must consult the agency policy and procedure for exposure to blood borne pathogens. The following guidelines reflect the Center for Disease Control and IH Workplace Health and Safety Policy and guidelines

## TRU Reporting: http://www.tru.ca/hsafety/incident\_reporting.html

If a student injures themselves and / or is exposed (i.e. BBFE, TB etc.), the student (with help from faculty) must:

- 1. Complete Worksafe BC Form 7- Apprenticeship/ Practicum Report of Injury or Occupational Disease.
- 2. Complete the TRU Incident Report form
- 3. Complete the SON Unusual Occurrence Form (Appendix E)
- 4. Scan & send copies of Worksafe BC Form 7 & TRU incident form to:
  - Gord Maurits, OH&S <u>gmaurits@tru.ca.</u> <u>Within 3 days.</u> He will report any student injury / incidents to the Ministry of Advanced Education who will send to *Worksafe BC*. This will allow any follow up costs to be covered for the student in the event further treatment needs to happen
  - Scan & send copies of all 3 forms to the BScN Chairperson
  - Ensure a copy of the unusual occurrence form is included in the student's file.
- 5. Provide the student with a copy of any documents sent on their behalf
- 6. Inform any care providers that this is a work-related injury/incident/exposure

If a faculty member injures themselves and / or is exposed (i.e. BBFE, TB etc.), they must:

- Complete <u>Worksafe BC Form 6A: Report the injury/incident/exposure</u> (in addition to the above)
- Complete the TRU Incident Report form
- Forward these forms to <a href="mailto:gmaurits@tru.ca">gmaurits@tru.ca</a> within 3 days.
- Inform any care providers that this is a work-related injury/ incident/exposure
- Inform the BScN chairperson
- 1. Seek assistance from fellow staff member if necessary.
- 2. Apply immediate first aid:
  - a. Reduce contamination by washing the wound with soap and water or flushing blood from eyes, mouth or nose with large amounts of clear water.
  - b. If blood gets on the skin but there is no cut / puncture / abrasion, just wash thoroughly with soap and water. This is not considered an exposure and no report or follow-up is necessary.
- 3. Immediately report the incident to your faculty (or unit manager/preceptor if appropriate)
- 4. Report to Emergency. You will need the client's full name, patient's PHN and birth date.

In the ER, the student may have bloodwork drawn and / or be counselled regarding post exposure prophylaxis / anti-retroviral therapy. Please note: To be most effective this therapy must be started within 2 hours of exposure.

- 5. The nurse in charge / case manager will:
  - Complete a source risk assessment (In IH, the form is available on InsideNet
  - Obtain source consent for blood work (if source is known and / or available)
  - Document the source's consent for bloodwork / completion of bloodwork
  - Forward the risk assessment to the Emergency department where the student is reporting.

#### Sources:

http://insidenet.interiorhealth.ca/infoResources/forms/Documents/807471.pdf

Practice Education Guidelines for BC: Workplace health and safety

## Reporting/Recording Unusual Occurrences Involving Client Safety

Any student who is responsible for, witnesses, discovers an unusual occurrence involving client safety, including medication errors or unsafe practice on any unit, is required to complete an agency unusual occurrence form (sometimes called an incident report or patient safety learning event) as well as any required TRU forms. To ensure that learning happens, the student along with the nurse educators, are to:

- explore potential causes of error and its relevance to current educational practice
- explore strategies in order to prevent a reoccurrence of the error, if applicable In the Event of an Unusual Occurrence / Incident in a Health Agency (Including Medication Errors)

#### The Student will:

- Ensure client safety (Examples: assess vital signs/neuro signs, physical wellbeing, etc., assess for medication adverse reactions, assess client for any untoward outcomes as a result of the unusual occurrence) and follow agency policy for reporting and follow up of events
- Notify the nurse educator and the responsible RN / LPN as soon as possible
- Notify the physician responsible for the involved client.
- With the assistance of faculty complete the necessary agency forms:
  - In IH this is referred to as a 'Safety Event Report'. It is part of the provincial Patient Safety & Learning System (PSLS).
  - TRU School of Nursing Unusual Occurrence Report form. (See Appendix
     E). Include the PSLS report number
  - Ensure that the appropriate agency personnel are aware of any follow-up.

#### The Nurse Educator will:

- Assist the student to ensure client safety and to follow agency policy for reporting and follow up of events
- Support the student to notify the RN/ LPN / PCC / manager and/or physician, as necessary.
- if necessary direct students to TRU counselling services
- Assist the student in filling out forms

- o In IH this is referred to as a 'Safety Event Report'. It is part of the provincial Patient Safety & Learning System (PSLS).
- TRU School of Nursing Unusual Occurrence Report form. (See Appendix E). Include the PSLS report number
- Sign / witness the agency & SON forms indicating awareness of unusual occurrence. There is space in the PSLS reporting system for the faculty member's name
- Report any serious incidences / multiple medication errors to the Chairperson, Nursing.

Students who have safety concerns while in the community are encouraged to leave the situation immediately, and to follow up with their preceptor and nurse educator.

# **SON Student Activities and Organizations**

## **Nursing Undergraduate Society (NUS)**

The NUS is the nursing student government. The NUS executive and class representatives demonstrate leadership and commitment to the organization of activities for the benefit of all nursing students.

The purpose of the NUS is to:

- 1. Provide a means for effective participation and implementation of nursing student affairs at TRU
- 2. Provide an official and responsible student organization with the purpose of participating in decisions affecting nursing students at TRU
- 3. Encourage interaction and communication amongst the various semesters
- 4. Promote educational and social activities of the nursing student body

The executives of this society are called the Student Board. This Student Board consists of a president, vice-president, treasurer, secretary, representatives from each of the eight semesters, and a representative faculty member. Please see:

https://www.tru.ca/nursing/students/currentstudents/nus.html

## **Canadian Nursing Student Association**

The Canadian Nursing Students Association (CNSA) is the national voice of Canadian nursing students and is an affiliate member of the Canadian Nurses Association (CNA). CNSA is actively dedicated to the positive promotion of nursing and as a member you have an opportunity to interact with other nursing students on educational, professional, and social levels. All BScN students at TRU are members of the CNSA.

# **School of Nursing Committees**

Student participation is welcomed and encouraged on SON Committees. Students will be notified of vacancies on SON Committees in September and as positions become available.

Examples of various committees include:

#### **Curriculum Committee**

This is the first-place program/curriculum issues may be considered. It is advisable that students write letters to the committee or request time with the committee to make presentations on issues relevant to curriculum.

# **Program Evaluation Committee**

The mandate of this committee is to collect information about the BScN program at various points in the program from a variety of sources. This includes students, employers, preceptors, clients, and graduates. This data is analyzed and used to inform changes to the curriculum, and it is used to guide us in achieving the standards for

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program recognition by BCCNP and for accreditation from the Canadian Association of Schools of Nursing. BCCNP Program Recognition is required. CASN Accreditation is a voluntary process.

### **Nursing Council Committee**

Faculty Council is the governance body for the TRU School of Nursing. The purpose of Faculty Council is to provide a forum for school wide dissemination of information, discussion, and academic decision-making related to the governance and management of the SON and its activities. The Council is governed by TRU policies. Student representatives, two per academic year, are voting members of the Council. Student representatives are selected through TRUSU each year. TRUSU will send out information about the opportunity and contact details for questions.

### **School of Nursing Advisory Committee**

This committee is made up of stakeholders (employers, nurses, and students) and serves to provide the SON with information about societal and health trends that shape the offering of the TRU Nursing Program. There is one student representative that is appointed by the President.

## **School of Nursing Student Research Ethics**

(Revised May 2020)

Nursing students are responsible for adhering to the standards for ethical research as outlined in the Tri-Council Policy Statement 2 (TCPS-2): Ethical Conduct for Research Involving Humans. The TRU Research Ethics Board (REB) is responsible for approving research proposals involving humans. As well, in September of 2019 TRU joined the Research Ethics BC Harmonization Project to better help researchers and students with ethics applications that involve more than one university and/or health authority. With one ethics application researchers and students can obtain ethics approval from multiple ethics boards at once by using the UBC RiSE application system. This process is part of the BC AHSN network and Research Ethics BC.

#### **TCPS-2 Tutorial Certification**

All students considering research activities involving humans must complete the TCPS-2 Tutorial. This activity can be found at the following website: <a href="http://www.pre.ethics.gc.ca/eng/education/tutorial-didacticiel/">http://www.pre.ethics.gc.ca/eng/education/tutorial-didacticiel/</a>

A copy of the student's Certificate of Completion of the TCPS-2 tutorial is to be placed in the student's file in the SON office.

### **Cultural Safety and Research**

Past research practices involving Indigenous people have not always been addressed from a place of respectful relationships and as such promoted distrust between researchers and Indigenous Peoples (TCPS-2, 2010). Increasingly First Nations, Inuit, and Métis engage in research as members of particular communities, or as academics. The TCPS-2 offers several principles to guide researcher considerations when engaging in knowledge development and distribution concerning Indigenous Peoples such as respect for persons, concern for welfare, and justice. These principles are intended to guide a researcher and not override specific community guidelines that exist or develop as a result of research engagement. Engagement, collaboration, and building of reciprocal relationships that foster trust and understanding are key qualities in developing research relationships that abide by Indigenous knowledge development and dissemination principles (TCPS-2). Chapter 9 of the TCPS-2 provides several guidelines to facilitate research conversations with Indigenous communities. Student researchers are to review this chapter in order to increase their understanding and ability to apply an ethical framework in Indigenous context. See an also: http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/chapter9chapitre9/#toc09-1

## **Course Ethics Approval Process for Student Research Activity**

Faculty member will apply to the TRU REB for course ethics approval for students to engage in research that is likely to involve humans, such as Nursing 3510. Electronic applications are available to the Romeo database (see

https://www.tru.ca/research/research-services/romeo.html). Course ethics approval is normally valid for one year. When course ethics approval is gained, faculty member members are responsible for ensuring that students adhere to the TCPS-2. The TRU REB must be informed of any changes to the course ethics application (e.g. names of faculty member teaching the course) by completing an amendment on Romeo.

Students involved in a research project as part of course work must complete and submit the appropriate ethics forms as applicable to the research to the course teacher for review and signed approval. Please refer to the Research and Graduate Studies website (see <a href="http://www.tru.ca/research.html">http://www.tru.ca/research.html</a>) for sample forms, including the Participant Feedback form.

#### Students must also complete:

 A SON "Agency/Institutional Ethics Review Policies/Procedures and Student Projects Involving Humans" form is required if research is being conducted under the auspices of an agency/institution beyond TRU (see Appendix C).

Before students begin data collection, it is the responsibility of the faculty member teaching the course to ensure the students' research activities:

- Are minimal risk;
   If the faculty member is unsure about the level of risk, he/she should consult the TRU REB. If the activities are deemed likely to be more than minimal risk, e.g. if they involve vulnerable populations, students will be required to apply to the TRU REB for a full ethics review and approval.
- Have appropriate informed consent;
- Address assurance of confidentiality and anonymity and include an explanation of the rationale if anonymity cannot be guaranteed;
- Include plans for appropriate management and secure storage of data;
- Include plans for confidential destruction of data and related information;
- Use appropriate methodologies that are ethically sound; and
- Consents are to be securely stored for five years. If, however, research is conducted under the auspices of another agency such as Interior Health, plans for retaining data and consents are to be described in the original application to the TRU REB for ethics approval or in an amendment to the TRU REB.

## **Student Ethics Approved Research, Outside Course Activity**

When research is undertaken in courses without course ethics approval, nursing students are required to follow the TRU REB protocol and submit an ethics application via Romeo (<a href="https://www.tru.ca/research/research-services/romeo.html">https://www.tru.ca/research/research-services/romeo.html</a>). Students are to identify their faculty member supervisor who normally would be the course instructor.

On occasion, nursing students may be interested in collecting information from other students, faculty member, or practice professionals that is unrelated to courses to help make evidence-informed decisions about policy or practice. Data collection that involves humans, such as distributing surveys or questionnaires, or organizing focus groups or

other data collection activities must meet the TCPS-2 for ethics approval or exemption. If in doubt about the need for ethics approval, consult the TRU REB Chair or TRU Ethics and Compliance Officer in the Research and Graduate Studies Office (see Appendix C for additional information). When ethics approval is required, data collection <u>must not proceed</u> prior to approval.

### Reporting/Documenting: Evidence of TCPS-2 Compliance

Documents providing evidence of compliance with the TCPS-2 and, when applicable, with the TRU-REB, must be readily available in the SON.

Students are to ensure that the certificate of completion of the TCPS-2 tutorial is added to their Student File in the SON office.

Full-time faculty member are expected to retain the data and confidential information for each research activity in a secure place in the SON. Sessional and part-time faculty member are to give this data and confidential information to the senior full-time faculty member in the course or, in the absence of a full-time faculty member, to the Chairperson. This data and confidential information is to be kept for one year from the end of the semester in which this research was conducted, and then confidentially destroyed.

Consents are to be securely stored for five years, as stated above. If, however, research is conducted under the auspices of another agency such as Interior Health, plans for retaining data and consents are to be described in the original application to the TRU REB for ethics approval or in an amendment to the TRU REB.

Faculty members with courses that require ethics approval must complete an annual report of student research conducted within the course and submit this information on Romeo to the TRU REB.

## Appendix A: TRU SON General Marking Criteria for Scholarly Papers

### A Paper:

In summary, an **A paper** is work of exceptional quality that demonstrates excellent comprehension of topic, sound critical thinking, and considerable effort and personal involvement with the topic. An A paper demonstrates the following qualities:

- The paper is very well organized;
- Topic is clearly defined and the writing flows easily with logical sequencing of points/issues;
- The content is tightly focused on the topic;
- The content includes clearly defined and accurately used relevant definitions;
- Excellent use of relevant literature is included and there is evidence of initiative and industry in reading background (original sources, recent and relevant research, critical essays);
- The topic is broadly perceived in relation to the nature of the assignment; manifests that the writer is well informed; reflects intellectual curiosity;
- Theoretical data/material is clearly used and effectively presents viewpoint;
- Conclusions and inferences are clearly established, appropriate and justified by data presented or reference used;
- Format is consistent and appropriate throughout;
- Writing is tightly constructed, clear, with not pretentious phrasing, is non-repetitive, well-edited, with pertinent examples;
- Correct APA style with good integration and accurate documentation of references, and
- Punctuation, spelling and grammar is problem-free.

#### B Paper:

In summary, a **B paper** reflects good quality work with no major weaknesses. There is evidence of critical thinking, adequate comprehension, and personal involvement in the work. The following qualities represent a B paper.

- The paper is quite well organized;
- The topic is adequately defined and the writing generally flows easily with logical sequencing of points and issues;
- Content is focused on topic;
- · Critical definitions are included;
- There is good use of relevant resource materials;
- Topic is more narrowly perceived but the subject/topic is adequately covered;
- Generally, uses theoretical data appropriately in developing the paper; somewhat less scope in theoretical and/or conceptual support;
- Conclusions/inferences generally supported by appropriate data;
- Format is generally appropriate;

- The paper is generally well constructed;
- Correct use of APA style with reasonably good integration and accurate documentation of references, and Punctuation, grammar and spelling are generally good.

#### C Paper:

In summary, a **C paper** reflects adequate or average work, a fair level of comprehension of the topic but some weaknesses in content. There is minimal evidence of critical thinking, personal involvement with the topic, and use of the literature. The following qualities represent a C Paper:

- There are some problems with the organization of the paper;
- There are weaknesses in the sequencing of points/issues with missing linkages between and within paragraphs;
- Some of the content is off topic but in general remains focused;
- Some relevant definitions are missing;
- There is either limited use of relevant literature or over-use of references;
- There is evidence of a more superficial approach to the assignment, with a fair coverage of the topic but a tendency to only touch on some ideas (detail lacking);
- There is evidence of the use of theoretical data but application is unclear or inaccurate in some areas;
- Some conclusions and inferences are inadequately supported by the data/references;
- Format is generally adequate with some inconsistencies;
- Problems with over-repetition of ideas, inadequate examples, some areas lack clarity;
- Occasional problems with APA style and integration/documentation of references, and
- A few problems in punctuation, spelling, and/or grammar.

#### D and F papers:

In summary, D or F papers are seriously flawed and have no evidence of critical thinking or understanding of the topic. There is usually incorrect or absent information, little evidence of research and/or adequate use of the literature, multiple punctuation, grammar, APA, and spelling errors, as well as poor overall structure.

## **Appendix B: TRU SON Expectations and Guidelines Relating** to APA Style for Student Scholarly Papers

TRU School of Nursing requires the use of the American Psychological Association (APA) style for written assignments. Students are to refer to the <u>Publication Manual of the American Psychological Association</u> (APA) for information regarding how to organize a scholarly paper, express ideas, reduce bias in writing, use correct grammar and punctuation, how to cite references within the text of a paper, and how to create a reference list.

The information found in this handout identifies TRU SON acceptable modifications to **7**<sup>th</sup> **edition** of the APA Manual and a few pointers to get students started. Students should refer to specific Course assignments for specific APA requirements. Students should know that APA information is available through a text book and many free on line abbreviated resources including some from the <u>TRU library</u>. Below are some general instructions to get you started.

#### 1. General Instructions

- Papers must be typed with a consistent font throughout the paper. Font can include any of the following: 11 pt. Calibri, 11 pt. Arial, 10 pt. Lucinda Sans Unicode, 11 pt. Georgia, 12 pt. Times New Roman, or 10 pt. Computer Modern.
- 2.5 cm (1 inch) margins on all sides.
- Double-space throughout the paper including the title page and reference list
- The title page should seven pieces of information: title of the paper (bolded), author(s) full name(s) and / or student identification number, institutional affiliation, course name and number, instructor's name, assignment due date. Refer to title page example in this Appendix.
- Page numbering begins on the title page in the upper right-hand corner.
- APA Style and grammar guidelines can help you figure out how to use commas, hyphenation, spacing after a period
- See sample student paper

#### 2. Headings, Abstracts and Table of Contents

- If <u>headings</u> are required in your paper, remember they serve as an outline for the reader. The length and complexity of your paper will determine the number of headings used.
- All topics of equal importance have the same level heading throughout the paper.
- The introduction section of the paper does not require a heading as the title of the paper is assumed to be the introductory heading.
- Abstracts are not required unless they are specifically asked for in the in assignment criteria.
- Table of Contents are not required unless specifically asked for in the assignment criteria. The APA Manual does not include formatting for Table of Contents. Refer to the example in this Appendix for formatting.

 Thompson Rivers University Library. APA 7<sup>th</sup> Edition in Nutshell https://libguides.tru.ca/ld.php?content\_id=35139598

#### 3. In-text Citations

- An easy way to decide if you need to provide a citation is: If its not your idea, it needs referencing.
- When directly quoting another source, use double quotation marks around the text, and include the author, year, and page or paragraph number in parenthesis at the end.
- If the quote is 40 words or more, block the quote and omit the quotation marks.
- If paraphrasing an individual's work, quotation marks are not required, however the author and year are necessary.
- When there are 2 authors, use "and" in text and "&" inside parentheses. For example: Kerry and Jones (2007) noted... but ... The results indicated a significant relationship (Kerry & Jones, 2007).
- If there are 3-5 authors, name all of the authors the first time the reference is used. Subsequent citations only require the first author followed by "et al." and a year.
- If there are 6 or more authors cite only the last name of the first author followed by "et al." and the year.
- When a publication date is not available, write n. d. in parenthesis after the author(s).

#### 4. Reference List

- Order references alphabetically by authors surname
- The first line of the reference source is aligned with the left margin. The second and subsequent lines of the reference source are indented 2.5 cm.
- All sources cited within the paper must be included in the reference list.
- If you are using multiple works from the same author, the date of publication determines the order in the reference list. The earliest publication is listed first.
- electronic sources each require specific referencing and is different from print sources.

#### 5. Appendices:

- If using an appendix, it must be correctly cited and discussed in the body of the paper.
- Page numbering continues throughout the appendices.
- See Sample Table of Contents re format for listing Appendices in the Table of Contents page.

#### Reference

American Psychological Association. (2020). *Publication Manual of the American Psychological Association* (7<sup>th</sup> ed.). American Psychological Association.

### Sample Table of Contents

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Please note not all papers will require a Table of Contents. Please	

Please note not all papers will require a Table of Contents. Please refer to your faculty member's instructions for the assignment. If a table of contents is required, note the indentation of items. Likely they follow along with the different levels of headings you've chosen for your paper.

## **Appendix C: School of Nursing Student Research Ethics**

- 1. Algorithm for TRU School of Nursing Student Research Ethics Reviews
- 2. Agency/Institutional Ethics Review Policies/Procedures and Student Projects Involving Humans, Vulnerable populations, First Nations, Inuit, and Metis Peoples of Canada

(Revised May 2020)

Excerpts from the Tri-Council Policy Statement 2: "Ethical Conduct for Researchers Involving Humans" (2010).

The purpose of this document is to promote student and faculty member awareness of when ethics approval for student activities IS needed and when ethics approval IS NOT needed. At times this line is blurred.

There is an on-line introductory tutorial available at <a href="http://www.pre.ethics.gc.ca">http://www.pre.ethics.gc.ca</a> that provides information on the Goals of the Human Ethics policy, and the Context of an Ethics Framework (including the first five sections: Ethics Review; Free and Informed Consent; Privacy and Confidentiality; Conflict of Interest, and Inclusion in Research).

In addition, the Guidelines for Health Research Involving Aboriginal Peoples' is located in Chapter 9 of the Tri-Council Policy Statement 2: Research Involving the First Nations, Inuit, and Metis Peoples of Canada. The following citations from the Tri-Council Policy Statement: Ethical Conduct for Research Involving Aboriginal Peoples (2<sup>nd</sup> ed.) (TCPS-2) provide clarity:

This chapter on research involving Aboriginal peoples in Canada, including Indian (First Nations<sup>1</sup>), Inuit and Métis peoples, marks a step toward establishing an ethical space for dialogue on common interests and points of difference between researchers and Aboriginal communities engaged in research.

First Nations, Inuit and Métis communities have unique histories, cultures and traditions. They also share some core values such as reciprocity – the obligation to give something back in return for gifts received – which they advance as the necessary basis for relationships that can benefit both Aboriginal and research communities.

Research involving Aboriginal peoples in Canada has been defined and carried out primarily by non-Aboriginal researchers. The approaches used have not generally reflected Aboriginal world views, and the research has not necessarily benefited Aboriginal peoples or communities. As a result, Aboriginal peoples continue to regard research, particularly research originating outside their communities, with a certain apprehension or mistrust.

The landscape of research involving Aboriginal peoples is rapidly changing. Growing numbers of First Nations, Inuit and Métis scholars are contributing to research as academics and community researchers. Communities are becoming better informed about the risks and benefits of research. Technological developments allowing rapid distribution of information are presenting both opportunities and challenges regarding the governance of information.

This chapter is designed to serve as a framework for the ethical conduct of research involving Aboriginal peoples. It is offered in a spirit of respect. It is not intended to override or replace ethical guidance offered by Aboriginal peoples themselves. Its purpose is to ensure, to the extent possible, that research involving Aboriginal peoples is premised on respectful relationships. It also encourages collaboration and engagement between researchers and participants.

For additional information please refer to the following website as well as consult with your faculty member:

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http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/chapter9-chapitre9/

The following excerpts from the *Tri-Council Policy Statement: Ethical Conduct for Researchers Involving Humans* (TCPS-2), (2010) may provide further clarity on this topic:

"Article 2.1, Application In some cases, research may involve interaction with individuals who are not themselves the focus of the research in order to obtain information. For example, one may collect information from authorized personnel to release information or data in the ordinary course of their employment about organizations, policies, procedures, professional practices or statistical reports. Such individuals are not considered participants for the purposes of this Policy. This is distinct from situations where individuals are considered participants because they are themselves the focus of the research. For example, individuals who are asked for their personal opinions about organizations, or who are observed in their work setting for the purposes of research, are considered participants" (p. 16).

"Article 2.5 Quality assurance and quality improvement studies, program evaluation activities, and performance reviews, or testing within normal educational requirements when used exclusively for assessment, management or improvement purposes, do not constitute research for the purposes of this Policy, and do not fall within the scope of REB review" (p. 20).

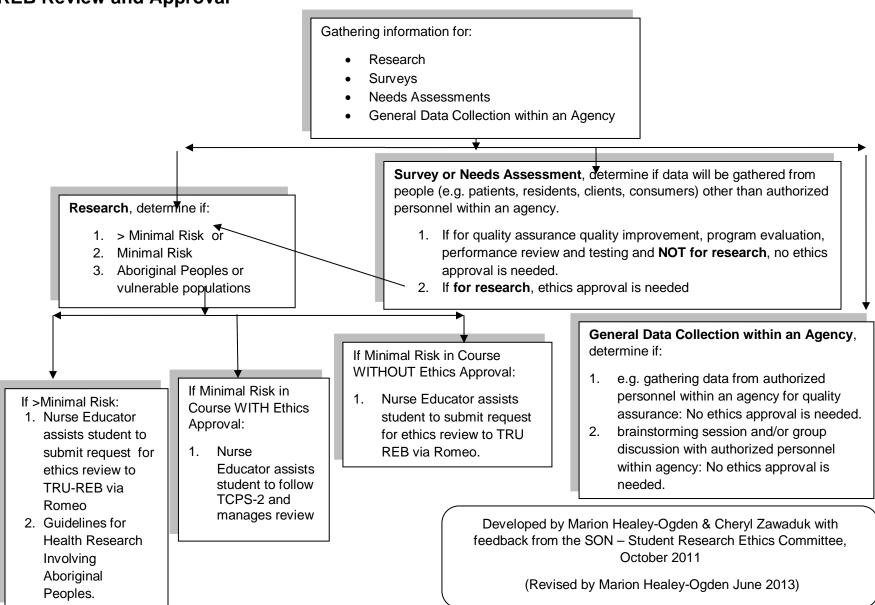
#### Reference:

Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada, *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans*, December 2010.

http://www.pre.ethics.gc.ca/pdf/eng/tcps2/TCPS\_2\_FINAL\_Web.pdf

Please see the Algorithm on the next page to assist in deciding if TRU REB approval will be required. If formal REB approval is not required, students are still required to demonstrate sound ethical practice as described in the TCPS-2.

## Algorithm REB Review and Approval





## Agency/Institutional Ethics Review Policies/Procedures and Student Projects Involving Humans

Before Nursing Students can engage in any primary investigations beyond the daily normal practice of nursing that requires their regular engagement with clients (including access to client records) they must obtain written permission from the agency to do so. Please review this form, and sign and return to the nursing student.

I am aware that the following student(s):
is/are under my guidance/direction while engaged in a project titled:
during the following time period:
This project requires direct participant investigation (through questionnaires, interviews, focus groups, review of confidential agency records, etc.).
I assume responsibility for seeking advice as to agency ethics review policies in relation to human participants and will advise students in writing of any criteria they must meet before engaging in the investigation.
Name
Position
Agency
Date

## **Appendix D: Learning Contracts - Guidelines for Implementation**

Written evaluations, in the form of practice appraisals, are the primary method of recording students' progression towards professional practice. However, from time to time, learning contracts are considered necessary by a faculty member to clearly communicate competencies of concern and clearly identify strategies to achieve quality indicators indicative of practice expectations for the course. The learning contract is one method designed to focus student and faculty member attention on practice competencies of concern and specific strategies to promote student achievement of the competencies.

#### **Process Guidelines**

- At the discretion of the faculty member, upon assessing student progress in practice, a learning contract (LC) may be initiated. The following are examples of reasons faculty may initiate a learning contract:
  - a. a high-risk or several low-risk incident(s) indicative of student performance that places clients at actual or potential risk;
  - b. a recurring pattern of unacceptable practice identified in previous practice appraisals;
  - c. below minimum student practice performance, or inconsistent performance, in one or several domains:
  - d. unprofessional behavior or actions that create either an unsafe or unsupportive learning environment.
- 2. Learning contracts may be initiated by the faculty member during a practice rotation or at the end of a practice rotation.
- 3. The faculty member will consult with the Chairperson prior to initiating a learning contract.
- 4. In writing the contract, the faculty member will identify the practice domains, competency(ies) and associated quality indicator(s) of concern from the course Practice Appraisal Forms (PAF's). It is advisable to list the <a href="BCCNP Standards of Practice">BCCNP Standards of Practice</a> or <a href="CNA Code of Ethics">CNA Code of Ethics</a> involved as appropriate.
- 5. Students have the right to invite a support person to be present during any formal practice appraisal sessions (end of practice appraisal interview, meetings to discuss learning contract) between students and the faculty member. Students are required to inform the faculty in advance of the meeting when the support person will be present.
- 6. Faculty members should make every effort to inform a student of the decision to initiate a learning contract prior to meeting to discuss learning contract competencies and strategies.

- 7. The faculty member and student develop strategies, in writing, intended to assist the student to become successful in practice during the allotted time frame.
- 8. The faculty member, in consultation with Program Chairperson, determines a timeframe in which the student ought to demonstrate competent practice.
- 9. The learning contract is signed and dated by both the student and faculty member and then placed in the student file. The student's signature on the learning contract indicates that the student is aware of the concerns. The student has an opportunity to provide written feedback regarding the contract, if desired.
- 10. A copy of the learning contract is given to the student and the Chairperson.
- 11. In rare circumstances a learning contract may be carried over into the next semester at the discretion of the Chair. The chair will notify the next semester faculty member.
- 12. If the learning contract is in place and the student is, or will be, with a nurse preceptor, the student along with the faculty member will discuss with the preceptor, the specific learning contract strategies to promote student success.
- 13. Students may appeal a grade through the office of Student Affairs. <u>Student Academic Appeals Policy</u> ED 4-0

# **Appendix E: TRU School of Nursing Unusual Occurrence Report**

\*This form must be completed by both the student and faculty member

		,		
1.	Describe the nature of the incident (e.g., med error; or client; physical, verbal, bullying, harassmen assault).			
2.	Describe the circumstances surrounding the event agency unusual occurrence form. Include factors causes for the error/incident, i.e., mitigating charassment, bullying or discrimination <a href="https://www.tru.ca/careers/hr/respectful-workplace">https://www.tru.ca/careers/hr/respectful-workplace</a>	identified as being possible circumstances. If this is a please refer to:		
3.	Faculty member's comments (e.g., student's attitude of responsibility and access of resources: reporting			
4.	Has the student been involved in previous unusuathe factors that contributed to the incident similar?			
5.	Suggested follow up action (e.g., counselling, further education, referral to TRU health services).			
6.	Student's comments:			
Da	ite of incident:			
Stı	Student's signature: Date:			
Fa	Date:			

N.B.: copies of this form will be given to the student , one placed in the student's file in the SON and if necessary a copy forwarded to OH&S at TRU