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### SECTION I: TEACHING STAFF

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<thead>
<tr>
<th><strong>Dean</strong></th>
<th><strong>Daniel Gagné</strong>, I.A., B.Sc.Inf. (Université du Manitoba), M.Sc.Inf. (Université du Manitoba)</th>
</tr>
</thead>
</table>
| **Coordinators** | **Curriculum Coordinator**  
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| **Instructors** | **Administrator of clinical education**  
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**Administrative Assistant**  
**Amina Ali Amar**  
**Pierre Minkala-Ntadi**, Ph.D., SIC (Université Grenoble Alpes, France) |
# School of Nursing and Health Studies

List of teaching staff

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Telephone: (204) 237-1818, ext. 305, Toll Free: (204) 233-5112, ext. 305
esies@ustboniface.ca  www.ustboniface.ca

<table>
<thead>
<tr>
<th>Name</th>
<th>Extension</th>
<th>Box #</th>
<th>Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doris Alarie</td>
<td>704</td>
<td>105</td>
<td>1604</td>
</tr>
<tr>
<td>Amina Ali Amar</td>
<td>305</td>
<td>1216</td>
<td>1612</td>
</tr>
<tr>
<td>Jacqueline Avanthay-Strus</td>
<td>703</td>
<td>89</td>
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<tr>
<td>Patricia Bourrier</td>
<td>701</td>
<td>125</td>
<td>1611</td>
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<tr>
<td>Anne-Lise Costeux</td>
<td>709</td>
<td>47</td>
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<tr>
<td>Barbara Donaldson</td>
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<td>126</td>
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<tr>
<td>Daniel Gagné</td>
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<td>Blandine Kapita Kama</td>
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<td>Cora-Andrée Martin</td>
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<tr>
<td>Pierre Minkala-Ntadi</td>
<td>447</td>
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<td>0606</td>
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<tr>
<td>Diane Pineau</td>
<td>707</td>
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<td>Julie Savard</td>
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<td>Marie-Claude Simpson</td>
<td>432</td>
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<td>0130</td>
</tr>
<tr>
<td>Darcelle Vigier</td>
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SECTION II: PROGRAM DESCRIPTION

<table>
<thead>
<tr>
<th>Program/Degree</th>
<th>Years to complete</th>
<th>Total or credit hours</th>
<th>Maximum years to complete</th>
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<tbody>
<tr>
<td>Baccalaureate in Nursing</td>
<td>4 years</td>
<td>120 hours</td>
<td>8 years</td>
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<tr>
<td>Diploma Practical Nursing program</td>
<td>2 years</td>
<td>87 hours</td>
<td>4 years</td>
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</table>

2.1 Baccalaureate in Nursing Program

Registered Nurses help individuals across their life span to achieve and maintain good health. The 4-year program leading to a Bachelor of Nursing prepares graduates to enter the workforce as entry-level nurses in all areas of health care and to successfully complete the National Council Licensure Examination (NCLEX). The program seeks to develop bilingual professional nurses possessing critical judgment, interpersonal skills, a desire for life-long learning, and the ability to work effectively in a variety of health care environments.

2.2 Diploma Practical Nursing Program

The 22-month Diploma in Practical Nursing program is designed to provide you with the theoretical knowledge, laboratory skills, and clinical experience required to function as an autonomous Licensed Practical Nurse (LPN).

Upon successful completion of the program, you will possess the competencies to successfully complete the Canadian Practical Nurse Registration Examination. This will allow you to practice as an LPN. As an LPN, you will be able to provide safe, competent, and ethical nursing care to meet the needs of patients of all age groups throughout their lifespan. With experience, you will also be able to function in leadership roles.
SECTION III: COURSE SEQUENCE AND DESCRIPTION

Please see the schedule of courses and exams for the various programs and important dates at https://ustboniface.ca/horaires.

ATTENTION: Students must remain available until the end of the exam period.

3.1 Course Sequence for the Baccalaureat in Nursing

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Year 2</th>
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<tbody>
<tr>
<td><strong>FALL</strong></td>
<td><strong>WINTER</strong></td>
</tr>
<tr>
<td>BIOL 1415</td>
<td>BIOL 1417</td>
</tr>
<tr>
<td>FRAN 1002</td>
<td>FRAN 1004</td>
</tr>
<tr>
<td>SANT 1035</td>
<td>SINF 1046</td>
</tr>
<tr>
<td>PSYC 1215</td>
<td>SINF 1049</td>
</tr>
<tr>
<td>SINF 1017</td>
<td>SINF 1116</td>
</tr>
<tr>
<td>SINF 1018</td>
<td>SINF 1026</td>
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<th>Year 3</th>
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<tr>
<td><strong>FALL</strong></td>
<td><strong>WINTER</strong></td>
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<tr>
<td>MBIO 1225</td>
<td>SINF 3045</td>
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<td>SINF 3015</td>
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<tr>
<td>SINF 3017</td>
<td>SINF 3055</td>
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<tr>
<td>SINF 3025</td>
<td>SINF 3057</td>
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<tr>
<td>SINF 3027</td>
<td>SINF 3065</td>
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<td>SINF 3035</td>
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LIST OF COURSES – YEAR 1 BSI

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<tbody>
<tr>
<td>BIOL 1415</td>
<td>Anatomy of the Human Body</td>
</tr>
<tr>
<td>FRAN 1002</td>
<td>Grammaire de l’écrit 1</td>
</tr>
<tr>
<td>FRAN 1004</td>
<td>Grammaire de l’écrit 2</td>
</tr>
<tr>
<td>PSYC 1215</td>
<td>Introduction to Psychology</td>
</tr>
<tr>
<td>SANT 1035</td>
<td>Croissance et développement</td>
</tr>
<tr>
<td>SINF 1018</td>
<td>Introduction aux sciences infirmières</td>
</tr>
<tr>
<td>SINF 1017</td>
<td>Techniques et méthodes de soins I</td>
</tr>
<tr>
<td>SINF 1026</td>
<td>La communication professionnelle en santé</td>
</tr>
<tr>
<td>BIOL 1417</td>
<td>Physiologie du corps humain</td>
</tr>
<tr>
<td>FRAN 1005</td>
<td>Grammaire de l’écrit (Partie B)</td>
</tr>
<tr>
<td>SINF 1046</td>
<td>Évaluation de la santé</td>
</tr>
<tr>
<td>SINF 1049</td>
<td>Stage : Introduction à la pratique des soins infirmiers</td>
</tr>
<tr>
<td>SINF 1116</td>
<td>Nutrition</td>
</tr>
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</table>
## List of Courses – Year 2 BSI

<table>
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<tr>
<th>Course Code</th>
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<tbody>
<tr>
<td>SINF 2024</td>
<td>Pharmacology and Diagnostic Tests</td>
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<tr>
<td>STAT 1005</td>
<td>Data Measurement and Analysis</td>
</tr>
<tr>
<td>SINF 2026</td>
<td>Techniques and Methods of Care</td>
</tr>
<tr>
<td>SINF 2045</td>
<td>Adult and Family Care</td>
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<td>SINF 2047</td>
<td>Adult and Family Care Training</td>
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<tr>
<td>PATH 3215</td>
<td>Pathophysiology</td>
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<tr>
<td>SANT 2075</td>
<td>Interprofessional and Collaborative Practice</td>
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<tr>
<td>SINF 2035</td>
<td>Family Care in Perinatal Care</td>
</tr>
<tr>
<td>SINF 2037</td>
<td>Family Care in Perinatal Care Training</td>
</tr>
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## List of Courses – Year 3 BSI

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<th>Course Code</th>
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<tr>
<td>MBIO 1225</td>
<td>Microbiology &amp; Immunology</td>
</tr>
<tr>
<td>SINF 3015</td>
<td>Mental Health Care</td>
</tr>
<tr>
<td>SINF 3017</td>
<td>Mental Health Care Training</td>
</tr>
<tr>
<td>SINF 3025</td>
<td>Community Health Care</td>
</tr>
<tr>
<td>SINF 3027</td>
<td>Community Health Care Training</td>
</tr>
<tr>
<td>SINF 3035</td>
<td>Care Methods and Practices in Community Health</td>
</tr>
<tr>
<td>SINF 3045</td>
<td>Community Health Care</td>
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<td>SINF 3047</td>
<td>Community Health Care Training</td>
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<tr>
<td>SINF 3055</td>
<td>Complex Care</td>
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<tr>
<td>SINF 3057</td>
<td>Complex Care Training</td>
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<tr>
<td>SINF 3065</td>
<td>Professionalism and Ethics in Care</td>
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## List of Courses – Year 4 BSI

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<tr>
<td>SINF 4015</td>
<td>Complex Care</td>
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<tr>
<td>SINF 4017</td>
<td>Complex Care Training</td>
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<tr>
<td>SINF 4025</td>
<td>Professional and Scientific Approaches in Nursing</td>
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<tr>
<td>SINF 4035</td>
<td>Palliative Care</td>
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<tr>
<td>SINF 4055</td>
<td>Special Topics</td>
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<tr>
<td>SINF 4045</td>
<td>Leadership in the Context of Health Care</td>
</tr>
<tr>
<td>SINF 4125</td>
<td>Current Trends in Health</td>
</tr>
<tr>
<td>SINF 4047</td>
<td>Preceptorship: Transition to Employment in Nursing</td>
</tr>
</tbody>
</table>
3.2 Course Description for the Baccalaureat in Nursing

YEAR ONE

FALL

BIOL 1415 Anatomy of the Human Body (BIOL 1411) (3 credits) (Lab required)
Discussion of microanatomy and gross anatomy, including changes occurring from conception to old age. Students may not hold credit for BIOL 1415, BIOL 1411, BIOL 1410 and the former ANP 1505, ANP 1506 and ANP 1507. (Prerequisite: none. High school Biology strongly recommended).

FRAN 1002 Written French Grammar 1 (FRAN 1001) (3 credits) (Lab required)
Improvement of French through comprehension activities and the production of a variety of texts that lead to a deeper knowledge of grammar, enriched vocabulary and an appreciation of style. Development of writing habits such as the use of reference works and self-correction tools. Application of course concepts and oral activities in tutorial groups (compulsory). Students may not hold credit for FRAN 1005 and FR 106 or FRAN 1001 (144.100 ou 144.093).

SANT 1035 Growth and Development (3 credits)
Study of human growth and development across the lifespan. Students may not hold credit for SANT 1035 and the former PSY 2514.

PSYC 1215 Introduction to psychology (PSYC 1211) (3 credits)
Basic concepts and principles of psychology. Psychological basis of behaviours, sensory processes, perception, states of consciousness, learning and memory. Descriptions of research methods in scientific psychology. Students may not hold credit for PSYC 1215, PSYC 1211, PSYC 1200, PSYC 1201 and the former PSY 1501.

SINF 1017 Nursing Skills I (1 credit)
(Lab required)
Application of theoretical concepts and acquisition of psychomotor skills necessary to provide basic nursing care to a diverse client population using needs analysis strategies and critical thinking. (Corequisite: SINF 1018)

SINF 1018 Introduction to Nursing (3 credits)
An introduction to the nursing discipline and profession in the context of Canadian health care. Emphasis is on nursing concepts and the roles and responsibilities of the nurse in health care.

SINF 1026 Professional Communication in Healthcare (3 credits)
An introduction to basic concepts of therapeutic communication. Exploration of self-awareness as an individual in a relationship through critical analysis of literature, theories and experiences.

WINTER

BIOL 1417 Human Physiology (BIOL 1413) (3 credits) (Lab required)
The functions of all systems and the homeostatic mechanism. Students may not hold credit for BIOL 1417, BIOL 1413, BIOL 1412, BIOL 2411 and the former ANP 1505, ANP 1506 and ANP 1507. (Prerequisite: BIOL 1415)

FRAN 1004 Written French Grammar 2 (FRAN 1001) (3 credits) (Lab required)
Improvement of French through comprehension activities and the production of a variety of texts that lead to a deeper knowledge of grammar, enriched vocabulary and an appreciation of style. Development of writing habits such as the use of reference works and self-correction tools. Application of course concepts and oral activities in tutorial groups (compulsory). Students may not hold credit for FRAN 1005 and FR 106 or FRAN 1001 (144.100 ou 144.093).

SINF 1046 Health Assessment (3 credits)
(Lab required)
An introduction to data collection and health assessment of adults, with a focus on the variability of norms and of risk factors. This course consists of two components: theory and laboratory. (Prerequisites: SANT 1035, SINF 1026, SINF 1018; Corequisites: BIOL 1417)
**SINF 1049 Practicum: Introduction to Nursing Practice (2 credits)**
Introduction to nursing practice in a variety of adult-care settings. Introduction to required knowledge, skills and professional behaviours. Duration of 120 hours. (Prerequisites: SINF 1018, SINF 1017, SINF 1026; Corequisite: SINF 1046)

**SINF 1116 Nutrition (3 credits)**
Theoretical course based on the fundamental principles of a balanced diet. Emphasis on the study of foods and nutrients necessary for the health of the human body. The following concepts are covered: the role of nutrition throughout the life cycle, analysis of the role of nutrition in preventing and/or contributing to chronic illness, discussion about consumer habits and identification of factors (determinants) that affect a healthy diet, as well as current controversies. (Prerequisites: SINF 1018, BIOL 1415)

**YEAR TWO**

**FALL**

**SINF 2024 Pharmacology and Diagnostic Testing (3 credits)**
A study of pharmacology, including the effects of medications on the human body, their toxicity, methods of administration, nursing observations and associated problems. The responsibilities of a nurse in relation to diagnostic testing and nursing procedures. (Prerequisites: BIOL 1417, SINF 1046)

**STAT 1005 Introduction to Statistics (3 credits) (Lab required)**
An introduction to the basic principles of statistics and procedures used for data analysis. Topics to be covered include: gathering data, displaying and summarizing data, examining relationships between variables, sampling distributions, estimation and significance tests, inference for means. Not to be held with STAT 1005, STAT 1001, STAT 1000 or HSS 2781.

**SINF 2047 Practicum: Care of Adults and Families (3 credits)**
Clinical practice focused on care of adults experiencing acute and chronic illnesses with stable or predictable outcomes, throughout the care continuum and across health care settings (simulated or in a healthcare setting). Duration of 135 hours. (Prerequisite: SINF 1049; Corequisites: SINF 2026, SINF 2045, SINF 2024)

**WINTER**

**PATH 3215 Pathophysiology (3 credits)**
Etiology of illness, causes and mechanisms of pathologies, preventive measures and corrective therapies. Students may not hold credit for PATH 3215 and the former PHS 4700. (Prerequisite: BIOL 1417)

**SANT 2075 Interpersonal Relationships and Collaborative Practice (3 credits)**
Identification of essential concepts and skills in order to establish and maintain interpersonal relations in the trans-professional team. (Prerequisite: PSYC 1215)
SANT 2115 Introduction to Research in Health Care (3 credits)
Methodology, appreciation and critical evaluation of research in nursing. Concepts and paradigms of various research models and use of evaluation criteria. Identifying the components of a research project, analysis of strengths and weaknesses of models studied; implications for practice. Students may not hold credit for SANT 2115 and the former HSS 3501. (Prerequisite: STAT 1005)

SINF 2035 Care of the Childbearing Family (3 credits) (Simulation required)
Theoretical and research-based nursing care of childbearing families in hospital, home and community settings. Emphasis on maternal-infant care in situations of normality and risk. Concepts include family-centered perinatal health care, transitions to parenthood, family adaptation, coping and resources. (Prerequisites: SINF 2045, SINF 2047, SINF 2024 or the former SINF 2025; Corequisite: SINF 2037)

SINF 2037 Practicum: Care of the Childbearing Family (3 credits)
Nursing care of the childbearing family in various settings such as hospital, public health, community organization, home or simulation. Duration of 132 hours. (Prerequisites: SINF 2026, SINF 2024 or the former SINF 2025; Corequisite: SINF 2037)

YEAR THREE

FALL

MBIO 1225 Microbiology and immunology (3 credits)
Theoretical and practical basics necessary to offer quality nursing care to people with contagious diseases and hospital infections. Basic microbiology. Description of bacteria; their habitat, culture and identification methods; principles of sterilization, disinfection and description of aseptic technique; etiology of infection; mode of transmission and prevention of these infections. Virology. Essential properties of viruses, their importance to medicine and nursing and the particular problems they cause. Immunology. Principles of immunity, theory and practice of immunisation. Students may not hold credit for MBIO 1225 and MBIO 1220 and the former BAC 2500.

SINF 3015 Mental Health Nursing (3 credits) (Simulation required)
Theoretical foundations of the nursing care of individuals with mental health issues and mental disorders, including their etiology, diagnosis and treatment. Emphasis on the development of therapeutic and relational communication, family support and community resources. (Prerequisites: SINF 2024 or the former SINF 2025, PSYC 1215, SINF 2035; Corequisite: SINF 3017)

SINF 3017 Practicum: Mental Health (3 credits)
Care of individuals with mental health issues. Application of therapeutic interaction, relationship skills, family assessment and support in simulation environments and health care settings. Duration of 112 hours. (Prerequisites: SINF 2024 or the former SINF 2025, SINF 2037; Corequisite: 3015)

SINF 3025 Nursing in Community Health I (3 credits)
Introduction to the theory and general principles of nursing practice in community health. The health of populations, the roles of the nurse and the nursing process in community health. (Prerequisite: SANT 2115; Corequisite: SINF 3027)

SINF 3027 Practicum: Nursing in Community Health I (1 credit)
Nursing practice with individuals, families and the community as clients in various community settings. Emphasis on community involvement, partnership and interprofessional collaborative work. Duration of 45 hours. (Corequisite: SINF 3025)

SINF 3035 Nursing Skills III (2 credits) (Lab required)
Use of a systematic nursing process to apply advanced psychomotor skills. (Prerequisites: PATH 3215, SINF 2026)
WINTER

SINF 3045 Nursing in Community Health II (3 credits)
Study of the theories and strategies that foster the development of a healthy environment. Study of the principles and methods related to program planning. (Prerequisites: SINF 3025, SINF 3027; Corequisite: SINF 3047)

SINF 3047 Practicum: Nursing in Community Health II (3 credits)
Nursing practice with individuals, families and the community as clients in various settings and nursing roles. Emphasis on the planning, implementation and evaluation of community health interventions. Duration of 120 hours. (Corequisite: SINF 3045)

SINF 3055 Complex Care I (3 credits)
(Simulation required)
Nursing concepts and principles for children, adolescents and adults suffering from acute or chronic diseases. Family-centered care, support care, evaluation and management of care in the home and various health settings. (Prerequisites: PATH 3215, SINF 3035; Corequisite: SINF 3057)

SINF 3057 Practicum: Complex Care I (3 credits)
Nursing practice in complex care situations with individuals (children, adolescents and adults), groups or communities. Management of complex nursing care on the family, community or social health level and primary or tertiary health care in the community, including in pediatrics. Duration of 168 hours. (Corequisite: SINF 3055)

SINF 3065 Professionalism and Ethics in Nursing (3 credits)
Scope and standards of nursing practice. In-depth study of ethics, legal situations and the dilemmas of the practice. Emphasis on clarifying values, professional socialization and image and on inter-professional practice. (Prerequisite: SANT 2075 or the former SANT 2085; Corequisite: SINF 3055)

YEAR FOUR

FALL

SINF 4015 Complex Care II (3 credits)
(Simulation required)
In-depth study of complex situations in nursing practice with selected populations, including in pediatrics. Exploration of dependant and independent nursing roles with individuals, groups and communities with complex needs. (Prerequisites: SINF 3055, SINF 3057; Corequisite: SINF 4017)

SINF 4017 Practicum: Complex Care II (4 credits)
Nursing practice in complex care situations with individuals, groups or communities. Management of complex nursing care on the family, community or social health level and primary or tertiary health care in the community. Duration of 176 hours. (Corequisite: SINF 4015)

SINF 4025 Theories and Professional Approaches in Nursing (3 credits)
Study of the philosophical, structural and theoretical bases of the discipline. Application of theories to explain nursing phenomena. Exposure to a range of concepts, theories and approaches relevant to nursing practice. (Prerequisites: SANT 2115, SINF 3065)

SINF 4035 Palliative Care (3 credits)
(Simulation required)
Philosophy and practice of palliative and end of life care, through the lifespan and in various health settings. Critical examination of the theory, research and practice associated with caring for individuals and families dealing with a fatal illness. Exploration of the concepts of death, agony and grief in healthcare systems, cultures and society using an inter-professional approach. (Prerequisites: SANT 2075 or the former SANT 2085, SINF 3065)
SINF 4055 Special Topics (3 credits)
Directed reading or in-depth examination of a particular aspect in Nursing or health-related topics. (Prerequisites: completion of all courses at the 1000 and 2000 of the program, selection will follow specific admission criteria and written authorisation from the instructor)

WINTER

SINF 4045 Leadership in the Context of Healthcare (3 credits)
Historical, socio-political and economic factors that influence the exercise of the nursing profession. Analysis of leadership and change theories. Study of strategies that can influence policy and bring about change in the healthcare network. (Prerequisites: SINF 3065, SINF 4025)

SINF 4125 Trends in Healthcare (3 credits)
Current trends and their influence on the profession and on nursing practice are analyzed and evaluated. (Prerequisite: SINF 3065)

SINF 4037 Preceptorship: Transition to Nursing Practice (9 crédits)
Facilitates the transition from the graduating student role to the entry-level practitioner through intensive practice in an area of personal interest. This final clinical course emphasizes the integration and synthesis of knowledge and skills previously acquired and the application of theory and research to nursing practice. Duration of 450 hours (Prerequisites: successful completion of all courses and practicums, GPA minimum of 2.5)
### 3.3 Course Sequence for the Diploma in Practical Nursing

#### Year 1

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<tr>
<th>FALL</th>
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<tbody>
<tr>
<td>BIOL 1415</td>
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<td>SINF 1046</td>
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#### Year 2 (In effect since 2011)

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#### Year 2 (In effect 2019-2020)

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<td><strong>Total credits for year 2 – 42</strong></td>
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#### COURSES – Year 1

- **BIOL 1415**  Anatomy of the Human Body
- **FRAN 1005**  Grammaire de l’écrit (Partie A)
- **SANT 1035**  Human Growth and Development
- **DSI 101**   Nursing Skills I
- **SINF 1018**  Introduction to Nursing
- **SINF 1026**  Professional Communication in Healthcare
- **DSI 104**   Practicum : Introduction to Nursing Practice
- **BIOL 1417**  Physiology of the Human Body
<table>
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<tr>
<td>FRAN 1005</td>
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<td>Chronic Care</td>
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<td>DSI 107</td>
<td>Nursing Skills II</td>
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<tr>
<td>DSI 108</td>
<td>Practicum : Adult Care</td>
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<tr>
<td>SINF 2024</td>
<td>Pharmacology and Diagnostic Testing</td>
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<tr>
<td>DSI 110</td>
<td>Complex Care</td>
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<tr>
<td>DSI 111</td>
<td>Practicum : Complex Care</td>
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<td>DSI 113</td>
<td>Nursing Skills III</td>
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**COURSES – Year 2**

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<td>Microbiology and Immunology</td>
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<tr>
<td>PSYC 1215</td>
<td>Introduction to Psychology</td>
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<tr>
<td>DSI 201</td>
<td>Pediatrics and Rehabilitation</td>
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<tr>
<td>DSI 203</td>
<td>Practicum : Pediatrics and Acute Care</td>
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<tr>
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<td>Gerontology and Palliative Care</td>
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<td>SINF 1116</td>
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<td>DSI 204</td>
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<td>Practicum : Mental Health and Maternal-Newborn Care</td>
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</table>
3.4 Course Description for the Diploma in Practical Nursing

YEAR ONE (in effect 2018-2019)

FALL

BIOL 1415  Anatomy of the Human Body
(BIOL 1411) (3 credits) (Lab required)
Discussion of microanatomy and gross anatomy, including changes occurring from conception to old age. Students may not hold credit for BIOL 1415, BIOL 1411, BIOL 1410 and the former ANP 1505, ANP 1506 and ANP 1507. (Prerequisite: none. High school Biology strongly recommended).

FRAN 1005  Written French Grammar
(FRAN 1001) (Part A) (6 credits) (Lab required)
Improvement of French through comprehension activities and the production of a variety of texts that lead to a deeper knowledge of grammar, enriched vocabulary and an appreciation of style. Development of writing habits such as the use of reference works and self-correction tools. Application of course concepts and oral activities in tutorial groups (compulsory). Students may not hold credit for FRAN 1005 and FR 106 or FRAN 1001 (144.100 ou 144.093).

SANT 1035  Growth and Development
(3 credits)
Study of human growth and development across the lifespan. Students may not hold credit for SANT 1035 and the former PSY 2514.

DSI 101  Nursing Skills I (1 credit) (Lab required)
Application of theoretical concepts and acquisition of psychomotor skills necessary to provide basic nursing care to a diverse client population using needs analysis strategies and critical thinking. (Corequisites: BIOL 1415, SINF 108, DSI 104)

SINF 1018  Introduction to Nursing (3 credits)
An introduction to the nursing discipline and profession in the context of Canadian health care. Emphasis is on nursing concepts and the roles and responsibilities of the nurse in health care.

SINF 1026  Professional Communication in Healthcare (3 credits)
An introduction to basic concepts of therapeutic communication. Exploration of self-awareness as an individual in a relationship through critical analysis of literature, theories and experiences.

DSI 104  Practicum: Introduction to Nursing Practice (1 credit)
Introduction to nursing practice in a variety of settings with adult clients. Introduction to the professional knowledge, skills and behaviours required. The length of the practicum is 40 hours. (Corequisites: DSI 101, SINF 1018, SINF 1026)

WINTER

BIOL 1417  Human Physiology  (BIOL 1413) (3 credits) (Lab required)
The functions of all systems and the homeostatic mechanism. Students may not hold credit for BIOL 1417, BIOL 1413, BIOL 1412, BIOL 2411 and the former ANP 1505, ANP 1506 and ANP 1507. (Prerequisite: BIOL 1415)

FRAN 1005  Written French Grammar
(FRAN 1001) (Part B) (6 credits) (Lab required)
Improvement of French through comprehension activities and the production of a variety of texts that lead to a deeper knowledge of grammar, enriched vocabulary and an appreciation of style. Development of writing habits such as the use of reference works and self-correction tools. Application of course concepts and oral activities in tutorial groups (compulsory). Students may not hold credit for FRAN 1005 and FR 106 or FRAN 1001 (144.100 ou 144.093).

SINF 1046  Health Assessment (3 credits)
(2021-2022 and after) (Lab required)
An introduction to data collection and health assessment of adults, with a focus on the variability of norms and of risk factors. This course consists of two components: theory and laboratory. (Prerequisites: SANT 1035, SINF 1026, SINF 1018; Corequisites: BIOL 1417)
DSI 106 Chronic Care (3 credits)
An introduction to health, well-being and chronic illnesses. Acquisition of a fundamental understanding of client care for adults, and their family, in the chronic stage of their illness, in a variety of clinical environments. (Prerequisite: SINF 1018; Corequisites: BIOL 1417, DSI 108)

DSI 107 Nursing Skills II (2 credits)
(Laboratory required)
Use of a systematic nursing approach for the application of psychomotor skills. (Prerequisites: DSI 101, DSI 104; Corequisites: BIOL 1417, SINF 1046)

DSI 108 Practicum: Adult Care (2 credits)
Clinical practicum with a focus on care for adults living with chronic illnesses, in all phases including exacerbated periods of the illness. The practicum takes place in different care settings. The length of the practicum is 120 hours. (Prerequisites: SINF 1018, SINF 1026, DSI 104; Corequisites: BIOL 1417, DSI 106, DSI 107)

SUMMER

SINF 2024 Pharmacology and Diagnostic Testing (3 credits)
A study of pharmacology, including the effects of medications on the human body, their toxicity, methods of administration, nursing observations and associated problems. The responsibilities of a nurse in relation to diagnostic testing and nursing procedures. (Prerequisites: BIOL 1417, SINF 1046)

DSI 110 Complex Care (3 credits)
Continuation of the learning of knowledge and skills specific to caring for clients and their families in acute or chronic stages of illness, in a variety of clinical settings. (Prerequisites: BIOL 1417, SINF 1046, DSI 106, DSI 107; Corequisites: SINF 2024, DSI 111, DSI 113)

DSI 111 Practicum: Complex Care (4 credits)
Nursing practicum in complex care situation with adults or children and adolescents. Management of complex nursing care in the context of family health and primary health care. The practicum takes place in surgery and/or medicine. The total practicum length is 160 hours. (Prerequisites: DSI 108; Corequisites: SINF 2024, DSI 110, DSI 113)

DSI 113 Nursing Skills III (2 credits)
(Labor required)
Use of a systematic nursing approach for the application of advanced psychomotor skills. (Prerequisites: DSI 107, DSI 108; Corequisites: SINF 2024, DSI 110, DSI 111)

YEAR TWO (Existing programme)

FALL

MBIO 1225 Microbiology and immunology (3 credits)
Theoretical and practical basics necessary to offer quality nursing care to people with contagious diseases and hospital infections. Basic microbiology. Description of bacteria; their habitat, culture and identification methods; principles of sterilization, disinfection and description of aseptic technique; etiology of infection; mode of transmission and prevention of these infections. Virology. Essential properties of viruses, their importance to medicine and nursing and the particular problems they cause. Immunology. Principles of immunity, theory and practice of immunisation. Students may not hold credit for MBIO 1225 and MBIO 1220 and the former BAC 2500.

PSYC 1215 Introduction to psychology (PSYC 1211) (3 credits)
Basic concepts and principles of psychology. Psychological basis of behaviours, sensory processes, perception, states of consciousness, learning and memory. Descriptions of research methods in scientific psychology. Students may not hold credit for PSYC 1215, PSYC 1211, PSYC 1200, PSYC 1201 and the former PSY 1501.
SIA 201 Practical Nursing – Specialties I (pediatrics, rehabilitation) (3 credits)
Issues, concepts and nursing care for pediatrics and rehabilitation populations (Prerequisites: SIA 109, SIA 110, SIA 111, SIA 112; Corequisites: SIA 203, SIA 205, SIA 213)

SIA 203 Practical Nursing – Practicum IV (4 crédits)
Learners provide care to clients of all ages who are in the acute stage of their illness/disease. Practicum settings include: Maternal / Newborn and Pediatrics (Prerequisites: SIA 109, SIA 110, SIA 111, SIA 113; Corequisites: SIA 201, SIA 205, SIA 213)

SIA 205 Practical Nursing – Specialties III (gerontology, palliative care) (3 crédits)
Issues, concepts and nursing care related to the gerontological client, mental health and palliative care (Prerequisites: SIA 109, SIA 110, SIA 111; Corequisites: SIA 201, SIA 203, SIA 213)

SIA 213 Practical Nursing- Laboratory IV (1 crédit) (Lab required)
Continued learning of concepts and skills necessary for holistic care of clients of all ages. Laboratory practice of nursing skills specific to specialty areas such as medicine and pediatrics. (Prerequisites: have successfully completed all courses including practicums for Year 1 of the programme; Corequisites: SIA 201, SIA 203, SIA 205)

WINTER
SIA 112 Nutrition (3 credits)
Theoretical course based on the fundamental principles of a balanced diet. Emphasis on the study of foods and nutrients necessary for the health of the human body. The following concepts are covered: the role of nutrition throughout the life cycle, analysis of the role of nutrition in preventing and/or contributing to chronic illness, discussion about consumer habits and identification of factors (determinants) that affect a healthy diet, as well as current controversies. (Prerequisites: SINF 1018, BIOL 1415)

SIA 204 Practical Nursing – Community / Home Care (3 credits)
In this course learners explore the multiple dimensions of health, health behaviours and environmental and social factors that affect health and/or health behaviour. Alternative health behaviours and therapies are explored, as are the basics in nursing research (Prerequisites: SIA 201, SIA 203, SIA 205; Corequisites: SIA 112, SIA 206, SIA 207, SIA 209, SIA 210)

SIA 206 Practical Nursing – Practicum V (3 credits)
Application of the nursing process in caring for persons in the specialities of gerontology, mental health and palliative care. (Prerequisites: SIA 201, SIA 203, SIA 205, SIA 213; Corequisites: SIA 112, SIA 204, SIA 207, SIA 209, SIA 210)

SIA 207 Practical Nursing – Professionalism and leadership (3 credits)
This course prepares learners for their role in the practical nursing profession. It includes the opportunity for learners to examine personal, professional and leadership qualities that enhance their performance as a member of the health care team. (Prerequisites: SIA 201, SIA 203, SIA 205; Corequisites: SIA 204, SIA 206, SIA 209, SIA 210)

SIA 209 Practical Nursing – Specialities II (maternal/newborn) (3 credits)
(Prerequisites: SIA 201, SIA 203, SIA 205, SIA 213; Corequisites: SIA 112, SIA 204, SIA 206, SIA 207, SIA 210)

SIA 210 Practical Nursing – Specialities IV (mental health) (3 credits)
Theoretical foundations of the nursing care of individuals with mental health issues and mental disorders, including their etiology, diagnosis and treatment. Emphasis on the development of therapeutic communication skills and relationships, family support and community resources. (Prerequisites: SIA 201, SIA 203, SIA 205, SIA 213; Corequisites: SIA 112, SIA 204, SIA 206, SIA 207, SIA 209)
SUMMER

SIA 208 Senior Practicum (8 credits)
This practicum provides the learner with the opportunity to synthesize acquired knowledge and skills and gain competence in the role and responsibilities of the graduate Practical Nurse. The preceptor process is used to empower the learner to function independently. (Prerequisites: Successful completion of all courses of the program (theory, laboratory and practicums) with a minimal grade point average of at least 2.5)

YEAR TWO (2019-2020)
FALL 2019

MBIO 1225 Microbiology and immunology (3 credits)
Theoretical and practical basics necessary to offer quality nursing care to people with contagious diseases and hospital infections. Basic microbiology. Description of bacteria; their habitat, culture and identification methods; principles of sterilization, disinfection and description of aseptic technique; etiology of infection; mode of transmission and prevention of these infections. Virology. Essential properties of viruses, their importance to medicine and nursing and the particular problems they cause. Immunology. Principles of immunity, theory and practice of immunisation. Students may not hold credit for MBIO 1225 and MBIO 1220 and the former BAC 2500.

PSYC 1215 Introduction to psychology (PSYC 1211) (3 credits)
Basic concepts and principles of psychology. Psychological basis of behaviours, sensory processes, perception, states of consciousness, learning and memory. Descriptions of research methods in scientific psychology. Students may not hold credit for PSYC 1215, PSYC 1211, PSYC 1200, PSYC 1201 and the former PSY 1501.

DSI 201 Pediatrics and Rehabilitation (3 credits)
Basic understanding of nursing care specific to some specialities, such as pediatrics and rehabilitation. (Prerequisites: SINF 2024, DSI 110, DSI 111, DSI 113; Corequisites: DSI 203)

DSI 203 Practicum: Pediatrics and Acute Care (4 credits)
Practical application of the theoretical knowledge related to providing care to clients of all ages in the chronic stage of illness and in the specialty areas of nursing of pediatrics and rehabilitation. This practicum is 160 hours in duration. (Prerequisites: SINF 2024, DSI 111, DSI 113; Corequisites: DSI 201)

DSI 205 Gerontology and Palliative Care (3 credits)
The study of the phenomenon of aging in human beings as well as their living conditions: sociological, economic and epidemiological concepts, and an understanding of compassion and respect for human dignity through quality care that safely meets the needs of dying clients and their families. (Prerequisites: SINF 2024, DSI 110, DSI 111, DSI 113)

WINTER

SINF 1116 Nutrition (3 credits)
Theoretical course based on the fundamental principles of a balanced diet. Emphasis on the study of foods and nutrients necessary for the health of the human body. The following concepts are covered: the role of nutrition throughout the life cycle, analysis of the role of nutrition in preventing and/or contributing to chronic illness, discussion about consumer habits and identification of factors (determinants) that affect a healthy diet, as well as current controversies. (Prerequisites: SINF 1018, BIOL 1415)

DSI 204 Community Health (3 credits)
Introduction to concepts, theories and general principles of community health nursing and the promotion of health for individuals, families and groups. (Prerequisites: SINF 1018, SINF 1026; Corequisites: SINF 1116)
DSI 206 Practicum: Mental Health and Maternal-Newborn Care (3 credits)
Practical application of the theoretical knowledge related to providing care to clients of all ages in the specialty areas of nursing of mental health and perinatal care. This practicum is 120 hours in duration. (Prerequisites: DSI 201, DSI 203, DSI 205; Corequisites: DSI 209, DSI 210); both components of this practicum (mental health and perinatal care) to receive a grade of Satisfactory (S) in DSI 206 Practicum: Mental Health and Maternal-Newborn Care.

DSI 207 Professionalism and Leadership (3 credits)
Introduction to professionalism and leadership. Development of the learners’ personal and profession skills related to the practical nursing practice within an interprofessional team. Ethical reflection on the professional practice and on the conditions in which this practice takes place. Leadership concepts are introduced. (Prerequisites: SINF 1018, SINF 1026, DSI 203)

DSI 209 Maternal-Newborn Care (3 crédits)
Acquisition of a basic understanding of the nursing care to be provided during pregnancy, delivery and the postpartum phase, with and without complications. Acquisition of understanding of the nursing care provided to newborns, including home care and the family’s adaptation process. (Prerequisites: DSI 201, DSI 203, DSI 205; Corequisites: SINF 1116, DSI 204, DSI 206)

DSI 210 Mental Health (3 crédits)
Theoretical foundations of the nursing care of individuals with mental health issues and mental disorders, including their etiology, diagnosis and treatment. Emphasis on the development of therapeutic and relational communication, family support and community resources. (Prerequisites: SINF 2024, PSYC 1215; Corequisites: DSI 206)

SUMMER

DSI 208 Preceptorship: Transition to Nursing Practice (8 crédits)
Integration and application of the knowledge and skills acquired and the professional conduct while performing the role of practical nurse. A preceptorship is the chosen learning method because it allows the student nurse to take responsibility and to develop the confidence and skills required to become independent. Duration of 360 hours. (Prerequisites: Successful completion of all courses of the program (theory, laboratory and practicums) with a minimal grade point average of at least 2.5)

3.5 Psychomotor Skills Overview
There are 3 psychomotor skills courses in both the Bachelor of Nursing and Diploma Practical Nursing programs. The skills courses have a lecture and laboratory component. Instructors use a principle and hands-on learning based approach. Principles are stressed, as well as resource seeking skills such as accessing procedure manuals. In clinical settings, students must follow hospital Policy and Procedure. CEFs need to be familiar with how to access documents in their specific clinical settings.

Course content resources are provided for students online. This includes objectives for each unit, readings, videos and other required activities. Students are expected to use the objectives to guide their study of content and then must write lab exams and psychomotor evaluations. Medication calculations, understanding a Kardex/care plan/MAR and creating cheat sheets are included in these courses.

Students are expected to come prepared and able to problem solve application of the skills and answer critical thinking questions. It is the student’s responsibility to identify their learning needs and seek out appropriate resources. Laboratory staff circulate to observe and assist students in their learning. If a student has come unprepared, they may be sent out of the
laboratory and are not permitted to attend an alternate laboratory.

Attendance is mandatory, and any missed labs must be made up independently and evidence of make up effort submitted to lab staff. Students are made aware of the resources available to them for independent practice and are expected to attend the lab to ensure that they are competent for clinical application of the skills. Once a lab has been completed, it is a student's responsibility to ensure that they have a good basic ability to attempt the skill in clinical with CEF supervision. This same method of preparation can be encouraged for clinical skill opportunities that arise even if they have not yet been taken in lab.

Performing psychomotor skills is an integral component of their clinical experience. In your role as a CEF, you will be the main person who actually observes and evaluates the student performing these skills. If you feel the student is weak in their performance and/or understanding of the skill you can "refer them to the skills lab". What happens is that the student will return to the lab and practice this skill to improve – they will also have a skills lab instructor there with them to observe their performance and provide them feedback. Ensure that you communicate with the Practicum Course Leader to clearly indicate what psychomotor skill(s) need to be improved upon. Ensure the student knows that the student informs the Laboratory Coordinator that their CEF has referred them to the lab and confirms what psychomotor skills need to be improved. The laboratory instructor or laboratory coordinator provides documented feedback to the PCL, student and CEF. This information is included the student's evaluation form by the CEF.

3.6 Practicum Overview

The nursing practicums (experiential education) provide the essential link to the theoretical learning from the classroom to real life. The practicums enable the students to apply the knowledge in the clinical setting to further psychomotor skill development, clinical reasoning and problem solving, as well as communication and leadership skills. Students introduced to clinical settings begin to bridge the foundational theoretical knowledge and skills learned in the classroom, laboratory and in simulations with real people in the care setting.

An important aspect of our program is that each practicum has a companion theoretical nursing course designed to prepare the nursing student about the many different nursing care settings. Through these experiences in various health care settings, students are able to apply their knowledge prior to graduation.
Bachelor of Nursing

Nursing students are exposed to the reality of patient care through nine (9) nursing practicums totalling 1,458 practicum hours over 4 years.

<table>
<thead>
<tr>
<th>Bachelor of Nursing program</th>
<th>Required hours</th>
<th>Care setting</th>
<th>Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>SINF 1049 Practicum : Introduction to Nursing Practice</td>
<td>120</td>
<td>Gerontology</td>
<td>Thursday and Friday over 8 weeks</td>
</tr>
<tr>
<td>SINF 2037 Practicum : Care of the Childbearing Family</td>
<td>132</td>
<td>Maternal-Newborn</td>
<td>Thursday and Friday over 8 to 9 weeks</td>
</tr>
<tr>
<td>SINF 2047 Practicum : Care of Adults and Families</td>
<td>135</td>
<td>Chronic care</td>
<td>Thursday and Friday over 8 to 9 weeks</td>
</tr>
<tr>
<td>SINF 3017 Practicum : Mental Health</td>
<td>112</td>
<td>Mental health</td>
<td>Thursday and Friday over 7 to 8 weeks</td>
</tr>
<tr>
<td>SINF 3027 Practicum : Nursing in Community Health I</td>
<td>45</td>
<td>Community Agency</td>
<td>Tuesday afternoons over 13 weeks</td>
</tr>
<tr>
<td>SINF 3047 Practicum : Nursing in Community Health II</td>
<td>120</td>
<td>Community Agency Acute and Chronic</td>
<td>Wednesday over 13 weeks</td>
</tr>
<tr>
<td>SINF 3055 Practicum : Complex Care I</td>
<td>168</td>
<td>Acute medicine and surgery with pediatrics or adults</td>
<td>Thursday and Friday over 10 to 11 weeks</td>
</tr>
<tr>
<td>SINF 4017 Practicum : Complex Care II</td>
<td>176</td>
<td>Acute medicine and surgery with pediatrics or adults</td>
<td>Thursday and Friday over 10 to 11 weeks</td>
</tr>
<tr>
<td>SINF 4047 Preceptorship : Transition to Nursing Practice</td>
<td>450</td>
<td>Various</td>
<td>Block practicum according to preceptor schedule</td>
</tr>
</tbody>
</table>

Diploma Practical Nursing

Nursing students are exposed to the reality of patient care through (6) six nursing practicums totaling 920 practicum hours over 2 years. Students introduced to clinical settings begin to bridge the foundational theoretical knowledge and skills learned in the classroom and laboratory with real people in the care setting.

<table>
<thead>
<tr>
<th>Diploma Practical Nursing program</th>
<th>Required hours</th>
<th>Care setting</th>
<th>Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSI 104 Practicum : Introduction to Nursing Practice</td>
<td>40</td>
<td>Gerontology</td>
<td>Thursday and Friday over 2-3 weeks</td>
</tr>
<tr>
<td>DSI 108 Practicum : Adult Care</td>
<td>80</td>
<td>Chronic care</td>
<td>Thursday and Friday over 6 weeks</td>
</tr>
<tr>
<td>DSI 111 Practicum : Complex Care</td>
<td>160</td>
<td>Acute surgery or medicine</td>
<td>Thursday, Friday and Saturdays over 8 weeks</td>
</tr>
<tr>
<td>SIA 203 Practical Nursing – Practicum 4</td>
<td>160</td>
<td>Pediatrics and medicine</td>
<td>Thursday, Friday and Saturday over 10 weeks</td>
</tr>
<tr>
<td>SIA 206 Practical Nursing – Practicum 5</td>
<td>120</td>
<td>Mental health/ Community / Maternal-Newborn</td>
<td>Thursday, Friday and Saturdays over 8 weeks</td>
</tr>
<tr>
<td>SIA 208 Practical Nursing - Preceptorship</td>
<td>360</td>
<td>Acute and Chronic</td>
<td>Block practicum according to preceptor schedule</td>
</tr>
</tbody>
</table>
SECTION IV: MISSION AND PHILOSOPHY

4.1 Vision

A School of nursing and health studies that is recognized for its strategic positioning and its pursuit of excellence in:

- Training French-speaking students in its program;
- Technological and pedagogical innovation in the teaching of its training programs; and
- Nursing research.

The School is recognized in its community and in the national and international spheres for the quality of its programs, expertise and leadership, and for its focus on partnerships as a source of innovation.

4.2 Mission

The School of Nursing and Health Studies offers quality academic and practical education, in French, for the development of specific competencies. This education meets the needs of a French-speaking and culturally diverse clientele. Innovation and research in the teaching of nursing and health studies, as well as partnerships and mentorship by a devoted faculty, lay the foundation to encourage student growth and to promote the professional identity of future graduates.

4.3 Values

- Respect
- Personal and professional development
- Mutual and proactive commitment
- Integrity
- Professionalism
- Excellence

Respect

The feeling of respect entails consideration for oneself and others and recognition of an individual's value and acceptance of the person as a whole. With this in mind, we are committed to:

- Respecting ourselves and others;
- Accepting diversity in terms of language, culture, ethnicity, sexual identity and gender, orientations and expressions, religion, spirituality, life choices and values of the other, as well as the decisions and preferences of each individual;
- Demonstrating discretion in student/professor relationships;
- Encouraging dialogue and avoiding judgment;
- Recognizing and appreciating our colleagues for their expertise, experience, complementarity and contribution.

Personal and professional development

Students can reach their full potential when their environment fosters personal and professional development and growth.

With this in mind, we are committed to:

- Equipping students so that they are able to take on their responsibilities;
- Providing opportunities for personal and professional reflection;
- Offering support to our students to ensure their success throughout their program of study;
- Giving priority to students and being attentive to their needs;
- Promoting a culture of curiosity, critical thinking and continuous learning.
Mutual and Proactive Commitment
The best way to involve students, colleagues and collaborators is to capitalize on the expertise of each individual, strengthen competencies, collaborate productively, participate in innovation and to contribute to the vitality of USB, together.

With this in mind, we are committed to:
- Establishing workplace relationships based on trust;
- Believing in the ability of colleagues/collaborators/students;
- Cultivating open-mindedness, dialogue and the sharing of information;
- Working toward common goals and objectives;
- Developing partnerships in the fields of research, teaching and practice.

Integrity
Openness, honesty, trust, authenticity and accountability underlie our responsibility with respect to students, colleagues and all of our partners.
On a daily basis, we are committed to:
- Communicating in an open, transparent and honest way with students, colleagues and all partners;
- Having the courage of our convictions;
- Taking responsibility for our actions;
- Sharing information required for programs to operate successfully.

Professionalisme
Soft skills, which are essentially a way of acting or behaving, are influenced by the environment surrounding students and colleagues / collaborators and by the duties or work to be accomplished.

In the context of health professions, we are committed to:
- Demonstrating an example of professional behaviour;
- Developing students' soft skills and sense of initiative;
- Helping students to progress so that they are able to create and demonstrate their professional identity.

Excellence
Excellence consists of reaching the best possible results in order to ensure the quality of the training programs in terms of teaching, research and services for students, employees and the community.

We are committed to creating a culture in which faculty members, students, support personnel and administrators will be able to:
- Reach their full potential;
- Be fully involved in their work and/or learning;
- Maximize opportunities for continuous development;
- Be innovative and creative;
- Support one another;
- Meet the standards of the professional Colleges; as well as the provincial standards and codes for all programs;
- Be proud to be a USB graduate or employee.

4.4 Philosophy
The program’s philosophy is derived from the School of Nursing and Health Studies mission, vision, and values which are interlinked to the Université de Saint-Boniface mission and vision.

The School of Nursing’s philosophy aligns with that of Université de Saint-Boniface.
The nursing discipline is constantly evolving to respond to the population’s health needs, changes in society, and the restructuring of health services.

The aim of the nursing practice is to promote, maintain and restore the health needs of individuals and groups, to prevent disease and injury, and to provide end-of-life care. Clients are individuals of all ages, families, and communities, in all stages of their development. Health is a dynamic experience at the heart of the nursing discipline. It is viewed as a resource.
in everyday life, and not as a life objective (Ottawa Charter, 1986). Together with other health disciplines, nurses work with clients to help them take control of their own health (physical, psychosocial or spiritual health), according to the clients' capabilities and the resources available (Potter and Perry, 2014).

The nursing programs are based on evidence and nursing theories at every level of training. The focus of the profession is the nursing paradigm, made up of four central concepts: person, environment, nursing, and health, and the relationship between these concepts (Potter and Perry, 2014; Canadian Council for Practical Nurse Regulators, 2013). This metaparadigm, together with the skills (knowledge), behavioural skills and know-how, lead to the development of the competencies required by the nursing practice (Canadian Nurses Association, 2015; College of Registered Nurses of Manitoba, 2013; College of Licensed Practical Nurses of Manitoba, 2016; Canadian Council for Practical Nurse Regulators, 2013).

The training programs encourage students to develop critical thinking skills, a reflective practice, problem-solving abilities, professional communication skills, an aptitude for teamwork, leadership skills, an interest in participating in research activities, and the desire to exercise political influence in the healthcare field. Graduates from the programs will have acquired the capacity to work independently or collaboratively, regardless of the practice setting. The program prepares graduate nurses to possess the competencies required by the entry-level practical nurse and to take the Canadian Practical Nurse Registration Examination (CPNRE).

The USB program subscribes to the principles of adult learning including active student participation in the learning activities. While we support them in their learning efforts, we ensure that students accept the responsibility for their academic progress. We encourage and facilitate their active involvement in their learning by utilizing different teaching methods, such as small group work, simulations, discussions and self-directed studies as well as formal lectures. We take into consideration our students' prior studies and experiences. We recognize that each student is at a different stage in her or his development and we support the student to achieve success in their chosen educational program (e.g. recent high school graduates, adults pursuing a second career, immigrants).

As a whole, our program prepares students to practise as entry-level practical nurses in compliance with CLPNM established standards. The standards of practice of practical nurses and the code of ethics are integrated at all levels of the program. Faculty members ensure their own professional development and continuing education by pursuing advanced studies and participating in research in their respective area of expertise.
The diagram illustrates the conceptual framework on which the Practical Nursing Education Program is based. The Practical Nursing Program has adopted the conceptual framework developed for the Baccalaureate Program of Nursing Sciences of USB as both education programs will coexist within the walls of USB.

The four central concepts of the metaparadigm are in a continuous relationship with one another. The colour fading between the four concepts demonstrates that it is a relationship that is always changing. The conceptual framework of the Practical Nurse Diploma Program incorporates concepts and theories from current professional literature. Concepts of the Metaparadigm
Nursing (Caring)
Caring is the raison d'être of nursing. It is a dynamic process aimed at promoting, maintaining, restoring or improving the health status, well-being and quality of life of the person, preventing illness and injury, and providing rehabilitation and end-of-life care.

Practical Nursing encompasses the roles associated with the four domains of practice of the profession: nursing practice, research, leadership, education. Nursing as defined by the International Council of Nurses encompasses, among others, the roles associated with participation in shaping health policy and the management of health systems and patients.

Nursing education is a component of the Nursing concept. Nursing knowledge (Carper, White, and Chinn & Kramer) guides student learning throughout the program:
- Empirical knowledge: research process
- Personal knowledge: the discovery of self and of others
- Ethical knowledge: the capacity to make ethical choices in practice situations
- Aesthetic knowledge: the art of grasping the meaning of human experience
- Sociopolitical knowledge: awareness of the interaction that exists between the profession and society.

Person
The person or client who benefits from the care provided by the practical nurse can be an individual, a family, a group, a community or the population. The person is a partner in the shaping of the plan of care; there is collaboration between the person and the practical nurse providing nursing care. Nursing must take into account the person's environment. The interaction between the person and his or her environment has an impact on health and on the care provided.

Environment
The practical nurse takes into account all the environmental factors that may have an incidence on the person. These factors, the determinants of health, are a fundamental element in nursing education and practice. The determinants of health include: level of income and social status; social support networks; education and literacy; employment and working conditions; social environment; physical environment; personal health practices and coping skills; healthy childhood development; biological and genetic endowment; health services; gender; culture. The person, their health status and the nursing care provided all have an impact on the environment.

Health
The practical nurse has an interest in all aspects of health, including the level of wellness, well-being and quality of life that the person experiences. Health is not a static state. It is in perpetual motion. Nursing, person and environment influence health. The health experience of the person can bring about a change in the environment.

Overall, the Practical Nursing Program aims to develop the students' ways of knowing, ways of being, and ways of doing. The nurse's practice is centred on the care dispensed to the person who, in continual interaction with his or her environment, lives health experiences.

After completing the program, entry-level practical nurses must maintain their continuing professional development to be in a position to meet the new challenges facing health care.

4.6 Program Goals
The program’s goals provide clear statements of expected results. The goals are derived from the School of Nursing and Health Studies mission, vision, and values which are interlinked to the Université de Saint-Boniface mission and vision, require that the graduate will be able to:

1. Practice in a self-regulated, professional and ethical manner, applying the profession’s standards of practice, scope of practice, and code of ethics along with the standards of the practice setting.
2. Engage in evidence-informed professional nursing practice that is directed toward promoting health, preventing illness, managing disease processes, restoring optimal function, and alleviating suffering in clients across the lifespan in a variety of settings.

3. Be accountable and responsible for their practice and are committed to protecting the public.

4. Recognize their limitations and seek guidance from experienced practitioners.

5. Provide safe, competent, culturally safe, and ethical nursing care in a variety of settings to clients throughout the lifespan.

6. Demonstrate critical thinking, flexibility, creativity, and clinical judgment in unpredictable and complex situations.

7. Work collaboratively as part of the interprofessional team to ensure responsiveness to client needs.

8. Develop and implement effective communications strategies to promote quality work environments for the health care team.

9. Exemplify professional nursing practice that is proactive and responsive to the changing health care needs of society.

10. Engage in lifelong learning including continued self-reflection to promote personal and professional growth and continuing competence.

11. Address the determinants of health throughout all phases of the nursing process.

12. Use attributes of an effective leader to positively impact on population health and health care policy.

13. Use patient care technologies, information systems and communication systems to facilitate safe, efficient and effective nursing practice.

14. Evaluate and implement clinical quality improvement, risk management, nursing research, and best practice guidelines to provide quality nursing care.

15. Uphold the ideals of social justice, inclusivity, and equity through respectfulness, cultural competence and cultural safety.

16. Apply professional, ethical/moral, and legal standards in decision-making with respect to health and health care delivery.

4.7 References


Canadian Council for Practical Nurse Regulators. (2013). Compétences d'admission et de pratique pour les infirmiers et infirmières auxiliaires autorisé(e)s. [Entry to Practice Competencies for Licensed Practical Nurses].


College of Registered Nurses of Manitoba. (2013). *Compétences de niveau débutant pour les infirmières immatriculées du Manitoba.* [https://www.crnm.mb.ca/support/resources](https://www.crnm.mb.ca/support/resources)


SECTION V: RESPONSABILITIES AND EXPECTATIONS

5.1 Program Governance

USB’s Board of Governors approves the Bachelor of Nursing and Diploma Practical Nursing. The programs are directed by School of Nursing and Health Studies (SNHS) and are the administrative responsibility of the Dean. The USB and SNHS organization charts visually depict the structure for reporting and decision-making.

It should be noted that the programs are offered in collaboration with USB’s Faculty of Arts and Faculty of Science and l’École technique et professionnelle. Courses such as psychology and biomedical sciences, are taught by instructors from these faculties.

The mandate of USB’s college division is to offer college-level, French-language programs that meet the educational, professional, cultural, social, and linguistic needs of Manitoba’s Francophone community.

To accomplish this, USB’s college division:
- Offers relevant, current, practice-focused programs;
- Ensures the satisfaction of its students, graduates, and employers with the programs;
- Promotes mastery of the French language by creating an environment that supports language skill improvement;
- Provides a setting that supports the person’s overall development by offering services that meet the students’ sociocultural needs;
- Responds to the community’s training requests in an efficient and flexible manner;
- Establishes links with the job market, professional associations and education networks;
- Contributes to the economic, social and cultural development of Manitoba’s Francophone community.

School of Nursing and Health Studies

After many years under the tutelage of the USB’s École technique et professionnelle, the School of Nursing and Health Studies (SNHS) was created in June 2017.

The SNHS aims to develop critical thinking, reflective practice, problem-solving skills, professional communication skills, teamwork skills, leadership and, in the case of specific programs, for students, an interest in participating in research activities, and a desire to exercise political influence in health care.

Its pedagogical approach is based on laboratory simulations and practicums through partnerships, and puts the active offer of French-language services at the forefront.

5.2 Roles and responsibilities

Nurses have a professional obligation to support learners to develop and refine the competencies needed for safe, ethical and effective practice, and to support the development and socialization of students who are learning.

In any practice setting, the primary responsibility of a nurse is to the client. When learners participate in providing client care, a nurse supporting the learner is responsible for ensuring client safety while facilitating a positive learning experience. The following will clarify the responsibilities of the Clinical Education Facilitator, Practicum Course Leader, Administrator of Clinical Education and Student. All nurses and learners require a setting that is supportive of learning experiences and needs.
5.2.1 Clinical Education Facilitator Job Description

In practice settings, nurses act in formal support roles, such as preceptors, to ensure client safety and facilitate a learning environment that encourages professional growth, career development and high-quality client care.

Accountability: Dean of the SNHS

Main duties:

- Facilitate students’ learning in a variety of settings.
- Ensure students’ clinical readiness to achieve patient safety standards.
- Promote and maintain a safe, positive and creative learning environment.
- Organize all material, learning tools and other documentation for the clinical experience, including orientation packs for care units.
- Reserve lockers and post-clinical rooms in the participating establishment through the person responsible for this.
- Facilitate orientation of students to their practicum placements and to policies and procedures.
- Consult with nursing staff when assigning patients. Nursing staff is ultimately responsible for patient care.
- Post patient assignment at the beginning of the practicum day, at the latest.
- Be present in the care unit and collaborate with staff.
- Prepare and maintain appropriate documentation related to students’ formal clinical evaluation daily.
- Coordinate student activities during the practicum, monitor their performance and discuss it with the course instructor.
- Encourage students to use appropriate resources; (for example, laboratory, videos, books or other).
- Address and document all incidents that reflect difficulties, (for example: clinical errors and unprofessional conduct, etc.) and collaborate with the practicum instructor, as necessary.
- Provide constructive verbal and written feedback to students daily regarding their clinical setting performance and care plans (for example: correct work, care plans).
- Evaluate students’ knowledge in order to safely entrust them with clients, according to their level of experience.
- Be available to students during technique evaluations.
- Teach students and supervise them while they provide care. If this is not possible, the instructor may either:
  - Ask the nurse responsible for the student’s clients to observe him or her while performing certain procedures or techniques
  - Make an agreement with the nurse responsible for the student’s clients to supervise him or her while performing any procedure or technique.
- Act as the resource person for care unit staff regarding teaching the students.
- Contribute toward developing related policies and procedures within the institution.
- Participate in identifying, presenting, implementing and evaluating clinical practice guidelines.
- Participate in the orientation and training of new teaching staff.
- Update orientation tools (for example, orientation packs for specific clinical units).
- Participate in identifying, presenting, implementing and evaluating practicum evaluation tools.
- Demonstrate professional values and principles according to practice standards.
• Help to resolve problems with staff members in clinical settings.
• Promote nursing programs and recruitment.
• Seek collaboration with appropriate resource persons.
• Inform clinical setting staff members regarding academic programs, practicum students and learning objectives.

Qualifications
• Knowledge of French and English, oral and written;
• Bachelor of Nursing;
• Valid certificate of registration from the College of Registered Nurses of Manitoba;
• A minimum of five years of varied clinical experience;
• Experience in clinical and/or academic teaching is an asset;
• Experience using various computer systems and software.

Skills and Abilities
• Leadership and team spirit;
• Creativity, initiative, independence and professional commitment;
• Able to learn to use specialized software;
• Excellent communication and interpersonal skills.

Knowledge
• Good understanding of how ESIES and clinical units operate;
• Knowledge of information technology in the health care field.

5.2.2 Practicum Course Leader Role

The Practicum Course Leader (PCL) is responsible for orientating and supporting student clinical education. The PCL provides leadership in the development, delivery, evaluation and planning of the clinical learning program. The PCL will work closely with all the CEFs and provide CEFs with support to ensure that the learning objectives of the clinical courses are met. The PCL will meet with students and CEFs who require learning contracts. The PCL is responsible to the Administrator of Clinical Education and Dean, SNHS.

Other roles and responsibilities:
• Split students into clinical groups.
• Assist with preparing a list of clinical placements required for the academic year in collaboration with the ACE and Academic Coordinator.
• Update lesson plans and evaluation tools in collaboration with the Curriculum Coordinator, ACE, and Academic Coordinator.
• Guide clinical supervisors in collaboration with the ACE in terms of their clinical course responsibilities.
• Review practicum-related lesson plan, material, evaluation tools and techniques.
• Communicate with clinical supervisors regularly regarding students’ progress.
• Assists clinical instructors with the clinical performance evaluation process throughout the clinical experience.

5.2.3 Administrator of Clinical Education Role

The Administrator of Clinical Education (ACE) is responsible for finding clinical placements and recruiting CEFs. The ACE is responsible for student and CEF orientation to the clinical courses. The ACE mentors new and returning CEFs. He or she also develops the course objectives, assignments and work with the Curriculum Coordinator, Academic Coordinator and Practicum Course Leader during the initial clinical course. The ACE assists when necessary with the Pass/Fail grade for the clinical course or clinical learning program. He or she is also responsible for ensuring that students meet
all of the practicum requirements. It's important as a CEF, to establish positive relationships with the Practicum Course Leader, Administrator of Clinical Education, Nurse Manager, Nurse Educator and Receiving Coordinator.

Other roles and responsibilities:

- Prepare list of clinical placements required for the academic year in collaboration with the Academic Coordinator.
- Update lesson plans and evaluation tools in collaboration with the PCL, Curriculum Coordinator and Academic Coordinator.
- Guide clinical supervisors in terms of their clinical course responsibilities.
- Review practicum-related lesson plan, material, evaluation tools and techniques.
- Communicate with the PCL regularly regarding students’ progress.
- Assists clinical instructors with the clinical performance evaluation process throughout the clinical experience if needed.

5.2.4 Student Role

Other roles and responsibilities:

- Make all necessary efforts to ensure competent practice during his or her practicum.
- Follow all instructions provided in the course outline.
- Attend staff report for previous shift and provide report at end of shift.
- Communicate care plan to staff members and have it approved by them.
- Verbally communicate all relevant information to staff in practicum setting throughout practicum day.
- Use knowledge while collecting information, analyzing and planning, implementing, and evaluating patient and care.
- Clearly and effectively communicate with clients and staff members.
- Notify clinical supervisor and clinical setting staff members when leaving the unit.
- Demonstrate professional qualities while adhering to the Code of Ethics and professional standards.
- Document all relevant information regarding client care according to standards and procedures.
- Maintain confidentiality in accordance with the Personal Health Information Act (PHIA).
- Be responsible for gathering relevant information in order to determine a care approach for clients.
- Actively participate during pre- and post-conferences and help establish care plan to allow for continuity of care.
- Receive pertinent information from nursing staff before beginning activities with clients.
SECTION VI: GENERAL INFORMATION

6.1 Communication with Students

It is imperative that students and instructors use their USB email to communicate about all course-related activities. Do not use your “personal” email. If you have any questions regarding your email account or for obtaining access to your course information on the learning platform please contact the Practicum Course Leader.

6.2 Social Media

Since you are engaged in a teaching/learning relationship with your students it is imperative that this is maintained at a professional level. Please do not “friend” any of your students on Facebook, follow on Twitter, or engage in any social media contact.

Professional behavior must be maintained at all times. Although we recognize that social media tools on the internet are a common forum for students to communicate with one another. It is IMPERATIVE that no information relating in any way to your classroom or clinical experiences (including students, instructors, professors, patients, CEF, unit environment, facility, etc) is shared through any of these forums.

6.3 Lines of Communication

When there is a concern during the clinical practicum, it is crucial that first, there be a conversation between the clinical supervisor and the student. The purpose of the discussion is to address the issue. If it is not resolved, the practicum instructor must be informed as soon as possible in order to determine a solution.
The diagram below outlines the recommended channel of communication:

6.4 Dealing with a Weak or Struggling Student

Responsibilities of Clinical Education Facilitators

- Communicate with the PCL when behaviors start to demonstrate a student's unsatisfactory clinical performance.
- Identify specific behaviors that demonstrate a student's unsatisfactory clinical performance (both verbally and in the student's weekly anecdotal notes and evaluation form).
- Consult the PCL and/or the ACE before deciding to remove student from clinical setting, if there are concerns regarding client safety.
- Develop a learning plan with the student that is focused on improving his or her clinical performance, expected behaviours and timeframes.
- Inform the PCL of the situation and, together, examine the student's performance and the strategies determined for its improvement.
- Write a report on the interactions with the student regarding his or her performance.
- Include a review of all written documents related to the evaluation and advise the student to communicate with the PCE, during the evaluation interview.
- Explain the circumstances which led to the student's failing grade, in the case of an appeal. The Dean will invite you to a meeting.
- Please note there no conditional pass for a clinical experiences.
Responsibilities of the Practicum Course Leader

- Review and clarify practicum objectives.
- Review, with the clinical education facilitator, the behaviours indicating a student's insufficient performance and create an action plan to provide him or her with the required help.
- Review the student’s file to determine, as required, a pattern of clinical and academic performance and communicate all relevant information to the clinical supervisor. Consult the ACE and/or academic coordinator if needed.
- Maintain communication with the clinical education facilitator to ensure the action plan is carried out and that the student's progress notes are created.
- Inform the ACE and academic coordinator of the student's difficulties and the suggested action plan.
- Review the written anecdotal and evaluation notes before the instructor or clinical supervisor assigns the student a failing grade.
- Meet with the student who is about to or has received a failing grade, to hear his or her position, as necessary. Explain the impact of failing a clinical practicum and ask whether he or she plans to submit an appeal or withdraw from the course. Refer him or her to the administrator and/or coordinator of the program.

6.5 Procedure for Adverse Event

In the event of an accident during practicums, follow the institutional procedure and inform the PCL as soon as possible.

Student must report all adverse events and/or near misses immediately to assist in the tracking.

Adverse event:
An unintended patient injury or complication that results in disability at the time of discharge, death, or prolonged hospital stay and that is caused by health care management rather than the patients underlying disease process.

Near miss includes:

i. Any action that may have/could have impacted or caused harm to a patient

ii. Patient injures his/her self while under the care of a student

iii. Student fails to fulfill orders prescribed for a patient under his/her care

iv. Student violates a direct patient care policy of the health agency/USB within which she/he is receiving the clinical experience

v. Providing treatments or medications not prescribed for a specific patient under his/her care

vi. Student is prevented from implementing a procedure, treatment or medication by the instructor/staff member because it will result in an actual/potential injury to the patient

vii. Student fails to use sound clinical judgment when caring for a patient

In the event of an adverse event or near miss, the student shall:

1. Immediately assess and respond to the event and seek help from the Clinical Education Facilitator, the primary nurse or another healthcare provider.

2. Alert the appropriate people in regards to the event (i.e. Clinical Education Facilitator, primary nurse, physician, patient, family members, etc.).

3. Complete and distribute the respective regional health authority Occurrence Report as per the region’s policy (no copies of this form are permitted).
4. Complete USB’s Occurrence Report (see appendix) as per USB’s policy. The policy and form are located on USB’s website (eCAMPUS).

5. Notify the Course Leader of the occurrence by telephone or in person with a description of the actions that have been taken. This notification needs to occur as soon as possible after the event has occurred and no later than the end of the shift.

6. After debriefing with the Clinical Education Facilitator, submit the USB Occurrence Report form to the Course Leader within 24 hours of the event occurrence.

Thereafter the PCL shall:

1. Review and discuss the follow up with the Administrator of Clinical Education within 24 hours of receiving USB’s Occurrence Report form.
2. Submits USB’s Occurrence Report form to the Administrator of Clinical Education.

Final follow up the Administrator of Clinical Education shall:

1. Compile and analyses the safety events and conducts follow ups as necessary.
2. Submits a report at the end of each term to the Academic Coordinator and Dean in order to initiate changes if required. All USB Occurrence reports will be stored for 5 years.
3. The Academic Coordinator submits an annual report to the College indicating follow-up actions.

*USB’s form is available online

Note:
For students enrolled in the DPN program, CLPNM will be notified of any adverse event that cause harm to a patient immediately following the occurrence.

6.6 Student Clinical Evaluations

The School of Nursing and Health Studies uses the Pass/Fail grading method of clinical experiences. Please refer to the course syllabus, the Clinical Educator Handbook and the Student Handbook for more information. Your Practicum Course Leader and Administrator of Clinical Education will assist you to become familiar with this tool.

All clinical evaluations for each student in the SNHS are kept in the students file (locked room by the advisor of non-academic requirements’ office). This file is considered confidential. Evaluations contain valuable information about a student’s progress throughout the nursing program. Most of the clinical courses also expect the student will write a self-evaluation of their clinical performance. These self-evaluations are also kept in the files.

It is imperative that student issues are accurately assessed and identified in the evaluation forms while providing supporting documentation. Remember, that you are evaluating the student for the following term, as the student has further clinical courses to complete. We want students to be aware of what areas they need to improve upon, so they can grow into confident nurses. This may be a psychomotor skill or professional behaviour.

If a student has significant learning issues during the clinical course or throughout the program, they may need to meet with the Practicum Course Leader, Administrator of Clinical Education, Academic Coordinator and/or the Dean.

Depending on the circumstance, the students’ clinical evaluations may be reviewed, often to look for a pattern of behaviour or whether the incident under discussion was an isolated
event. Fair and reasonable evaluations are important.

Please refer to the course syllabus and the Student Guide for further information.

Examples of probing questions

Below are some examples of questions that can be used to develop and assess students’ knowledge and thinking. Clinical Education Facilitators can use the questions as they are written or modify them to suit the particular content or context of the student learning situation. There is no expectation that all questions will be used in one CEF-student discussion. Student responses can lead to additional CEF questions. Examples of 3 types of questions are provided:

1. Questions to develop and assess knowledge, understanding, and application of theory
2. Questions to develop and assess students’ higher order thinking, including critical thinking
3. Probing statements or questions to follow a student response

Questions to Develop and Assess Students’ Knowledge, Understanding, and Application of Theory

- What are the (normal lab values, expected behaviour for an X-year old child, medication side effects, etc.)? How does that fit with what you’re seeing?
- What do the Best Practice Guidelines say?
- What are the data sources you are using? What others could you use?
- What could be an explanation for this situation? What other explanations might there be?
- Explain (disease, community resources, a particular theory, etc.).
- Compare this situation to what you saw last week.
- How does your patient’s situation compare with what you expected? Why might that be?
- What theory helps you to understand this situation? How does the theory help?
- How does the theory you learned in class apply to this situation?
- Using X theory as your base, describe (the nursing care you will provide, how you will approach this situation, what you will evaluate).
- What is the rationale for your care?

Questions to Develop and Assess Students’ Higher Order Thinking, including Critical Thinking

- Explain why the data you have collected are significant.
- What are the important cues in the data?
- What influences how much weight you put on the information you have gained from the patient and other data sources?
- How have you clustered or grouped the data to generate a nursing diagnosis?
- What other nursing diagnoses could be possible in this situation? Why have you chosen the one(s) that you consider to be best?
- What is your plan for this situation? What is the theory or rationale the plan is based on?
- What tells you that the interventions are effective? What are the criteria you are using to judge the effectiveness of the intervention? How do you know these are the right criteria?
- What is your analysis of the situation?
- What are the ethical principles in operation in this situation?
- Tell me about the thinking that led to this conclusion (about a nursing diagnosis, patient care, or other clinical matters)
- Based on X, what would you predict?
• What are the assumptions (in your statement, in the treatment plan, in patients' statement, etc.)?
• What is missing (in what you know, the data that has been collected, the people taken into account, etc.)?
• What are the main ideas you take from this situation? How will you use those ideas in the future?
• What have you learned in this situation that will influence your future practice?

Probing Statements or Questions to Follow a Student Response

• Tell me more about that.
• That would be important because......
• How does that relate to what you know about (physiology, best practices, a particular theory, etc)?
• How can you explain that?
• How could you learn more about that?
• What else would you like to know?

Tips for Clinical Evaluation

On a daily basis jot a few notes down on each student. Carry an anecdotal record for each student, maintaining privacy of data. Make specific notes, focusing on specific details of the student’s behavior.
• Document patterns of behavior over time through compilation of records.
• Use multiple sources of data for evaluation (e.g. the student, buddy nurses, patents, peer evaluator, written and verbal work, documentation, nursing care plans etc.)
• Assist the student to identify weekly goals and assess during the midterm evaluation, in order to help the student progress through the course.
• Use the Pass/Fail Evaluation Tool to help students understand what knowledge and skills they will need to demonstrate.
• Ensure you provide positive reinforcement, as well as provide constructive criticism when required. Provide “mini-evaluations” (daily, weekly) in order to provide ongoing suggestions.
• Provide evaluation “sandwiches” commenting first on a strength, then a weakness/area of improvement, and then a strength of student behavior.
• Present feedback and evaluation in non-judgemental language confining comments to student behavior.
• Be specific with the use of examples (dates, times, patient initials, etc.)
• Ask for feedback of the student’s performance from the health care team (e.g. staff nurses, physiotherapist, unit managers etc.)
• Midterm evaluation is very important as it is a stepping stone, and provides student with vital information regarding what they need to improve upon. However, do not wait until then to provide feedback: this should be ongoing during the clinical weeks.
• Invite students to complete self-assessments and summarize what they have learned.
• Help students to prioritize learning needs with specific goals for each day.

6.7 What to do Before Your Clinical Experience

Clinical Education Facilitators are to read the entire Clinical Instructor Guide and Student Handbook prior to the start date.

Immunizations

CEFs must be vaccinated for the following illnesses: diphtheria or tetanus, polio, measles, rubella, mumps, chicken pox, influenza, hepatitis B, and Mantoux. Proof of these immunizations must be submitted to the Administrator of Clinical Education upon signing the contract.

Pyxis
The CEF must take the « Train the trainer » training with the laboratory coordinator. He or she must then follow each institution’s policy and procedure regarding the training expectations for students.

PHIA

The clinical supervisor must ensure that he or she follows each institution’s policy and procedure regarding PHIA documentation for students.

Other required documentation

The CEF must provide a copy of these documents to the Administrator of Clinical Education upon signing their contract.

- Official Criminal Record Check certificate, including Vulnerable Sector Check
- Official Child Abuse Registry Check certificate
- Official Adult Abuse Registry Check certificate
- Adult criminal record and child abuse registry self-declaration form
- Cardiopulmonary Resuscitation Certificate, Level HCP (Health Care Provider)
- Completed HSPnet form
- Immunizations
- N95 Mask

NVCI (Non-Violent Crisis Intervention)

This training is strongly recommended for clinical supervisors, as it is mandatory in certain institutions.

Identity Card

Upon taking up a position at Université de Saint-Boniface, you must obtain an identity card in order to receive access to various resources, such as the library. This identity card is also mandatory for clinical supervisors at St. Boniface Hospital. You can obtain this card at the Sportex, located in room 0340 in the USB basement.

Name Tag

As a clinical supervisor, you must have an identification name tag on practicum and laboratory days. This name tag will be ordered by the administrative assistant. She will contact you when the name tag has been delivered. You may pick it up at room 1405.

Reserving USB Classrooms

Communicate with the administrative assistant to reserve a classroom at the Université de Saint-Boniface.

Photocopier

You have access to the photocopier located in room 0622 in the Pavillon. Access to a computer and a printer is also available in room 1612 from 8:30 to 4:30. Please contact the practicum instructor for access and assistance.

Parking Fees

It should be noted that in order to be reimbursed for parking fees, the form Réclamation pour remboursement de dépenses (Expense Reimbursement Claim) (attached) must be completed, signed and submitted to the ETP Office administrative assistant along with all parking receipts.

Learning Plateform

As a clinical supervisor, you also have access to eCampus. eCampus is a learning plateform where course instructors post all relevant information for students (course plans, laboratory schedules, etc.).
SECTION VII: ADMISSION

In addition to the requirements listed below, students must meet general admission requirements, as well as program-specific requirements.

7.1 Baccalaureate in Nursing

All students must meet the following admission requirements:

High school diploma with:
- Minimum average of 70%
- 65% in a 40S science course (Chemistry or Biology)
- 60% in Français 40S and English 40S
- 60% in Pre-Calculus 40S or Applied Mathematics 40S

Or

Be an adult student (21 or older), without a completed high school diploma, but with:

- A minimum average of 65%
- 65% in a 40S science course (Chemistry or Biology)
- 60% in Français 40S and English 40S
- 60% in Pre-Calculus 40S or Applied Mathematics 40S

7.3 Language Requirements

7.3.1 Applicants with English as a second language

The program is offered in French. However, there are some English-language mandatory textbooks and suggested texts. Additionally, knowledge of English is essential for entering into the work setting where students will be placed for practicums.

In addition to the noted admission requirements, an applicant whose first/primary language is not English must provide evidence of language proficiency by submitting the required language test scores from one of the following Nursing Board approved language proficiency tests.

International English Language Testing System (IELTS) – academic version:

<table>
<thead>
<tr>
<th>Test</th>
<th>Writing</th>
<th>Speaking</th>
<th>Listening</th>
<th>Reading</th>
</tr>
</thead>
<tbody>
<tr>
<td>IELTS</td>
<td>7.0</td>
<td>7.0</td>
<td>7.5</td>
<td>6.5</td>
</tr>
</tbody>
</table>

Canadian English Language Benchmark Assessment for Nurses (CELBAN):

<table>
<thead>
<tr>
<th>Test</th>
<th>Writing</th>
<th>Speaking</th>
<th>Listening</th>
<th>Reading</th>
</tr>
</thead>
<tbody>
<tr>
<td>CELBAN</td>
<td>7</td>
<td>8</td>
<td>10</td>
<td>8</td>
</tr>
</tbody>
</table>
7.3.2 French-language placement test (Le profil linguistique)

All first-time applicants accepted to the University must complete their profil linguistique through the SPL before registering for courses.

The results of the profil linguistique help to direct students to the right French courses and help the SPL to offer measures to help fill any existing gaps.

Note: The results of the profil linguistique are valid for a two-year period. Generally, it is recommended to take the profil linguistique once only. If the SPL allows a student to repeat the profil linguistique less than two years after the first attempt, the student will be charged a $135 repeat fee. During the first year of studies, students usually register for a full course or two half courses in French. For certain programs, the number of French courses required depends on the profil linguistique results. Students can only register for the courses they are directed to according to their profil linguistique results. Passing one or more courses is a diploma requirement. Please note that this is a minimum requirement.

For more information on the French-Language profil linguistique, see the USB website.

7.4 Non-Academic Requirement

See Section IV: Non-Academic Requirements of the Student Handbook

7.5 Tuition Fees and Dates To Remember

Veuillez consulter le lien ci-dessous.
mailto:https://ustboniface.ca/frais

The orientation week for the Bachelor of Nursing and the Diploma Practical Nursing will take place from Monday, August 27, 2018 to Friday, August 31, 2018.

Attendance is mandatory
SECTION VIII: NON-ACADEMIC REQUIREMENTS

All students must meet the non-academic admission requirements prior to registration.

- Any costs associated with the Non-Academic Requirements are the responsibility of the student.
- All documentation needs to be submitted 10 business days prior to registration.
- As it may take a number of months to complete all non-academic requirements, it is recommended that students apply for their checks upon acceptance in the program.

8.1 Résumé of Non-academic Requirements

Students – Year 1 (DSIA and BSI)

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiopulmonary Resuscitation Certificate HCP level (annually)</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>First Aid Certificate (every 3 years)²</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>All immunizations, including hepatitis B 1st dose and Mantoux Test (2 steps)</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Hepatitis B (2nd and 3rd doses, including serology)</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Criminal Record Check, including Vulnerable Sector (VS)</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Child Abuse Registry Check</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Adult Abuse Registry Check</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Self-declaration of records (annually)</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Personal Health Information Act (PHIA) training</td>
<td>In class</td>
</tr>
<tr>
<td>HSPnet form</td>
<td>In class</td>
</tr>
<tr>
<td>N95 Mask Fit Testing</td>
<td>Prior to registration³</td>
</tr>
</tbody>
</table>

Students – Year 2 (DSIA and BSI)

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Due Date</th>
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</thead>
<tbody>
<tr>
<td>Cardiopulmonary Resuscitation Recertification HCP level</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Self-declaration</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>ASSIST</td>
<td>In class</td>
</tr>
</tbody>
</table>

Students – Year 3 (BSI)

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recertification First Aid Certificate</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>N95 Mask Fit Testing</td>
<td>Prior to registration³</td>
</tr>
</tbody>
</table>

Students – Year 4 (BSI)

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recertification en réanimation cardiorespiratoire niveau ISS (HCP)</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Self-declaration of records (annually)</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Recertification First Aid Certificate</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>N95 Mask Fit Testing</td>
<td>Prior to registration³</td>
</tr>
<tr>
<td>Mantoux Test (1st step)</td>
<td>Prior to registration³</td>
</tr>
</tbody>
</table>

8.2 Child Abuse Registry Check

The College of Registered Nurses of Manitoba, College of Licensed Practical Nurses of Manitoba (CLPNM) and clinical agencies where nursing students are placed for clinical practice require that all students and graduates of an approved nursing education program who wish to practice nursing in this province disclose information about any conviction for an offence under the Criminal Code (Canada), the Controlled Drugs
& Substance Act (Canada), of the Food and Drugs Act (Canada) in order to be considered for eligibility for registration with the College.

All successful applicants are admitted provisionally to the program pending compliance with the Child Abuse Registry check. All applicants must submit a completed Child Abuse Registry check prior to registration. Any applicant on the Child Abuse Registry will be denied admission.

After admission, at any time prior to completing the program, students who become listed on the Child Abuse Registry are required to report this information to the Academic Coordinator. Listing on the Child Abuse Registry will result in dismissal from the program.

Some clinical practice sites require that students complete a current or additional Child Abuse Registry check prior to the first clinical practice day.

**Before admission**

i. Students are recommended to apply for the Child Abuse Registry check upon acceptance in the program. (As it can take up to 120 days to obtain this document)

ii. Students must submit a completed Child Abuse Registry check before June 28 to the Advisor, non-academic requirements.

**After admission**

i. Students must submit a yearly self-declaration, indicating whether they are listed on the Child Abuse Registry before June 28 to the Advisor, non-academic requirements.

ii. The onus is on the student who becomes listed on the Child Abuse Registry to report this information to the Academic Coordinator.

iii. Students who become listed on the Child Abuse Registry are required to report this information to the College Of Licensed Practical Nurses. (DPN students only)

iv. The Academic Coordinator will notify the Executive Director of the College of Licensed Practical Nurses of the student’s positive Child Abuse Registry Check and dismissal from the program. (DPN students only)

### 8.3 Adult Abuse Registry Check

All successful applicants are admitted provisionally to the program pending compliance with the Adult Abuse Registry check. All applicants must submit a completed Adult Abuse Registry check prior to registration. Any applicant on the Adult Abuse Registry will be denied admission.

After admission, at any time prior to completing the program, students who become listed on the Adult Abuse Registry are required to report this information to the Academic Coordinator. Listing on the Adult Abuse Registry will result in dismissal from the program.

Some clinical practice sites require that students complete a current or additional Adult Abuse Registry check prior to the first clinical practice day.

**Applicant**

i. Students are recommended to apply for the Adult Abuse Registry check upon acceptance in the program. (As it can take up to 120 days to obtain this document)

ii. Students must submit a completed Adult Abuse Registry before June 28 to the Advisor, non-academic requirements.

**After admission**

i. Students must submit a yearly self-declaration, indicating whether or not they are listed on the Adult Abuse
Registry before June 28 to the Advisor, non-academic requirements.

ii. The onus is on the student who becomes listed on the Adult Abuse Registry to report this information to the Academic Coordinator.

iii. Students who become listed on the Adult Abuse Registry are required to report this information to the College Of Licensed Practical Nurses. (DPN students only)

iv. The Academic Coordinator will notify the Executive Director of the College of Licensed Practical Nurses of the student’s positive Adult Abuse Registry Check and dismissal from the program. (DPN students only)

8.4 Criminal Record Certificate

All successful applicants are admitted provisionally to the program pending compliance with a Criminal Record Search Certificate including a vulnerable sector search. All applicants must submit a completed a Criminal Record Search Certificate including a vulnerable sector search prior to registration.

Note: A criminal conviction will not necessarily result in denial of admission to the School of Nursing and Health Studies. Applications from persons with criminal records will be reviewed by the Professional Practice Committee.

After admission

i. Students must submit a yearly self-declaration, indicating whether or not they have been charged with a criminal offence or convicted of a criminal offence before June 28 to the Advisor, non-academic requirements.

ii. The onus is on the student who is charged with a criminal offence or convicted of a criminal offence to report this information to the Academic Coordinator.

Note: Students charged with a criminal offence or convicted of a criminal offence will be reviewed by the Professional Practice Committee.

iii. Students charged with a criminal offence or convicted of a criminal offence are required to report this information to the College Of Licensed Practical Nurses. (DPN students only)

Some clinical practice sites require that students complete a current or additional Criminal Record Search Certificate including a vulnerable sector search prior to the first clinical practice day.

Applicant

i. Students are recommended to apply for the Criminal Record Search Certificate including a vulnerable sector search upon acceptance in the program. (As it can take up to 120 days to obtain this document)

ii. Students must submit a completed Criminal Record Search Certificate including a vulnerable sector before June 28 to the Advisor, non-academic requirements.

Note: Applications from persons with criminal records will be reviewed by the Professional Practice Committee.

Applicant

i. Students are recommended to apply for the Criminal Record Search Certificate including a vulnerable sector search upon acceptance in the program. (As it can take up to 120 days to obtain this document)

ii. Students must submit a completed Criminal Record Search Certificate including a vulnerable sector before June 28 to the Advisor, non-academic requirements.

Note: Applications from persons with criminal records will be reviewed by the Professional Practice Committee.

After admission

i. Students must submit a yearly self-declaration, indicating whether or not they have been charged with a criminal offence or convicted of a criminal offence before June 28 to the Advisor, non-academic requirements.

ii. The onus is on the student who is charged with a criminal offence or convicted of a criminal offence to report this information to the Academic Coordinator.

Note: Students charged with a criminal offence or convicted of a criminal offence will be reviewed by the Professional Practice Committee.

iii. Students charged with a criminal offence or convicted of a criminal offence are required to report this information to the College Of Licensed Practical Nurses. (DPN students only)
Professional Practice Committee

1. The nursing program shall establish a committee known as the Professional Practice Committee (PPC) to determine that a student with a positive criminal record check or charge with a criminal offence may continue in the program.

Membership in the PPC shall be as follows:

i. Chair (non-voting, except in case of tie) is the Academic Coordinator of the School of Nursing and Health Studies, a permanent member of the committee.
ii. Dean of the School of Nursing and Health Studies, a permanent member of the committee;
iii. Université Secretary-General, a permanent member of the committee;
iv. One representative of the Nursing Profession in question, to be appointed by the:
   a. College of Licensed Practical Nurses of Manitoba (CLPNM);
   b. College of Registered Nurses of Manitoba (CRNM);

2. In the event of that a student has a positive criminal record check or is charged with a criminal offence, the Academic Coordinator shall:

i) Refer matter to the PPC within 24 hours of receipt of notification.
ii) The Academic Coordinator will meet with student at the earliest convenience to review the process and collect required information for the PPC.

Hearing Procedures

Once a reference has been made to the PPC,

i) The student with a criminal record will be required to submit an original criminal record transcript.

ii) The hearing shall be closed to all persons.

iii) A quorum for the PUC shall be 3 members and the Chair as referred to section 1.

iv) A simple majority of the members hearing the matter is required for any finding or for the determination of the appropriate disposition of the matter.

v) The Chair of the PUC shall vote only to break a tie.

vi) Members of the PPC shall be bound by confidentiality in respect to information received in Committee. Information will only be disclosed as is reasonably necessary to implement the investigation, the resolution or the terms of any disposition imposed, or as required by law.

vii) The results of the hearing and the reasons therefore shall be conveyed in writing to the student, with copies to the Dean.

Disposition of the Matter

i) The PPC shall, after hearing all the evidence, meet in closed session with its members only, to:

   a. Consider the evidence;
   b. Consider the threats to public interest and safety;
   c. The decision to dismiss the student will be made with consideration given to the following:
      - Severity of the offence;
      - The student’s ability to attend clinical in relation to agency Criminal Record and Vulnerable Sector check policies, and
      - The student’s eligibility to register and practice upon completion of the program.

   d. Determine the appropriate disposition of the matter;
The PPC may make any disposition it deems appropriate in the circumstances. Without limiting the generality of the foregoing the following options, alone or in combination, are available:

a. Determine that no further action be taken;

b. Allow the student to remain in the program. The student will be required to disclose this information to all clinical practicum sites he/she is attending. The facility may refuse placement based on the information provided. All clinical agencies have the right to refuse to accept a student for placement based on the results of the Criminal Record and Vulnerable Sector check. Should the results of the Criminal Record Check result in a student being denied a placement in an agency or organization, the Dean of the School of Nursing and Health Studies will discuss options with the student, which may include withdrawal or dismissal from the program. The inability of the student to complete the required placement may result in the student failing to graduate;

c. Dismiss the student from the program.

In the event of an appeal, the implementation of any decision of the PUC may be suspended until the matter has been disposed of by Senate Appeals Committee.

### Records

A record of any findings of the disposition related thereto shall be kept on the student’s academic file within the Program. All information relating to the hearing before the PPC shall be kept in the office of the Dean.

### 8.5 Immunisations

Applicants must submit a completed immunization program prior to registration. Any applicant with an incomplete immunization program will be barred from registration and attending clinical.

#### Please note: Seasonal flu

Requirement (not required for fall registration)

Nursing programs require all students to receive an annual flu vaccination. Documentation confirming vaccination should be submitted to the Advisor, non-academic requirements (Local 0130) office by the end of the fall semester. Students who cannot receive the vaccine for health reasons must submit documentation (signed letter) from their doctor or other health professional. Like any other immunization, students who do not submit this documentation will be removed from their practicum.

### 8.6 CPR/First Aid Certification

Applicants must submit a current CPR (HCP level) and Standard First certification prior to registration. Any applicant without a current CPR (HCP level) and Standard First certification will be
barred from registration and attending clinical.

**8.7 Other Non-academic requirements**

Nursing students without all non-academic requirements will be barred from registration and attending clinical. This includes and is not limited to Personal Health Information Act (PHIA) training, HSPnet form, N95 Mask Fit testing, WHIMIS, ASIST training and Non-Violent Crisis Intervention certification. Students must submit proof of all non-academic requirements by June 28 each year, unless there is a prior agreement with the Advisor, non-academic requirements.

**8.8 Student Registration in the Diploma Practical Nursing (DPN)**

Full-time and part-time Diploma Practical Nursing (DPN) students are responsible for applying and renewing a Student Practical Nurse (SPN) Registration while enrolled in the DPN program in accordance with The Licensed Practical Nurses Act, 2001 and Regulation.

1. **Initial Student Practical Nurse Registration Application CLPNM**

As of the first day of classes, students have four weeks to apply for registration as a Student Practical Nurse. Students are responsible for providing all necessary documentation in English, as required or requested, directly to the CLPNM. All fees associated with registration are the responsibility of students.

In order to process the initial application for registration with the CLPNM, students must submit the following documents, in person or by mail (please refer to the CLPNM’s website at www.clpnm.ca):

- SPN Registration application form, duly completed;
- Payment of fees (NOTE: if application for registration is late, a late fee will be added to the application fee);
- Proof of identify (copy of a valid Manitoba driver’s license or of a Canadian passport) that has been notarized or verified by CLPNM staff;
- Criminal Record Search Certificate including Vulnerable Sector Search;
- Child Abuse Registry Check;
- Adult Abuse Registry Check.

All checks must be original copies or notarized copies and must have been issued within the last six months. Please note that all notarized copies must be signed by a Notary Public.

Students must sign a waiver upon application for SPN registration allowing CLPNM and Université de Saint-Boniface (USB) to share information.

Students must submit all documentation to USB and CLPNM. It is the student's responsibility to ensure that CLPNM has received the necessary documents within the required deadline. Also, as CLPNM communicates regularly with students through email, it is the student's responsibility to notify CLPNM of any changes to his or her contact information.

2. **Student Practical Nurse Registration Renewal**

Registration as a Student Practical Nurse is valid for a maximum period of 12 months, starting from the first day of classes. Students must renew their SPN Registration annually while enrolled in the DPN program.

CLPNM will send an email to students approximately 2 months before their SPN Registration expires along with instructions on how to renew it. Students may also inquire as to when their registration expires by...
checking the public register on the CLPNM’s website using the “Find an LPN” link. It is the responsibility of students to keep track of their expiry date and to renew their registration before it expires.

Student registration renewals are processed online, therefore students receive no paper renewal forms. CLPNM sends an email to students approximately 2 months before the expiry of the SPN Registration, giving them a limited amount of time to login and renew their registration. Once all required information has been submitted for the student registration renewal, students will receive an email from CLPNM stating their registration has been renewed.

3. Ensuring your registration as a Student Practical Nurse is up-to-date

Student practical nurses are expected to notify the CLPNM of any changes to their name, contact information, and enrolment status (voluntary withdrawal, fail, or removal from the program) within 30 days, as per CLPNM By-Laws. USB shall notify CLPNM of any changes to enrolment status. Criminal convictions occurring while enrolled in the DPN program must be disclosed to CLPNM as well as the USB Academic Coordinator.

4. Use of Student Practical Nurse Status

"Student Practical Nurse" (SPN) is a protected title and as such, only individuals on the CLPNM student register are allowed to use this designation. Students without a current SPN Registration are not entitled to use this title and will be barred from attending clinical and classes.

Unauthorized SPN practice or using the protected title of “Student Practical Nurse” when not eligible to do so is subject to penalties and discipline procedures set out in the Act, Regulations and CLPNM By-Laws and may prompt an investigation by the CLPNM’s Investigation Committee.

Ultimately, students who fail to register and to renew their registration with the CPLNM:

1. Will not be eligible for Graduate Practical Nurse (GPN) Registration;

2. Will not be able to work as a GPN between the graduation date and the writing of the Canadian Practical Nurse Registration Exam (CPNRE);

3. Will not be eligible to write the CPNRE.

Note: Not being eligible to write the exam on time for this reason may be considered a first time fail, and therefore may be counted as 1 of the 3 exam attempts.

Disclaimer

The DPN programme is a two-year program of study and the CLPNM information related to Student Practical Nurse Registration presented in this Policy may change before you graduate. For the most up-to-date information, please refer regularly to the CLPNM’s website at www.clpnm.ca.
SECTION IX: PROFESSIONALISM

All CLPNM registrants (licensed practical nurses, graduate practical nurses and student practical nurses), in all roles and settings, are expected to understand, uphold and promote the ethical standards of the profession.

As a Student Practical Nurse you are responsible for upholding specific standards that are based on the values of the nursing profession. These values are:

- Respect and dignity of the person
- Compassionate care
- Trustworthy professional relationships
- Informed decision-making
- Safety and protection of the public
- Privacy and confidentiality
- Justice, equity, and fairness
- Quality work environments

More specifically, the Code of Ethics serves as the foundation for the nurse’s professional practice. Further, the Code:

- Outlines the nursing profession’s commitment to respect, promote, protect, and uphold the fundamental rights of people who are both the recipients and the providers of health care
- Describes the accepted standards for ethical decision-making, ethical practice, and the professional conduct expected of nurses
- Provides a framework for professional integrity, accountability, and responsibility.

Six broad ethical standards, listed below, govern the conduct of members of the Licensed Practical Nursing profession. The value statements following each standard describe the ideals for nursing care and establish reasonable directions for practice.

The six ethical standards for the practical nursing profession are:

- People-centred approach: nurses empower and enable people to maintain, promote and protect their health and well-being.
- Compassionate, safe, ethical and competent care: nurses are committed to providing quality, compassionate, safe, ethical and competent care.
- Ethical management of personal health information: nurses manage the privacy and confidentiality of personal health information.
- Collaboration with the health care team: nurses encourage and support collaborative, comprehensive and integrated health care.
- Professional integrity and conduct: nurses act with integrity and are mindful of their professional conduct.
- Professional responsibility and accountability: nurses, as members of a self-regulating profession, are responsible for knowing the Code of Ethics, are accountable for their actions and decisions, and are answerable to the CLPNM for their practice.

9.1 Code of conduct

Students in the nursing program must also comply with the ETP Code of Conduct, including:

- Maintaining honesty and personal integrity at all times
- Having regular attendance in course and all related activities
- Being punctual to class and all related activities
- Being prepared for course and all related activities
- Actively participating in course and all related activities
- Adhering to deadlines
- Respecting every person
- Maintaining a physical environment that is conducive to learning.
9.2 Code of Conduct for the Simulation Centre

i. No student is allowed in the simulation laboratory without the presence of the laboratory coordinator or a faculty member.

ii. Food and drinks are STRICTLY PROHIBITED in the patient rooms of the simulation laboratory.

iii. All students must sign in upon arriving at the simulation laboratory.

iv. Professional attire is required, i.e. nurse uniform and closed shoes; wearing a watch or jewellery on the forearm is prohibited; artificial nails are also prohibited; hair that may contaminate patient areas must be tied back. Anyone not in professional attire will be refused access to the simulation laboratory.

v. Anyone with a LATEX ALLERGY must advise the laboratory coordinator before entering the lab.

vi. Cell phones, pagers and all other electronic devices must be turned off during clinical simulation. Messages may be checked during breaks.

vii. Damage to mannequins or to any other equipment in the simulation laboratory or malfunctioning equipment must be immediately reported to the laboratory coordinator.

viii. Anyone using the simulation laboratory must demonstrate professionalism and courtesy in his/her conduct and remarks, as stipulated by the USB Politique sur le harcèlement et le harcèlement sexuel [Harassment and Sexual Harassment Policy].

ix. It is prohibited to remove equipment, computers or other material from the simulation laboratory.

x. Changes to the aforementioned rules may be made at the discretion of the simulation laboratory coordinator or a faculty member.

9.3 Code of Conduct for the Laboratories

To describe the behaviour expected of individuals when using the laboratories.

i. The clinical dress code must be followed at all times in the laboratories.

ii. "Invasive" techniques are not to be practiced on individuals (on oneself, family members, friends, classmates, etc.).

iii. During laboratory practice sessions, needles to be used must be signed and countersigned by the Lab Supervisor once the needle is disposed of (thrown away).

iv. Removal of materials or equipment from the laboratories is prohibited. Any student who removes material or equipment from the laboratories that is not included in his or her kit will be subject to disciplinary measures.

v. Individuals using the laboratory must conduct themselves and communicate in a professional and courteous manner, in accordance with USB’s Politique sur le harcèlement et le harcèlement sexuel [Harassment and Sexual Harassment Policy].

vi. Only those students registered in skills courses or authorized by an instructor are allowed to enter the laboratories (children, friends, spouses, etc. are not permitted).

vii. No food or beverages in the laboratories.

viii. No shoes on the beds.

ix. Students must bring and use the appropriate lab kits at all times, except for during evaluations.
x. All stations and rooms used within the laboratories must be returned to their original condition following practice sessions, and all equipment used must be returned to its place.

xi. Only supervisors are permitted to access to the storage area.

xii. During independent practice sessions, students must sign in and out on the attendance sheet.

xiii. Audiovisual recordings are prohibited at all times.

xiv. All incidents or accidents that occur in the laboratories must be reported to the person in charge of the laboratory (instructor or supervisor).

Failure to comply with these rules of conduct in the laboratories may lead to disciplinary measures, up to and including expulsion from the program.

9.4 Student Honesty and Integrity

Students are expected to adhere to a high standard of professional integrity at all times during classroom and clinical experiences (including in the Simulation Centre, in the nursing laboratories, and in clinical agencies).

While minor lapses in professionalism can be expected when learning about professionalism, some behaviours are major breeches of professional integrity and can affect a student’s standing in the program, including dismissal when the actions signify that the student is unsuitable for the practice of Nursing.

The following are some examples of major breeches of professional integrity:
➢ Falsifying or fabricating a patient record or report (e.g., making up a home visit report)
➢ Failing to report an incident or accident in caring for a patient (e.g., not informing anyone of a medication error) — Reporting an error is seen as 'positive' — it is the NOT reporting that is the problem!

➢ Abusing the trust of a patient/client (e.g., acting disrespectfully, stealing, verbal, physical or psychological abuse, accepting money for personal use)

➢ Appropriation of medications or other substances for personal use (e.g., taking a narcotic)

➢ Failure to preserve the secrecy of confidential information (e.g., discussing a patient on a bus; posting a comment about a patient on Facebook)

➢ Entering clinical studies in a condition liable to impair the quality of care (e.g., going to clinical drunk or under the influence of other drugs impairing function)

9.5 Professional Unsuitability

The nursing program may require the withdrawal of a student when the student has been found unsuited, on consideration of competence or professional fitness for the practice of nursing. The withdrawal may be required at any time throughout the academic year or following the results of examination at the end of any academic term.

A student may be required to withdraw from the nursing program when the student has:

i. Been found guilty of such conduct which, if participated in by a practicing nurse would result in suspension or expulsion of the practitioner from the practice of nursing or such other disciplinary actions available against a practitioner by the governing body of the profession;

ii. Practiced incompetently in any clinical setting;

iii. Jeopardized professional judgment through self-interest or a conflict of interest;

iv. Demonstrated behaviour with respect to other students, colleagues, faculty or the public which is exploitive, irresponsible or destructive;

v. Acquired a criminal conviction which was determined to be such a nature as to bring
disrepute to the profession, or by which the student demonstrated poor judgment, lack of integrity or (other) unsuitability for the profession;

vi. Impaired performance as a result of any health condition;

vii. Been under the influence of alcohol or drugs while participating in client care, any other professional activity, or any activity related to the practice of the nursing profession;

viii. Demonstrated unethical behaviour as specified by the College’s Code of Ethics.

Procedure:
1. The nursing program shall establish a standing committee known as the Professional Unsuitability Committee (PUC) to hear and determine matters of competence and/or professional fitness for the practice of nursing.

Membership in the PUC shall be as follows:

i. Chair (non-voting, except in case of tie) is the Academic Coordinator of the School of Nursing and Health Studies, a permanent member of the committee.

Committee Members:

i. Dean of the School of Nursing and Health Studies is a permanent member of the committee;

ii. Two full time instructors in the School of Nursing and Health Studies elected by nursing faculty, for a five (5) year term, which may be renewable;

iii. Two students from each of the nursing program in question; appointed by the student organizations for one (1) year term, which may be renewable; and

a. Students representatives will sit on the committee only if the referral is from their respective program

iv. One representative of the Nursing Profession in question, to be appointed by the:

a. College of Licensed Practical Nurses of Manitoba (CLPNM);

b. College of Registered Nurses of Manitoba (CRNM);

preferably with experience in dealing with disciplinary matters, for a five (5) year term, which may be renewable.

2. In the event of a professional unsuitability claim the Academic Coordinator shall:

i. Refer matter to the PUC in a written report, setting out the name of the student involved, the alleged facts and the alleged ground(s) warranting withdrawal of the student within five (5) working days of receipt the referral. In no circumstances will a referral be based solely on anonymous allegations or materials. Anonymous materials are defined as “authorship that has not been disclosed”.

ii. Consult the Program Head regarding an interim disposition of the matter.

iii. Send a Notice of Hearing to the student in writing, by registered mail (the last known address of the student as found on the program’s record) within five (5) working days of PUC notification. The information will include the grounds for the referral to the PUC, the membership of the PUC, interim disposition of the matter, the date, time and place for the hearing.

3. Hearing Procedures

Once a reference has been made to the PUC, the proceedings may continue notwithstanding that the student has subsequently voluntarily withdrawn from the Program, or has refused to participate in the proceedings.

i. The student may appear in person and may choose to be represented by a Student Advocate, legal or other counsel. A student may request an additional support person who may accompany him/her to the hearing.

ii. The Program and Student may call witnesses as needed. Written notice to each party of witnesses to be called by the other party shall be given prior to the hearing.
The hearing shall be closed to all persons except the members of the PUC, Program representative(s), the student, the designated representative of the student, and any witnesses.

The student or her/his representative shall have the right to hear and to cross examine witnesses, to have access to copies of all documents submitted to the PUC for consideration at least five (5) working days prior to the hearing, to call witnesses and to submit other evidence.

The student shall not be required to give evidence but if the student elects to do so, then the student may be questioned by members of the PUC.

A quorum for the PUC shall be 4 members and the Chair as referred to section 1.

A simple majority of the members hearing the matter is required for any finding or for the determination of the appropriate disposition of the matter.

The Chair of the PUC shall vote only to break a tie.

Members of the PUC shall be bound by confidentiality in respect to information received in Committee. Information will only be disclosed as is reasonably necessary to implement the investigation, the resolution or the terms of any disposition imposed, or as required by law.

The results of the hearing and the reasons therefore shall be conveyed in writing to the student, the Student Advocate, and/or the designated representative of the student where applicable, with copies to the Program Head.

### 4. Disposition of the Matter

i) The PUC shall, after hearing all the evidence, meet in closed session with its members only, to:
   a. Consider the evidence;
   b. Consider the threats to public interest and safety;
   c. Determine the appropriate disposition of the matter;
   d. The PUC may make any disposition it deems appropriate in the circumstances. Without limiting the generality of the foregoing the following options, alone or in combination, are available:
      a. Determine that no further action be taken;
      b. Allow the student to remain in the program and attach conditions prescribing future conduct by the student. Such conditions to remain in effect for any period of time the PUC deems appropriate;
      c. Reprimand the student in writing;
      d. Suspend the student from the Program for a specified period of time;
      e. Require the student to withdraw from the Program indefinitely;
      f. Attach conditions which must be fulfilled before any application for re-admission to the Program can be considered;
      g. Expel the student from the Program with no right to apply for re-admission to the Program

ii) In cases in which the disposition of the hearing is one of d, e, f, or g as set out in section 4) ii the results shall be conveyed by the Academic Coordinator to the Registrar who shall make the appropriate notation in the student’s transcript.

iii) The student may request the PUC to consider removal of the notation from the transcript.

#### 5. Appeals

If the student wishes to appeal a disposition of the PUC, such appeal may be made to the Senate Appeals Committee in accordance with the procedures of that body.

In the event of an appeal, the implementation of any decision of the PUC may be suspended until the matter has been disposed of by Senate Appeals Committee.
6. **Records**
   A record of any finding of professional unsuitability and/or disposition related thereto shall be kept on the student’s academic file within the Program. All information relating to the hearing before the PUC shall be kept in the office of the Program Head.

9.6 **Student Practical Nurse Registration**

See Section III: Admission of the Student Handbook.

9.7 **Complaint Handling Guide**

I. **Principles of Procedural Fairness**
   1. A fair process means that concerns or complaints shall be heard fairly and that fair and unbiased decision-makers will make decisions.
   2. A complainant (for the purposes of this document, a student) has the right to bring forward a complaint without the fear of retaliation.
   3. A complainant has the right to have the matter addressed in a timely manner by the Dean or appropriate designate who is not in a conflict of interest and who can address the concerns without bias.
   4. The person against whom the complaint is made (hereinafter referred to as “The Respondent”) shall have the right to respond to any complaint, which is brought forward to him/her.
   5. The complainant has the right to be informed of the respondent’s response and reply to it.
   6. Both parties have the right to know how the matter was addressed and/or resolved. Consideration shall be given to confidentiality.
   7. Although it is preferable to resolve a matter on an informal basis, the complainant and respondent have the right to be informed about all formal avenues of recourse which may be available.

II. **Process for Students Bringing Forward a Complaint**
   1. A complainant bringing forward a complaint shall, in the first instance, attempt to resolve the situation by speaking to the person involved (i.e. professor).
   2. Where the matter cannot be resolved to the complainant’s satisfaction at the initial level, the complainant, if proceeding with the complaint, shall bring the complaint to the attention of the Dean of the School of Nursing and Health Studies.
   3. If any one of the two levels described above, the complainant may access assistance from the Association étudiante de l’Université de Saint-Boniface and from the Service d’intervention (Orientation, counseling et placement).
   4. Normally the Ombudsman’s services are available to the complainant after all levels of conflict resolution and all levels of the formal appeal process have been exhausted.

III. **Administrative Officer’s Role**
(For the purposes of this document the Administrative Officer is any School of Nursing and Health Studies employee who has the authority to hear and make decisions about students matters i.e. Academic Coordinator, Dean)

   1. To provide information on complaint resolution procedures.
   2. To consider the rights and interests of the complainant and respondent.
   3. To facilitate the resolution of the complaint through informal resolution as listed in (a) – (d)
      a. Counselling the complainant with regard to what kind of resolutions can be expected.
      b. Counselling the respondent against whom a complainant has been lodged, on effective and timely resolution.
c. Serving as a source of information about the referral to mediation, advocated, counselling and other services for both complainant and the respondent.
d. Mediating between the complainant and the respondent.

4. To investigate where it is deemed appropriate.

IV. Recommended Procedures

Meeting with complainant
1. To listen to the concerns of the complainant.
2. To keep a written record and to discuss confidentiality of notes
3. To ascertain if the complainant has discussed the matter with the faculty member.
4. To determine the resolution expected by the complainant.
5. Review options (as outlined in item 6 a – f.)
   a. The complainant could approach the respondent against whom a complaint has been logged with his/her concerns.
   b. The Administrative Officer meets with the respondent (without revealing the name of the complainant, where confidentiality is an issue) to ascertain his/her perspective.
   c. The Administrative Officer could set up a meeting of the complainant and the respondent with the Administrative Officer or some other third party as mediator.
   d. The Administrative Officer takes no action without further instruction from the complainant.
   e. Where the complainant has unsuccessfully attempted to resolve the matter directly with the faculty member or where the complainant is not comfortable to do so on his/her own, the Administrative Officer can commence an investigation.
   f. Other actions as may be seen to be appropriate and agreed to by the Administrative Officer and the complainant.

Meeting with Faculty/Student against whom a complaint has been lodged
1. Inform respondent of complaint.
2. Inform respondent that a written record will be made. Communicate the content of the meeting notes that will be kept on file. (confidentiality)
3. Explain, in detail, the concerns brought forward by complainant.
4. Obtain the respondent’s perspective.
5. Outline the choices presented to the complainant and what the complainant wishes.
6. Request how respondent would like to resolve the matter
7. Discuss next steps with respondent which may include Administrative Officer discussing the response with complainant or may include setting up meeting between complainant and respondent.

Investigations
1. Investigate the complaint to determine if further action is warranted. This shall include speaking with the respondent directly and may also include interviewing any other witnesses necessary to assess the substance of the complaint. The complainant will have the opportunity to reply to the respondent’s response.
2. If the preliminary investigation suggests that a formal full investigation appears to be warranted the matter shall be referred to the Dean. In the subsequent investigation the rights of all parties must be respected.
3. The Dean holds the authority to decide if a formal investigation is warranted and the Dean may designate the duties of conducting a formal investigation.
4. The Investigator shall advise the complainant and respondent that a formal investigation has been authorized and the respondent will be fully informed by the Investigator about the complaint. The respondent shall have a reasonable opportunity to respond fully to the complaint. In the subsequent investigation,
the right of all parties must be respected and all parties shall be fully informed about the expectations of the formal investigation i.e. confidentiality, records, FIPPA, etc.

5. If the formal investigation determines that the complaint is considered frivolous and/or vexatious, inform the complainant that disciplinary action may be taken.

6. If the formal investigation determines the complaint has been substantiated, the Administrative Officer shall determine appropriate course of action to be taken and shall advise the respondent accordingly. The Administrative Officer shall also advise the complainant as to the decision, taking into account the respondent’s rights of privacy and rights pursuant to the collective agreement.

7. Other policies and procedures to consult:
   - Accessibilité et accommodement pour les étudiants et étudiantes ayant une incapacité
   - Harcèlement et harcèlement sexuel
   - Règlement disciplinaire
   - Rendement scolaire, probation, suspension
   - Politique en matière de violence à caractère sexuel
   - Politique de prévention de la violence
   - Gestion des plaintes de AEUSB
   https://aeusb.ca/gestion-des-plaintes/
SECTION X : POLICIES AND PROCEDURES

10.1 Academic Policies

10.1.1 Admission Status

Students admitted to the Program must complete a minimum of 3 credit hours of course work in the Fall or Winter term of their admission year and each subsequent semester.

i. Students are expected to register in at least one nursing course during each consecutive Fall and Winter term while they are enrolled in the program.

ii. Students who wish to interrupt their studies must apply in writing to the Academic Coordinator for a leave of absence.

Leave of Absence

Students may have to take leave for health or family reasons (e.g., a family crisis). A student who believes a leave of absence is necessary must submit an official request. A leave of absence may include a period of convalescence or helping family members in crisis. However, the student is at risk of losing a semester or a year of study and of having difficulty returning to clinical training.

The student must request a leave of absence in writing to the Academic Coordinator of the program. Supporting documents may be required with the request. This request for a leave of absence must be submitted to the Academic Coordinator of the program by June 1st. In exceptional circumstances, requests made after that date may be considered. Leave of absence is usually granted for a maximum period of one year. Generally, only one leave of absence is authorized during a student’s program.

In order to return to their program, students must submit a request for reinstatement in writing to the head of the program no later than May 1st of the year they wish to return. No requests for reinstatement will be considered after this date. Students who have not applied to be reinstated before May 1st will be considered as having left the program and will be discontinued from it. These students will have to reapply to the program.

If students are granted a leave of absence equivalent to one academic year and do not return to the program the following semester, they must withdraw from the university. They may apply for readmission during the year following their withdrawal, at which time they may be required to restart the program.

A person who returns from a leave of absence for reasons of illness must show proof of medical or psychosocial treatment that indicates he or she is capable of returning to the program.

A leave of absence does not extend the program time limit outlined in the Academic Calendar. To maintain authorization for the leave of absence and to avoid being withdrawn from the program, students may not enroll in another program, faculty or institution during the period of leave. Students on leave have the same requirements as those in the program with respect to the Criminal Record Check, Child Abuse Registry and Adult Abuse Registry. When applying to return to the program, students are required to submit a self-declaration of their Criminal Record Check, Child Abuse Registry and Adult Abuse Registry.

Students who have enrolled in another program, faculty or institution during their leave of absence, or who have been withdrawn from the program because they were not granted a leave of absence, and who have not taken at least one course in the program during the Fall or Winter term, must apply for readmission if they wish to return to the program.

Parental and Maternity Leave

A parental or maternity leave is permissible during the program. However, the academic progression will be examined on a case by case basis.

The student must inform the Academic Coordinator as soon as possible and complete a leave of absence request.
The Academic Coordinator will assess the impact that the parental or maternity leave will have on courses and practicums. The student must find an alternative solution if the leave will affect important courses or assignments.

The student must inform the Academic Coordinator if he or she requires additional leave time.

**Clinical Reintegration**

Students returning to studies in nursing following an absence of one year or more from clinical courses must complete a mandatory demonstration of psychomotor skills competency in the skills laboratory. Competency must be demonstrated prior to clinical attendance.

**Procedure:**

i) The student must communicate his intention to have a clinical reintegration evaluation completed by the Academic Coordinator prior to May 1.

ii) The Academic Coordinator will forward the student’s request for a clinical reintegration evaluation to the Laboratory Coordinator within 3 business days.

iii) The Laboratory Coordinator will communicate with the student to schedule an evaluation date within 3 business days following the request from the Academic Coordinator.

iv) The student will confirm the date of the evaluation within 3 business days following a mutually agreed date.

v) The Laboratory Coordinator will ensure the laboratories are available for the student to practice.

vi) The following guidelines will apply to the clinical reintegration evaluation:

   a. The student is responsible for reviewing steps of and rationale for previously learned psychomotor skills.

   b. The student must practice these skills in the lab.

   c. The student must review the principles of safe medication administration as well as the numeracy skills necessary for accurate medication dosage calculation.

   v) If, at any time, assistance is required or concerns arise, the student must consult the Laboratory Coordinator as soon as possible.

   vii) The Academic Coordinator will meet the student, within 5 business days following the evaluation, with a learning plan.

   viii) The learning plan must be completed prior to the student’s next practice rotation.

10.1.2 **Student Performance**

The student GPA will be calculated at the end of each term. A student will be in the following standing based on their GPA:

**Good Academic Standing**

A student with a CGPA of 2.5 or higher will be assessed “Program Minimum Met.”

**Academic Warning**

The first time a student’s CGPA drops below 2.5, the student will receive an Academic Warning.

**Academic Probation**

The second time that a student’s CGPA drops below 2.5, the student will be placed on Academic Probation.

**Academic Suspension**

The third time that a student’s CGPA drops below 2.5, the student will be placed on Suspension. Students who are suspended shall be ineligible to take any courses at the Université de Saint-Boniface for 12 months (full-time). A student may apply for reinstatement on academic probation after the term of suspension has been completed.
**Required to Withdraw**

Students will be required to permanently withdraw from a program due to academic performance below the minimum requirements. Students are ineligible for re-admission to the program.

**Reasons for permanent withdrawal:**

a. Students who have been permitted to return from Suspension and whose CGPA drops below 2.5 a fourth time;
b. CCPA below 1.75 at the end of an academic year;
c. Failure in two or more practicum/clinicals;
d. Failure in a repeated mandatory course.

**Program Withdrawal**

In certain cases, a student may be required to withdraw from a program due to academic performance that falls below the minimum requirements or to academic dishonesty.

**Reasons for withdrawal:**

1. failure in courses totalling 18 credits and included in the CGPA calculation (withdrawal from ETP);
2. failure in a repeated mandatory course (withdrawal from program or ETP);
3. CGPA below the minimum degree requirement after 24 additional course credits (withdrawal from program or ETP);
4. CGPA below the minimum requirement after twelve (12) months of probation full-time or 24 course credits part-time (withdrawal from program or ETP);
5. failure in two or more practicums;
6. CGPA below 1.75 at the end of an academic year.

If a student withdraws from a program for a second time, it is considered permanent. The student may not register in the program again.

**10.1.3 Calculating Cumulative Grade Point Average (CGPA)**

At the end of each year, the transcript of marks indicates a cumulative grade point average. This reflects a grade point average calculated as follows:

- Each course has a regulated number of total teaching hours, specifically the number of hours recommended to reach the objectives (no matter the teaching method). The grade points earned per course are calculated by multiplying the credit hours or teaching credits by the number value of the grade received. The resulting number is the cumulative value.
- The total cumulative value is divided by the total hours or teaching credits for which a number value is assigned. The result of this calculation is the cumulative grade point average.
- A minimum cumulative grade point average of 2.5 is required to obtain a certificate, diploma, or bachelor’s degree.

**Courses and Grades Excluded from the Calculation**

The following are not factored into calculating the cumulative grade point average: courses taken in other programs or as an auditing student, exempted courses, courses that were withdrawn from, ones with incomplete grades, or ones that are graded S or NS

**10.1.4 Grading System**

A minimum cumulative grade point average of 2.5 (C+) is required to obtain a Practical Nursing Diploma. A minimum passing grade of C+ is required in all courses.

Whatever the evaluation methods used in a course or teaching activity, a grade is given to each registered student. This grade is represented by one of the following letters, expressing the meaning indicated.

The grading scale is as follows:

- **A+** 4.5 Exceptional 90% to 100%
- **A** 4.0 Excellent 80% to 89.9%
- **B+** 3.5 Very good 75% to 79.9%
- **B** 3.0 Good 70% to 74.9%
- **C+** 2.5 Satisfactory 65% to 69.9%
- **C** 2.0 Fail 60% to 64.9%
Pass

Grades of A+, A, B+, B, C+, S indicate that the teaching activity or course has been completed.

Passing grades for courses taken in other faculties or schools are those required by those faculties or schools. The initials S (satisfactory) or NS (not satisfactory) can be used if École technique et professionnelle deems it difficult to grade using A+, A, B+, B, C+ (e.g.: to grade a practicum).

The initial S (satisfactory) is used when a course is passed, but this grade is not included in calculating the cumulative grade point average. The initials NS (not satisfactory) are used if a course is failed, but this result does not affect the cumulative average calculation.

All clinical courses are based upon a S (satisfactory) / NS (not satisfactory) grade. Students do not receive a letter grade for clinical courses.

10.1.5 Late Assignments

Assignments received later than the due date, without negotiated extensions, will be penalized. Any assignment that is not submitted by the date and time specified, or any assignment for which an extension is granted that is not handed in by the negotiated date and time, to the location specified, is subject to the following penalty(s):

- For 1 day late (any time up to 24 hours after date/time due), the penalty is 5% deducted from the grade for the assignment (e.g. mark of 75% would be reduced to 70%)
- For each subsequent day late (each 24-hour period), the reduction increases daily:
  - for 2 days late, deduct 15% (e.g. mark of 75% would be reduced to 60%);
  - for 3 days late, deduct 30%;
  - for 4 days late, deduct 50%;
  - for 5 or more days late, deduct 100% (assignment is given zero [0]).

Exceptions to the lateness penalty for valid reasons such as illness, compassionate grounds, etc., may be entertained by the instructor but will require supporting documentation (e.g., a doctor’s letter/attending physician’s statement). Generally, 24-hour notice for extension requests is required. Assignments submitted later than five calendar days without negotiation will not be accepted.

10.1.6 Examinations

Supplemental Examination

The School of nursing and health studies does not permit supplemental examinations.

Skills testing

Skills and methods of care in the laboratories are evaluated on a Pass/Fail basis. If a student fails, he or she is only entitled to one retake.

Procedure:

To ensure consistency, the following guidelines apply to all nursing courses with a laboratory skills and methods evaluation component:

i. When testing skills and methods of care, a student’s performance will be evaluated as either pass or fail.

ii. If a student fails to demonstrate competence during an evaluation (i.e. he or she does not pass the skills test), the evaluator will provide the student with corrective feedback and will recommend additional exercises.

iii. If a student does not pass an evaluation the first time, he or she is only entitled to one retake.

iv. If a student does not pass the retake, he or she will receive a grade of F; the student will no longer be eligible for the course in question or other courses in the nursing program.

v. A drug calculation test is considered a skills test.

vi. To pass a drug calculation test, students must receive a minimum mark of 90%.
Students are not allowed to use a calculator for the drug calculation test (this does not apply to students in the Bachelor of Nursing program).

10.1.7 Student Attendance

Students shall attend all classes, including lectures, laboratories, tutorials, seminars, clinicals, conferences, etc.).

i. Attendance at all classes, all clinicals, all practicums, and all conferences will be monitored on a regular basis.

ii. A student's record of attendance is considered in student evaluations.

iii. In the event of circumstances requiring their absence, students are expected to provide in advance written notice justifying their absence to the appropriated faculty member(s). Written notices will be kept on file.

iv. In the event that prior notification of circumstances requiring their absence is not possible, students must contact the faculty member(s) as soon as possible and provide a written explanation. Written explanations will be kept on file.

v. Faculty members are required to report to the Academic Coordinator all unexplained absences from class in excess of three hours over at least two classes in any term (see Academic Regulations).

vi. Students are responsible for notifying the faculty member/clinical associate (in writing if possible) and the appropriate nursing unit/agency of any anticipated absence prior to the beginning of their scheduled clinical/practicum time.

vii. In the event of absence due to illness or protracted illness during examination periods, a medical certificate will be required from a healthcare provider who has immediate and first-hand knowledge. Medical certificates by a nurse or physician "after the fact" of the illness will not be accepted.

viii. In the event of inclement weather, students should exercise prudent judgment when deciding whether or not to travel to scheduled practicums, conferences and classes. Timely and appropriate notification (e.g., telephone, email) of absence due to inclement weather is also required.

10.1.8 Differed Examinations

Students unable to take a final exam due to illness or incapacity must request an exam deferral through their instructor.

i. Students must submit a request at least seven days before the date of the final exam and it must be accompanied by a medical certificate or an appropriate official document indicating the nature of the illness or incapacity and when it occurred.

ii. On their transcripts, students will be given a mark of NP (No Paper) and the grade obtained to date in the course.

iii. A deferred exam is to be taken according to the instructor's terms. It is usually taken during the summer session exam period or that of the following academic year.

10.1.9 Permission to take courses at another university

To take a course at another university, you must first obtain a letter of permission from the program; for these courses to be recognized, the pass mark required by that other university must be obtained (some programs may require a grade higher than C). Consult the Registrar or the Educational Guidance Service.

Permission to attend courses at another university is indicated in the official file. To obtain a letter of permission, you must have a cumulative grade point average (CGPA) of at least 2.5 and not be on probation at the time of application. Only courses that meet program requirements will be approved.

The official transcript of courses taken at another university with the letter of permission must be received by the Registrar's Office by May 15th for students enrolled at the spring convocation.
NB: A course followed without a letter of permission outside the University of St. Boniface will not necessarily be recognized.

10.2 Clinical Policies

10.2.1 Processes Related to Clinical Withdrawal

A student may be debarred from clinical practice by action of the Administrator of Clinical Education for persistent non-attendance, unsafe clinical practice, and/or failure to produce assignments to the satisfaction of the instructor. Once the debarment process has been initiated, the student will not be able to voluntarily withdraw from clinical practice that is presently under investigation. Students so debarred will have failed that course.

Procedure: Initiation of process for debarment

i. The student is removed from the clinical area.

ii. The Clinical Education Facilitator informs the Course Leader that the student has been removed from the clinical area and consults with the Course Leader regarding debarment.

iii. The Clinical Education Facilitator discusses the documentation with the student. If warranted, the student is notified verbally and in writing that the debarment process has been initiated.

iv. The Course Leader will notify the Academic Coordinator and Administrator of Clinical Education that the debarment process has been initiated and provide the rationale for same.

v. The Course Leader provides the Academic Coordinator and Administrator of Clinical Education with copies of the documentation outlining the rationale for initiating the debarment process.

vi. The Administrator of Clinical Education will arrange a meeting with the student. The student will be given the opportunity to challenge the documentation presented.

vii. Following the meeting with the student, the Administrator of Clinical Education will notify the Academic Coordinator of the outcome of the meeting and provide a written decision to the student and the Course Leader.

viii. The student may appeal the decision within ten (10) working days of the date of the written decision by the Administrator of Clinical Education.

Appeal Process

Through a written submission, the student notifies the Academic Coordinator of his or her intent to appeal the debarment decision. An Ad Hoc Appeals Committee is established to hear the appeal and render a final decision as to whether debarment is warranted. The Ad Hoc Appeals Committee will be comprised of two instructors of the student’s department who are not involved in delivering the course in question, one student from the same program of study as that of the student’s, and an instructor from another program in the department. The Chair of the Ad Hoc Appeals Committee will be the member selected from another program in the department and be the non-voting member.

An official summary documenting the issues and decisions taken by the Instructor will be submitted to the Chair of the Ad Hoc Appeals Committee within 5 working days from notification of the student’s appeal.

The Committee’s decision will be based on consideration of the codes of ethics and standards established by the appropriate professional body as well as any other related code and standard, and on the Committee’s assessment of harm and/or risk for harm.

The Committee may:

I. Uphold the initial decision made by the Program Head;

II. Issue a written reprimand to the student stating the conditions for continuance in the specific Health Studies course and describing the
consequences should those conditions not be met; or

III. Initiate other actions as the Committee deems appropriate to address the situation.

The Ad Hoc Appeals Committee chairperson will provide a written decision to the student, the Academic Coordinator, the Course Leader and the Administrator of Clinical Education within ten (10) working days of receiving the official summary.

10.2.2 Unsafe Clinical Practice

The debarment process will be invoked when the student demonstrates unsafe clinical practice. This includes:

- Unsafe clinical/laboratory practice is behavior that places the client, family or others in physical or emotional jeopardy.
- Physical jeopardy is the risk of causing physical harm.
- Emotional jeopardy is the risk for emotional or psychological harm.
- Unsafe clinical practice is an occurrence, or a pattern of behavior, involving unacceptable risk.

10.2.3 Failures in Clinical Course Rotation

Students who receive a fail grade in a rotation within a course comprising multiple clinical rotations will be debarred from the course immediately and will receive a final grade of “Fail/Unsatisfactory.” Students who receive a fail grade on one of these rotations will not be allowed to withdraw voluntarily from the course.

10.2.4 Social Media and Electronic Device Usage

Students are prohibited from posting any private or confidential content, including health information and academic protected information regarding clients, agencies or peers on any social media site, even if the identifiers are removed. This also includes images of clients or agencies. Violations of this policy may expose the student to criminal, civil and professional liability and may also contravene the Professional Unsuitability policy.

Any breach of confidentiality or privacy must promptly be reported to your Faculty Member.

Use of social media and electronic devices for non-academic purposes is prohibited during any clinical experience.

Unauthorized use will result in immediate removal of the student from the clinical and may result in utilization of the Professional unsuitability policy.

10.2.5 Professional Dress Code

Dress code may vary based on the location where the student is placed.

Dress Code for Hospital Placements

Dress codes vary between institutions and the specific policies of the institution and/or clinical setting must be followed when working in a particular institution. In these instances the particular policy of the setting will be reviewed with students prior to starting clinical practice.

Professional appearance for hospital setting:

i. A professional appearance will be conveyed by ensuring that hair is clean and tied back if it interferes with performance of nursing interventions. Long hair must be worn off the collar and pulled away from the face. If hair accessories are required, they must be secure and professionally appropriate.

ii. Male students with beards should have them neatly trimmed.

iii. A minimum amount of jewellery is permitted. Appropriate jewellery includes one pair of stud earrings and a plain wedding band.
iv. A minimal amount of scent free make-up is acceptable.
v. Scented products are not to be worn.
vi. All visible body piercing rings must be removed, tongue rings should be replaced with a clear spacer.
vii. Tattoos must be covered at all times.
viii. Nails must be clean, groomed, short, and non-polished. Acrylic, artificial or gel nails are not permitted.
ix. Chewing gum is not permitted.
x. A student name tag for the institution and USB’s student name tag must be worn during all nurse client encounters.
xi. White socks and white enclosed shoes are to be worn with the uniform. Either “professional duty” shoes or all white leather running shoes (with a minimum of colour detail) are permitted. It is important that adequate support and “breathability” be provided. Shoes and laces must be kept clean.
xii. Burgundy uniform with USB crest must be worn with all client encounters. A white sweater may be worn on top of uniform if necessary. Uniform lengths must be professionally appropriate, and tops must not reveal the abdomen.

While in the hospital setting, change areas and lockers are provided by the institution. Uncovered uniforms and nursing shoes are to be worn on the premises only. Students must bring a change of clothing and change prior to leaving the clinical setting. Uniforms and shoes are not to be worn outside of the institution.

**Professional appearance for community setting:**

In the event that uniforms are not required for clinical practice, students are to be appropriately dressed for the clinical experience. Dress is a professional responsibility and can affect the type of relationship that develops with clients and the professional identity conveyed to other community partners.
i. A professional appearance will be conveyed by ensuring that hair is clean and tied back if it interferes with performance of nursing interventions. Long hair must be worn off the collar and pulled away from the face. If hair accessories are required, they must be secure and professionally appropriate.
ii. Male students with beards should have them neatly trimmed.
iii. A minimum amount of jewellery is permitted. Appropriate jewellery includes one pair of stud earrings and a plain wedding band.
iv. A minimal amount of scent free make-up is acceptable.
v. Scented products are not to be worn.
vi. All visible body piercing rings must be removed, tongue rings should be replaced with a clear spacer.
vii. Tattoos must be covered at all times.
viii. Nails must be clean, groomed, short, and non-polished. Acrylic, artificial or gel nails are not permitted.
ix. Chewing gum is not permitted.
x. USB’s student name tag must be worn during all nurse client encounters.
xi. Shoes should be clean and supportive with closed toe and heel. No high heels permitted. If it is culturally unacceptable to wear shoes in a particular home, soled slippers may be worn.
xii. Semi-casual street and dress clothes that are clean, neat and permit the student to fulfill the nursing process with ease. Likewise, clothing with low necklines, short mid-riffs and low-rise waist band become even more revealing when bending over to perform nursing interventions and are not acceptable for professional dress. Casual clothes such as jeans, sneakers, sweatshirts, etc.. are also not appropriate. Exceptions to wearing casual clothing may be lab coats.
xiii. A lab coat may be worn over semi-casual street or dress clothes (not jeans or sweatshirts). Name tags are to be worn on lab coats.
10.2.6 Conflict of Interest in Clinical Practice

Students are expected to report immediately to one of the course leader/instructor and/or Clinical Education Facilitator if a conflict of interest related to personal/familial relationships arise in the clinical experience.

Family members include: sister, brother, mother, father, spouse, significant other, daughter, nephew, niece, uncle, aunt, cousin, partner, friends, or in-laws.

Students are expected to immediately report to the Clinical Education Facilitator any of the following:

I. A student has a family member in their clinical group;
II. A student has been assigned to a clinical setting in which they are employed;
III. A student has been assigned to a clinical setting in which one of their family members is employed or is a patient;
IV. A student has been assigned to a Clinical Education Facilitator, or Preceptor who is related to them.

In any of the above situations, students will be re-assigned to a clinical area where there is no relational conflict.

10.2.7 Gift Giving and Receiving

Students are reminded not to provide gifts to preceptors, instructors, clinical education facilitators, or faculty. This is in keeping with professional practice.

10.2.8 Unsafe Clinical Practice

Student must report all adverse events and/or near misses immediately to assist in the tracking and systems analysis during their clinical experience.

Adverse event:
An unintended patient injury or complication that results in disability at the time of discharge, death, or prolonged hospital stay and that is caused by health care management rather than the patient's underlying disease process.

Near miss includes:

i. Any action that may have/could have impacted or caused harm to a patient
ii. Patient injures his/her self while under the care of a student
iii. Student fails to fulfill orders prescribed for a patient under his/her care
iv. Student violates a direct patient care policy of the health agency/USB within which she/he is receiving the clinical experience
v. Providing treatments or medications not prescribed for a specific patient under his/her care
vi. Student is prevented from implementing a procedure, treatment or medication by the instructor/staff member because it will result in an actual/potential injury to the patient
vii. Student fails to use sound clinical judgment when caring for a patient

Procedure:

In the event of an adverse event or near miss, the student shall:

1. Immediately assess and respond to the event and seek help from the Clinical Education Facilitator, the primary nurse or another healthcare provider.
2. Alert the appropriate people in regards to the event (i.e. Clinical Education Facilitator, primary nurse, physician, patient, family members, etc.).
3. Complete and distribute the WRHA’s Occurrence Report as per WRHA policy (no copies of this form are to be done).
4. Complete USB’s Occurrence Report (see appendix) as per USB’s policy. The policy and form are located on USB’s website (eCAMPUS).
5. Notify the Course Leader of the occurrence by telephone or in person with a description of the actions that have been taken. This notification needs to occur as soon as
possible after the event has occurred and no later than the end of the shift.

6. After debriefing with the Clinical Education Facilitator, submit the USB Occurrence Report form to the Course Leader within 24 hours of the event occurrence.

Thereafter the Course Leader shall:

1. Review and discuss the follow up with the Clinical Education Facilitator within 24 hours of receiving USB’s Occurrence Report form.
2. Submits USB’s Occurrence Report form to the Clinical Placement Coordinator.

Final follow up the Clinical Placement Coordinator shall:

1. Compile and analyses the safety events and conducts follow ups as necessary.
2. Submits a report at the end of each term to the Program Head and department in order to initiate changes if required. All USB Occurrence reports will be stored for 5 years.
3. The Program Head submits an annual report to the College indicating follow-up actions.

Note: For students enrolled in the DPN program, CLPNM will be notified of any adverse event that cause harm to a patient immediately following the occurrence.

10.2.9 Student Travel and Costs

Students are responsible for their transportation to and from the practicum site and to all meetings pertaining to the practicum, including expenses (uniforms, travel costs, transit costs, meals and accommodations).

10.2.10 Guidelines for Safe Student Travel

Traveling by car:
- Make sure your vehicle is in good repair;
- Make sure that the fuel gauge is accurate;
- Ensure that you have sufficient fuel to get to you to and from your destination;
- Make sure that you windshield washer container is full;
- Plan the route you will take in advance. Use main roads as much as possible;
- Have clear directions prior to leaving so as to avoid have to stop and ask for directions; or use GPS;
- Have you keys in hand before you get into your car;
- Once you are in the vehicle, lock all doors;
- If you suspect you are being followed, do not drive to your home. Rather, drive to a police station or to a service station/public place where you can call the police.
- Carry a cell phone;
- Have a telephone list of pertinent School of Nursing and Health Studies numbers (i.e. your Practicum Course Leader, Clinical Education Facilitator, Administrator of Clinical Education).

Parking your car:
- Carefully consider where you park if you are not returning to your car until after dark;
- If possible, park in a well-lit area;
- Avoid parking near walls, high fences, or vegetation that may provide cover for an intruder;
- Back your vehicle into the parking space so you can drive ahead in the event that you need to make a quick exit;
- Before you get out of your car, check for loiterers. If any are identified, seek another location to park your vehicle;
- Always lock your vehicle;
- Cover any valuables that you must leave in your vehicle;
- Do not leave house keys, credit cards, personal information including registration, or cash in your vehicle.

If your vehicle breaks down:
- If your vehicle breaks down, summon help (i.e. raise the hood of the vehicle, turn on
four way flashers, call roadside assistance (if applicable));

- Remain in your vehicle;
- Sit on the passenger side of the front seat while waiting for help; this will give the impression that you are waiting for the driver to return.

**Winter traveling:**
- Before you leaving for your destination, check the weather conditions and the road report;
- Use your discretion when deciding to travel on the roads in winter;
- Dress in clothing that is appropriate for the weather in the event of vehicle problems, also have a survival kit in your vehicle;
- If you vehicle malfunctions or you incur problems related to weather conditions, stay with your vehicle for better protection and easy location.

**General guidelines:**
- Avoid walking at night;
- Avoid taking shortcuts through poorly lit areas;
- Carry enough change to make emergency phone call;
- If possible, know the location of public payphones in the area where you expect to travel.

**10.2.11 Interpersonal Safety**

**Guidelines to minimize risk for abuse and harm**

1. All students must complete the Non-Violent Crisis Intervention course offered in the first year of the program.
2. Students who feel unsafe or vulnerable at any time, in any practice setting, must remove themselves immediately. They must notify their instructor and, if appropriate, the supervisory personnel of the agency as soon as possible.
3. Before conduction a home visit, inform someone you know where you are going and when you expect to return; bring your cell phone, and leave your cell phone number with them.
4. Remove yourself from the home immediately if any persons present are under the influence of drugs or alcohol.
5. When attempting to conduct a “private” conversation in the home, avoid using private bedrooms.
6. Maintain professional demeanor in your dress (consult policy on professional dress), actions, and use of language.
7. Maintain professional boundaries. Do not divulge personal or private information about yourself (i.e. your life-story, your phone number, or your home address).
8. Document any client history information that alerts you to the possibility of an unsafe or harmful situation in future encounters.
9. Inquire about the presence of pets before conduction a home visit and in collaboration with the client, devise a plan to minimize any foreseen risks (i.e. allergic reaction, animal bite) before arriving.

It is incumbent on the students to take appropriate measure to protect their personal safety; for example, by advocating for any special considerations, by using proper body mechanics, wearing a medic alert, abiding by the rules of infection control, and so on.
SECTION XI: THE SERVICES OF THE UNIVERSITÉ DE SAINT-BONIFACE

11.1 Étienne-Gaboury Student Centre (Room 1102)

The Student Centre is an ideal place for socializing, having fun, eating, surfing the Internet or studying. This is where the cafeteria, which offers a varied menu, and the Internet Café are located. The Centre also has a stage on which performances are occasionally presented.

11.2 Le Café Rencontre (Room 1102)

The Café rencontre prepares a variety of local and international dishes to cater to everyone’s tastes. The cafeteria team is happy to serve you, offering daily specials from Monday to Friday.

11.3 Cultural Activities (Room 1237)

Université de Saint-Boniface is overflowing with culture! The Cultural Activities Service (CAS) provides you with many opportunities to fully take part in cultural life on campus and in the community.

Here are a few activities that are sponsored by the CAS:

- The Chiens de soleil theatre company;
- A music program that provides opportunities to perform in front of an audience, and a well-equipped music rehearsal room;
- The art gallery where students and staff members can exhibit their works;
- A photography club;
- A film club; and much, much more.

Through the Cultural Activities Scholarship (Boursac), the CAS also provides the human, financial and technical resources needed to implement exciting cultural projects. The CAS also offers training workshops, conferences and forums.

11.4 Réveil FM Radio (Room 1101)

Réveil FM is a radio station created by and for St. Boniface’s academic community. The station offers diverse programming, which will soon be available online. Check www.reveilmedias.ca for more information.

11.5 Le Réveil (Room 1239)

Le Réveil is the student newspaper by the USB Student Association. It is independent and is financed by the students enrolled at USB. It is fuelled by the energy of its young journalists and contributors from St. Boniface’s academic community. Le Réveil is distributed through La Liberté in Manitoba, in both paper and digital format. Le Réveil also has a website (réveilmedias.ca), a YouTube channel and social media accounts.

11.6 Le Théâtre Chiens-de-soleil

The Chiens de soleil theatre is a theatre of discovery that exists because of the passion of USB’s students and of the members of Manitoba's Francophone community. It offers bold productions for adolescents and adults. Chiens de soleil has also created the Theatre in the Cemetery program.

11.7 La Source / Chaplaincy Services (Room 1132)

Each person’s faith and beliefs are respected and valued at USB, within a true mosaic of coexisting cultures. La Source provides a meeting place for those who wish to share these beliefs. Chaplaincy Services (CS) is available to everyone and supports the following activities, among others:

- Spiritual renewal retreat;
- Days of reflection;
- Interfaith dialog;
- Tuesday Eucharist (11:30 a.m.) from September to April;
- Friday Prayer for Muslims from September to mid-June.
Chaplaincy Services also supports the USB Development and Peace Committee, which aims to create a better world by helping those in need and promoting intercultural dialogue. This committee’s goal is to inform the USB community on issues related to the imbalance between northern and southern countries that leads to poverty. The committee also organizes activities that encourage intercultural dialog among USB students. Every two years, a humanitarian and awareness project is organized, ending with a trip to, for example, Mexico (2005), Peru (2007), Haiti (2009), Mali (2011), British Columbia (Hesquiaht First Nation, 2013 and Tla-o-qui-aht First Nation, 2015), and Brazil (2016).

La Source addresses the faith woven into the mosaic of coexisting cultures within the USB community. It is available for all USB students.

11.8 The Chapel (Room 2325)

The Chapel is open during the academic year for personal prayer for Muslims and Christians and for any other person seeking a silent place for reflection. One-on-one meetings for counselling and spiritual guidance are also available. Room 2325 is a permanent place of worship open to people of all faiths.

11.9 Orientation, Counselling and Placement (Room 1118)

This department provides advice and support to students for program and course selection at USB and elsewhere. For example:

➢ Academic advising;
➢ Counselling services;
➢ Intervention requests and services;
➢ Advising on harassment;
➢ Instruction and tutoring;
➢ Resource Information Centre;
➢ Financial aid;
➢ Job search and employment opportunities;
➢ Career Centre;
➢ Weekly info.

11.10 Student Accessibility Services (Room 1119)

Université de Saint-Boniface offers an adapted service for students requiring special services or accommodations. A person with a physical, emotional or psychological disability or learning disability may receive support upon providing proof of his or her disability.

Available services:
➢ One-on-one tutoring;
➢ Note taking;
➢ Special equipment (a computer station with software to facilitate screen reading, a voice synthesizer, scanner, specialized programs, voice recording, etc.);
➢ Four (4) areas for working individually or with a tutor;
➢ Accommodation for exams;
➢ Scholarship and bursary information;
➢ Alternate format.

11.11 Student Card and Locker Available at Sportex (Room 1340)

Nursing students are required to reserve a locker, as backpacks are not allowed in the laboratories.

11.12 Sports and Recreation Services (Room 0340)

Sports play an important role in many people’s lives. Whether it be having fun, staying in shape, doing yoga or participating in sports competitions, Université de Saint-Boniface encourages participating in sports in its many forms. Well-being and having fun are at the heart of our sports philosophy.

The Sports and Recreation Service offers a variety of sports and exercise options. The service also facilitates participation in self-
directed, intramural and intercollegiate activities.

11.13 Sportex (Room 0340)

Sportex is one of the best fitness centres in Winnipeg. During their free time, all USB community members can participate in the athletic activities that meet their needs. It is equipped with two gyms, a fitness centre with a weight room, a functional training room, a cardiovascular equipment room and programming that includes yoga, TRX, spin, Zumba and circuit, among others.

As a separate service, Sportex also provides monthly public transit (Winnipeg Transit) passes and student cards.

11.14 Language Enrichment Services and Tutoring (Room 2411)

Are you unsure how to start your written assignment? Are you getting lost in your research? Are you having trouble organizing your assignment? Would you like to have someone else read your written work to make sure that you have properly expressed your ideas? The tutors at the Tutoring Centre can guide you through each step of the writing process: brainstorming, pre-writing, creating a first draft, and preparing the final text. They can help you organize your work in a logical manner, to clearly and properly convey your message, and to apply self-correction techniques. If you like, they will provide explanations and suggest supplementary grammar and spelling exercises. The Tutoring Centre provides this personalized written and oral enrichment service free of charge in French, English and Spanish.

11.15 Alfred-Monnin Library (Room 2110)

The library provides you with:
- Orientation on how to properly use the catalogue, find a book on the shelves, reserve or renew a book online;
- Direct loans from the USB and U of M collections;
- Access to over 500 databases;
- Loans from other libraries (interlibrary loans);
- 16 work stations with Internet access and Microsoft programs;
- Paid photocopiers and printers;
- Area for group work or independent study.

Your valid student card is required in order to check out printed resource materials.

11.16 International Office (Room 1111)

The International Office undertakes internationalization initiatives with its partners on campus. It organizes activities to welcome and integrate international students and participates in international student recruitment. The International Office provides orientation services, information sessions for students and staff members, and certain tourist or cultural activities.

The International Office also has a mandate to promote student mobility through participation in the study abroad program. To this end, the International Office coordinates student mobility agreements, informs interested students and helps them through the process.

The International Office has a partnering program for international and Canadian students. It aims to bring together people from different backgrounds to share knowledge, because everyone has something to share from their culture, language, perspective and knowledge.

The International Office also provides services and programs that give the institution an international dimension.
The International Office publishes *Le Cosmopolite*, an e-newsletter that is delivered directly to your USB email inbox.

11.17 Computer Services (Room 1443)  
[http://ustboniface.ca/serviceinformatique](http://ustboniface.ca/serviceinformatique)

The Computer Services department ensures access to, and manages and develops the modern information systems so that USB’s student population, faculty and administrative staff members are able to use them for educational, informational and administrative purposes.
APPENDIX A

Review the Clinical Instructor Guide, for the School of Nursing and Health Studies for Mission and Values, or visit the Université de Saint-Boniface website at: https://ustboniface.ca/esies

Important contacts
Practicum Course Leader: Marie-Claude Gratton Simpson  
msimpson@ustboniface.ca 
204-237-1818 ext. 432 
Office: 0130

Clinical Coordinator for Clinical Placements: Diane Pineau  
dpineau@ustboniface.ca 
204-1818 ext. 707 
Office: 1607A

Human Resource contacts
Director of Human Resources
Athalie Arnal  
aarnal@ustboniface.ca 
204-237-1818 ext. 401

Human Resources Systems Manager
Julie Belley,  
jbelley@ustboniface.ca 
204-237-1818 ext. 466

Accounting clerk and Human Resource Agent
Marie-Lynne Gratton  
mlgratton@ustboniface.ca 
204-237-1818 ext. 309

Dayforce
Your paystub is found at https://www.dayforcehcm.com/mydayforce/login.aspx. Your access code will be email to your university email account by HR if you are new contractual employee. If you cannot access your paystubs and have issues please contact HR at dayforce@ustboniface.ca.

Union
Find your collective agreement: https://ustboniface.ca/en/collective-agreements

Policies and Regulations
Please review the Université de Saint-Boniface policies and regulations found within the Clinical Instructors Guide 2018-2019 as well as at: https://ustboniface.ca/en/policies-and-regulations

You are also expected to become familiar and follow the clinical site's policies and procedures. Prior to commencing the clinical you will need to review the Clinical Instructors Guide available online or upon request by the Course Leader.
APPENDIX B

GENERAL INFORMATION

Email access
Once your contract is signed you will access to your account at the university. Having issues with your account call a technician in Service informatique (ext. 406)

| Policy 6.1: The contact information must remain professional between student and instructor/professor, only the school’s email can be used. Do not give your personal email or telephone number to the student. |

Educational/Learning Plateform: eCampus
All educational materials are available on the university’s education portal, eCampus. You are not expected to make copies of materials for the students. If you want to add resources/materials that you would like to share with the students, it is strongly recommended to send that material to the Course Leader in order to upload them to the education portal.

You have access to an office, computer and printer in the pavilion upon request, contact the Practicum Course Leader. Your computer access is provided to you by email once newly hired. If you are having difficulty logging please contact Service informatique (SI) (ext. 406).

Employee ID
You are required to obtain an ID card for access to various resources on Campus and as proof of employment at various clinical sites.

Name Tag
You are required to wear your name tag during all off campus activities. A name tag will be ordered for you and you shall be notified by the Administrative Assistant when it is ready for pickup in office 1405.

Library
While employed at the Université you have access to all course manuals from the Alfred-Morin bibliothèque and online databases. You will require an employee card to physically view or borrow books from the library; your employee card can be obtained in the Sportex. Your online logging is the same username and password to login to the USB computers. If you have difficulty with your library login or access to the library services contact the director at ext. 331.

Parking
While on business at the university, you will not be able to park in the parking lot unless paid for ahead of time in the finance department if there is availability. The cathedral next door offers 5$/day parking on weekdays (except during special occasions). 2 hr Street parking is available and is monitored by the city. Refer to the Clinical Instructors Guide section VI – general information for information on parking fees while at a clinical site.
APPENDIX C

CLINICAL PLACEMENTS

PREPARING FOR CLINICAL

- Review the Clinical Instructors guide.
  - Become familiar with sections IV, V, VI, IX, and X
- Review the Student Handbook.
- Review the syllabus and resources found on the learning platform

Get in touch with educator and manager:
- Additional Learning materials (i.e. orientation packages)
- New policies/systems
- Do the students need lockers? (see ‘Site specific information’ at the end the guide)
- Booking rooms for conferences
- Contact Course Leader for any questions or concerns.

Orientation days
The School of Nursing will provide three, 8hrs paid orientation days at the clinical site if you have never previously worked at that site. A request must be made to the Clinical Coordinator.

Orientating students
Please reserve the first day of clinical to orientate the students to the site/unit. Orientation hours count towards the overall clinical hours. If the students are to have their name tag visible at all times when on site for any School of Nursing functions.

Ensure the students are familiar with:

- Physical lay-out
- Policies and procedures (institutions)
- Nursing roles and responsibilities
- Location of supplies and equipment
- Emergency procedures (fire alarms, locations, exits, their role, etc.)
- Organisation of the healthcare team
- Review CRNM Standards of practice for RNs (*Entry-level Competencies for Registered Nurses)

Be aware that the use of social media and electronic devices in clinical practice settings is not permitted; student will be removed from the setting. The School of Nursing and Health Studies expects employees to be role models and follow the same guidelines and codes of conduct as the students regarding professionalism, the dress code, social media use, etc.

Policy 6.2 Using electronic devices and social media.
Students are not permitted to post confidential or private information regarding clients, clinical institutions, peers or professors on social media.
APPENDIX D

CONFERENCE
Conferences are held prior to, after or during clinical days. Expectations, explanations and a discussion guide are outlined in the appendices of the syllabus. Review the following with the students:

- Clarify students learning objectives (in syllabus)
- What are your specific expectations of the students (be explicit, students need structure, provide important dates in writing, etc.)
- Review assignments, completion dates and expectations. All assignment instructions are on eCampus).

A student orientation session is presented by the Course Leader each semester prior to the start of the practicum, this session is to review:

- The syllabus: expectations, course objectives, etc.
- Pre-clinical preparation (Data collection)
- Care plans
- Reflective journals
- Reflective journal with clinical question (EBP)
- Evidence-based project
  - Written assignment
  - Oral presentation
- Other: depending on the specific clinical (ex. MSE, Illness/disease research, leadership project, community project, etc.

Specific assignments are explained in detail in the Clinical Assignments document found on eCampus as well as in the syllabus.

Clinical hours
Clinical experiences are of 8, 10 or 12 hours. The School of Nursing mandates that the majority of the hours are placed during daytime hours. Evenings are possible, however no more than 16 hours (excluding shift of 12 hours that commence in the morning). The students are aware to be available for clinical on Thursdays, Fridays and Saturdays.

- No clinical days during Fall/Winter break and stat holidays
- Uncertain what your clinical hours are see the course syllabus or Appendix A of this document.

<table>
<thead>
<tr>
<th>Fall session</th>
<th>Winter session</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thanksgiving</td>
<td></td>
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<tr>
<td>Remembrance day</td>
<td></td>
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<tr>
<td>Fall Reading Week</td>
<td></td>
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<tr>
<td>Fall session exam week</td>
<td></td>
</tr>
<tr>
<td>Last available clinical day is the first Friday of December.</td>
<td>Louis Riel day</td>
</tr>
<tr>
<td>Winter Reading week (3rd week of Feb.)</td>
<td></td>
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<tr>
<td>Winter session exam week</td>
<td></td>
</tr>
<tr>
<td>Good Friday</td>
<td></td>
</tr>
<tr>
<td>Last available clinical day is the first Friday of April.</td>
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</tbody>
</table>
Strategies to promote learning

Positive ‘Role Modeling’
- Conveys positive values, behavior and teamwork
- Beneficial for patient care and advocacy

Providing encouragement, information and resources.
- Encouragement helps with self-confidence and willingness to learn and accept new challenges.
- Sharing information such as tips and hints – try to mediate the amount of information provided at one time.

Rehearsals: ‘dry run’ prior to performing the skill and communication (can also role play)
- Decreases student anxiety and promotes client safety.

‘Think aloud’ strategy: students are encouraged to think aloud for the instructor to understand their competencies, students learn from hearing the instructor do the same.
- Promotes critical thinking

Storytelling: your experiences will one day be theirs. Help them understand the processes and the expectations.
- Promotes listening and supportive communication
- Stimulates reflection

Soloing.
- Develops self-confidence/independence
- Self-learning with the appropriate resources ensure greater retention and rich learning experience
- This allows the student to think critical and problem solve.
- Supervising too closely hinders learning, independence and confidence.
  - Can result in the student being dependant on the instructor telling them when they made an error, as opposed to the student thinking for themselves.
APPENDIX F

Dealing with weak or struggling students

Weak Students (see Clinical Instructor Guide, policy 6.4)

- A weak student often lacks self-awareness, has difficulty using information to develop professionally.
- They are unable to accept constructive criticism.
- They are disorganised and slow to complete assigned tasks or care, and are unable to prioritize care.
- They are unable to assume more complex patient assignments.
- They are unable to gather information independently and cannot adapt to new data/situations.
- They are unable to develop collegial relationships with teachers, instructors and unit staff.
- Strategy: arrange for a less complex assignment, plan for flexibility, and provide rewards and positive feedback, use repetition (to promote organization), give step by step instruction, daily debriefing sessions.

Refer to the Clinical Instructors Guide. In the event that the student's clinical performance is in question, the clinical instructor will first make a verbal, followed by a written warning. The student will have to sign this warning and may add comments. The original of copy will be given to the student, and the Clinical Instructor, as well as the Course Leader, will keep a copy until the end of the clinical. In the event that the student receives a NS (non-satisfactory) in the clinical a copy of the assessment will be kept by the Course Leader.

The Clinical Instructor will:

- Identify the difficulties early: Keep anecdotes (daily if possible with examples, including times and dates, witnesses, etc.)
- Discuss the concerns with the student as soon as the concern is noted (be explicit).
- Difficulties with psychomotor skills; acknowledge the students struggles, advise the student to practice skills in the laboratory – this may be following by a re-evaluation of the students skills by the Course Leader and Laboratory Professor prior to returning to the clinical setting.
- Seek support (from Course leader, Educator, CRN, Colleagues)
- Contact Course Leader, make them aware of the student’s difficulties and interventions you have implemented or will implement.
- Meet the Course leader to discuss strategies for improvement and establish goals and expectations (generally also with the student).
- Don’t forget positive feedback. (‘Critic Sandwich’= some positive, negative, finish with positive)
- Daily debriefing sessions.
Anxious Student

- An anxious student can be mistaken for a weak student, be observant and identify the behavior for what it is. Anxious students often: over talk, ask unnecessary questions, can be passive or hide.
- **Strategy**: speak with the student, use open and honest communication, humor.
- Develop a strategy together on how to decrease their anxiety.

Above average student

- It is easy to accidently push these students aside due to presence of weaker students.
- These students meet clinical expectations early and are good problem solvers, they are often independent. They respond to patient cues for nursing care, they can also be very insightful in their own strengths and weakness.
- **Strategy**: Provide experiences and continue to challenge the student. Don’t forget that they need constructive criticism and positive reinforcement as well.

Unsafe behavior (refer to the Clinical Instructors Guide)

- Immediately speak with the student to rectify and teach (Notify the Course leader – it may be deemed necessary to remove the student from the clinical setting).  **A verbal warning** should be given at this time and reinforce with a debriefing at the end of the clinical day and/or prior to the next clinical day.
  - **Document**
- Follow-up with the student to see if they understand the unsafe behavior – clarify, has the behavior been corrected? **Written warning provided** by the Course Leader will be signed by the student.
- If concerns persist stop the student immediately, contact the Course Leader – the student will be removed from the clinical setting.
- **Finish the student's evaluation: include all documents regarding unsafe behavior.**
- The student will have a meeting with the Course Leader (and another faculty member) to review the evaluation and finale grade of **Non-Satisfactory** will be issued. Depending on the nature of the behavior further action shall be reviewed by the **Professional Unsuitability Committee**.

When is it essential that contact the Course Leader:

- In the event of an adverse event. The Course Leader will advise you to fill-out a Occurrence report (found on eCampus) for the university, and follow the clinical sites critical reporting policy. Submit the University’s Occurrence report to the Course Leader as soon as possible (same clinical day).
- You have identified a pattern or single occurrence of **unsafe behavior** (unsafe/unethical practice, behavior; not respecting policies).
- Repeated concerns regarding the students’ psychomotor skills, knowledge base, organizational, decision-making, communication abilities, or their professional conduct.
- Student becomes ill or injured during or prior to clinical (may be unable to carry out tasks due to health and safety concerns).
Questions concerns about the program, course or student general preparation.

Student fails to arrive for an assigned shift without notice or preparation.

Student has missed clinical hours; please give reason and action taken.

Conflict resolution/problems

Step 1: Identify the issue (everyone has a say): Meet with the student for a conversation (involve the Course Leader if there is an unforeseen escalation or concerns)

Step 2: Solution (generate possible solutions). Encourage the student to give possible solutions (promote problem solving/critical thinking). List options and encourage participation from all involved.

Step 3: Implement.
   - Choose and implement the best solution. Commit with verbal and/or written agreement from all involved.
   - Clearly state goals and responsibilities of all (be explicit).

Step 4: Evaluate
   - Follow-up. Meet and discuss; what is working? What needs to change?

RESTRICTIONS

Students CANNOT

- Take verbal orders from a physician
- Push IV meds
- Practice without the preceptor on the unit or an RN available for consult.
- Perform a death verification
- Sign for blood or blood products
- Participate in a 2 person positive patient ID check
- Cannot receive and sign for narcotic and controlled substances
- Cannot draw up and administer medications requiring a 2 nurse verification (except Subcutaneous insulin – the student is not a licensed professional – 2 RN signatures are still need for insulin checks
<table>
<thead>
<tr>
<th>YEAR</th>
<th>COURSE</th>
<th>COURSE NAME</th>
<th>HOURS</th>
<th>SESSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SINF 1049</td>
<td>Stage: Introduction à la pratique des soins infirmiers. (Introduction to nursing practice)</td>
<td>120 hrs</td>
<td>Hiver Winter</td>
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<tr>
<td>2</td>
<td>SINF 2047</td>
<td>Stage : Soins des adultes et de la famille. (Subacute care: Adult and Family medicine)</td>
<td>135 hrs</td>
<td>Automne Fall</td>
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<tr>
<td></td>
<td>SINF 2037</td>
<td>Stage : Soins de la famille en périnatalité (Maternité)</td>
<td>132 hrs</td>
<td>Hiver Winter</td>
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<tr>
<td>3</td>
<td>SINF 3017</td>
<td>Stage : Santé mentale (Mental Health)</td>
<td>112 hrs</td>
<td>Automne Fall</td>
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<tr>
<td></td>
<td>SINF 3025</td>
<td>Stage : Soins infirmiers en santé communautaire (Community Health)</td>
<td>45 hrs</td>
<td>Automne Fall</td>
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<td>SINF 3027</td>
<td>Stage : Soins infirmiers en santé communautaire II (Community health II)</td>
<td>120 hrs</td>
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<td></td>
<td>SINF 3057</td>
<td>Stage : Soins complexe I (Complex care: Medicine/Surgery)</td>
<td>168 hrs</td>
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<td>4</td>
<td>SINF 4017</td>
<td>Stage : Soins complexes II (Complex care: Medicine/Surgery)</td>
<td>176 hrs</td>
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<td></td>
<td>SINF 4047</td>
<td>Stage de consolidation: Transition à l'entrée en fonction (senior practicum)</td>
<td>450 hrs</td>
<td>Hiver/Printemps Winter/Spring</td>
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<td>YEAR</td>
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<td>COURSE NAME</td>
<td>HOURS</td>
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<tr>
<td>1</td>
<td>DSI 104</td>
<td>Stage : Introduction à la pratique infirmière (Introduction to nursing practice)</td>
<td>40 hrs</td>
<td>Automne Fall</td>
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<tr>
<td>1</td>
<td>DSI 108</td>
<td>Stage : Soins des adultes (Adult Care)</td>
<td>80 hrs</td>
<td>Hiver Winter</td>
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<tr>
<td>1</td>
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<td>Stage : Soins Complexes (Complex Care)</td>
<td>160 hrs</td>
<td>Été Summer</td>
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<tr>
<td>2</td>
<td>DSI 203</td>
<td>Stage : Pédiatrie et soins aigus (Pediatrics and Acute Care)</td>
<td>160 hrs</td>
<td>Automne Fall</td>
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<tr>
<td>2</td>
<td>DSI 206</td>
<td>Stage : Santé mentale et périnatalité (Mental Health and Maternity)</td>
<td>120 hrs</td>
<td>Hiver Winter</td>
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<td>2</td>
<td>DSI 208</td>
<td>Stage de précepteur : Transition à l'entrée en fonctions (Preceptorship)</td>
<td>360 hrs</td>
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