



**CONTINUING NURSING STUDIES
INTERNATIONALLY EDUCATED NURSES (IEN)
STUDENT HANDBOOK
2018 - 2019**

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1. GENERAL INFORMATION ABOUT THE CENTRE FOR NURSING STUDIES (CNS)

1.1 MESSAGE FROM THE CNS

Welcome to the Centre for Nursing Studies (CNS) and Continuing Nursing Studies.

The CNS is operated by Eastern Health and is located in St. John's, at the Dr. Leonard A. Miller Centre site, in the adjacent Southcott Hall building. The CNS offers a variety of programs across the continuum of nursing education.

This handbook is intended to provide information needed by students in the Internationally Educated Nurse (IEN) Bridging Program. Regulations that govern the academic, clinical, and professional components of the program are described as well as information related to the resources available to students. Students must meet the applicable course and/or program and other regulations as outlined in this handbook. Please refer to the table of contents at the beginning of the handbook for a listing of its contents.

NOTE: Any alterations to existing policies or regulations after publication will supersede what is in print in this handbook. Students will be notified of any changes to the published regulations, policies or information outlined in this handbook.

1.2 CNS MISSION, VISION AND VALUES

Our Mission

The Centre for Nursing Studies will deliver a continuum of nursing education programs that prepares highly competent practitioners and leaders through a commitment to excellence in teaching, practice, research and other forms of scholarship.

Our Vision

To enhance excellence and leadership in nursing education, innovation, partnerships, research and other forms of scholarship.

Our Values

Collaboration

Collaboration is the guiding principle in our approach to education, research and other forms of scholarship, practice, and international development.

Diversity

We respect diversity and foster inclusion among students, faculty, staff, and partners.

Excellence

Excellence is a means of assuring we prepare the highest quality practitioners and leaders.

Professionalism

We embody professionalism through continuous learning and the highest standards of integrity, ethical behaviour, accountability, and transparency.

Respect

Respect is the foundation of all our interactions.

1.3 CNS PROGRAMS

The CNS offers a Bachelor of Nursing (Collaborative) Program, a Practical Nursing Program and Continuing Nursing Studies courses/programs. Continuing Nursing Studies encourages registered nurses (RNs) and licensed practical nurses (LPNs) in the province of Newfoundland and Labrador to pursue lifelong learning in their professional development. Continuing Nursing Studies offers post-basic specialty programs, professional development courses and re-entry programs for registered, licensed practical nurses, internationally educated nurses across Canada and abroad.

1.4 THE IEN BRIDGING PROGRAM

The IEN Bridging Program is offered as part of Continuing Nursing Studies. The IEN Bridging Program is offered to nurses who are educated and registered in countries outside of Canada and have been assessed as requiring additional education in order to obtain a practising license as a RN in Canada.

1.5 IEN BRIDGING PROGRAM CONTACT INFORMATION

Director - CNS

Dr. Kathy Watkins kwatkins@mun.ca Office 1030 777-8168

Associate Director – Non-Degree Programs

Denise English denise.english@mun.ca Office 1035 777-8173

Coordinator, Continuing Nursing Studies

Natasha Fulford: natasha.fulford@mun.ca Office 1011 709-777-8157

Secretary: Continuing Nursing Studies

Deborah Peyton: pd6178@mun.ca Office 1026 709-777-8162

Registrar: Non-Degree Programs

Barbara Peters: barbara.peters@mun.ca Office 1007 709-777-8174

Business Office

Brenda Haines: bhaines@mun.ca

Office 1032 709-777-6644

Operations Officer

Debbie Peyton pd6178@mun.ca

Ground Floor 709-777-8179

CNS Website

<http://www.centrefornursingstudies.ca>

1.6 FINANCIAL INFORMATION GOVERNING FEES AND RECEIPTS

Centre for Nursing Studies Online Payment

The Centre for Nursing Studies accepts online payment by Visa and MasterCard. A *non-refundable* 1.75% convenience fee will be applied to credit cards. Online payments can be completed at

<https://www.centrefornursingstudies.ca/PNTuitionFeesandCharges.php>

Payment by cash, cheque or debit card can be made by visiting the Business Office at Southcott Hall during regular business hours.

For payment by mail, please use:

Business Office

Centre for Nursing Studies
Southcott Hall
100 Forest Road
St. John's, NL A1A 1E5
Canada

For payment by wire transfer, please

e-mail accounts.receivable@easternhealth.ca for banking information.

Supplementary Examination Fee: The fee for writing a supplementary examination is \$75. Payment is to be made to online at <https://www.centrefornursingstudies.ca/PNTuitionFeesandCharges.php>. Students are not permitted to write a supplementary examination until the examination fee has been paid.

Credit Recognition Fee: Students applying for Credit Recognition through Transfer Credit or Prior Learning Assessment Recognition (PLAR) will be charged a minimum fee of \$100.

Receipts: Students should retain all tuition and other program fee receipts. In the event of a dispute regarding the payment of fees, the CNS will be considered correct unless the student provides evidence of payment through the original receipt.

Income Tax Forms and Receipts: The CNS is required to issue a T2202A Tuition and Education Income Tax Form to students with respect to eligibility for the tax credits relative to education and tuition fees paid.

This form does not require students to attach receipts, but it is recommended that receipts are retained. Complete information including the Interpretation Bulletin of Revenue Canada is available in the CNS Learning Resource Centre.

Other Associated Program Costs: Students are provided with an approximated textbook cost list; students are responsible for purchasing textbooks. Other program costs including uniforms, lab coats and other supplies are purchased individually by the student.

**** The CNS reserves the right to make changes to its financial policies as deemed necessary.**

1.7 STUDENT SERVICES

1.7.1 Access to the CNS

Access to the CNS may be gained via the main entrance to Southcott Hall, Monday to Friday 0600 – 1800.

Students needing access during evenings, weekends and holidays will be required to use the main entrance of the Miller Centre which is opened from 0600 – 2100 daily.

Students are reminded that access to the Learning Resources Centre (LRC), Instructional Resource Centre (IRC) and Mailroom will only be provided during the hours when staff are available.

Students may gain access to the CNS Mailroom for drop-off purposes until 10:00 p.m. of each day.

Students are requested not to ask security personnel to provide direction to these areas after the designated hours.

1.7.2 Classrooms

The CNS occupies seven floors of Southcott Hall as follows:

- **Basement Level** - Student lockers and Lounges, Records Room and Conference Room
- **Ground Floor** – Classrooms, LRC, CNS Mailroom, office of the Operations Officer, and Guidance and Counselling Services.
- **First Floor** - Classrooms, Computer Labs and Nursing Labs
- **Second Floor** - Conference rooms, Nursing Society Office, International Nursing Office and Faculty offices
- **Ninth Floor** - Nursing Labs and Faculty offices
- **Tenth Floor** - - Faculty, Secretarial and Administrative offices
- **Eleventh Floor** - Faculty, Secretarial and Administrative offices, Research Office

If students need to book a space for study or project work, the request (with a brief explanation of the reason for the request) should be made to the appropriate department as follows:

- Classroom Space – Administration Assistant to the Director, 10th Floor, Room 1034
- Lab Space – IRC, 9th Floor, Room 921
- Conference Room Space – LRC Personnel, Ground Floor, Room G39

1.7.3 Learning Resource Centre and Computer Lab

The Learning Resource Centre (LRC) is located on the ground floor of the CNS. The LRC provides an expanding collection of books, periodicals, A-V and computer software to support the CNS curricula and to foster independent learning. The LRC is an integral part of the CNS and has a major role in the facilitation of its educational programs. Its main objective is to provide quality information services and resources for all LRC clients. Instruction in the use of information resources focuses on equipping students with information retrieval and management skills which will enable them to become independent and lifelong students.

All CNS students are registered with the LRC and have usage and borrowing privileges. Students will be issued an ID card that must be presented when borrowing materials or booking facilities.

Students are encouraged to make use of all services and resources available through the LRC. There is a wealth of material which can be used for independent and self-paced learning by students. LRC staff will be happy to assist students with any questions or problems they may have in locating materials, using reference tools, etc. Students are responsible for following all LRC/Computer Lab policies to ensure equitable access to resources and facilities for all students. Students not adhering to policies may have LRC/Computer Lab privileges revoked.

Hours of Operation

Full reference and instructional services are available from 0800 – 1630 Monday to Friday. These hours are decreased at the end of April. Please check with the LRC or visit our website at www.centrefornursingstudies.ca/Library for exact hours of operation.

To Contact Us:

Circulation Desk	-	777-8192
Reference/Admin	-	777-8189
Computer Lab	-	777-8194

E-mail: karen.hutchens@mun.ca

LRC General Policies

Policies in the LRC/Computer Lab are kept to a minimum, as our expectations are that students will use these facilities in a responsible and cooperative manner.

- Food is permitted in the LRC with the following exceptions: No Hot Food, No Take Out permitted in the LRC.
- All beverages must be in covered containers.
- The noise level should not exceed quiet talking. Students should be considerate of others working or studying.
- All materials must be signed out by a staff person or the student on duty.
- Borrowed materials should be returned promptly so that others are not deprived of access to them.

LRC Circulation Policies

All materials to be borrowed must be signed out at the Circulation Desk. Borrowed items must be returned by the due date. Students must present CNS ID when borrowing materials or equipment. Students with overdue materials will not be permitted to sign out any materials until overdue items have been returned. Students will be required to pay replacement or repair costs for materials that are lost or damaged.

- Reference materials and periodicals are for use in the LRC only.
- Books from stacks can be signed out for 2-week periods, and may be renewed once, unless previously reserved.
- Reserve materials are for 2-hour loan and must be used in the LRC. These include vertical files, books and A-V materials which have been placed on Reserve.
- The library catalogue is now available through the Internet. This means that you can search for books and videos in the CNS library from anywhere.

To Access:

1. Go to <http://www.libraryworld.com/opac>
 2. On the log-on page, enter the library name, CNS. There is no need to enter a password.
- If you would like assistance using the catalogue, please contact the LRC staff.

LRC Services

Some of the LRC services which students can avail of:

Orientation sessions are provided to all incoming students. These consist of a thorough tour of the LRC/Computer Lab, a review of policies and services, and instruction in the use of certain reference materials and computer programs.

Circulation Services include checking out materials, renewing materials and placing holds or recalls on needed items.

Reference Services include provision of information regarding collection holdings, services, etc., including instruction in use of all software programs, including the Library Online Catalogue.

Interlibrary Loans can be obtained on a cost recovery basis. Request forms are available from Karen Hutchens (karen.hutchens@mun.ca).

Access to Photocopying Facilities – There are three photocopiers available in the LRC. Photocopying cards in \$2, \$5 and \$10 amounts can be purchased at the Circulation Desk. A \$2 refundable deposit is required for cards.

Instruction in the Use of Computerized Reference Tools will be covered in orientation. Further instruction will be provided by staff during regular LRC hours.

Access to A-V Equipment will be available on a limited basis through booking with the LRC. Basic instruction in the use of this equipment will be provided as needed. Borrowing is limited to LRC hours.

Computer Lab

The computer lab is located on the first floor of the CNS. This computer lab is available to all students during LRC hours. Some software programs available to students include word processing, CINAHL, e-mail and Internet access. Four printers are available for students use. LRC staff provide support to students during LRC hours. Orientation sessions are held to familiarize all new students with the available programs. Lab policies are posted in the Lab and must be adhered to by all students.

Study Rooms

Study rooms for group work can be booked through the LRC. Study rooms can be booked for a maximum of two hours. Groups of two or more are required. Rooms are not to be used as a single study space.

1.7.4 Instructional Resource Centre (IRC)

For nursing, it is important that the academic program is complemented by practice and experience in real and/or simulated settings. The IRC provides opportunity for simulated learning in both psychomotor competencies and interpersonal skills. IRC faculty and coordinator offices are located on the ninth floor.

Facilities and Equipment Available

The IRC is located on the first, ninth and basement floors of the CNS. The IRC rooms simulate both a hospital and clinic environment.

The IRC has various clinical equipment and teaching aids that will be useful resources for student practice and community use. This equipment may be signed out for student use on a short term basis.

Lab Policies

Students must comply with the following lab policies or they may be asked to leave the lab setting.

1. Students must dress professionally for lab activities.
2. In order to avoid congestion in the lab and outside the lab rooms, students. Must keep coats and book bags in their lockers. Do not sit or leave coats and bags in the corridor outside the lab rooms. Avoid leaving coats or book bags in chairs or by elevators (obstructs people walking down the corridor and entering/exiting rooms; looks unprofessional).
3. You may bring water but no coffee cups or food is permitted in the lab.
4. Lab rooms and stations must be tidied before leaving the room.
5. Students must be prepared for their lab.
6. Please handle lab equipment with respect. If damage is noted, please report.
7. Cell phones or electronic messaging and listening devices must be turned off in the lab and stored away.

Dress Code

The IRC simulates a professional clinical environment. Proper attire and footwear for lab activities is required in the lab setting.

Returning Students

Students who have been away from clinical can seek remedial help for clinical skills. These sessions will be based on the students' individual learning needs.

1.7.5 Guidance and Counseling

Guidance and Counseling services are provided by a qualified Guidance Counselor who is available to all students enrolled at the CNS. These services are located at the CNS, ground floor, Southcott Hall, room G27.

Services Offered:

- ***Individual and/or group counselling*** is available in personal, academic and career planning areas.
- Small group sessions designed to meet identified student needs, include the following:
 - Study Skills
 - Exam writing strategies
 - Enhancing Personal and Professional Effectiveness
 - Dealing with Death and Dying
 - Resume Writing
 - Mindfulness
 - Stress Management

- Ongoing assessment and program development to meet new need areas identified by students and/or faculty.

Accessing Services

An open door, drop-in policy is encouraged. However, in order to ensure a specific appointment time, advance booking is recommended. This may be done in either of the following ways:

- Telephone or email: Dawn Lanphear: Room G27 Phone: 777-8187 or Email: dawn.lanphear@mun.ca
- Write the word “booked” beside a designated time slot on a schedule posted on the Guidance Counsellor’s office door.

Group sessions will be advertised on student bulletin boards. Advance sign-up is recommended as attendance is limited.

Utilization of Services

Student utilization of these services is generally on a voluntary basis. However, students may also be referred to a Guidance Counsellor by a faculty member. In these instances, students work collaboratively with the Guidance Counsellor and faculty member, if necessary, to develop and implement strategies to help resolve the identified problem area. It is the student’s responsibility to set up an appointment time and follow through with the sessions.

Confidentiality

The Guidance and Counselling policy for client/counsellor confidentiality is in accordance with the professional regulation of the Canadian Nurses Association.

1.7.6 Academic Accommodations

The CNS is committed to providing academic accommodations to all students who self-identify and have documentation pertaining to a disability. Academic accommodation refers to a change to teaching or evaluation procedures designed to accommodate the particular needs of a student with a disability without compromising academic integrity of the course, program, or assignment. Academic integrity is defined as the demonstration of acquisition of a body of knowledge or the skill normally required for passing a course and/or completing a course or program as determined by the instructor and/or the CNS.

Students should contact the Coordinator, Continuing Nursing Studies with all appropriate documentation, in a timely manner to make a request for accommodation or to request a change in accommodation. Following contact with the Program Coordinator, students must discuss their academic accommodation needs with their instructors, and any others, in light of the nature and requirements of the particular course, program or assignment.

Students can seek the assistance of the CNS Guidance Counsellor to arrange for accommodation and access additional services or agencies available in the community.

1.7.7 Academic Advising

Students requiring academic advising should contact the Coordinator, Continuing Nursing Studies.

1.7.8 Student Health

The CNS clinical coordinator will monitor the immunization status and health record updates for students in the Program. The coordinator will contact students as immunization or health record updates are needed.

For all other health related matters, students are responsible to obtain the services of a health care provider of their choice.

1.8 CHANGE OF NAME AND ADDRESS

Students are advised to notify the Registrar, Non-Degree Programs, in writing of any change in name, phone number, mailing or email address.

1.9 CANCELLATION OF PROGRAMS/COURSES

The CNS reserves the right to cancel programs if there is insufficient enrollment.

2. OVERVIEW OF THE IEN BRIDGING PROGRAM

2.1 PROGRAM DESCRIPTION AND DELIVERY

The IEN Bridging Program prepares the internationally educated nurse to build on the commonalities and differences between their own experiences and Canadian health care delivery and nursing practice. IENs enroll in the program or identified program courses to enhance knowledge and skills as a means to attain practice equivalence to the Canadian educated and practising nurse.

For many courses in the program, the delivery method is via distance education, Centre for Innovation in Teaching and Learning (CITL). Specified courses have full day lab components where attendance is required, on-site, at the CNS. Labs are strategically scheduled to minimize travelling for the IEN who lives outside the St. John's metropolitan area. For IENs who enroll in a clinical component of the program, the requirement to complete the course in the St. John's area is course dependent.

2.2 PROGRAM REFERENCE

IENs referred for admission to the IEN Bridging/RN Re-Entry Program from the Association of Registered Nurses of Newfoundland and Labrador (ARNNL) are given first priority to course offerings. IENs who are applying from jurisdictions within Canada are requested to complete the Proof of Eligibility Form from that

jurisdiction indicating that they have followed the correct procedures and assessment to be eligible for a nursing license in Canada.

2.3 ADMISSION REQUIREMENTS

IENs applying to the IEN Bridging/RN Re-Entry Program must complete an application form that identifies the courses for which the application is intended. Other documents to be submitted with the application form include:

2.3.1 Completion of the National Nursing Assessment Service (NNAS) process.

2.3.2 Submission of completed nursing knowledge and skills assessment report.

2.3.3 Proof of eligibility to work or study in Canada through documentation of:

- Canadian citizenship
- Permanent residency documents or
- Authorization under the Immigration and Refugee Protection Act

2.3.4 Proof of Eligibility Form from a nursing regulatory body indicating eligibility for interim license following successful completion of the program or specified course(s).

2.3.5 There will be **one intake** per academic year for candidates interested in the IEN Bridging/ RN Re-Entry Program at the CNS. Applications must be received by April 1st of each year. Due to the high interest in the Program, incomplete applications will not be reviewed or processed. Please adhere to the checklist in the Application Guide. Intake will be based on application numbers and faculty resources.

2.3.6 For IENs whose first language is not English or who completed their nursing education in a language other than English, a test of English must be completed. An official copy of the test results must be submitted before program/course commencement. If such documentation is with the ARNNL, the IEN student can request that a verified copy from ARNNL be forwarded to the CNS. Otherwise, the IEN must request the testing company to send an original report of the test scores to the CNS. Acceptable tests and scores are:

- **IELTS** (International English Language Testing System – Academic version) overall score of 7.0 with scores of 7.0 - speaking, 7.5 - listening, 6.5 - reading, and 7.0 - writing. Standard Error of Measure (SEM) of 0.5 will be applied to test scores.
- **TOEFL** (Test of English as a Foreign Language (IBT)). Total minimum score of 86 with scores of 26 -speaking, 20 - listening, 20 -

reading, and 20 - writing.

- **CELBAN** (Canadian English Language Benchmark Assessment for Nurses). Scores: Speaking - 8, Listening – 10, Reading – 8, Writing – 7.

NOTE: Test scores are valid for two years from the testing date. IEN students whose test scores expire while still in the IEN Bridging/RN Re-Entry Program may remain in the program if the IEN student is living and/or working in a setting where they are consistently using English as the primary language and no language issues arise. However, it is important to note that the nursing regulatory body requires a current (within two years) English Language Proficiency test score prior to awarding a practising license.

- 2.3.7** For IENs who are registering for the Medical-Surgical Nursing Practice course or a specialty course that requires completion of the clinical component the pre-clinical placement requirements should be submitted as soon as possible (see pp. 32-33 for list of preclinical requirements).

2.4 IEN PROGRAM PHILOSOPHY

The Internationally Educated Nurses' (IEN) Bridging Program is designed to facilitate the IEN's integration into Canadian nursing practice by providing learning opportunities that build on previous nursing knowledge and experience and thus prepare the IEN for registration and practice in the Canadian context.

Program design and delivery is based on preparing the IEN to achieve national and provincial nursing practice entry-level competencies. The curriculum is guided by current practice competencies and standards, Canadian health care system trends and issues, and the professional practice of nursing. Elements of the curriculum design deemed critical to enabling IENs to effectively bridge into Canadian nursing practice include a strong professional communication thread and learning opportunities that build critical thinking and clinical judgement skills.

The program provides learning opportunities that are consistent with the beliefs of the Continuing Nursing Studies Programs of the CNS, specifically, that learning is a dynamic and continuous and occurs within the context of interactions between the student, the teacher and the environment. Program delivery is flexible and delivered within an environment that acknowledges the individual IEN's unique educational and practice background. Faculty and student relationships that acknowledge the importance of awareness and responsiveness to diversity in culture and learning style are essential to all aspects of program design.

Critical to delivery of the program is the establishment of partnerships and relationships with stakeholders to facilitate the availability of adequate resources and supports for program delivery and to meet the unique needs of IENs. Program design and delivery is inclusive of ongoing and timely evaluation to ensure transparency, relevance and responsiveness to the needs of the IEN and the practice setting.

2.5 CONTINUING NURSING STUDIES PHILOSOPHY

Given that the IEN Bridging/RN Re-Entry Program is offered through Continuing Nursing Studies, the Philosophy and Conceptual Framework for Continuing Nursing Studies is also included in this handbook.

The philosophy of Continuing Nursing Studies includes beliefs about person, health, environment, nursing, and nursing education.

Person

Each person is viewed as a unique individual comprised of biological, psychological, sociological, and spiritual dimensions. Though these dimensions are identified as separate entities, in actuality, they are not; they constantly interact with one another, are dependent on one another and are coordinated in a systematic way. This balance or exchange between systems maintains a person's holism; the idea that the person is considered to be greater than the sum of her/his parts.

The person is an open system who interacts internally as well as externally with other components such as social, physical, cultural, political and economical systems. Stressors from within the internal and external components of the environment continuously confront the person. Successful adaptation by the person to these stressors results in health or wellness while unsuccessful adaptation results in illness or death.

Growth and development of a person occurs in a logical sequential pattern from conception through death. Beliefs and values developed during the lifespan help a person formulate perceptions about self, health and the world.

Perceptions, particularly about health, determine whether or when the person will seek health care. The nurse, when working with the person, develops a helping relationship. During this relationship the nurse facilitates the person to become an active participant and to assume responsibility for personal health.

Health

Health is viewed as a dynamic process in the life continuum of a person which encompasses the concepts of wellness, health, and illness. These concepts refer to a person's ability to achieve a level of biological, psychosocial, and spiritual well-being by continually adapting to the internal and external environment. The degree of health attained is determined by a person's ability to successfully respond to stressors in the internal and external environment. The level of

functioning which maximizes an individual's potential to function within the environment is wellness. Effective responses implies the use of adaptive mechanisms to successfully achieve or maintain a person's holistic nature or balance, whereas ineffective responses cause a maladaptation/imbalance among the person's systems. This imbalance is referred to an illness, which may lead to death.

Wellness, health, and illness are seen as separate, but parallel, entities on a continuum and their positions are determined by the nature and strength of adaptive responses in relation to the nature and strength of stressors.

Since no one attains perfect health and not everyone is defined as ill, there must be a range on the continuum that allows for health and illness to co-exist.

People view health and illness in terms of their own perceptions which stem from their individual value systems. Alterations in their health status usually lead individuals to seek care within the health care delivery system. People have a universal right to health care. The right to seek or not seek health care must be respected, as long as people understand the implications of their actions and this does not pose a threat to others.

The primary goal of nursing is to promote, maintain, or restore a person's adaptation to an optimal state of health. Since the process of health is a unique and individual experience, the person must be regarded as an active participant and the ultimate authority in the plan of care. The goals of nursing care must then be dynamic, individualized, and determined collaboratively by the person and the nurse.

The Health Process 211

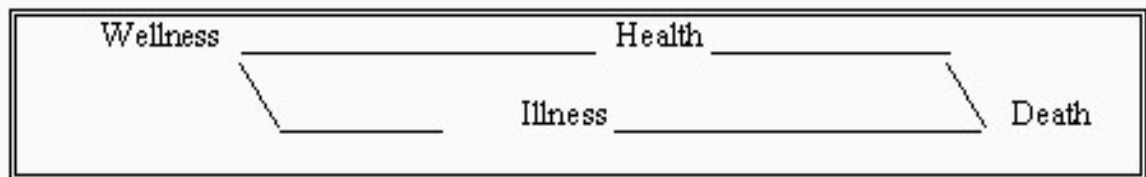


Figure 10-3 Health Continuum (Reprinted with permission from Twaddle, AC: *A Sociology of Health*, p. 13. St. Louis, C.V. Mosby, 1977).

Environment

Environment in the broadest sense includes all of the internal and external influences affecting the development of a person or group. These influences are seen as systems that are open and interact with one another. A person is many systems and sub-systems that interrelate in an integrated fashion to maintain one's totality or holism. Both persons and environment are seen as living, dynamic, systems with porous boundaries that allow for exchange of matter, energy, and information within and between each other.

The internal environment of a person includes a variety of sub-systems such as biological, psychological, sociological, and spiritual. These components include

unique characteristics, as well as, characteristics that are common with other persons. Each of these sub-systems, the biological for example, can be further divided into components such as gastrointestinal, respiratory, and circulatory systems.

The biological system contains sub-systems that affect a person's normal body functioning. The psychological system contains sub-systems that affect a person's thinking and feeling. A person's ability to develop formal and informal relationships with one person, the family, or other social groups describes the sociological system. The spiritual component may include a person's need to believe in a Supreme Being, a special order of the universe, or that life has meaning. The internal environment therefore includes everything internal to a person's body boundaries.

The external environment includes anything exterior to a person's internal environment. This includes anything that may impact or encroach upon a person's life. Physical environment, cultural environment, social environment, political environment, and economic factors are examples of the sub-systems that may have an impact upon a person's life. The physical environment includes elements like: air, water, soil, and food quality; geography; climate; and building structures. Cultural factors include racial and ethnic identity, values and beliefs, language, and intercultural communications of the person. The social environment consists of the social systems with which a person interacts such as the family, social groups, and the community at large.

Job availability, the quality and accessibility of health care services and other resources, and financial stability of the community exemplify components of the economic environment. The political environment represents the governmental power to influence or determine policies relevant to health care, environment, and other issues in society.

Nursing

The profession of nursing allows the nurse to develop a very special and unique relationship with a client. During this relationship, the client places a great deal of trust in the nurse. The nurse frequently deals with a client who is in a weakened and disruptive state. In this precarious relationship, in which the nurse may become the client advocate, it is essential that the nurse be a caring individual with strong ethical and moral values.

The nurse begins the process by developing an open, honest, individualized and collaborative relationship with the client which is reliant upon good communication skills. Although nurses also work with families and groups, the emphasis here is on the individual. This relationship can be established with individuals of any age group, therefore, understanding the concepts of growth and development is an essential part of this process.

Nursing care is provided to clients in acute, long term, ambulatory, rehabilitative, and community settings. These settings provide the nurse with the opportunity to work with individuals at varied positions along the wellness-illness continuum.

Promoting, maintaining and restoring a client's adaptation to an optimal state of health is the major goal of nursing. The nurse helps facilitate the client to adapt positively to stressors in the internal and external environment, moving clients toward health and growth. Maladaptation occurs when the stressor or stressors are stronger than the person's adaptive responses.

In order to determine a person's adaptive ability and level of health the nurse must assess the person's internal and external environment. Stressors, that have the potential to disrupt a person's system or holism are identified by looking at various components of the client's internal and external environment.

The nurse assesses the client's level of health by identifying factors such as information about the client's coping abilities, functional health patterns, past experiences, and ability to change.

The nurse can determine if the client is adapting effectively or ineffectively to stressors by identifying coping responses. These responses may include the use of psychological and physiological defenses as well as intellectual reasoning. Ineffective coping behaviours on the other hand, will lead to maladaptation, illness or death. It should be noted however, that stress is an essential part of normal life and when it reaches crisis proportions, may result in maladaptation.

The nurse, in collaboration with the client, utilizes decision making and effectively. These nursing strategies include providing information, teaching more effective coping responses and modifying or changing the internal or external environment of the patient. Evaluation of these strategies is ongoing throughout the nurse-patient relationship.

When working with healthy and well individuals, the nurse can provide teaching and information to promote or maintain a high quality of life or level of functioning within the environment. Often the client will be able to function in everyday life despite being ill. The nurse then focuses on strengthening or maintaining positive adaptive responses.

The nurse, even though independent in her/his role to a large degree, does not care for the client in isolation. The nurse is a member of the health care team which includes other professionals such as physicians, social workers, physiotherapists and dietitians. Providing holistic nursing care places the nurse in a unique situation not only as the giver of care but also as the coordinator of care.

Nursing Education

Continuing Nursing Studies encourages RNs and LPNs in their pursuit of lifelong learning. Learning is dynamic and continuous and occurs within the context of

interactions between the student, the teacher, and the environment. Learning is lifelong and interpreted through the life experiences of the student.

Learning is reciprocal, interactive and student-initiated. Learning is the synthesis of knowledge derived from theory and practice. Learning is facilitated in an environment that is flexible, values individuality, and fosters critical thinking, creativity and independence. Learning is facilitated when students are encouraged and assisted to reflect, examine, critique, practice, share and reframe. Learning is facilitated in a milieu where students are actively involved in the learning process and where the student/teacher relationship is collaborative and collegial. Lifelong learning is essential for all nurses to maintain personal and professional competence.

2.6 CONTINUING NURSING STUDIES CONCEPTUAL FRAMEWORK AND MODEL

The Conceptual Framework, which serves as a blueprint for the development of nursing courses in Continuing Nursing Studies, is an eclectic one. This framework is developed from key concepts identified in the vision, mission, and values and beliefs statements. Concepts central to the framework include: holism, systems theory, sequential pattern of growth and development, beliefs and values, continuum, wellness, health, illness, stressors, coping, adaptation, maladaptation, collaborative relationships, and advocacy. The following is an explanation of the Conceptual Framework (see Model of Framework following explanation).

The Student - The inner circle, represents the student (RN or LPN), the focal point of the conceptual framework.

Programs - The middle circle represents the programs. Programs that are offered by Continuing Nursing Studies are based on continuous needs assessment of key stakeholders (RNs, LPNs, employers, community at large, and others), evolving scientific knowledge, health care delivery system, professional nursing organizations, and any other groups that have relevant input to selection of programs.

Key Concepts to Program Development - The outer circle represents key concepts surrounding programs. Key Concepts that have been identified as being essential to the development of programs are:

Individuality - Each student has a different level of education, value system, and set of experiences. These differences are recognized in program development.

Adult Learning Principles - Programs will be developed using adult learning principles as the “philosophy” of education.

Continuum of Learning - Courses will be developed to allow for a continuum of learning to motivate and facilitate students to develop an attitude of lifelong learning.

Evidence Based Practice - Current nursing research and methods will be incorporated into programs to facilitate evidence-based practice.

Prior Learning Assessment Recognition - Continuing Nursing Studies is committed to recognizing prior learning.

Partnerships - Continuing Nursing Studies will develop partnerships with key stakeholders.

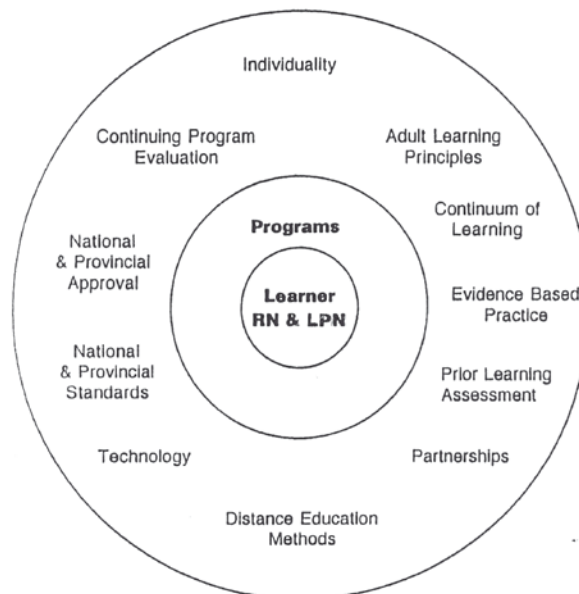
Distance Education Methods - Distance education methods will meet the educational needs of the students by providing accessibility to programs.

Technology - Technology will be utilized where possible in the provision of programs to facilitate interactive learning.

National and Provincial Standards - National and provincial standards from professional and educational organizations will be incorporated into programs.

Approval - Programs are approved by relevant professional bodies as required.

Continuous Program Evaluation - Programs and courses will undergo continuous evaluation to ensure relevance, currency of content, quality, latest technology available used, and satisfaction from students and employers.



2.7

COURSE REGULATIONS AND COURSE DESCRIPTIONS

The IEN Bridging Program is available to IEN who are referred for specific courses or for IENs who are required to complete the full program. The program includes 17 courses, nine general nursing and eight specialty courses. The requirement to complete more than one specialty course is dependent on the individual IEN's credential assessment.

IEN students must successfully complete all required general nursing courses prior to commencing the Medical-Surgical Nursing Practice course.

Students must have computer access as all theory components are offered through online delivery.

All courses must be completed in sequential order or as determined by the program coordinator. The delivery of the specialty courses will be done in consultation with the program coordinator.

The following is a list of all IEN Bridging Program courses with course descriptions:

GENERAL NURSING COURSES

COURSE NUMBERS

CS means Continuing Studies

CSS means Continuing Studies Specialty

The number denotes the course number.

A denotes the theory portion of a course

B denotes the Clinical portion of a course

1. **CS001 The Profession of Nursing in Canada** (8 weeks) reviews the evolution of professional nursing practice and related theoretical foundations that impact health care delivery in Canada. This course will provide opportunities for discussion and reflection on societal forces that impact Canadian registered nursing practice. An overview of the various components of the Canadian health care system and professional, ethical and legal issues related to nursing are also explored.
2. **CS002 Therapeutic and Professional Communication** (8 weeks) emphasizes the principles of therapeutic and professional communication. The course has four distinct components: the nurse-client relationship; communicating with clients and families; collaboration and cooperative practice; and professional documentation. There are two online laboratory discussion forums associated with this course.

3. **CS003 Pharmacology** (10 weeks) provides information that accurately reflects current registered nurse practice in drug therapy in Canada, including knowledge of pharmacological interventions. The course focuses on the concepts and principles of pharmacology, knowledge of medication groups, their actions, uses, and special considerations.
4. **CS004 Medication Administration** (10 weeks) reviews the knowledge, skills, and judgements required by the registered nurse to safely administer medications to clients. This course addresses basic concepts related to drug administration, Canadian drug legislation and standards, safe preparation of medications, calculation of medication dosages, documentation and the role of the nursing process in medication administration. This course has a 2 day on-site lab component.
5. **CS005 Health Assessment** (10 weeks) reviews the Canadian registered nurse's role in health assessment. The course includes two components: the health history and the physical examination. The course teaches nurses to assess their clients holistically and to analyze their findings, determine outcomes and document data in an accurate and timely manner. This course has a 3 day on-site lab component.
6. **CS006 Health Challenges and Nursing Interventions** (12 weeks) addresses health challenges across the lifespan. The course builds on previous knowledge of pathophysiology, pharmacology, and health assessment. Course concepts include health promotion and illness prevention; the nursing process; ethical, legal and professional considerations; family centered care; teaching and learning and collaborative practice. These concepts are applied to the nursing care of individuals experiencing common health challenges.
7. **CS007 Complex and Emergency Health Challenges** (12 weeks) focuses on the process of effective clinical decision-making by nurses within a Canadian context. Simulations are used to address critical thinking, prioritizing, coordinating and delegating care.
The course also focuses on inter-professional collaboration and consultation for clinical decision-making. Case studies related to complex multi-system health challenges are used to prepare nurses for appropriate decision-making. The course also includes emerging health challenges seen in Canadian health care settings. This course has a one day on-site lab component.
8. **CS008 Clinical Skills** (10 weeks) provides students with the opportunity to review and apply psychomotor competencies in a simulated nursing practice setting. This course has a 5 day on-site lab component.
9. **CS009 Medical-Surgical Nursing Practice** provides the student with a sound foundation in medical-surgical nursing care of the adult client and family experiencing alterations in health. It is designed to integrate experiential knowledge, theory, skills, clinical decision-making, communication and

values in a Canadian health care setting. The role of the professional registered nurse in acute medical-surgical inpatient areas will be emphasized. This course includes 40 hours of lab facilitation (CS008), 160 hours of faculty-led clinical and 200 hours of preceptorship.

SPECIALTY NURSING COURSES

***THE REQUIREMENT TO COMPLETE THE CLINICAL COMPONENT OF THE SPECIALTY COURSE WILL BE DEPENDENT ON INDIVIDUAL STUDENT ASSESSMENT RESULTS.

1. **CSS010A Mental Health Nursing** focuses on psychiatric/mental health problems across the lifespan. The course is designed to provide an overview of mental health nursing concepts. The meaning of mental health and mental illness to individuals, families and vulnerable populations is explored using a holistic perspective. Mental illness is considered using a biological, psychological, social and spiritual framework.
2. **CSS010B Mental Health Nursing Practice** provides the opportunity to apply knowledge acquired in the Mental Health Nursing course to the practice setting. The course is comprised of 80 hours of preceptored nursing experience in an acute care mental health setting.
3. **CSS011A Community Health Nursing** provides an overview of the knowledge required to practice nursing with individuals and families in the community setting and with the community as client. The nursing role in promoting, restoring, protecting and supporting the health status of clients and the community are addressed.
4. **CSS011B Community Health Nursing Practice** provides the opportunity to integrate and consolidate the knowledge acquired in the community health nursing theory course and apply it to community health nursing practice in Canada. The course is comprised of 80 hours of preceptored experience in a community health practice setting.
5. **CSS012 A Child Health Nursing** focuses on the nursing care of children and families in Canada. Several topics explored in relation to child health nursing include: common acute and chronic illnesses, family centered care, growth and development, and health promotion and injury prevention.
6. **CSS012B Child Health Nursing Practice** focuses on the nursing care of children and families. The course is comprised of 80 hours of preceptored nursing experience in an acute care child health setting.
7. **CSS013A Nursing the Childbearing Family** focuses on the nursing care of childbearing families in Canada. Course topics include all phases of the childbearing process, the neonatal period, and possible complications.

8. ***CSSO13B Nursing Practice for the Childbearing Family*** focuses on the nursing care of individuals and families, in the Canadian health care context, through all phases of childbearing and the neonatal period. The course is comprised of 80 hours of preceptored nursing experience in the acute care maternity setting.

2.8 COURSE OFFERINGS

Please refer to 2.3.5 (p.11) on application timelines. The facilitation of the Clinical Skills and Medical-Surgical Nursing Practice courses are based on need/student enrollment.

NOTE: For all IEN Bridging Program courses, the scheduling of course offerings is subject to change based on enrollment numbers.

2.9 COLLECTION OF DATA FOR PROGRAM EVALUATION PURPOSES

The CNS regularly collects data related to student enrollment and course or program completion. The collection and reporting of this information is for the purpose of program evaluation. Information collected is reported as aggregate data only; that is, information about individual students is not reported.

2.10 VERIFICATION OF IEN BRIDGING PROGRAM OR COURSE COMPLETION

The CNS will upon request, forward verification of program or course completion to the appropriate referral/reference body.

3. ACADEMIC REGULATIONS AND GUIDELINES IEN BRIDGING PROGRAM

3.1 PROMOTION REGULATIONS

- a) Students must achieve the required 70% pass mark in each nursing theory course and a PASS in each nursing practice course.
- b) Students who fail three (3) or more courses in the program are required to withdraw from the program.
- c) Students who fail a given course in the program twice are required to withdraw from the program.
- d) Students who are required to withdraw from the program as outlined in clause b) or c) of the program regulations may appeal for readmission after the lapse of two (2) semesters. The appeal will be heard by the NDPC.

- e) Students who fail 1-2 courses are considered out-of-sequence. Out-of-sequence students do not need to submit a written request for readmission but must notify the Coordinator for Continuing Nursing Studies and Registrar one semester in advance of the anticipated return.
- f) A student may write a supplementary examination for any one (1) course only once.
- g) Students who are required to withdraw from the program a second time are ineligible for future admission to the program.
- h) Students who return to the program after a required withdrawal are permitted no more failures in a nursing theory or nursing practice course.
- i) A student may be required to withdraw from a nursing practice course or the program at any time if, upon review by and a recommendation from the NDPC, it is deemed that the student would not profit from continued practice and/or is considered to be unsafe in the practice setting. In such cases, students who are required to withdraw from the program would not be eligible for future admission/readmission to the program.
- j) Students who wish to take a leave of absence from the program must apply in writing to the Chair of the NDPC. A leave of absence may be approved for a maximum of 12 months. The student must forward a written request for readmission to the Chair of the NDPC two semesters in advance of the anticipated return.
- k) Students must complete the IEN Bridging/RN Re-Entry Program within two years of admission.
- l) A student who is not enrolled, or actively participating in the IEN Bridging/RN Re-Entry Program course for more than three (3) consecutive semesters will be considered withdrawn from the program.
- m) Students in the program who are readmitted following a period of absence, either as a result of a leave of absence or a withdrawal from the program, may be required to do remedial work as recommended by the NDPC. The remedial work can include repeating clinical, laboratory, or classroom courses or repeating one or more semesters of the program. Students will be advised of their remedial program at the time of readmission. All remedial work must be successfully completed before a student will be permitted to proceed in the program.
- n) The process for making an appeal for readmission following a required withdrawal is as follows:

The student must forward a written appeal for readmission to the Chair of the NDPC. This request must be received two (2) semesters in advance of the anticipated return. The letter must state what actions the student has taken that he/she feels will improve chances for success with a readmission. The NDPC will table the request at its next regularly scheduled meeting and will respond to the student within one week of that meeting.

3.2 WAIVER OF REGULATIONS

The CNS reserves the right to modify, alter or waive any IEN Bridging/RN Re-Entry Program or course regulation in its application to individual students in the event where special circumstances may apply. Requests for waivers should be directed to the Associate Director, NDPC as Chair of the NDPC.

3.3 EVALUATION

- a. The method of evaluation for each IEN Bridging/RN Re-Entry Program course is identified in the course materials. There is a midterm and final exam in all theory courses. The exams will consist of multiple choice and alternate format type questions. The midterm covers all material up to the midterm of the course. The final exam is comprehensive and covers all course content.
- b. For most courses with a lab component, lab skill performance is evaluated through scheduled practical lab assessments.
- c. For nursing practice courses, students are evaluated using a pass/fail grading scheme.
- d. Students must complete all scheduled evaluation components of a course in order to receive a final grade.

3.4 EXAMINATIONS (TERM TESTS, MIDTERM AND FINAL EXAMINATIONS)

3.4.1 Scheduling of Examinations

The midterm and final examinations are facilitated by ProctorU through the Centre for Innovation in Teaching and Learning (CITL) (Brightspace). The examinations are scheduled as outlined in the course outline (s) and are to be written in a designated 24 hour timeframe (as per course outline). Students will receive a link on how to complete the exam online. The student must have a computer system designed to meet the requirements of online exam proctoring. No term tests or midterm examinations valued at more than 10% shall be held during the last two weeks of the class schedule.

3.4.2 Regulations Governing the Writing of Examinations

1. All students are required to sit for the examination at the time scheduled for the writing.
2. Photo IDs must be worn at the sitting of all examinations.
3. Brief cases, textbooks, binders, handbags etc., are not permitted in an examination room.

4. Students are expected to come prepared for examinations with pencils / erasers and any other learning tool identified by the course leader.
5. Examinations will start at the designated time and will be invigilated by a faculty member. Students will not be permitted to enter an exam room after the designated start time, except under extraordinary circumstances, at the discretion of the exam invigilator.
6. Examination booklets, answer sheets and scrap paper must be returned to, and checked by the faculty member upon completion of the exam. Duplication of examination questions is strictly prohibited.
7. Caps of any sort are not to be worn during examinations.
8. Palm pilots, cell phones, electronic translators and other electronic devices are NOT permitted in the examination room. A basic calculator may be permitted at the discretion of the course faculty.

3.4.3 Student Feedback Following Examinations

Students who wish to request specific feedback following the release of term exams/papers/assignments should approach the faculty member within four (4) working days following the release of grades or assignments. Feedback will be provided at faculty discretion.

3.4.2 Access to Final Examinations

1. A student has a right to see the final examination prior to a supplementary examination. However, the examination is the property of the CNS and the CNS retains full possession and control of the examination at all times. This regulation upholds the authority and judgment of the examiner in evaluation.
2. To access a final examination, a student must make a written request to the Associate Director, NDPC. The request is subject to the following conditions:
 - Any such request must be made following release of examination results for the semester in which the course was taken and within one month of the official release of grades by the CNS.
 - The final examination must be viewed in the presence of the course instructor or other person designated by the Associate Director, NDPC. Both the instructor and the student have the right to be accompanied by a registered student or a member of the faculty or staff of the CNS.
 - The final examination must not be taken away or tampered with in any way.

3.4.3 Re-reading of Final Examinations

1. A student may apply to have a final examination re-read whether or not he or she has obtained a passing grade in that course.

2. A student who wishes to have a final examination re-read must make application, in writing, to the attention of the Associate Director, NDPC within one month of the official release of grades by the CNS. When a re-reading is requested, the CNS will make every reasonable attempt to have the re-reading conducted by a faculty member(s) other than the original marker(s).
3. The fee for re-reading a final examination is \$50.00 and must be paid at the time of application. If the final numeric grade is raised after re-reading, the fee is refunded. If the final numeric grade is unchanged or lowered, the fee is forfeited.

3.4.4 Route for Questioning Grades

1. Grades awarded in individual courses cannot be appealed, as the student shall normally have had the opportunity to contest grades within one month of the official release of examination results (see Access to Final Examinations (3.6.4) and Re-reading of Final Examinations (3.6.5). Dissatisfaction with grades is not sufficient grounds for an appeal.
2. Notwithstanding the above, and recognizing that the awarding of grades is an academic matter, a student who wishes to question the grades awarded in individual courses may consult with the following in the order given:
 - The course instructor
 - The Coordinator, Continuing Nursing Studies
 - The Associate Director, NDPC

3.5 DEFERRED EXAMINATIONS

Students unable to write a scheduled examination **MUST** notify the course leader **at least one hour prior to the scheduled writing time**, to request a deferred writing. This notification must be made by the student in person directly to the course leader (except in cases where a student can provide written verification that they are unable to do so) or by voice mail to the course leader's CNS telephone number. Deferred exams are accommodated at the discretion of the course leader and are only accommodated under extraordinary circumstances. Documentation must be provided to be eligible for a deferred examination. Should a deferred be granted, the time, nature and method of that testing will be at the discretion of the course leader.

3.6 RELEASE OF GRADES

Grades will not be released to students by phone. Students may obtain term tests or midterm results via web access (Brightspace). Final course grades will be released to students via web access (Brightspace). Semester transcripts will be mailed to students. Faculty are **not** to release student grades to another student.

3.7 GUIDELINES FOR STUDENTS RETURNING TO THE PROGRAM FOLLOWING A PERIOD OF ABSENCE

- a) Students who withdraw from a course/semester for medical reasons must provide proof of medical clearance before resuming studies.
- b) Returning students may be asked to provide the following documentation; a) up-to-date immunization record; b) current CPR certificate; c) updated health assessment; d) Certificate of Conduct; e) updated references; and f) Child Protection Record.
- c) All regulations outlined in the current PN Student Handbook as they relate to Promotion Regulations and Supplementary Examinations will apply from the time of the students' INITIAL admission to the program.
- d) Students returning from a program absence must notify the PN Program Coordinator at least two semesters in advance of the return.
- e) If at any time during a period of absence the student decides not to continue with the nursing program, the student must notify the school in writing.
- f) Students wishing to do so may access the services of the CNS Guidance Counselor during a period of absence from the Program.

3.8 ATTENDANCE

It is the responsibility of the student to attend all laboratory and/or clinical practice experiences, as required. Failure to complete these required learning experiences could result in insufficient learning to meet course objectives and subsequently receive a failing grade.

Some components of the program are onsite and all students are required to attend. Students are responsible to arrange their own travel and accommodations.

3.9 LAB RETESTS

- a. Students are permitted one retest if they fail a lab exam.
- b. Students who fail a lab exam are required to complete remedial work before they are permitted a retest.
- c. All lab components must be successfully passed to achieve a pass in the course.

3.10 SUPPLEMENTARY EXAMINATIONS

The IEN Bridging/RN Re-Entry Program permits students to write a supplementary examination in a failed course under certain conditions. These include:

- a) The student must have achieved a cumulative grade of at least 65% in the failed course.
- b) Supplementary examinations are permitted only in courses that have a final examination.
- c) Only two supplementary examinations can be written in the program.

In determining whether a student achieves a passing grade in the course when a supplementary examination is written, the supplementary examination will have the same weight as the final examination for the course.

Students who achieve a passing grade following a supplementary examination will be awarded a final grade of 70% in the course. The fee to write a supplementary exam is \$75 payable before writing the supplementary exam (see p. 3).

3.11 COURSE ASSIGNMENT EXTENSIONS

Assignment deadlines will be extended only under extraordinary circumstances. Students requesting extensions are expected to contact the course faculty prior to the assignment due date. The granting of extensions is at the discretion of the coordinator.

3.12 INFORMAL RESOLUTION OF STUDENT COMPLAINTS

These guidelines are intended to facilitate informal resolution of student complaints. The initial attempt to resolve the complaint is made by the student and faculty member. Students are expected to approach faculty prior to seeking resolution at any other level.

Students who perceive that they need assistance with communication and or conflict management techniques may seek the services of the Guidance Counselor prior to requesting an appointment with the faculty member.

- a) If the problem is not able to be resolved in the initial discussion between the student and faculty member, the Coordinator, Continuing Nursing Studies or Associate Director meets with the faculty member and student to try and seek a solution.
- b) If the faculty member or student does not wish to attend this meeting or if a solution cannot be reached, then the matter is referred to the Director.

- c) Prior to referring the matter to the Director, the Coordinator, Continuing Nursing Studies or Associate Director will provide documentation of the problem identified and the efforts at resolution initiated to that point.
- d) At any point in the process, the student may have another student present as a support person. Any student choosing to do so will be made aware that the confidentiality which normally prevails in faculty/student discussions cannot be guaranteed with a second student in attendance.

3.13 APPEAL OF REGULATIONS

Regulations of the IEN/RN Re-Entry Program are designed to ensure the integrity of program/course standards and the fair and equitable treatment of students.

The CNS recognizes the right of individual students with extenuating circumstances to appeal decisions that result from the application of program regulations. Extenuating circumstances include illness, bereavement or other acceptable causes. In all cases of appeals, written evidence to support the reason for the appeal is required.

Before initiating an appeal the student should request an informal review with the course faculty. This will ensure that the faculty member is aware of all the facts that the student believes impacted the decision. If a resolution to the concern is not found, the student may commence the Appeal Process.

The following outlines application of the Appeal Process for students in the IEN Bridging/RN Re-Entry Program:

- a) The responsibility for making the appeal rests with the student and must be made within one (1) week following the decision resulting from application of the program regulation, except for 3.1 (d).
- b) Students with an appeal in progress may continue with classes and labs but are not permitted to attend clinical experience.
- c) The appeal should be made in writing to the Associate Director, Non-Degree Programs.
- d) The appeal letter should state the reason for the appeal and written evidence to support the extenuating circumstances that are cited in the letter of appeal.
- e) Appeals based on medical grounds must include a letter from a physician that clearly indicates that the medical problem was serious enough to interfere with the student's work.
- f) An appeal based on bereavement must be supported by proof of death.
- g) The appeal process recognizes a student's right to confidentiality. However, the NDPC requires substantial evidence in order to make a decision on an appeal. A student who wishes that certain facts concerning the extenuating circumstances remain confidential should discuss these with the Guidance

Counsellor. The Guidance Counselor, depending on the facts provided and with the student's permission, may write a letter confirming that sufficient grounds existed to support the appeal. This letter would not include the specific confidential extenuating circumstances disclosed by the student to the Guidance Counsellor.

- h) A student making an appeal has permission to address the NDPC prior to the appeal hearing.
- i) Appeals are heard by the NDPC.
- j) The appeal decision is communicated to the student in writing within a week following the appeal hearing.
- k) When an appeal is denied by the NDPC, the student may make application to the CNS Executive Committee for a second appeal hearing. Should the appeal be denied by the Executive Committee, no further appeal within the CNS is possible.

3.14 PROFESSIONAL MISCONDUCT

Professional conduct in the nursing profession is exhibited by actions and behaviors that demonstrate respect for the freedom and rights of others. While enrolled in the IEN Bridging/RN Re-Entry Program or course, students are expected to follow a prescribed standard for professional conduct.

When this standard is breached, the result is misconduct. Misconduct will subject the student to disciplinary action, which may result in a penalty ranging from reprimand to dismissal, depending on the nature of the act/s.

Some examples of misconduct include, but are not limited to:

- a. Dishonesty in any form, such as cheating, plagiarism, furnishing false information.
- b. Theft of, and/or intentional damage to, institutional or personal property of others.
- c. Continued refusal to comply with directives of CNS officials, CNS policies and/or institutional policies of clinical practice.
- d. Chemical substance abuse.
- e. Conviction of a crime that relates adversely to the practice of nursing or to the ability to practise nursing.
- f. Engaging in unfit or incompetent or unsafe nursing practice e.g.:
 - a. Performance of unsafe or incompetent patient care, failure to adhere to established agency guidelines for the provision of care, or failure to practise within the approved scope of practice.

- b. Non-compliance with the professional CNA Code of Ethics, Standards and Scope of Practice for Registered Nurses in NL.
- c. Violation of patient confidentiality, through inappropriate written or verbal disclosure of patient information outside the boundaries of professional communications.
- d. The use of loud, offensive, discriminatory or other kinds of language that may cause or result in defamation of character and/or harm to other students, faculty, staff, patients or visitors at the CNS.

An Informal and/or Formal Process for Resolution of Professional Misconduct may be used.

The Informal Process for Resolution of Professional Misconduct is designed to provide a mutually satisfactory resolution between the parties involved. In the case of application of the informal process the accusation will be reviewed by the CNS Director in the presence of the parties involved.

The Formal Process for Resolution of Professional Misconduct is used in cases where i) a satisfactory resolution to the issue cannot be reached through the informal process, or ii) in the opinion of the Director, the misconduct is a major breach of conduct. The formal process for resolution of professional misconduct involves review of the alleged misconduct by the NDPC.

If a student wishes to appeal the decision made by the NDPC, it should be made to the CNS Executive Committee.

If the appeal is denied by the Executive Committee, no further appeal within the CNS is permitted.

3.15 IEN BRIDGING PROGRAM OR COURSE COMPLETION TRANSCRIPT

Transcripts are issued for completion of the IEN Bridging/RN Re-Entry Program or for individual courses completed in the Program. Students referred/referenced from a nursing regulatory body will not be issued a transcript until all requirements are met. Transcripts are issued by the Registrar, Continuing Nursing Studies.

3.16 STUDENT RECORDS

Student records for all continuing education programs/courses are maintained, stored and secured within the Registrar's Office for Continuing Nursing Studies. Student access to records is available upon written request.

3.17 USE OF STUDENT PAPERS/PROJECTS

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

4. CLINICAL (NURSING PRACTICE COURSE) REGULATIONS AND GUIDELINES

4.1 NURSING PRACTICE COURSE ACADEMIC PRE-REQUISITES

- a. Students in the IEN Bridging/RN Re-Entry Program who are required to enroll in the Medical-Surgical Nursing Practice course must have all of their required general nursing theory courses completed prior to commencement of the course.
- b. Students in the IEN Bridging/RN Re-Entry Program who are required to enroll in a specialty nursing practice course must have all required general nursing courses and the pre-requisite specialty theory course completed prior to commencement of the specialty nursing practice course.

4.2 REQUIREMENTS PRIOR TO COMMENCEMENT OF A NURSING PRACTICE COURSE

Students required to enroll in a nursing practice course in the IEN Bridging/RN Re-Entry Program must meet certain pre-clinical requirements before permission is given to commence the required course.

Pre-Clinical Placement Requirements include:

a. Up-to-Date Immunization Status

All students **must** have the following mandatory screening requirements submitted prior to registration:

1. Immunization record to include documentation of having received the following immunizations:
 - 2 measles, mumps and rubella vaccines (MMR)
 - Tetanus-Diphtheria toxoid immune within the past 10 years – Tetanus, Diphtheria, and acellular Pertussis (Tdap). One dose of Tdap vaccine is now recommended in adulthood (18 years of age and older). If you have not received a dose of pertussis containing vaccine within the last ten years and are due for a tetanus booster, you should receive Tdap vaccine to meet this requirement.

- Polio vaccine – DTP as a child or proof of polio vaccination
 - Copy of a 2 step TB skin test and one step TB test in the last 12 months
 - Recommended: Hepatitis B vaccines (series of three)
2. Laboratory tests, for all students, as follows (arranged through family physician:
- Varicella titre and Hepatitis B Immune Status (anti-Hbs level)

Student must retrieve titre results of immunization records from Physician or Primary Health Care Provider and submit these to the Registrar.

b. CPR (level Health Care Provider–HCP)

Proof of current CPR certification at the HCP level is required on a yearly basis. Students commencing a nursing practice course must provide proof of a current level of certification that does not expire during the scheduled course offering.

c. Certificate of Conduct and Vulnerable Sector Check

Provincial legislation and NL Regional Health Authorities require that new employees, volunteers and students affiliating to health care agencies obtain a Certificate of Conduct and Vulnerable Sector Check prior to commencement of employment, service or clinical learning experiences. **Students must have these documents 6 months before the clinical start date. It has to be from where you are currently residing.**

It is advisable that students obtain these documents prior to commencing the IEN Bridging Program. Students will not be permitted to commence any nursing practice course until a current Certificate of Conduct and Vulnerable Sector Check has been provided. Failure to provide a Certificate of Conduct and Vulnerable Sector Check will require that the student withdraw from the Program.

d. Fit Mask Testing

All students must provide proof that they have been fitted for an N95 mask before commencement of a nursing practice course. To be completed at the CNS.

e. Personal Health Information Act (PHIA) Oath of Confidentiality

As per the Newfoundland and Labrador Personal Health Information Act (PHIA), students are required to sign an oath of confidentiality, as well as complete and submit proof of completion of the online PHIA education module. The Continuing Nursing Studies Coordinator will provide

students with the information related to this requirement.

<http://www.health.gov.nl.ca/health/PHIA/#online>.

NOTE: Documentation to support that Pre-Clinical Requirements have been met must be provided to the Continuing Nursing Studies Coordinator a minimum of 2 months in advance of the course start date. A delay in submission of up-to-date documents could result in a cancellation of the student's nursing practice course registration and a significant delay in program completion.

4.3 ORIENTATION TO A NURSING PRACTICE COURSE

An orientation to all courses in the IEN Bridging/RN Re-Entry Program is provided to students at the beginning of each semester. For the Nursing Practice courses, the orientation will provide students with all information needed related to the individual student's clinical practice setting, teaching faculty and preceptor names and expectations. This orientation will also review the course evaluation objectives, course expectations and method of evaluation.

4.4 NURSING PRACTICE / CLINICAL COURSE ATTENDANCE

Documentation is required for prolonged or excess absence from a nursing practice course. Regardless of the evidence provided for absenteeism, the student must ultimately demonstrate successful achievement of the objectives specified for the nursing practice course.

Failure to demonstrate an acceptable level of competency may result in failure or a required withdrawal from the course.

The faculty member and/or preceptor is/are able to appraise clinical progress only when the student is present for scheduled clinical opportunities. A student's absence from clinical may seriously affect the amount and/or quality of information which can be used to assess student progress and complete his/her evaluation.

Clinical opportunities are inclusive of:

- Attendance in clinical
- Preparation for/participation in conferences
- Individual meetings at the discretion of the faculty member and/or preceptor

4.5 REPORTING OF ABSENTEEISM

Students unable to attend a scheduled clinical activity must notify the clinical agency and assigned faculty member prior to commencement of the scheduled time. Faculty are to be notified via email, which is accessible 24 hours per day.

4.6 CLINICAL INCIDENT REPORT

In the event of a clinical incident such as a medication error, treatment error,

patient fall, etc., the student, in consultation with faculty, will complete a CNS Clinical Incident Report (see Appendix A). In most clinical agencies students will also be assisted in completing an agency-specific incident report.

The action taken following any clinical incident will be at the discretion of faculty and in keeping with the seriousness of the incident as well as the unique circumstances surrounding each situation.

A major focus of the incident review will be assisting the student to meet learning objectives identified as a result of the incident. The Clinical Incident Report will also be used to document any injury incurred by a student (i.e., needle stick in the clinical area). Any injury is to be reported immediately to the Occupational Health Nurse at the site. The Occupational Health Nurse will assume responsibility for initiating necessary treatment, teaching and follow-up. If the Occupational Health Nurse is not available or if any injury occurs during an evening or night shift or during a weekend, students should proceed immediately to the Emergency Department at that site for assessment. Based on the assessment, priority is determined and students are seen in order of importance.

4.7 STUDENTS AT RISK OF CLINICAL FAILURE OR DEEMED UNSAFE

As per PN Program promotion regulations, 3.1 (i) noted in the Student Handbook: A student may be required to withdraw from a nursing practice course or the Program at any time if, upon review by, and a recommendation from the NDPC, it is deemed that the student would not profit from continued practice and /or is considered to be unsafe in the practice setting. In such cases, students who are required to withdraw from the Program would not be eligible for future admission/readmission to the Program.

Policy

Expectations for Safe Clinical Practice:

1. Students are expected to demonstrate growth in clinical practice through the application of knowledge and skills from previous and concurrent courses.
2. Students are expected to demonstrate growth in clinical practice as s/he progresses through the course and to meet the clinical practice expectations described in the course outline.
3. Students are expected to prepare for clinical in order to provide safe and competent care.

If the clinical course is not faculty led, the faculty member will instruct the preceptor, co-signed nurse or agency contact to notify the faculty member as early

as possible if any of the above three expectations are not met. This provides for timely initiation of remedial activities to maximize a student's clinical progress.

Definition

At Risk

A student is considered to be *at risk* for clinical failure if s/he has difficulty meeting the PN Program course objectives as outlined in the clinical evaluation tool.

Unsafe

A student is considered to be *unsafe* in clinical practice when his/her performance places himself/herself or another individual at risk for, or actually causes physical, psychosocial, or emotional harm (Scanlan, Care, & Gessler, 2001).

The CNS recognizes the importance of identifying students who are *at risk* of failing a clinical course or who are deemed *unsafe* in clinical practice. Once the student has been identified as *at risk or unsafe*, through an occurrence or a pattern of behavior*, a process is put in place to assist the student towards achieving competent and safe practice. If the *at risk* student's performance does not improve and continues to place himself or herself or others at harm or potential harm, the student will fail the clinical course and the PN Program promotion regulation 3.1 (e) will apply.

Procedure for the At Risk Student

The Faculty Member:

1. Identifies the occurrence or pattern of behavior that places the student at risk of clinical failure and arranges to meet and discuss the same with the student as soon as possible.
2. Informs the course leader and, at any point in the process, the course leader may inform the PN Program Coordinator and/or the Associate Director, Non-Degree Programs.
3. Documents, within 48 hours, specific information about the area of concern (e.g., objective not being met due to an occurrence or pattern of behavior). Documentation must include date and time when the student was originally informed of the occurrence or pattern of behavior and the verbal feedback given to the student.
4. Meets with the student as soon as possible to review the documentation.
5. Signs and dates the documentation.
6. Collaborates with the student to develop a Learning Plan to address his/her deficiencies in meeting the standards of nursing practice and/or other course designated evaluation criteria. The plan provides specific details outlining the objectives, strategies (e.g., return to the lab for instruction and review; review specific theory before next clinical day, follow up meeting(s) with faculty), outcomes, and timelines that the student will have to meet. The consequences of failing to meet criteria will be outlined in the Learning Plan (e.g., removal from clinical unit or failure of the course).

7. Informs the student that his/her clinical performance will be evaluated for consistent and sustained improvement in accordance with the Learning Plan.
8. Advises the student that the consequences of failing to demonstrate consistent and sustained improvement in nursing practice will result in a failed grade.
9. Holds periodic meetings with the student to discuss progress toward meeting the Learning Plan objectives.
10. Documents supporting evidence of the student's ongoing clinical performance in relation to meeting the competencies as outlined in the PN Program clinical evaluation tool.
11. Determines if the student passes or fails the course in consultation with the course leader, PN Program Coordinator and/or the Associate Director, Non-Degree Programs.

The Student:

1. Meets with the faculty member to review the documentation.
2. Signs the form to verify s/he has read the document. The student's signature does not mean that they agree with the documentation but that it was discussed with him/her.
3. Responds, in writing, to the documentation, if desired, within 48 hours of receiving the document. It is recommended that the student discuss his/her perceptions of personal performance and how it relates to the competencies as outlined in the Practical Nursing clinical evaluation tool.
4. Collaborates with the faculty member to develop a Learning Plan to address his/her deficiencies to meet the competencies.
5. Acknowledges, in writing, that s/he is willing to participate in the Learning Plan.
6. Meets all components outlined in the Learning Plan.
7. Consults at any point in the procedure with individuals such as the course leader, individuals from counselling services, PN Program Coordinator and/or the Associate Director, Non-Degree Programs.

Procedure for Unsafe Student

The Faculty Member:

1. Dismisses the student immediately from the clinical area if the student is deemed to be unsafe, either through one serious event or a pattern of unsafe behaviors.
2. Notifies the course leader, who will notify the PN Program Coordinator and/or the Associate Director, Non-Degree Programs.
3. Documents, as soon as possible, specific information about the unsafe situation/event/behavior*. Documentation must include how the occurrence or behavior failed to meet the PN Program course objectives as outlined in the clinical evaluation tool. Documentation includes date and time when the student was originally informed of the occurrence or behavior and the verbal feedback given to the student.
4. Meets with the student as soon as possible to review the documentation.
5. Signs and dates the documentation.

6. Collaborates with the student to develop a Learning Plan to address the unsafe practice or behavior. The plan provides specific details about the objectives, strategies (e.g., return to the lab for instruction and review; review specific theory before next clinical day, follow-up meeting(s) with faculty), outcomes and timelines that the student will have to meet. The consequences of failing to meet the criteria outlined in the Learning Plan will be clearly outlined (e.g., result in a failed grade in the course and/or implementation of the PN Program promotion regulations).
7. Informs the student that clinical performance will be evaluated for consistent and sustained improvement in accordance with the Learning Plan.
8. Informs the student that the consequences of failing to demonstrate consistent and sustained improvement in nursing practice will result in a failed grade.
9. Holds periodic meetings with student to discuss progress toward meeting the Learning Plan objectives.
10. Documents supporting evidence of the student's ongoing clinical performance in relation to meeting the competencies, as outlined in the PN Program clinical evaluation tool.
11. Determines if the student passes or fails the course in consultation with the course leader and PN Program Coordinator and/or the Associate Director, Non-Degree Programs.
12. The Associate Director, Non-Degree Programs consults with the NDPC at any point, as necessary, to review the unsafe clinical practice of the student. The committee will make a determination as to whether the unsafe practice requires that the student be required to withdraw from the nursing course and/or from the program as per the PN Program Promotion regulation.

The Student:

1. Meets with the faculty member to review the documentation.
2. Signs the form to verify s/he has read the document. The student's signature does not mean that s/he agrees with the documentation but that it was discussed with him/her.
3. Responds, in writing, to the documentation, within 48 hours of receiving the document. It is recommended that the student discuss his/her perceptions of personal performance and how it relates to the standards of nursing practice and/or competencies, as outlined in the PN Program clinical evaluation tool.
4. Collaborates with the faculty member to develop a Learning Plan to address his/her deficiencies to meet the standards of nursing practice and/or competencies.
5. Meets all components outlined in the Learning Plan.
6. Acknowledges, in writing, that s/he is willing to participate in the learning plan.
7. Consults at any point in the procedure with individuals such as the course leader, individuals from counselling services, PN Program Coordinator, and/or the Associate Director, Non-Degree Programs.
8. May appeal the decision if it is determined that unsafe behavior requires him/her to be withdrawn from the nursing course and/or from the program, as per Regulation 3.12 Formal Procedure for Student Complaints, PN Student Handbook.

* **Note:** In relation to competencies, as outlined in the PN Program clinical evaluation tool.

4.8 PRECEPTORSHIP

Through consultation with nurse managers, preceptors are carefully selected to facilitate the clinical experience in the IEN Bridging /RN Re-Entry Program Nursing Practice courses. Qualities of preceptors often include: additional education related to the program, extensive “hands-on” experience in the specialty, expert nursing care, prior teaching/mentoring experience, and realistic expectations of the student.

During the clinical experience, the preceptor will facilitate the student’s achievement of the clinical objectives and clinical competencies. Refer to the preceptorship manual for more information on preceptor roles/responsibilities as well as the student’s (preceptee) role and responsibilities.

4.9 CLINICAL DRESS CODE

The CNS and affiliating clinical agencies have in place a clinical dress code for the practice setting. It is expected that all students follow this dress code. This will be explained in the orientation to a nursing practice course.

5. STUDENT SERVICES AND ADDITIONAL INFORMATION/ GUIDELINES

5.1 DISTANCE EDUCATION

The IEN Bridging Program is offered by Centre for Innovation in Teaching and Learning (CITL) Brightspace combined with some lab/classroom activities and supplemented with web-based communications and audio conferencing. There are many benefits of learning at a distance, especially for adult students. Its accessibility, particularly for adults whose family, professional and social commitments make it impossible to attend on-site classes, is a major advantage. Distance students can choose when and where they will study and can maintain a flexible study schedule that allows them to continue other important roles in life while performing the role of student.

For many students, distance learning is a new experience. Instead of attending classes 2 or 3 times a week, the student’s home becomes the classroom and the student assumes independence in his/her own learning. Faculty is available as needed by email or telephone to provide guidance and support, to offer explanations concerning the content, and to discuss concerns.

Success in the program/course is largely dependent on the student’s initiative and self-direction, study habits, level of motivation, organizational and time management skills.

Personal life factors such as work and family responsibilities, social commitments and community involvement can all affect the amount of time the student will spend on completing program requirements. It is essential the student evaluate the amount of time spent at all activities and organize or manage time to include at least **8-10 hours per week** for completing program requirements. The student should establish a specific study schedule and follow it as closely as possible.

Peer Support

The support of peers (classmates) is widely recognized for its benefits to the learning experience. Continuing Studies distance education programs encourage students to maintain ongoing communication with their peers to discuss difficult concepts, share ideas and provide support/encouragement. Students registered in the same course are able to email each other through CITL secured email. This medium provides an ideal opportunity to meet and share ideas with fellow classmates.

Names, phone numbers and email addresses of students will be shared with students on enrollment in programs/courses if individual students are agreeable to sharing this information. Peer interaction provides students with another support system in addition to school and family support.

Student utilization of the guidance services is generally on a voluntary basis. However, students may also be referred to the Guidance Counselor by a faculty member. In these instances, students work collaboratively with the Guidance Counselor and faculty member, if necessary, to develop and implement strategies to help resolve the identified problem area.

Program Orientation and Learning Package

All students are provided with a Program Orientation and Learning Package after admission to the IEN Bridging Program is confirmed.

The orientation will be arranged by the Continuing Nursing Studies Coordinator. The Learning Package will include:

- The Student Handbook.
- A recommended schedule for program/course completion.
- A course textbook list that includes a list of books. (**The IEN student is responsible to purchase all textbooks.**)
- Individual course materials are provided to the student once the student is registered for a specified course.
- A Preceptorship Manual is provided to students required to complete a nursing practice course once the student is registered in the specified course.

5.2 ACADEMIC ADVISING

Students requiring academic advising should contact the Continuing Nursing Studies Coordinator.

5.3 STUDY SKILLS

A successful experience for an independent, distance student requires active participation in the learning process. Effective study skills are an essential component of that process. Students should refer to the “*Enhancing Your Study Skills*” booklet available at

www.centrefornursingstudies.ca/programs/continuing_education/learning_resources.php

Two major concepts the student must consider before beginning to study are preparation and organization. Both concepts are equally important, because the best study techniques cannot help if the student approaches work unprepared or disorganized.

Preparation

- a. Motivation: As adults, motivation to learn is based on specific needs. Motivation stems from a desire to improve one’s current job or life situation. Without that intrinsic drive, difficulty in achieving success may be experienced. Students are advised to examine own level of motivation to learn prior to approaching the course/ program. Distance, self-directed, independent learning will demand adjustments in daily schedules as well as considerable effort and concentration on the part of the student.
- b. Physical preparation: It is essential that the student obtain adequate sleep and proper nutrition before studying. This allows the student to be energized, think clearly and remain focused.
- c. Positive attitude: The student’s attitude toward learning can affect his/her success. It is easy to be negative about studying, especially if the content is difficult and the workload is heavy. Academic success does not happen without considerable effort on your part. Believe you can and will succeed and enjoy the learning experience. For most students in Continuing Nursing Studies this is a continuation of lifelong learning. You have been learning since your basic education and have many health-related experiences that have contributed to your overall knowledge.

Organization

- a. Study schedule: Establishing a definite study schedule, which does not interfere with work, personal, and family matters, is essential. Decide how many hours per week you will devote to study. A minimum of 8-10 hrs/wk is

recommended. Develop and post your schedule each week in a visible location in your home (e.g. on the refrigerator). This will remind you of study times, enabling you to be compliant. Maintaining your schedule will provide you with a sense of accomplishment and improve your attitude. Settle down and begin studying quickly when the scheduled time arrives. Continue studying until the scheduled time is over. Take a short break every hour. Leave the room so that you can take your mind off the study. A refreshed mind improves concentration and retention of information.

- b. Study location: Select a room that is quiet with adequate lighting and ventilation. A desk with a firm, but comfortable chair is ideal for study. Store all learning materials in or near your desk. Distracters such as radio, television and telephone should be turned off.
- c. How to study: Firstly, survey the course content and additional readings you plan to study. Think about the title, look at the table of contents to identify units, objectives, headings, and subheadings, scan the course and read the summary. This gives you a general idea of how the material is organized and direction for your reading. Next, go back and read with the purpose of learning the information under specific headings or objectives. Set goals for yourself about how much time you will spend on specific sections based on the level of difficulty of the topic and strive to achieve that goal. Try not to memorize. It is impossible to remember everything you have read. Instead, aim at understanding the content and being able to apply it to a nursing situation. Identify key concepts that are essential to understanding and mastering the objective. Be active in the learning process by trying to anticipate what the author will say next as you read through the materials. Search for meaning by looking for the main idea in each section. Learn to identify and, then, briefly scan unimportant information. Think about what the objective is asking you (e.g., identify factors affecting the pain experience). Can you answer this? The advantage of asking yourself a question is that it increases your curiosity and makes learning more meaningful and interesting. Refer to notes from required readings and information listed under the objective. Complete any learning activities related to the objective.

Make notes or highlight important information at this time. Notes are merely key words/phrases to help guide you to the body of information you need to know. Do not rewrite the module or highlight every word in the textbook or reading material. Highlight and/or record only pertinent thoughts and important details. Use familiar abbreviations, make short lists, or draw simple tables to save time in note taking.

As you complete this process for each course, answer the comprehension check questions at the end of the module. If you score a mark that is equivalent to the pass mark for the program/course, continue on to next module. If not, go back and review areas of difficulty. If included, complete the post-test at the end of the unit. Identify areas of strength and weakness. Go back and review areas where your knowledge or understanding is insufficient. Use the notes you have taken to

review important concepts. Continue to do this until you feel you understand the content.

5.4 TEST TAKING

Most often you will be writing multiple choice exams. Many people think that these are the easiest types of exams you can write, but this is inaccurate. You need to know your material just as much, and usually more, for a multiple choice test than for most other types of exams.

There are ways in which you can improve your chances of performing well on an exam. Students should refer to the *“Multiple Choice Exam Writing Strategies” booklet available on the CNS website www.centrefornursingstudies.ca. In the menu refer to Programs, Continuing Nursing Studies, Learning Resources then Multiple Choice Exam Booklet.*

Below are some tips for you to follow in preparation for and while writing multiple choice exams.

Test Taking Tips

- Do not cram for the test the night before as this often causes undue stress. Plan and spread your review time over several days. Try to summarize the content rather than reviewing all the material. Notes taken during initial the study period are useful during the review. Purposefully give attention to areas you initially identified as important and try to predict test questions.
- As you begin the test, think positively and believe in yourself as a successful student. Skim the entire test once, briefly, to get a sense of what it is all about. Read the directions, twice, underlining or circling key instructions if necessary. Find out how much time you have to write the test, how much time you have per question (usually about 1 minute or so), if there are any compulsory questions, and if you will be penalized for incorrect guesses.
- Attempt to answer the questions in the order in which they are given to you. If you don't know the answer to a question, make a mark next to it, and move ahead to the next one. Come back to the difficult ones after you've completed the other questions.
- Read the question part of the problem, the “stem”, carefully, at least twice. Underline key terms such as “best action”, “primary reason”, “initial response.” Rephrase the stem in your own words if you feel it will help. Ask for clarification of any terms you do not understand. Anticipate what the answer will be and then look for it among the options given. You can often identify at least some of the characteristics of the correct answer.

- Read each option (answer) available to you even though one may seem like the correct answer to you. In multiple choice questions, all of the answers may be true but only one best answers the question. Actively reason through each, testing it against the question and eliminate the ones that you are certain are incorrect by crossing them off. Usually you can narrow your choices to two possible answers. Using logical reasoning, choose the more encompassing option as the one with the greatest chance of being correct.

5.5 FOOD SERVICES

A cafeteria service is located on the first floor of the Miller Centre. Hours of operation are as follows:

➤ Monday-Friday 08:00 – 15:30

Please note: These times may vary throughout the year. Notices of such changes are posted in the coffee shop.

5.6 SMOKING REGULATIONS

Smoking and second-hand smoke are recognized as serious health hazards. Eastern Health has a Smoke Free Environment Policy at all of its owned and operated facilities.

This policy includes that smoking is not permitted in or near buildings, on the grounds, in parking garages, or on the parking lots of Eastern Health sites and facilities.

5.7 FIRE SAFETY

As part of the CNS orientation, all students are required to attend a general information session on fire safety.

Part of the orientation to every clinical area includes reference to the student's duties in the event of fire.

The guidelines entitled, "Centre for Nursing Studies 'Code Red' Action Card" prepared by the Emergency Preparedness Committee, Miller Centre are posted throughout the CNS including classrooms, conference rooms, lab rooms and by all elevators in Southcott Hall. Students are advised to acquaint themselves with these guidelines as well as knowing the nearest exit of all the rooms occupied for learning activities scheduled at Southcott Hall.

5.8 EMERGENCY PREPAREDNESS

Eastern Health, as part of its Emergency Preparedness Plans, has established codes for various types of emergency situations in all of its facilities.

These codes apply to Southcott Hall and the Miller Centre. A listing of the codes is posted by all elevators in Southcott Hall. To call a code **DIAL EXTENSION 2000** and identify the emergency situation you are reporting.

For any **Medical Emergency** requiring medical assistance at Southcott Hall, **Dial 9 for an outside line, then 911**. State your medical emergency and your exact location in Southcott Hall.

5.9 SCENT FREE GUIDELINES

Eastern Health endeavors to provide a scent-free environment for clients, employees and all persons who use its facilities. Scented products contain chemicals which may cause severe problems for persons with asthma, allergies and chemical sensitivities. To achieve this goal a Scent-Free Policy is in effect for all Eastern Health Buildings. All persons are advised to use fragrant-free personal care products. Eastern Health is committed to using environmentally friendly products.

Students are expected to follow this policy and are not to wear scented products in any clinical setting or while in the Southcott Hall or Miller Centre Buildings.

5.10 CELL PHONE USE

The use of electronic communication devices, such as cell phones and smart phones, to place/receive calls, text messages, access internet sites, emails, videos or photographs for personal reasons in the clinical setting is prohibited during scheduled working/learning experiences.

Personal smart phones should be placed on vibration/silent mode during such times and should only be used during rest periods and meal breaks. Use of personal cell phones in the presence of a patient is strictly prohibited.

Cell phone use is permitted in the Southcott Hall Building but must be silenced during scheduled learning activities.

5.11 ROLES and RESPONSIBILITIES of the PROGRAM COORDINATOR

- Report to the Associate Director of Non-Degree Programs
- Planning and coordinating of all continuing nursing studies modules/courses. Assessments and programs.
- Ensuring implementation of CNS policies and practices,

- Acting as a liaison between nursing regulatory bodies, assessment agencies, educational institutions and professional organizations.
- Collaborating as part of committee memberships.
- Ensuring revision to modules/courses/assessments and programs is completed and current.
- Maintaining the Continuing Nursing Studies Handbooks, orientation packages, perception manual.
- Maintaining up-to-date exam bank.
- Maintaining a current and organized shared drive.
- Orientating new faculty to their role.
- Conflict resolution.
- Provide ongoing support and guidance to faculty and preceptors
- Conduct with faculty all competency based assessments (CBAs) and substantive Equivalent Competency Assessments (SECA)
- Conduct with faculty Pathway to Success & NCLEX Remedial.
- Conduct all practice support clinical requests.
- Report writing.
- Act as faculty when needed to teach theory and clinical.
- Assist faculty in the selection of preceptors for the clinical portion of programs/courses.
- Conducting faculty performance reviews, conduct exit interviews.
- Academic advising

5.12 ROLES and RESPONSIBILITIES of the FACULTY

- Establishing a learning contract with students.
- Discussing concerns related to program progression.
- Providing clarification regarding program/course content.
- Invigilating and correcting examinations of students in the St. John's area.
- Providing ongoing feedback and clarification regarding program/course material to all students via on-site discussions, telephone and email contact
- Providing clarification of assignment instructions.
- Motivating and assisting students, as needed, in time management.
- Initiating contact with students if they have not been in contact with the program facilitator over an extended period of time.
- Providing advice and assistance in obtaining additional learning resources.
- Selecting preceptors for the clinical portion of programs/courses.
- Providing preceptor orientation.
- Providing a support system for preceptors.
- Collaborating with preceptors regularly regarding students' clinical progress.
- Conducting an exit interview with each student.
- Instruct labs.
- Instruct faculty-led clinical.

APPENDIX A

CNS CLINICAL INCIDENT REPORT

To be completed by faculty for student incidents and submitted to the PN Program Coordinator.

Date of Incident _____ Course name _____

Clinical Area in which the incident occurred _____

Student: _____

Faculty: _____

Type of Incident: ____ Drug Error ____ Treatment Error ____ Fall
____ Other ____ (please specify) _____

Description of the Incident (include a precise description of the event; client's immediate reaction, if any; person(s) advised of incident; where/ how incident was recorded; outcome)

Summary of Student Interview and Recommendations Made

