

Preceptor Handbook

Year 4 Nursing

Important Contact Information:

Nursing Practicum Coordination Office (Oshawa):

Email address:

practicumcoordinator@ontariotechu.ca Phone

Number 905-721-8666 ext. 6187

Nursing Program Website: <https://healthsciences.ontariotechu.ca/nursing-practicum/index.php>

Clinical Course Leads:

Email: hilde.zitzelsberger@ontariotechu.ca

Phone number: 905-721-8666 ext. 3811

Email: kylie.kierinkiewicz@ontariotechu.ca

Phone number: (905) 721-8668 ext. 6270

Copyright © 2026 by Ontario Tech University/Durham College, Faculty of Health Sciences, Oshawa, ON, CA

Table of Contents

Preceptorship in Clinical Placements	4
Framing the Preceptorship Learning Experience: Our Nursing Program Philosophy.....	4
The Preceptorship Triad	6
Roles and Responsibilities of the Preceptor Triad	7
Role and Responsibilities of the Preceptor	7
Role and Responsibility of the Learner	7
Role and Responsibility of the Clinical Sessional Instructor	8
Year 4 Course Learning Objectives	9
NURS4700 Synthesis Professional Practice (Initial Final year practicum)	9
NURS4701 Professional Nursing Integrated Practicum (Final practicum)	9
Progression of Learning Over the Semester	10
Learners in Clinical Practice.....	12
When a Preceptor should contact the Clinical Sessional Instructor.....	12
Practicum Evaluation Processes	13
Collaborative Success Plan.....	13
Meeting Competencies: Some Tips.....	14
A Final Word	14
Additional Links and Resources	15
Appendices:	16

Message to Preceptors

Dear Preceptors,

You are about to embark on an exciting journey with our students, and we would like to take this opportunity to sincerely thank you for your commitment to nursing education. Your enthusiasm for teaching and your willingness to share your expertise are deeply appreciated.

Students consistently highlight the value of learning alongside Registered Nurses and other health care professionals during their clinical placements. In these experiences, they not only continue to develop their knowledge and clinical skills but are also shaped by the positive role modelling they observe in their preceptors. Your interactions with patients, colleagues, and the broader health care team play a meaningful role in fostering students' professional identity, compassion, and commitment to lifelong learning.

Thank you again for sharing your knowledge, skill, and professionalism with our students. We are grateful to have you as part of our community.

A handwritten signature in black ink that reads "Hilde Zitzelsberger". The signature is fluid and cursive, with the first name "Hilde" and last name "Zitzelsberger" clearly legible.

Hilde Zitzelsberger, RN, MSc, PhD
Associate Dean of Nursing Faculty
of Health Science Ontario Tech
University

Preceptorship in Clinical Placements

Welcome to the preceptored experience within the Ontario Tech University–Durham College Collaborative Nursing Program. We sincerely thank you for your commitment to supporting our learners. Your contributions are invaluable in shaping the next generation of nurses. Our goal is to work in partnership with you to strengthen senior-level practice education as students prepare to enter the profession.

A successful preceptored experience is grounded in collaboration among learners, clinical instructors, and preceptors, along with any additional supports. This shared approach helps achieve course learning outcomes and fosters a positive clinical learning environment. This handbook is intended to support preceptors, clinical sessional instructors, and learners throughout the experience.

Framing the Preceptorship Learning Experience: Our Nursing Program Philosophy

The Nursing Program philosophy guides both the Ontario Tech University–Durham College Collaborative BScN and the RPN to BScN Advanced Entry programs. It is informed by diverse worldviews, including positivist, phenomenological, postmodern, feminist, and critical social perspectives that respond to evolving health care needs. These perspectives shape the program's core focus on caring and nurturing relationships through being, knowing, and doing (praxis), grounded in the Caring Curriculum (Bevis & Watson; 1989; Hills, Watson, & Cara, 2020; Cara, Hills, and Watson, 2020) and our unique context.

CARING IN NURSING

Caring is a central component of the human experience and foundational to nursing practice. While caring may be thought of as present in all aspects of everyday life, caring in nursing requires intentionality; self- and other- awareness; and active, thoughtful, and skilled engagement in concern for others and the world around us.

NURSING

Nursing occurs within the context of intentional human caring from the nurse to the nursed, other human beings, and all life. It requires the skilled utilization, application, and evaluation of knowledge, mediated by multiple ways of knowing/being/doing, in partnership with the recipient of nursing care. This knowledge is drawn from nursing, natural sciences, social sciences, arts and humanities, and is uniquely employed within each specific nurse-person situation to promote and preserve caring, health-healing, dignity, and comfort.

PEOPLE

People include individuals, families (of origin or choice), groups, populations, and local and global communities, existing within the wholeness and complexities of our lives. The uniqueness of people is both limitless and a core characteristic of being human. This

awareness requires that nursing champion equity, diversity, and inclusion as a moral imperative. For this to be achieved people need to have insight, and understanding when it comes to historicity, truth and reconciliation of individuals who are racialized and marginalized. People make choices about their lives and their health-healing based on many factors, including but not limited to their life experiences, values, hopes, and aspirations. We recognize and value the innate human capacity for caring (Watson, 2020), and the primal human desire to be seen and to be heard (Paterson & Zderad, 1976).

ENVIRONMENT

Environment consists of all elements, internal or external to people (individuals, families (of origin or choice), groups, and communities) that influence people and/or the situation. Environmental elements may be experienced as positive, neutral, or negative. People both influence and are influenced by their environment. Examples of environmental factors include, but are not limited to, physical, social, psychological, and economic. Rights and freedoms, both entrenched in the law and as perceived by people, are part of their lived environment. We acknowledge the traditional territory of Indigenous peoples in Canada.

HEALTH-HEALING

Health-healing is a constantly changing, holistic human experience that transcends all phases of life and living. It encompasses all circumstances of living, as experienced, defined, and made meaningful by the individual, family, group, or community. In understanding that health-healing is defined and made meaningful by the client, we move away from a normative, often ableist, view of health versus illness. Rather, health-healing is viewed not as a singular state, but rather a process of moving towards wholeness, wellness, harmony, and balance. Our conception of health-healing is grounded in our appreciation of theoretical pluralism, while consistent with the caring curriculum. Health-healing has physical, socio-cultural, psycho-spiritual, political, and economic aspects. Health-healing is preserved and promoted through caring relationships that are affirming, enabling, empowering, and collaborative.

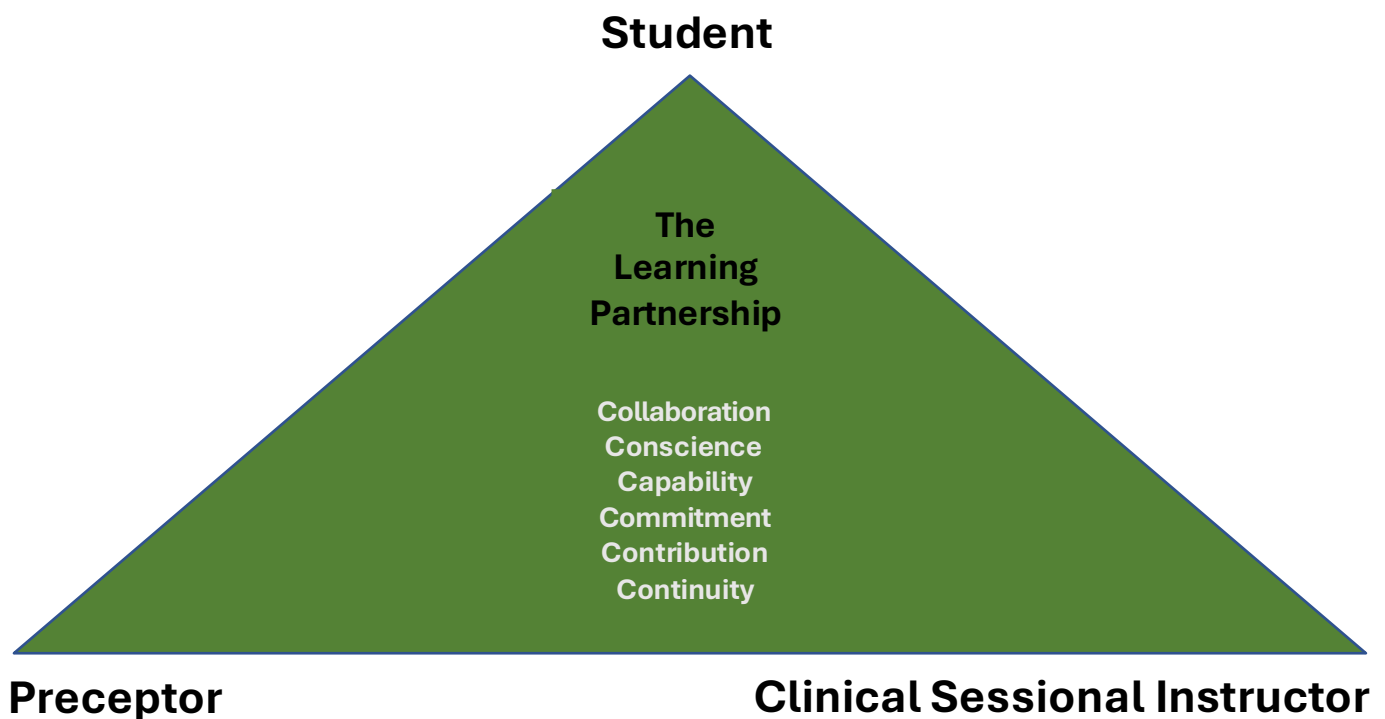
TEACHING-LEARNING

Teaching-learning in nursing is a dynamic, transformative process which occurs both formally and informally, and within a context of intentional caring. Teachers, nurses, students, and people requiring nursing care are co-learners and partners in a collaborative learning process. Learning occurs over time and through a variety of approaches. It is a life-long process of personal and professional growth, which builds on experience, stimulates reflection, and transforms the meaning of life experiences. As teachers, we are committed to fostering a stance of inquiry with students. Teacher-learner engagement, in all settings, always reflects our values of mutual respect, mutual intentional human caring, and mutual civility (Clark, 2022). Within the Nursing Program, teaching-learning is conceived of as an active process, whereby all participants take responsibility for fully engaging across a continuum of active learning approaches (Tanner, 2006).

The Preceptorship Triad

(Adapted from the RNAO Achieving Preceptorship Excellence Model, 2004)

The preceptorship triad consists of a preceptor, a learner, and a clinical sessional instructor, all of whom play integral roles for the success of the learning experience. The triad relationship between learner, preceptor and clinical sessional instructor is defined by six 'Cs', shown in the figure below: collaboration; conscience; capability; commitment; contribution; and continuity. These 6 Cs are briefly described in table below.



Core Processes for the Preceptor, Learner, and Clinical Sessional Instructor	
Collaboration	Shared vision, information sharing, and mutual trust are outcomes of collaboration, which contribute to sustaining members. (e.g., working together with team members to provide optimal client care)
Conscience	Ethical values and principles guide the daily practice of nurses. Preceptors role model this behaviour for others. (e.g., demonstrating openness, respect, and caring toward clients and learners)
Capability	Learner capability in clinical practice settings is built by encouraging their learning and improvement of a variety of clinical skills.
Commitment	Willingly making a mutual commitment and contribution to

	preceptorship. A tangible outcome is recruitment and retention of nurses. (e.g., preceptors commit to teaching, fostering professional growth and acceptance of learners as colleagues)
Contribution	Volunteering to act as a preceptor for student and other learners in order to develop and sustain the future of the profession
Continuity	Expert knowledge is transferred through preceptorship (e.g., preceptors available to students for variety of learning experiences)

Roles and Responsibilities of the Preceptor Triad

This section outlines the major roles and responsibilities of each member of the preceptorship triad to establish a supportive and productive relationship in the clinical practice setting.

Role and Responsibilities of the Preceptor

- Facilitates the focus and terms of the placement, including scheduling of shifts
- Orients the student to the practicum setting
- Communicates roles and expectations of practice setting
- Guides the learner to develop a learning plan that incorporates learning objectives related to the practice setting
- Facilitates opportunities to find appropriate experiences for learners
- Demonstrates/acts as a role model of a competent practitioner
- Stimulates the learner's critical thinking and reflection about the learner's own practice
- Provides regular feedback to the learner and clinical sessional instructor about the learner's successes and challenges in meeting practicum expectations
- Engages in mid-term and final evaluation processes with the learner and clinical sessional instructor
- Observes any unsafe practice, intervenes and takes steps to seek guidance
- Recommends a pass/fail grade for the learner to the clinical sessional instructor
- Initiates contact with faculty if a problem or concern arises in the learner's practice

Role and Responsibilities of the Learner

- Arranges to meet with the preceptor and clinical sessional instructor to identify the focus and expectations of the practicum experience
- Provides course specific documents to preceptor: Preceptor handbook, CNO entry to practice competencies document, practicum evaluation form, etc.
- In collaboration with the preceptor/faculty, develops and finalizes an individual practicum learning plan
- Meets with preceptor regularly to discuss progress, successes and concerns, and to request guidance and resources to support learning
- Actively participates in the activities at the practicum site
- Writes and submits assignments as per course requirements (noted in Course Outline)
- Develops and submits a self-evaluation at the middle and end of each practicum
- The learner shall act in accordance with the placement organization's regulations, rules, policies, and procedures including appropriate provincial acts as they apply to the placement organization.

Role and Responsibility of the Clinical Sessional Instructor

- Discusses the placement setting opportunities with the learner and preceptor
- Acts a link and resource between the nursing program and the placement site/preceptor
- Facilitates preceptor's knowledge of the clinical course's goals and objectives
- Initiates and maintains consistent communication with the preceptor and the learner
- Meets regularly (by phone, virtually, or in person) with learners and preceptors to discuss meeting learning outcomes, practice issues and concerns, and provide consultation, advice, and role modelling
- Reviews and assesses clinical assignments and provides overall feedback to learners
- Supports the learner to develop an appropriate learning plan for the practicum setting in collaboration with the preceptor
- Stimulates the learner's critical thinking and reflection about practice experiences
- Facilitates learner's integration of the Nursing Program's philosophy into practice and integration of theory into practice
- Consults with the preceptor and the learner to determine if the learner has met the practicum objectives
- Determines either a pass/fail in practicum for the learner
- Assumes responsibility for evaluating the learner's performance and taking appropriate action when a learner is not meeting the practicum objectives
- Consults with clinical course lead regarding any significant challenges or issues related to practicum experiences

Year 4 Course Learning Objectives

NURS4700 Synthesis Professional Practice (Initial Final year practicum)

1. Integrate evidenced based knowledge, ways of knowing, and the patient's lived experience while providing holistic care to individuals/families/groups/communities.
2. Integrate educational experiences, ethical framework and program philosophy in a dynamic professional practice health care and societal environment.
3. Critically analyze complex reality based situational/simulation/scenarios that demonstrate evidenced based nursing practice at a year four level.
4. Collaboratively plan care and holistic health activities required by individuals, families and communities with specific health challenges according the year four level.
5. Demonstrate effective on-going professional development through collaborative interactions within a multidisciplinary team setting according to the CNO Standards of Practice.
6. Demonstrate knowledge, skill and judgment in providing safe, competent, and ethical care for clients/families that meets the current CNO Standards of Practice as outlined by the College of Nurses of Ontario.
7. Demonstrate the multiple roles of a professional nurse engaged in an evidenced based, competent, safe practice as they relate to the CNO Entry to Practice roles and competencies.

NURS4701 Professional Nursing Integrated Practicum (Final practicum)

1. Establish and maintain professional caring relationships in dyads, families, groups, and/or communities.
2. Maintain and promote health through the safe application of nursing knowledge and care with clients from an ethic of caring.
3. Use ways of knowing to deepen the understanding of the lived experience of individuals, families, groups, and/or communities.
4. Utilize a decision-making model to perform nursing interventions (actions, treatments, techniques) to promote health, prevent disease and injury, maintain and restore health, promote habilitation, and/or palliation.

Progression of Learning Over the Semester

Week		
Prior to the Semester	Learner attends/reviews the mandatory orientations (clinical course and practicum site). An attempt of the mandatory math test must take place prior to attending the first shift. Learners must have contact with their clinical instructor prior to attending the first shift. Learners will contact their preceptors by email or phone, or as outlined by the practicum setting and/or practicum nursing office. Learners should arrange transportation and parking, and any other requirements as needed prior to first clinical shift.	Learners and preceptors may exchange preferred contact information and arrange for the first shift date/time. The preceptor will provide an overview of the care provided and focus on the unit and the client population and needs. Materials for review prior to the first shift may be provided to the learner to review in advance of attending shifts.
1 Starting the Semester	Learner begins placement with preceptor. First Shift: The first shift should primarily involve shadowing and orientation to the placement setting and shift routines. Preceptors share with the learner their clinical expertise, areas of interests, and the use of nursing theory. Learners may share with preceptors their level of competence, expectations, and learning goals.	Learner provides the preceptor's name and contact information to the clinical instructor. The clinical instructor contacts the preceptor to provide semester and program information. Preceptors will assess learner preparation, communication, and how updates will be provided by the learner. Preceptors review practicum dates and confirm future shifts. Communicating Regularly During Shifts Preceptors frequently communicate with learners, asking the learner if there are questions or emerging concerns. Preceptors may ask specific questions and provide positive and constructive behavioral feedback as close to the event as possible. Preceptors encourage early independence within areas of competence and confidence and keep daily notes to support facilitation, feedback and the evaluation process.

1-3	Draft of the final learning plan. Learning plans should be continually updated throughout the term and submitted for review at midterm and final evaluation meetings.	Developed by the learner and shared with the preceptor and clinical instructor for feedback. Should be reviewed at midterm and final evaluation meetings.
4-5	Reflective Critical Analysis (RCA) #1. Must be submitted prior to the midterm evaluation.	Developed by the learner and submitted to the preceptor and clinical instructor. Evaluated by the clinical instructor.
5-6	Midterm Evaluation form initiated. The form should be developed and a meeting established once the student has reached approximately half of their practicum hours.	Developed by the learner and sent to the preceptor and clinical instructor who add their comments.
7	Reading Week	
6-8	Midterm evaluations completed	The midterm meeting takes place between the preceptor, clinical instructor, and learner.
9-11	Reflective Critical Analysis #2	Developed by the learner, and submitted to the preceptor and clinical instructor. Evaluated by the clinical instructor.
11	Final Evaluation form initiated. The form should be developed and a meeting established once the student has reached approximately half of their practicum hours.	Developed by the learner and sent to the preceptor and clinical instructor who add their comments.
12-13	Final Evaluation completed with meeting. Updated using the midterm evaluation form. A meeting established once the student has reached all of their practicum hours.	Developed by the learner and sent to the preceptor and clinical instructor who add their comments. The evaluation meeting takes place between the preceptor, clinical instructor, and learner.

Please note that weeks/dates may change, for example, in a 6-week Spring semester

Learners in Clinical Practice

The practice of nursing is guided by the principles of client safety, ethics and competence. Regardless of what is authorized through legislation or policies, learners must only provide care in circumstances where they have the necessary knowledge, skill, and judgement to perform safely, effectively, and ethically. The learner is expected to: Identify situations where assistance is required and seek appropriate assistance, direction, and supervision as required.

*Please see the [Nursing Program Practicum Handbook](#) for detailed policies and procedures that student must follow in practicum settings.

Attendance

Student success in the Nursing Program is dependent on complete attendance, which is mandatory. Students must be flexible in their schedule to attend either 8 or 12 hour shifts any day of the week according to their preceptor schedules. Students are required to be able to demonstrate that they consistently meet learning outcomes for the practicum experience. Missed practicum shifts put a student at risk of not being able to meet course requirements. Attendance in practicum also is an essential part of accountability to peers, clients, and other health care team members.

When a Preceptor should contact the Clinical Instructor

The Clinical Instructor is available to the preceptor and student at all times to discuss any concerns.

The preceptor must contact the Clinical Instructor when the learner demonstrates unsafe practice:

Unsafe practice in practicum is defined as work performed by the learner while caring for the patient which displays:

- (1) a lack of knowledge, skill or judgement;
- (2) disregard for the welfare of the client;
- (3) is of a nature or extent which indicates that the learner is unfit to continue in practicum and;
- (4) a lack of adherence to the [College of Nurses of Ontario Practice Standards](#)

In addition, the Clinical Instructor should be contacted when the learner:

- Places self, preceptor, client(s) or agency at risk
- Is consistently late, absent, or cancelling planned practicum shifts
- Lacks follow-through on suggestions for plans of care and unit expectations
- Has limited knowledge integration, critical thinking skills, reflective practice skills, and/pr consistently demonstrates inadequate skills
- Lacks ability to transfer knowledge from one situation to another
- Does not demonstrate expected progression
- Has an injury/accident/illness on site
- Demonstrates behaviors that are concerning e.g., lack of respect, biased or discriminatory actions/language, lack of boundaries with clients and staff, defensive when provided feedback, etc.
- Lacks accountability
- Breaches client confidentiality and/or privacy

- Is being harassed/ threatened by staff, family or client (sexual, racial etc.)

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

Collaborative Success Plan

A Collaborative Success Plan (CSP) is designed to support student success in practicum by clarifying expectations. It is developed by the clinical instructor in collaboration with the student and preceptor, with input from the clinical course lead as needed. It identifies areas of concern, sets goals, outlines actions to support learning, and establishes a timeline to review progress.

The clinical sessional instructor with the preceptor will identify concerns with the student as they present themselves in the practicum environment and may choose to implement a CSP.

Practicum Evaluation Processes

Evaluation is both a formative and summative process. Practicum evaluations formally take place at the midterm (about 50% of hours completed) and at the end of the term (100% of hours completed). The learner will initiate the completion of the evaluation forms by indicating on the form the CNO competencies that have been met with comments and examples. The learner then submits the form to the preceptor and clinical sessional instructor who provide their comments and feedback. Please see Important links for the CNO competencies documents and Appendices for the practicum evaluation form. The learner will meet with the preceptor and clinical sessional instructor for an interactive review process at midterm and final evaluation.

On the evaluation form, the areas of strength, areas for development, and further goals are essential for the learner, preceptor, and clinical sessional instructor to complete to support and encourage student success.

Evaluations of practicum performance are based on the following:

- Completion of all mandatory clinical hours for the clinical course.
- Consistently and safely meeting the practicum course learning outcomes and CNO ETP competencies as outlined in the associated evaluation document.
- Submission of practicum requirements such as the learning plan, RCAs and any other requirements such as simulations or activities.

Meeting Competencies: Some Tips

Dr. Patricia Benner, a nursing theorist, developed a model for the stages of clinical competence in her classic book “From Novice to Expert: Excellence and Power in Clinical Nursing Practice (1982)”. Benner describes clinical competence as developing over time through education and experience, progressing from novice to expert. This model provides a useful framework for understanding learners’ professional growth.

Nursing students typically begin clinical practice at the novice level and are expected to graduate as novice to advanced beginners. Further competence or expert level is achieved after a few years in practice as nurses gain further experience and proficiency.

The evaluation form outlines the College of Nurses of Ontario Entry-to-Practice competencies expected of learners. While these competencies are achieved over the full program, not all will be demonstrated in every practicum. Students must consistently provide safe, competent, ethical, and compassionate care relevant to the setting and support their progress with examples. Preceptors and clinical instructors provide feedback on competency development. Learners are expected to seek opportunities to meet relevant competencies and regularly review the evaluation form to guide their learning.

A Final Word

Within our nursing program, we strive to foster rich experiential learning environments and situations that support learners to grow and hone their competencies in nursing practice. We view nursing as a relational and evidence-informed profession and are committed to ensuring that nursing is grounded in ethical practices, integrity, empathy, reflection, and critical inquiry.

To our valued preceptors, we are glad to be working with you. Your contributions are essential to supporting safe, equitable, and sustainable nursing care—both now and into the future.

Additional Links and Resources

College of Nurses of Ontario, Supporting Learners <https://www.cno.org/en/learn-about-standards-guidelines/educational-tools/ask-practice/supporting-learners/>

College of Nurses of Ontario, Standards of Practice, Code of Conduct (2026)
https://www.cno.org/globalassets/docs/prac/49040_code-of-conduct.pdf

CNO Practice Standards

<https://www.cno.org/standards-learning/standards-guidelines/standards-guidelines>

College of Nurses of Ontario Entry to Practice Competencies

<https://www.cno.org/globalassets/docs/reg/41037-entry-to-practice-competencies-2020.pdf>

Ontario Tech University-Durham College Collaborative Nursing Program

[Nursing Programs Handbook](#) (includes link to the Nursing Program Skills list)

Appendices:

- A. Collaborative BScN Nursing Program Practicum Evaluation Form – Example
- B. Collaborative BScN Nursing Program Practicum Evaluation Form - Template

Review of Clinical Performance

Example

of Completed Practicum Evaluation Document NURS 4700 & NURS 4701

Student: _____ Clinical Instructor (Faculty): _____ Preceptor: _____

Date: _____ Placement Setting: _____ Term: _____

The Nursing Program Practicum Evaluation Template is designed in accordance with the College of Nurses of Ontario (CNO, 2019) Competency Framework. Within this framework, there are a total of 101 competencies, organized thematically under nine roles which are seen as intersecting within the full scope of practice of a Registered Nurse. As with Registered Nurses, no student is expected to meet all of the competencies. Rather, the expectation is that a nursing student (as with a RN) will meet the competencies as the opportunity arises and aligned with their professional development and levelled across the nursing program. The roles outlined in the CNO competency framework include:

1. **Clinician:**

Registered nurses are clinicians who provide safe, **competent**, ethical, **compassionate**, and **evidence informed** care across the lifespan in response to **client** needs. Registered nurses integrate knowledge, skills, judgment and professional values from nursing and other diverse sources into their practice.

2. **Professional:**

Registered nurses are professionals who are committed to the health and well-being of clients. Registered nurses uphold the profession's practice standards and ethics and are accountable to the public and the profession.

3. **Communicator**

Registered nurses are communicators who use a variety of strategies and relevant technologies to create and maintain professional relationships, share information, and foster therapeutic environments.

4. **Collaborator**

Registered nurses are collaborators who play an integral role in the health care team partnership.

5. **Coordinator**

Registered nurses coordinate point-of-care health service delivery with clients, the health care team, and other sectors to ensure continuous, safe care.

6. **Leader**

Registered nurses are leaders who influence and inspire others to achieve optimal health outcomes for all.

7. **Advocate**

Registered nurses are advocates who support clients to voice their needs to achieve optimal health outcomes. Registered nurses also support clients who cannot advocate for themselves.

8. **Educator**

Registered nurses are educators who identify learning needs with clients and apply a broad range of educational strategies towards achieving optimal health outcomes.

9. **Scholar**

Registered nurses are scholars who demonstrate a lifelong commitment to excellence in practice through critical inquiry, continuous learning, application of evidence to practice, and support of research activities.



Learning Objectives for NURS4700 Synthesis Professional Practice (First term in 4th year)

Successful completion of the theoretical and practicum components of this course will enable students to:

1. Integrate evidenced based knowledge, ways of knowing, and the patient's lived experience while providing holistic care to individuals/families/groups/communities.
2. Integrate educational experiences, ethical framework and program philosophy in a dynamic professional practice health care and societal environment.
3. Critically analyze complex reality based situational/simulation/scenarios that demonstrate evidenced based nursing practice at a year four level.
4. Collaboratively plan care and holistic health activities required by individuals, families and communities with specific health challenges according the year four level.
5. Demonstrate effective on-going professional development through collaborative interactions within a multidisciplinary team setting according to the *CNO Standards of Practice*.
6. Demonstrate knowledge, skill and judgment in providing safe, competent, and ethical care for clients/families that meets the current *CNO Standards of Practice* as outlined by the College of Nurses of Ontario.
7. Demonstrate the multiple roles of a professional nurse engaged in an evidenced based, competent, safe practice as they relate to the CNO Entry to Practice roles and competencies.

Learning Objectives for NURS4701 Professional Nursing Integrated Practicum (Second term in 4th year)

Successful completion of the theoretical and practicum components of this course will enable students to:

1. Establish and maintain professional caring relationships in dyads, families, groups, and/or communities.
2. Maintain and promote health through the safe application of nursing knowledge and care with clients from an ethic of caring.
3. Use ways of knowing to deepen the understanding of the lived experience of individuals, families, groups, and/or communities.
4. Utilize a decision-making model to perform nursing interventions (actions, treatments, techniques) to promote health, prevent disease and injury, maintain and restore health, promote habilitation, and/or palliation.

Entry to Practice Competencies

1. Clinician (CNO definition)

Registered nurses are clinicians who provide safe, **competent**, ethical, **compassionate**, and **evidence-informed** care across the lifespan in response to

client needs. Registered nurses integrate knowledge, skills, judgment, and professional values from nursing and other diverse sources into their practice.

Clinician ETP Competencies: 1.1-1.27	Met DCE (initial)	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date / Comments
1.1 Provides safe, ethical, competent, compassionate, client-centred and evidence informed nursing care across the lifespan in response to client needs.	SI				I have met this ETPc through each clinical day by employing critical assessment findings and providing appropriate safe, ethical, compassionate nursing care to ensure the client's needs were met-medication administered prior to assessments & mobilization, careful yet expeditious assessments conducted.
1.2 Conducts a holistic nursing assessment to collect comprehensive information on client health status.	SI				I met this ETPc by performing assessments that included all body systems and by asking the client how they were feeling and doing at that moment encouraging the patient to express emotional as well as physical concerns.
1.3 Uses principles of trauma-informed care which places priority on trauma survivors' safety , choice, and control.				SI	Not met.
1.4 Analyses and interprets data obtained in client assessment to inform ongoing decision making about client health status.	SI				I used information gathered from chart/findings to help determine the immediate needs of my patients and what might interventions could be needed. I had the opportunity to use lab values and vital signs to determine my patient's level of wellness/illness.
1.5 Develops plans of care using critical inquiry to support professional judgment and reasoned decision-making.				SI	Not met.

1.6 Evaluates effectiveness of plan of care and modifies accordingly.	SI				I was able to evaluate very quickly the plan of care of each patient pre-delivery, post-delivery, and modify the plan of care as needed. i.e., patient on bed rest, but began to experience extreme pain, determined patient required immediate C-section.
1.7 Anticipates actual and potential health risks and possible unintended outcomes.	SI				I recognized the potential for infection in the incision of post op C-section patients Throughout the placement, I was able to determine the risk of falling baby temperature and dehydration of babies
					without effective feeds. I was able to be involved in monitoring blood sugars of mom and baby. I was able to conduct assessments on mom to monitor for signs of common postpartum risks
1.8 Recognizes and responds immediately when client safety is affected.	SI				I was able to teach parents about safe sleep for baby, the risks of leaving babies unattended on the bed. I was also able to teach mothers about the importance of wearing shoes while ambulating, and the importance of using the call bell when fall risk moms needed to void.
1.9 Recognizes and responds immediately when client's condition is deteriorating.	SI				I assessed patient on bed rest who began to experience extreme pain, determined patient required immediate C-section.
1.10 Prepares clients for and performs procedures, treatments, and follow up care.	SI				I was able to help mom prepare for aftercare for themselves and baby by informing them of the necessity of seeing the pediatrician in 2-3 days after the discharge, and seeing the OB 6 weeks.
1.11 Applies knowledge of pharmacology and principles of safe medication practice.	SI				I was able to safely dispense meds to my patients and use critical thinking in the process.
1.12 Implements evidence-informed practices of pain prevention, manages client's pain, and provides comfort through pharmacological and non- pharmacological interventions.	SI				– Met when patient complained of nausea and medication was able to be administered to resolve the issue. I was able to use pain assessments for mom and baby as well as pain management techniques as well as pharmaceuticals to ensure that mom's pain controlled was

					appropriately tolerated.
1.13 Implements therapeutic nursing interventions that contribute to the care and needs of the client.	SI				I was able to demonstrate ETC by always acting in the best interest of the patient and providing interventions for the patient that would bring them more comfort and a therapeutic outcome
1.14 Provides nursing care to meet palliative and end-of-life care needs.				SI	
1.15 Incorporates knowledge about ethical, legal, and regulatory implications of medical assistance in dying (MAiD) when providing nursing care.				SI	
1.16 Incorporates principles of harm reduction with respect to substance use and misuse into plans of care.				SI	
1.17 Incorporates knowledge of epidemiological principles into plans of care.				SI	
1.18 Provides recovery-oriented nursing care in partnership with clients who experience a mental health condition and/or addiction.				SI	
1.19 Incorporates mental health promotion when providing nursing care.				SI	
1.20 Incorporates suicide prevention approaches when providing nursing care.				SI	
1.21 Incorporates knowledge from the health sciences, including anatomy, physiology, pathophysiology, psychopathology, pharmacology, microbiology, epidemiology, genetics, immunology, and nutrition.	SI				I was able to use information learned in previous classes, and I allowed them to guide decision making Every week of placement I was able to use my knowledge in anatomy, physiology, pathophysiology and pharmacology.

1.22 Incorporates knowledge from nursing science, social sciences, humanities, and health-related research into plans of care.	SI				I was able to incorporate information from previous classes and used them to guide my decision making I was able to incorporate information taught in several different classes to help my patients with the best possible outcome.
1.23 Uses knowledge of the impact of evidence informed registered nursing practice on client health outcomes.	SI				I was able to incorporate information from previous classes and I used this knowledge to guide my decision making In each clinical placement, I was able to use best-practice methods to impact my client's health
1.24 Uses effective strategies to prevent, de-escalate, and manage disruptive, aggressive, or violent behaviour.				SI	
1.25 Uses strategies to promote wellness, to prevent illness, and to minimize disease and injury in clients, self, and others.				SI	
1.26 Adapts practice in response to the spiritual beliefs and cultural practices of clients.				SI	
1.27 Implements evidence-informed practices for infection prevention and control.	SI				I used PPE according to hospital guidelines, proper handwashing, gloves, masks and shields to protect ourselves from Covid19

NURS 4700 and NURS 4701 nursing students are beginner to novice clinicians who provide safe, competent, ethical, compassionate, and evidence informed care across the lifespan in response to client needs and with support and guidance of their preceptor. Nursing students in NURS 4700 integrate knowledge, skills, judgment and professional values from nursing and other diverse sources into their CARING practice. THE GOAL IS NOT TO BE FULLY INDEPENDENT WITH A FULL PATIENT LOAD, BUT RATHER TO PROVIDE HOLISTIC CARE WITH EMERGING INDEPENDENCE TO A MODIFIED PATIENT ASSIGNMENT.

Student Comments Midterm: The maternal/child patient care experiences this semester have allowed me to begin to practice being a clinician in many ways, and I feel this is the role that I was able to grow in the most. I was able to learn how to gather information and to properly assess how a patient is doing, practice head to toe assessments along with focused post partum assessments and was provided with information to challenge my thinking and help me form appropriate care plans. I was able to practice anticipating complications that may occur in different situations, and also plan how I would intervene if those things did occur. I was able to be involved in creating plans through pregnancy, birth and postpartum. I was able to perform tasks within my knowledge, skills and judgment.

Preceptor Comments Midterm: Student is beginning to demonstrate the competencies in the clinical role. When providing care to post-partum patients and their newborns, she demonstrated a caring and knowledgeable practice specific to childbirth and neonatal life transitions. She has met this role by performing a

comprehensive head-to-toe assessment for a postpartum mother and newborn. She has identified appropriate actions based on lab and diagnostic values, and has evaluated and provided pharmacological interventions for therapeutic management of pain and has learned the expectations of appropriate and concise documentation.

Clinical (Faculty) Instructor Comments Midterm: *Student was able to demonstrate several of the competencies in the clinical role. While caring for the post partum and newborn patients she provided competent and compassionate care and always recognized the importance of family while caring for her patients. She was able to complete her head to toe assessments/focused post partum assessments with knowledge and comprehensiveness. At midterm Student is demonstrating some very good clinician concepts.*

Student Comments Final: This maternal/child clinical experience has helped me to understand fully the importance of providing safe, competent, ethical, compassionate, and evidence informed care to the maternal patient's needs along with recognizing the necessity of being able to recognize how quickly a newborn can experience health challenges-as experienced when a newborn was having difficulty breathing and required immediate suctioning and then careful positioning to ensure airway remained clear.

Preceptor Comments Final: Student has always come to the clinical setting prepared with most relevant theoretical information and with a positive and professional attitude. She can competently perform a head to toe/focused assessments on both a postpartum mother who has had a vaginal or caesarean delivery, along with care of the newborn. She practices safely and is aware of her limitations in her assessments and practices according to CNO standards and the expectations of OTU student.

Student is encouraged to continue to prepare her plan of care and determine prioritization before assessing the patient in order to ensure she is meeting all the requirements during her meeting with the patient.

Clinical (Faculty) Instructor Comments Final: *Student has met the expectations for the role of clinician and has met many of the entry to practice competencies as it relates to role of clinician.*

2. Professional (CNO definition)

Registered nurses are professionals who are committed to the health and well-being of clients. Registered nurses uphold the profession's practice standards and ethics and are accountable to the public and the profession.

Professional ETP Competencies: 2.1-2.14	Met DCE	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date /Comments
2.1 Demonstrates accountability , accepts responsibility, and seeks assistance as necessary for decisions and actions within the legislated scope of practice .	SI				Initially, I did not feel confident in this new clinical placement, so I was able to recognize that I needed assistance to make the best decision and I went to my preceptor for direction. While providing care for my patients I was able to practice being accountable and responsible for my patient's care/documentation/ medication administration, and provided clear SBAR reporting things to my preceptor.

2.2 Demonstrates a professional presence , and confidence, honesty, integrity, and respect in all interactions.	SI				During each clinical experience, I was eager to learn and practice nursing skills. I tried to be a professional, even though I was often nervous and not completely confident at the outset of the semester. I was honest
					with the RN's around me regarding my skills and was respectful to them as well as to my patient.
2.3 Exercises professional judgment when using agency policies and procedures, or when practising in their absence.	SI				Reviewed hospital policies during my placement in order to practice within defined and expected parameters.
2.4 Maintains client privacy, confidentiality, and security by complying with legislation, practice standards, ethics, and organizational policies.	SI				I ensured my preceptor that I would never disclose any personal information about my patient that might divulge private information.
2.5 Identifies the influence of personal values, beliefs, and positional power on clients and the health care team and acts to reduce bias and influences.	SI				Several different patients and families in my care had different opinions and values, and it was important to respect them and not force my own opinions and values upon them.
2.6 Establishes and maintains professional boundaries with clients and the health care team.	SI				I made an effort to not become too "friendly" with my clients. This doesn't mean that I was unkind or unfriendly, but I didn't overshare information regarding my personal life with them and overstep any professional boundaries in anyway.
2.7 Identifies and addresses ethical (moral) issues using ethical reasoning, seeking support when necessary.	SI				Addressed a pts concern about losing her newborn since she had previous CAS involvement and listened to her with humility and compassion.
2.8 Demonstrates professional judgment to ensure social media and information and communication technologies (ICTs) are used in a way that maintains public trust in the profession.	SI				I never post anything about my day on social media that could compromise patient confidentiality.

2.9 Adheres to the self-regulatory requirements of jurisdictional legislation to protect the public by: a) assessing own practice and individual competence to identify learning needs.	SI				Each clinical day, I was candid and honest with my preceptor if I was not comfortable or confident in performing a skill. I wanted to be honest about what I was able and unable to do and willing to observe and learn and further my learning after clinical by researching areas I felt I did not have competency.
b) developing a learning plan using a variety of sources.	SI				Developed learning plan using SMART goal format and Completed a maternal/child learning plan.
c) seeking and using new knowledge that may enhance, support, or influence competence in practice.	SI				During my maternal child clinical, knowing that I had some knowledge gaps I eagerly sought opportunities to observe, read about and grow in my personal experience/nursing skills. After clinical, I would often complete some research about the different things I encountered that day in order to learn more about what I had seen at the hospital, and to be prepared for the following day.
d) implementing and evaluating the effectiveness of the learning plan and developing future learning	SI				Completing aspects of my learning plan within defined times and personally identified gaps and areas for improvement.

plans to maintain and enhance competence as a registered nurse.					
2.10 Demonstrates fitness to practice .	SI				Through studying and practice, I want to always ensure that I am competent in the areas where I am providing nursing care. I want to keep trying and continue to perfect different skills while knowing my own limitations as a student.
2.11 Adheres to the duty to report.	SI				I shared with my preceptor the worries and concerns the mother had regarding previous CAS involvement.
2.12 Distinguishes between the mandates of regulatory bodies, professional associations, and unions.	SI				Understands differences in protocols from the school in comparison to the agency (Hospital Health Network)
2.13 Recognizes, acts on, and reports, harmful incidences, near misses, and no harm incidences .				SI	Not experienced.

2.14 Recognizes, acts on, and reports actual and potential workplace and occupational safety risks.				SI	Not experienced.
Professional ETP Competencies: 2.1-2.14 Nursing students in NURS 4700 and NURS 4701 are emerging professionals who are committed to the health and well-being of clients, uphold the profession's practice standards and ethics, and are accountable to the public and the profession.					
Student Comments Midterm: I was able to demonstrate professional competencies this semester through respectful communication by always introducing myself to the patient as well as listening carefully to the patient's and families concerns about the problems being faced with hospitalization. I have used therapeutic interventions to help the client and family member. I appreciated learning about my patient's illnesses and helping the patient and families to achieve their health goals. I provided my preceptor and other nurses with timely patient information following my assessments and interventions.					
Preceptor Comments Midterm: Student provided evidence-based knowledge information to her patients and family. Student reported her assessments and any abnormal finding was followed up within appropriate time. Student demonstrated professional communication during her breastfeeding teaching and bath demos. Student was able to demonstrate professional behaviour with her patients and with the staff on our unit. Student was able to professionally inform me about a patient who had serious concerns re-CAS. Student was also able to ensure that she was properly prepared to provide care to her patients prior to beginning assessments and ensuring consent was obtained.					
Clinical (Faculty) Instructor Comments Midterm: <i>Student is demonstrating professional behaviour with her patients and with the staff on maternal/child unit. Student has been preparing diligently to provide care to maternal/child patients, has been demonstrating that she is gaining in knowledge, skill and judgment in the area of her professional role.</i>					

Student Comments Final: I always exhibit professionalism in the clinical setting. I am honest, respectful and consistently gaining confidence. I accurately conduct environmental safety scans of all my patient's rooms to identify any risks to patient safety, as well as conducting patient's fall risk assessment. I have appropriately developing my professional communication skills with members of the team when providing updates on patient status and report before breaks and at the end of my shift. I reflect and identify where my knowledge may need help and I know where to find the information. I was able to administer PO medications and IM injections accurately while demonstrating preparation and critical thinking throughout the process. I always remembered to check doctor's orders prior to coming to the medication room to confirm that the medications were ordered. I have demonstrated consistently over the semester my commitment to the health and well being of my patients.

Preceptor Comments Final:

Student provided evidence-based knowledge information to her patients and family. Student reported her assessments and any abnormal finding was followed up within appropriate time. Student demonstrated professional communication during her breastfeeding teaching and bath demos. The clinical practice challenged Student's ability to demonstrate accountability for her practice by exploring Covid-19 donning and doffing policies. Student demonstrated integration and philosophy of family-centered care by promoting connectedness with patients through the use of empathy, honesty and respect with her nursing care and professional communication.

Clinical (Faculty) Instructor Comments Final: *Student has met the expectations for the Professional role by submitting all of the expected written documents for this rotation on time and demonstrated critical thinking, problem solving abilities through her Reflective Critical analyses and Learning Plan. She was professional in her demeanour, communication and respect demonstrated within the clinical setting towards her patients, families, preceptor and other health care team members.*

3. Communicator (CNO definition)

Registered nurses are communicators who use a variety of strategies and relevant technologies to create and maintain professional relationships, share information, and foster therapeutic environments.

Communicator ETP Competencies: 3.1-3.8	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date / Comments
3.1 Introduces self to clients and health care team members by first and last name, and professional designation (protected title).	SI				Each time I entered a patient's room, I would ensure that I introduced myself as an Ont.Tech U. nursing student to my patients and families. I also made sure to gain their consent before I performed any assessments on pp patient or infant.
3.2 Engages in active listening to understand and respond to the client's experience, preferences, and health goals.	SI				When listening to my patients, I would always indicate that I was actively listening through eye contact and nodding to demonstrate to my patient that their concerns and preferences were important to me.

3.3 Uses evidence-informed communication skills to build trusting, compassionate, and therapeutic relationships with clients.	SI				Each time I interacted with my clients I would do my best to build a relationship with my clients so that they felt comfortable and were able to trust me to provide compassionate care.
3.4 Uses conflict resolution strategies to promote healthy relationships and optimal client outcomes.	SI				I was prepared for conflict resolution and through my NURS 4100 leadership course, I read about effective ways to resolve conflict (emotional intelligence) and was aware of measures to de-escalate any situation where conflict might arise.
3.5 Incorporates the process of relational practice to adapt communication skills.	SI				I made sure to create healthy and happy relationships that were maintained through boundaries with the patients, families, visitors and other HCPs.
3.6 Uses information and communication technologies (ICTs) to support communication.	SI				I learned how to use the electronic documentation at the hospital to ensure my care had been reported in a timely and concise manner.
3.7 Communicates effectively in complex and rapidly changing situations.	SI				During a situation where a newborn was having difficulty breathing, I quickly called for help, suctioned the infant and held the infant in a position to ensure the airway was patent.
3.8 Documents and reports clearly, concisely, accurately, and in a timely manner	SI				Initially, my preceptor reviewed the preferred method of reporting and document, then I demonstrated to my preceptor my documentation and SBAR reporting in a timely, accurate manner.

Communicator Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are novice communicators who use a variety of strategies and relevant technologies to create and maintain professional relationships, share information, and foster therapeutic environments. i.e. develops and terminates therapeutic relationships, collaborates with patients to establish health goals, demonstrates effective conflict resolutions strategies, demonstrates professional communication with the patient and members of the health care team, is adept with technology used in healthcare (medication administration systems, computer software programs, uses evidence-informed communication strategies (ISBAR), and documents concisely and accurately

Student Comments Midterm: I was able to practice communication this semester by always introducing myself to the patient as well as listening carefully to the patient's and families concerns about the problems being faced with hospitalization. I have used therapeutic interventions to help the client and family member. I appreciated learning about my patient's delivery and post-partum problems and helped the patient and families to achieve their health goals. I made sure to review the ISBAR procedure when reporting assessments findings to my preceptor and physician. I also understood the importance of growing my ability to respond ethically and legally to an incident. I maintain confidentiality when I communicate information about my patients. I listen carefully to my preceptor's feedback and ensure that I take this information into my nursing practice at the next clinical day.

Preceptor's Comments Midterm: Student introduces herself as a fourth-year student nurse from On Tech U. upon entering her client's room and upon meeting other healthcare members. She communicates effectively in complex and rapidly changing situations such as calling out for help when an infant had an airway obstruction.

Student is able to demonstrate practicing client-centered and culturally safe care, ensuring that she engages in active listening to understand and respond to the patient and the family's experience, preferences, and health goals and as well as using evidence-informed communication skills to build trusting, compassionate, and therapeutic relationships with clients. This was evident as she grew in her confidence over the weeks in the hospital setting. Lastly, Student continued to document and report clearly, concisely, and accurately as evident by her ISBAR communication.

Clinical (Faculty) Instructor Comments: *Student communicates clearly and is very punctual in her emails to me and completes her written submissions clearly and with professional level communication. Continue to grow in confidence as you communicate with the interprofessional health care team members.*

Student Comments Final: In terms of the communicator role, I feel that throughout this semester I have been able to communicate proficiently, clearly, and honestly on a regular basis. I introduce myself to patients and members of the health care team, engage in active listening to foster the cultivation of trusting therapeutic relationships with clients, communicate effectively in rapidly changing situations, and document in a proficient manner. This placement opportunity has given me more confidence to communicate with clients and interprofessional colleagues and allowed me to continue practicing different communication strategies and techniques that are unique to each client and circumstance. I still need to work on using conflict resolution strategies and information and communication technologies in practice, which will both assist me in becoming a stronger communicator in the clinical setting.

Preceptor Comments Final: Student has excelled and achieved her communicator role in this placement setting. She was able to receive from and give verbal report to other nurses with confidence. She was able to develop therapeutic relationships with her post-partum patients. I would encourage Student to continue to gain confidence in herself and her knowledge base, this will in turn help ease her efficiency at communicating with members of the health care team as well as with her patients.

Clinical (Faculty) Instructor Comments: Student has met the expectations of the Role of the communicator and has met many of the entry to practice competencies for this maternal/child rotation, well done.

4. Collaborator (CNO definition)

Registered nurses are collaborators who play an integral role in the health care team partnership.

Collaborator ETP Competencies: 4.1-4.5	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date / Comments
4.1 Demonstrates collaborative professional relationships.	SI				Each clinical day in the hospital I was able to work with my preceptor, other RN's and other members of the health care team in a professional relationship.
4.2 Initiates collaboration to support care planning and safe, continuous transitions from one health care facility to another, or to residential, community or home and self-care.	SI				I was able to collaborate with my preceptor who helped me understand the steps in discharge planning and health teaching in preparation for discharge of post partum patients.

4.3 Determines their own professional and interprofessional role within the team by considering the roles, responsibilities, and the scope of practice of others.	SI				I was able to work interprofessionally with my preceptor and RN's by understanding that their scope of practice was different from my scope as a nursing student. I understood my role within the health care team, including my responsibilities and scope of practice. For example, I was offered to administer medication via IV push by my preceptor nurse, however, I showed her the skills list we have as nursing students and I informed her that this skill was not within my scope of practice, and therefore respectfully declined the opportunity, however I observed the skill very carefully and for any changes in the patient.
4.4 Applies knowledge about the scopes of practice of each regulated nursing designation to strengthen intraprofessional collaboration that enhances contributions to client health and well-being.	SI				Based on the skills I am qualified to do, I try to lighten the workload of my preceptor and any other nurses working on the unit. I was able to provide care using skills based on my scope of practice as a 4th year student.
4.5 Contributes to health care team functioning by applying group communication theory, principles, and group process skills.	SI				Through my understanding of communication theory and principles, I was able to function as a collaborator with my preceptor and other members of the health care team.

Collaborator Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are collaborators who are beginning to play an integral role in the health care team partnership. i.e. communicates in a professional manner with members of the team, with the guidance of the preceptor who helps to encourage delegation to regulated and un-regulated team members according to their scope of practice, collaborates on care planning.

Student Comments Midterm: I have learned to collaborate with the patients, family members as they are often an invaluable resource regarding the patients' needs and post partum health. This semester, I was able to work together with my preceptor, other RNs, and unregulated health care providers building a cohesive and collaborative team ensuring the best outcome for the post partum patient and newborn.

Preceptor Comments Midterm: Student has continued to apply the collaborator role when providing patient care, always considering information provided to her from the patient and other members of the health care team. In addition, Student continued to understand the importance of collaborating with other healthcare members such as other colleagues and physicians. Student further illustrates this role by understanding what other healthcare members can be incorporated to her client's plan of care.

Clinical (Faculty) Instructor Comments Midterm: Student is working very well/collaborating with her preceptor and other members of the interprofessional health care, keep up the good work.

Student Comments Final: The staff at the Hospital over this semester has been very supportive, engaging and willing to collaborate with me in my role as nursing student. They have made me feel included and have been very positive and eager to "show me the ropes." I was able to collaborate with them in order to ensure our patients were well cared for, assessed in a timely way, I reported my findings to my preceptor. I understood my scope of practice as a 4th year nursing student and always requested assistance with the nursing care/nursing skills that I was not able to perform. The nurses on the unit trusted my assessment skills and encouraged my growth in areas where my knowledge, skill and judgment required their support.

Preceptor Comments Final: Student collaborates well with all members of the health care team, as well as the patient and their families. Student is able to identify and inform me and any other nurses on the unit about her scope of practice when providing care for patients to prevent any confusion in responsibilities for patient care.

Student consistently ensures that I am well informed of the care she has provided her patients with by providing me with timely updates on patient status in regard to infant feeds, vital signs and assessments. Student has received great positive feedback from all of the nurses on our unit, excellent work!

Clinical (Faculty) Instructor Comments Final: Student has met the expectations for the Collaborator role and many of the entry to practice competencies. Confidence as a collaborator was evident as Student's confidence grew over the semester. Well done.

5. Coordinator (CNO definition)

Registered nurses coordinate point-of-care health service delivery with clients, the health care team, and other sectors to ensure continuous, safe care.

Coordinator ETP Competencies: 5.1-5.9	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date / Comments
---------------------------------------	-----	----------------------------	---------------------------	---	-----------------

5.1 Consults with clients and health care team members to make ongoing adjustments required by changes in the availability of services or client health status.	SI				Upon performing pain assessment, I observed the pt in a lot of pain and I coordinated with my preceptor to ensure her pain medication was given to ease her pain - Had to consult the physician to make adjustments to the order and to correct medication error (incorrect dosage)
5.2 Monitors client care to help ensure needed services happen at the right time and in the correct sequence.	SI				I was able to ensure that patient received their PRN medications-correct medication, dosage, frequency and time. I was able to follow a schedule to ensure that my clients received meds and assessments at the correct time.
5.3 Organizes own workload, assigns nursing care, sets priorities, and demonstrates effective time management skills.	SI				With the help of my preceptor, I learned how to organize my day in a way that I made sure my clients were assessed at the appropriate time and their medication was administered in a timely manner. I was able to manage my time effectively so that I was not behind.
5.4 Demonstrates knowledge of the delegation process.	SI				Through NURS 4100, I have learned the process of delegation.
5.5 Participates in decision-making to manage client transfers within health care facilities.	SI				I was able to assist with pt transfer in rooms eg from c- section to recovery room.
5.6 Supports clients to navigate health care systems and other service sectors to optimize health and well-being.	SI				Reviewed discharge health teaching and showed pt various resources available and contact information for those resources from the discharge package.
5.7 Prepares clients for transitions in care.	SI				Helped prepare client for discharge from hospital to home.
5.8 Prepares clients for discharge.	SI				I was able to be involved in the process of patient teaching of mother regarding baby care, baby feeding and any changes in newborn as it pertained to the discharge process. I was also about to observe the RN complete the necessary documentation after discharge had occurred.

5.9 Participates in emergency preparedness and disaster management.	SI				During my experience in L&D I helped to complete an environmental check in the delivery room, checking to make sure all equipment was present and functioning in case of an emergency
---	----	--	--	--	---

Coordinator Role applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students, with the support of their preceptors, show developing skills in the coordination of point-of-care health service delivery with clients, the health care team, and other sectors to ensure continuous, safe care. i.e., prepares patient and family for transitions, participates in discharge teaching with supervision, consultation with clients and the health care team for additional services, monitors client for effectiveness of consultations and prioritizes assignment.

Student Comments Midterm: I was provided with many opportunities to learn to prioritize interventions based on what is best for my patients. I understand how important a nurse is in coordination of care and services for our patient. I was able to understand the coordination of care from L & D to recovery, from recovery to maternal/child unit, and within 24 hours, coordination of care included lactation consultant; and planning to get the patient ready for discharge.

Preceptor Comments Midterm: Student has begun to have an understanding and demonstrate the role of coordinator as a nursing student by being able to organize her own workload and set priorities during her clinical day. Student has also begun to monitor client care to ensure needed services are requested in a timely manner as most patients leave the maternal unit within 24 hours. Student has also begun to understand how the process or coordinating care for a patient works on our unit.

Clinical Instructor (Faculty) Comments Midterm: Student has been responsible for providing safe patient care through the coordination of knowing all of the health care team who could be involved in patient care from admission to discharge.

Student Comments Final: I made sure to avoid any gaps in care through coordination with my preceptor. I made sure that safety measures were in place and had the opportunity to work with my preceptor to review the discharge process and know how to implement it and also know who to contact for additional patient services.

Preceptor Comments Final: Student is developing well in her ability to prioritize actions and interventions appropriately and is safe, timely and competent in her provision of care, health promotion and health teaching. Student is able to understand and consistently link the assessment data and laboratory data to her patient care and understands the findings and collaborates with me in the patient care. Student was able to reflect on each of her clinical shifts and create strategies to help her when on the floor for her next shift such as writing out all her tasks for her shift with times and collaborating with me to ensure there were no gaps in the patient care.

Clinical Instructor (Faculty) Comments Final: Student has understood the coordinator role in the care of patients who may require more than nursing care-she has asked Social work and Lactation Consultants to provide their expertise as it related to patient care. Student has learned very quickly how to coordinate discharge planning with others on the health care team. Well done.

6. Leader (CNO definition)

Registered nurses are leaders who influence and inspire others to achieve optimal health outcomes for all.					
Leader ETP Competencies: 6.1-6.11	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date / Comments
6.1 Acquires knowledge of the Calls to Action of the Truth and Reconciliation Commission of Canada.	SI				Familiarized myself with Canadian Health Libraries' Responses to the Truth and Reconciliation Commission's Calls to Action: A Literature Review and Content Analysis"
6.2 Integrates continuous quality improvement principles and activities into nursing practice.	SI				I was able to begin to integrate continuous quality improvement principles in my nursing practice as I worked hard at obtaining the knowledge, skill and judgment in many new nursing skills as they related to labour & delivery
6.3 Participates in innovative client-centred care models.				SI	I began to understand innovative client centred care models.
6.4 Participates in creating and maintaining a healthy, respectful, and psychologically safe workplace.	SI				I supported my nursing colleagues using respectful, and empathetic ways of being and demonstrated regard to all of the nurses on the unit.
6.5 Recognizes the impact of organizational culture and acts to enhance the quality of a professional and safe practice environment.	SI				I am beginning to understand that everyone on the team has a unique role during a C-section, the role of the scrub nurse, circulating nurse, respiratory therapist, doctor etc. all demonstrate the importance of creating a safe professional practice. I demonstrated professionalism and maintained a safe practice environment.

6.6 Demonstrates self-awareness through reflective practice and solicitation of feedback.	SI				After each clinical experience I was able to reflect on the things that I had learned and invited and accepted feedback from my preceptor and other nurses on the unit, helping me to recognize where I needed more practice, what were my strengths and weaknesses working on the maternal/child unit. When I completed my RCAs, I was able to reflect on the things that I had done well, what I had learned and what more I needed to learn in order to grow in confidence.
6.7 Takes action to support culturally safe practice environments.	SI				I was able to set aside a space for a pt's husband to perform a prayer. I also gave them privacy during that time. This shows respect and support.
6.8 Uses and allocates resources wisely.	SI				I made sure not to use more supplies than what I needed, i.e., Using 1 face shield and N95 throughout shift. Using gloves when appropriate.
6.9 Provides constructive feedback to promote professional growth of other members of the health care team.	SI				I provided feedback to nurses when we were collectively performing care and I received valuable feedback about my nursing care.
6.10 Demonstrates knowledge of the health care system and its impact on client care and professional practice.	SI				I have come to understand the health care system a little more fully and how a full complement of services and professional practice enhance the safety and health recovery of patients.
6.11 Adapts practice to meet client care needs within a continually changing health care system.	SI				I have tried to keep patients up to date regarding the visitor policy and mask policy during the pandemic since protocols were continually change.

Leader Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginning/emerging leaders who influence and inspire others to achieve optimal health outcomes for all. i.e. maintains a culturally safe work environment (maintains confidentiality, is supportive to colleagues), continually engages in reflective practice for quality improvement, seeks and provides constructive feedback, adapts practice within continually changing system i.e., Covid19 protection (ensuring the correct PPE for family members).

Student Comments Midterm: I displayed leadership through being a professional colleague in a new clinical environment, asking for guidance, trying to show independence and continuing to grow in competence with each shift. My preceptor helped prepare me for challenging situations that I may face in clinical and through reflection I was able to begin to build my confidence and help me respond more effectively during unexpected patient care situations.

Preceptor Comments Midterm: Student has continued to demonstrate her ability to adapt her nursing practice to meet client care needs within a continually changing health care system as evidenced by ensuring appropriate PPE was used when caring for her clients and educating family members about PPE. Student continued to demonstrate knowledge of the health care system and its impact on client care and professional practice by consulting with an MD regarding lab results on an infant who had increased bilirubin levels. Student continued to understand and recognize the impact of organizational culture and acted to enhance the quality of a professional and safe practice environment (i.e., knowing the importance of disclosing incidents to family members). She has also created and maintained a healthy, respectful, and psychologically safe workplace with colleagues and patients.

Clinical (Faculty) Instructor Comments Midterm: *Student's RCAs reflected a commitment to thinking about how to maintain culturally safe work environments, and providing support to colleagues and patients in a continually changing health care environment.*

Student Comments Final: The maternal/child experience has allowed me to build confidence in my nursing practice through ongoing opportunities to demonstrate my independence while at the same time knowing when to ask for guidance and mentoring. I had opportunities to observe my preceptor in the role of being in charge of the unit, organizing work schedules while taking into consideration the needs of the staff. I reflected upon my own nursing care and really wanted to create an organizational culture where psychological and practice safety were present.

Clinical Instructor Comments Final: Student assesses and reflects on her own practice, the environment and experiences and asks good questions to increase her own knowledge. Student demonstrates self-awareness through reflective practice during our debriefing time at the end of the day. She shares valuable information with our nurse colleagues regarding current trends in maternal child care. Student maintains a culturally safe work environment. Student has gone the extra mile to accommodate cultural/religious practices for her patients. She has been able to respond appropriately to constructive feedback and adapt her practice accordingly.

Student begins every clinical shift with a positive and eager attitude and carries that with her through the entire day. Student is encouraged to continue to build her confidence in her skills and knowledge to further help her succeed in her future nursing career.

Clinical (Faculty) Instructor Comments Final: Student is beginning to recognize the subtleties of the Leader role and understands the values of creating a practice environment where psychological and practice safety are essential.

7. Advocate (CNO definition)

Registered nurses are advocates who support clients to voice their needs to achieve optimal health outcomes. Registered nurses also support clients who cannot advocate for themselves.

Advocate ETP Competencies: 7.1-7.14	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date / Comments
7.1 Recognizes and takes action in situations where client safety is actually or potentially compromised.	SI				When I observed that mothers weren't sure of different safety measures for their babies, i.e., positioning in cradle, falling asleep with infant in the bed, I was able to act by teaching the mothers about safety and demonstrating best practice.
7.2 Resolves questions about unclear orders, decisions, actions, or treatment.	SI				As I began to become very familiar with most of the postpartum care, I also recognized when I needed to ask my preceptor or other nurses on the unit for clarification regarding orders and treatments.
7.3 Advocates for the use of Indigenous health knowledge and healing practices in collaboration with Indigenous healers and Elders consistent with the Calls to Action of the Truth and Reconciliation				SI	Reviewed: "Inequities within Indigenous Maternal Health: A Prevailing Issue"

Commission of Canada.					
7.4 Advocates for health equity for all, particularly for vulnerable and/or diverse clients and populations.				SI	
7.5 Supports environmentally responsible practice.	SI				Ensured that all equipment was disposed of in the appropriate receptacles (sharps in sharps container,
					gowns in soiled linen bin, gloves in garbage etc). Recognized and practiced doffing of PPE and how to dispose of the PPE
7.6 Advocates for safe, competent, compassionate and ethical care for clients.	SI				Advocated for compassionate care for pt who was concerned about having her baby taken from her due to past CAS involvement. Tried to be sensitive to her concerns, spoke with my preceptor and social work to ensure we advocated for this patient.
7.7 Supports and empowers clients in making informed decisions about their health care, and respects their decisions.	SI				Provided health teaching, pts chose whether they wanted to exclusively breast feed or do both breast and bottle.
7.8 Supports healthy public policy and principles of social justice.				SI	Ensured that pts and their support persons were following COVID19 precautions during the hospital stay and provided any updates when made available. Did not have opportunity to support principles of social justice.
7.9 Assesses that clients have an understanding and ability to be an active participant in their own care, and facilitates appropriate strategies for clients who are unable to be fully involved.	SI				Learned techniques that would help facilitate, educate and help new post partum patients feel confident in the care they were providing as new parents. Encouraged both parents to participate in skin to skin contact.

7.10 Advocates for client's rights and ensures informed consent, guided by legislation, practice standards, and ethics.	SI				Always requested and gained consent to perform assessments on the post partum patients and their newborns. When I spoke with new mother regarding her concerns about previous situation with CAS, I advocated for Social Worker to meet with the patient and discuss the situation regarding CAS and what that would mean with the birth of her new infant.
7.11 Uses knowledge of population health, determinants of health, primary health care, and health promotion to achieve health equity.				SI	
7.12 Assesses client's understanding of informed consent, and implements actions when client is unable to provide informed consent.				SI	
7.13 Demonstrates knowledge of a substitute decision maker's role in providing informed consent and decision-making for client care.				SI	
7.14 Uses knowledge of health disparities and inequities to optimize health outcomes for all clients.				SI	Reviewed "Inequities within Indigenous Maternal Health: A Prevailing Issue" DOI:10.20467/1091-5710.22.2.14

Advocate Role applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginner to novice advocates who, with the support of their preceptor, support clients to voice their needs to achieve optimal health outcomes. With support of the preceptor, NURS 4700 and NURS 4701 students also support clients who cannot advocate for themselves. i.e. obtaining consent prior to interventions, advocates for required PPE, clarifies any unclear orders, advocates for patient safety such as appropriate staffing when transferring.

Student Comments Midterm: Throughout the pediatric simulations I was able to effectively identify safe and unsafe medication doses, and other safety concerns. I learned the importance of using my knowledge and experience to advocate for minors who are not able to advocate for themselves. I also learned the importance of being and advocate for babies who are not able to verbally communicate how they are feeling. I learned techniques which help relieve the stress and anxiety associated with the hospital experience.

Preceptor Comments Midterm: Student was able to advocate for safe, competent, compassionate, and ethical care for her client by understanding that she needed to report the incident of giving the client too much morphine. In addition, Student continued to advocate to the MD by recommending plan of care that is appropriate to her client's need when completing her SBAR communication (i.e. IV gravol). Student was also able to support and empower clients in making informed decisions about their health care and respects their decisions. This was evident when she would utilize other pain assessment tool to assess her client's level of pain. Student continued to recognize and act in situations where client safety is actually or potentially compromised.

Clinical Instructor (Faculty) Comments Midterm: *Student is beginning to recognize the importance of advocating for safe, compassionate and ethical care as she engages with post partum patients.*

Student Comments Final: I tried to be mindful of the post partum patient and the personal circumstances especially for the patient who had prior CAS involvement. I tried to be compassionate and advocated for her through voicing her concerns to my co-assigned nurse and demonstrated respect, and concern for this patient.

Preceptor Comments Final: Student has been able to assess patient needs adequately and adapt her care accordingly, and recognize that certain patients required more attention, assistance, emotional support, compassionate care and health teaching. Student provided her patients with the autonomy to safely make decisions regarding their care by providing them with non-biased information. Student was able to advocate for her patients' needs to achieve optimal health outcomes. She always ensured that she obtained consent prior to interventions and clarified with her co-assigned nurse or with myself when encountering any unclear orders.

Clinical Instructor (Faculty) Comments Final: *Student appears to have gained knowledge and confidence in the role of patient advocate and has assisted her patients to feel that she is supportive and cares about them in all aspects of their lives.*

8. Educator (CNO definition)

Registered nurses are educators who identify learning needs with clients and apply a broad range of educational strategies towards achieving optimal health outcomes.

Educator ETP Competencies: 8.1-8.5	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date /	Comments
------------------------------------	-----	----------------------------	---------------------------	---	--------	----------

8.1 Develops an education plan with the client and team to address learning needs.	SI				Reviewed discharge health teaching with post partum patients and answered questions and provided additional information when needed.
8.2 Applies strategies to optimize client health literacy.	SI				Highlighted various resources in discharge package that post partum pt could read, review and ask questions if clarification was required.
8.3 Selects, develops, and uses relevant teaching and learning theories and strategies to address diverse clients and contexts, including lifespan, family, and cultural considerations.	SI				Throughout each clinical day, there were many different opportunities to provide healthcare teaching regarding breast feeding, baby development, while recognizing cultural backgrounds and beliefs.
8.4 Evaluates effectiveness of health teaching and revises education plan if necessary.	SI				After health teaching was completed with post-partum patients, I would confirm understanding with the clients and also continue to assess their learning throughout the day.
8.5 Assists clients to access, review, and evaluate information they retrieve using information and communication technologies (ICTs).				SI	

Educator Role applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginner to novice educators who, with support of their preceptors identify learning needs with clients and apply a broad range of educational strategies towards achieving optimal health outcomes. i.e., assesses patient's learning needs, develops a teaching plan, evaluates patient's understanding, provides links to health teaching resources, describing methods to authenticate information.

Student Comments Midterm: As a nursing student I have become aware that there is much to learn during every clinical experience in order to become more confident in becoming competent as an educator. I play a role in relaying my knowledge to patients and caregivers in order to promote and optimize health outcomes especially as it relates to post-partum patients (sharing information regarding breast feeding, expected infant output, what to observe regarding jaundice, post circumcision signs/symptoms of infection).

Preceptor Comments Midterm: Student has begun to demonstrate the role of an educator by acknowledging the importance of asking her post partum about their healthcare needs and concerns and as well as being able to assess patient's knowledge. For example, while administering medications to her client, she ensured that her client was aware of the adverse effects of the medication and to monitor and report. I encouraged Student to develop education plans with the clients such as plan for discharge i.e., post caesarean delivery, signs/symptoms of infection, healing process, anyone to assist when she returns home.

Clinical Instructor (Faculty) Comments Midterm: Student is engaged in learning the role of educator as she provides care. She has observed her

preceptor carefully and has grasped all of the important needs post partum patients may require regarding health teaching about self and infants.

Student Comments Final: Throughout this experience I see how important and valuable health teaching is within Maternity/child unit, especially for first-time mothers, or mothers who have large age gaps between children. I also see how much these parents value information that we are providing to them. I have also recognized the need to educate/support the learners' needs at a level that is helpful and does not add to any confusion regarding their care.

Preceptor Comments Final: Student has provided health teaching to all her patients in regard to post-partum care and newborn care. When unsure of how to answer specific questions, Student always made sure to consult with me or other nurses for clarification. We worked together to address specific topics that her patients needed reinforcement to understand. Student was able to observe and participate in discharge teaching after observing my role. Student was able to successfully implement different educational strategies when providing health teaching as she engaged with her patients, i.e., verbal teaching, highlighting specific resources and written information provided in their packages. Student also made sure to use terminology that the patients would understand by avoiding medical terminology.

Clinical Instructor (Faculty) Comments Final: Student has demonstrated her beginner to novice role as an Educator on the post partum unit. She has been able to carefully observe her preceptor and role model what she has seen, providing caring, supportive information to her patients.

9. Scholar (CNO definition)

Registered nurses are scholars who demonstrate a lifelong commitment to excellence in practice through critical inquiry, continuous learning, application of evidence to practice, and support of research activities.

Scholar ETP Competencies: 9.1-9.8	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	Date / Comments
9.1 Uses best evidence to make informed decisions.	SI				Throughout each clinical day, when making informed decisions about patient care, I used best evidence such as RNAO BPGs related to maternal/child care; I have used information that I have learned in my theory classes; and I have observed my preceptor very carefully as she provided care that was based on best evidence when making decisions regarding patient care.
9.2 Translates knowledge from relevant sources into professional practice.	SI				The knowledge that I had used while providing maternal/child care was based on current theoretical knowledge from relevant sources: RNAO BPGs, current nursing articles related to maternal/child care and have translated this knowledge into my professional practice.

9.3 Engages in self-reflection to interact from a place of cultural humility and create culturally safe environments where clients perceive respect for their unique health care practices, preferences, and decisions.	SI				Was able to demonstrate self-reflection through the my written RCAs and I have come to understand the importance and respect that I demonstrated cultural humility by helping prepare a space for a support person to pray in my patient's room and being quiet/or excused myself during this time of prayer.
9.4 Engages in activities to strengthen competence in nursing informatics.				SI	
9.5 Identifies and analyzes emerging evidence and technologies that may change, enhance, or support health care.	SI				Initially I learned Meditech documentation and the system was changed to EPIC. Familiarized myself with EPIC a new documentation technology that supports health care.
9.6 Uses knowledge about current and emerging community and global health care issues and trends to optimize client health outcomes.	SI				Used knowledge of the current global pandemic to ensure my own health and safety and that of my pts. - Made sure to wear appropriate PPE and provided current information updates to patients and families
9.7 Supports research activities and develops own research skills.				SI	
9.8 Engages in practices that contribute to lifelong learning.	SI				Throughout my clinical experience, I have continuously researched health conditions, lab tests and any health conditions (genetic testing) that were relevant to my patient's care.

Scholar Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginning to novice scholars who demonstrate a lifelong commitment to excellence in practice through critical inquiry, continuous learning, application of evidence to practice, and support of research activities, particularly as consumers of research. i.e. practice based on evidence informed protocols, develops an individualized learning plan, seeks out learning opportunities, critical thinking evident in written submissions, engages in research opportunities if available, uses research to support submissions.

Student Comments Midterm: The maternal/child clinical experience provided me with ample opportunity to draw on theoretical knowledge, as well as empirical knowledge which guided my nursing care. I used RNAO best practice guidelines, current nursing literature and also drew upon knowledge gained throughout my nursing education.

Preceptor Comments Midterm: Student is beginning to demonstrate the role of a novice scholar by using best evidence to make informed decisions and translating knowledge from relevant sources into professional practice. This was evident by demonstrating knowledge on ensuring sterility is maintained when completing wound care on a post operative C-section patient and post circumcision infant. She gained this knowledge by reviewing her preparatory materials and resources along with hospital policies. It is important that Student continues to refine her ability to critically think and prioritize her client's health challenges by linking the nursing assessments and interventions and questioning anything that she is unsure about.

Clinical Instructor (Faculty) Comments Midterm: *Student has submitted well documented and researched RCAs demonstrating her commitment to application of evidence in practice and using critical inquiry as she proceeds through this clinical experience.*

Student Comments Final: I plan to continue to gain the knowledge and experience in all of my clinical rotations in order to provide the best care possible for my patients. This maternal/child clinical experience has helped me to understand the value of applying evidence to practice and having a preceptor open to my questions has helped me to grow in critical inquiry, clinical judgment and decision making.

Preceptor Comments Final: Student has been able to adapt her care and plan accordingly to each patient's individual needs, altering her teaching style, and reinforcing correct techniques, all while maintaining patient autonomy. Student has demonstrated her ability to use critical thinking and intervene appropriately for an abnormal finding while determining the potential rationale for the finding. She researches and looks up policies when unsure of something, also clarifies with me if she is unclear about her understanding of the information she is reading. Student always sought opportunities to gain knowledge and experience in this clinical setting which has expanded her knowledge and skills. Excellent work!

Clinical Instructor (Faculty) Comments Final: *Student's RCAs are evidence informed, scholarly and demonstrate critical thinking skills. She researches and looks up policies when unsure of something, also clarifies anything that she is unsure about with her co-assigned nurse or myself. She demonstrated self-awareness through the completion of the learning plan. It was evident that Student has grown in her critical thinking, recognition of the value of using evidence to inform her nursing care.*

*for each competency achieved the student and clinical instructor initial the box

**Direct Clinical Experience (DCE); Face to face manikin-based simulation in the lab (FF Sim); Virtual online, computer-based, remote simulation (V Sim)

Summary of Midterm Comments:

Strengths demonstrated Midterm:

Student Comments: I felt that I was an effective communicator and collaborator during my clinical experience. I worked well with other members of my team, and I was able to communicate assessment findings. My nursing skills are becoming more solidified as I am able to complete a head-to-toe and focused assessments thoroughly and am able to recognize abnormal signs and know what and when to report my findings. I have also demonstrated a willingness to assist my colleagues and am comfortable asking for assistance when I am unsure of what I should be doing.

Preceptor Comments Midterm: Student has continued to provide good client centred care through understanding the importance of collaborating with client/family and health care team. She has successfully communicated with clients/family to assess client health goals and needs and has advocated for them to the health care team. Student demonstrated professionalism in her interactions with clients and colleagues. She protects client confidentiality at all times.

Clinical Instructor (Faculty) Comments Midterm: *Student is progressing well in her maternal/child placement at midterm, continue with the very good nursing care and continue to meet ETP and Roles as you move into the second half of your clinical hours.*

Areas for development Midterm:

Student Comments Midterm: Through reflection I am aware of my need to continue to practice clinical skills. I need to continue to practice medication calculations to ensure accuracy as well as master focused assessments. I also need to continue to independently research my patient's health conditions as I have come to realize the value of reading and learning about current nursing information as it pertains to maternal/child care.

Preceptor Comments Midterm: Through continued practice opportunities Student will have the opportunity to refine her nursing skills such as developing a thorough and succinct handover ISBAR report, head to toe and focused assessment skills, question clinical orders, enhance critical thinking skills and independent clinical judgement (i.e., be able to recognize other possible issues your client might present). Overall, it is important that Student continue to refine planning her client's care effectively by identifying her nursing priority base on the overall health condition and status of her client along with understanding and incorporating lab values.

Clinical Instructor (Faculty) Comments Midterm: *Student will take her preceptor's evaluation and will continue to grow in confidence, knowledge and skills as she proceeds to the end of this clinical rotation.*

Summary of Final Evaluation Comments:

Strengths demonstrated Final:

Student Comments Final: I felt that I grew into the role of a professional. I was respectful toward my clinical instructor, peers, patients, co-assigned nurses, and family members and was always accountable for my actions. I communicated well with my co-assigned nurse, clinical instructor and also the patients for whom I provided care. I was beginning to grow in the role of advocate, and coordinator mainly through observation and following my preceptor's demonstration of both roles. I believe I did my very best to attain the CNO roles and achieve the ETP competencies through opportunities that were presented to me as I provided effective and safe patient care.

Preceptor Comments Final: Student has progressed extremely well through clinical; she has demonstrated growth in critical thinking, communication, and collaboration skills within the healthcare team. She competently provided care for dyads by completing head to toe assessments, focused assessments, and carrying out all interventions required for the post partum patients. Student is a very compassionate and dedicated nursing student who places her patients' needs at the top of her priorities, it shows with how comfortable her patients are with her care. Student is organized in her assessments which are competent and thorough. Student always brings a positive attitude which is a positive influence on her nursing colleagues and patients. Excellent work!

Clinical Instructor (Faculty) Comments Final: *Student has met the expectations for this clinical rotation as noted through her preceptor's comments and Student's own descriptions of the care she has come to understand and provide to her patients. Well done.*

Areas for Development Final Evaluation Comments:

Student Comments Final: I need to continue to improve my time management skills. I believe this will improve as I gain more confidence and experience. I also need to grow in confidence in communicating with other health care professionals in the clinical setting and trust that when I have something to communicate it is important and must do so without hesitation.

Preceptor Comments Final: As you continue to gain more clinical experience, the confidence will follow which will help you advocate for your learning and your patients' needs better. The repetition when practicing skills on a regular basis will help increase competence and confidence. Time management for tasks that are due such as charting, assessments and medications is an area of development for Student.

Clinical Instructor (Faculty) Comments Final: *Student has identified areas where she will continue to develop her nursing practice. She has been able to understand that it takes time to grow in confidence and competence and will continue to use the resources needed to become a novice nurse.*

Identify three goals for next practicum - NURS 4701:

1. Continue to develop therapeutic relationships
2. Continue to gain confidence in collaborator and communicator roles.
3. Continue to build upon my critical thinking, problem solving and clinical judgment

Midterm Status**Pass:** _____**Fail:** _____**Signature:** _____**Signature Clinical Instructor:** _____**Final Status****Total Hours:** _____**Pass:** _____**Fail:** _____**Signature:** _____**Signature Clinical Instructor:** _____

*Your typed signature constitutes a written signature

References for entry to practice competencies.

Maestro, L., & Chadwick, D. J. (2017). Canadian health libraries' responses to the *Truth and Reconciliation Commission's* calls to action: A literature review and content analysis. *Journal of the Canadian Health Libraries Association*, 38(3), 92–101. <https://doi.org/10.29173/jchla/jabsc.v38i3.29300>

Waschuk, K. (2018). Inequities within Indigenous maternal health: A prevailing issue. *International Journal for Human Caring*, 22(2), 14–20. <https://doi.org/10.20467/1091-5710.22.2.14>

**Review of Clinical
Performance Practicum
Evaluation Template NURS
4700 & NURS 4701**

Student: _____ **Clinical Instructor (Faculty):** _____ **Preceptor:** _____

Date: _____ **Placement Setting:** _____ **Term:** _____

The Nursing Program Practicum Evaluation Template is designed in accordance with the College of Nurses of Ontario (CNO, 2019) Competency Framework. Within this framework, there are a total of 101 competencies, organized thematically under nine roles which are seen as intersecting within the full scope of practice of a Registered Nurse. As with Registered Nurses, no student is expected to meet all of the competencies. Rather, the expectation is that a nursing student (as with a RN) will meet the competencies as the opportunity arises and aligned with their professional development and levelled across the nursing program. The roles outlined in the CNO competency framework include:

1. **Clinician:**

Registered nurses are clinicians who provide safe, **competent**, ethical, **compassionate**, and **evidence informed** care across the lifespan in response to **client** needs. Registered nurses integrate knowledge, skills, judgment and professional values from nursing and other diverse sources into their practice.

2. **Professional:**

Registered nurses are professionals who are committed to the health and well-being of clients. Registered nurses uphold the profession's practice standards and ethics and are accountable to the public and the profession.

3. **Communicator**

Registered nurses are communicators who use a variety of strategies and relevant technologies to create and maintain professional relationships, share information, and foster therapeutic environments.

4. **Collaborator**

Registered nurses are collaborators who play an integral role in the health care team partnership.

5. **Coordinator**

Registered nurses coordinate point-of-care health service delivery with clients, the health care team, and other sectors to ensure continuous, safe care.

6. **Leader**

Registered nurses are leaders who influence and inspire others to achieve optimal health outcomes for all.

7. **Advocate**

Registered nurses are advocates who support clients to voice their needs to achieve optimal health outcomes. Registered nurses also support clients who cannot advocate for themselves.

8. **Educator**

Registered nurses are educators who identify learning needs with clients and apply a broad range of educational strategies towards achieving optimal health outcomes.

9. **Scholar**

Registered nurses are scholars who demonstrate a lifelong commitment to excellence in practice through critical inquiry, continuous learning, application of evidence to practice, and support of research activities.



Learning Objectives for NURS4700 Synthesis Professional Practice (First term in 4th year)

Successful completion of the theoretical and practicum components of this course will enable students to:

1. Integrate evidenced based knowledge, ways of knowing, and the patient's lived experience while providing holistic care to individuals/families/groups/communities.
2. Integrate educational experiences, ethical framework and program philosophy in a dynamic professional practice health care and societal environment.
3. Critically analyze complex reality based situational/simulation/scenarios that demonstrate evidenced based nursing practice at a year four level.
4. Collaboratively plan care and holistic health activities required by individuals, families and communities with specific health challenges according the year four level.
5. Demonstrate effective on-going professional development through collaborative interactions within a multidisciplinary team setting according to the CNO *Standards of Practice*.
6. Demonstrate knowledge, skill and judgment in providing safe, competent, and ethical care for clients/families that meets the current CNO *Standards of Practice* as outlined by the College of Nurses of Ontario.
7. Demonstrate the multiple roles of a professional nurse engaged in an evidenced based, competent, safe practice as they relate to the CNO Entry to Practice roles and competencies.

Learning Objectives for NURS4701 Professional Nursing Integrated Practicum (Second term in 4th year)

Successful completion of the theoretical and practicum components of this course will enable students to:

1. Establish and maintain professional caring relationships in dyads, families, groups, and/or communities.
2. Maintain and promote health through the safe application of nursing knowledge and care with clients from an ethic of caring.
3. Use ways of knowing to deepen the understanding of the lived experience of individuals, families, groups, and/or communities.
4. Utilize a decision-making model to perform nursing interventions (actions, treatments, techniques) to promote health, prevent disease and injury, maintain and restore health, promote habilitation, and/or palliation.

Entry to Practice Competencies

1. Clinician (CNO definition) Registered nurses are clinicians who provide safe, competent , ethical, compassionate , and evidence-informed care across the lifespan in response to client needs. Registered nurses integrate knowledge, skills, judgment, and professional values from nursing and other diverse sources into their practice.					
Clinician ETP Competencies: 1.1-1.27	Met DCE (initial)	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	DATE / Comments
1.1 Provides safe, ethical, competent, compassionate, client-centred and evidence informed nursing care across the lifespan in response to client needs.					
1.2 Conducts a holistic nursing assessment to collect comprehensive information on client health status.					
1.3 Uses principles of trauma-informed care which places priority on trauma survivors' safety , choice, and control.					
1.4 Analyses and interprets data obtained in client assessment to inform ongoing decision making about client health status.					
1.5 Develops plans of care using critical inquiry to support professional judgment and reasoned decision-making.					
1.6 Evaluates effectiveness of plan of care and modifies accordingly.					

1.7 Anticipates actual and potential health risks and possible unintended outcomes.					
1.8 Recognizes and responds immediately when client safety is affected.					
1.9 Recognizes and responds immediately when client's condition is deteriorating.					
1.10 Prepares clients for and performs procedures, treatments, and follow up care.					

1.11 Applies knowledge of pharmacology and principles of safe medication practice.					
1.12 Implements evidence-informed practices of pain prevention, manages client's pain, and provides comfort through pharmacological and non-pharmacological interventions.					
1.13 Implements therapeutic nursing interventions that contribute to the care and needs of the client.					
1.14 Provides nursing care to meet palliative and end-of-life care needs.					
1.15 Incorporates knowledge about ethical, legal, and regulatory implications of medical assistance in dying (MAiD) when providing nursing care.					
1.16 Incorporates principles of harm reduction with respect to substance use and misuse into plans of care.					
1.17 Incorporates knowledge of epidemiological principles into plans of care.					
1.18 Provides recovery-oriented nursing care in partnership with clients who experience a mental health condition and/or addiction.					

1.19 Incorporates mental health promotion when providing nursing care.					
1.20 Incorporates suicide prevention approaches when providing nursing care.					
1.21 Incorporates knowledge from the health sciences, including anatomy, physiology, pathophysiology, psychopathology, pharmacology, microbiology, epidemiology, genetics, immunology, and nutrition.					
1.22 Incorporates knowledge from nursing science, social sciences, humanities, and health-related research into plans of care.					
1.23 Uses knowledge of the impact of evidence informed registered nursing practice on client health outcomes.					
1.24 Uses effective strategies to prevent, de-escalate, and manage disruptive, aggressive, or violent behaviour.					
1.25 Uses strategies to promote wellness, to prevent illness, and to minimize disease and injury in clients, self, and others.					
1.26 Adapts practice in response to the spiritual beliefs and cultural practices of clients.					
1.27 Implements evidence-informed practices for infection prevention and control.					

NURS 4700 and NURS 4701 nursing students are beginner to novice clinicians who provide safe, competent, ethical, compassionate, and evidence informed care across the lifespan in response to client needs and with support and guidance of their preceptor. Nursing students in NURS 4700 integrate knowledge, skills, judgment and professional values from nursing and other diverse sources into their CARING practice. THE GOAL IS NOT TO BE FULLY INDEPENDENT WITH A FULL PATIENT LOAD, BUT RATHER TO PROVIDE HOLISTIC CARE WITH EMERGING INDEPENDENCE TO A MODIFIED PATIENT ASSIGNMENT.

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical (Faculty) Instructor Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical (Faculty) Instructor Comments Final:

2. Professional (CNO definition)

Registered nurses are professionals who are committed to the health and well-being of clients. Registered nurses uphold the profession's practice standards and ethics and are accountable to the public and the profession.

Professional ETP Competencies: 2.1-2.14	Met DCE	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	DATE /Comments
2.1 Demonstrates accountability , accepts responsibility, and seeks assistance as necessary for decisions and actions within the legislated scope of practice .					

2.2 Demonstrates a professional presence , and confidence, honesty, integrity, and respect in all interactions.					
2.3 Exercises professional judgment when using agency policies and procedures, or when practising in their absence.					
2.4 Maintains client privacy, confidentiality, and security by complying with legislation, practice standards, ethics, and organizational policies.					
2.5 Identifies the influence of personal values, beliefs, and positional power on clients and the health care team and acts to reduce bias and influences.					
2.6 Establishes and maintains professional boundaries with clients and the health care team.					
2.7 Identifies and addresses ethical (moral) issues using ethical reasoning, seeking support when necessary.					
2.8 Demonstrates professional judgment to ensure social media and information and communication technologies (ICTs) are used in a way that maintains public trust in the profession.					
2.9 Adheres to the self-regulatory requirements of jurisdictional legislation to protect the public by:					
a) assessing own practice and individual competence to identify learning needs.					
b) developing a learning plan using a variety of sources.					
c) seeking and using new knowledge that may enhance, support, or influence competence in practice.					
d) implementing and evaluating the effectiveness of the learning plan and developing future learning plans to maintain and enhance competence as a registered nurse.					

2.10 Demonstrates fitness to practice .					
2.11 Adheres to the duty to report.					

2.12 Distinguishes between the mandates of regulatory bodies, professional associations, and unions.					
2.13 Recognizes, acts on, and reports, harmful incidences, near misses, and no harm incidences .					
2.14 Recognizes, acts on, and reports actual and potential workplace and occupational safety risks.					

Professional ETP Competencies: 2.1-2.14

Nursing students in NURS 4700 and NURS 4701 are emerging professionals who are committed to the health and well-being of clients, uphold the profession's practice standards and ethics, and are accountable to the public and the profession.

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical (Faculty) Instructor Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical (Faculty) Instructor Comments Final:

3. Communicator (CNO definition)

Registered nurses are communicators who use a variety of strategies and relevant technologies to create and maintain professional relationships, share information, and foster therapeutic environments.

Communicator ETP Competencies: 3.1-3.8	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no	DATE / Comments
---	------------	-------------------------------------	------------------------------------	-------------------------------------	------------------------

				opportunity	
3.1 Introduces self to clients and health care team members by first and last name, and professional designation (protected title).					
3.2 Engages in active listening to understand and respond to the client's experience, preferences, and health goals.					
3.3 Uses evidence-informed communication skills to build trusting, compassionate, and therapeutic relationships with clients.					

3.4 Uses conflict resolution strategies to promote healthy relationships and optimal client outcomes.					
3.5 Incorporates the process of relational practice to adapt communication skills.					
3.6 Uses information and communication technologies (ICTs) to support communication.					
3.7 Communicates effectively in complex and rapidly changing situations.					
3.8 Documents and reports clearly, concisely, accurately, and in a timely manner.					

Communicator Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are novice communicators who use a variety of strategies and relevant technologies to create and maintain professional relationships, share information, and foster therapeutic environments. i.e. develops and terminates therapeutic relationships, collaborates with patients to establish health goals, demonstrates effective conflict resolutions strategies, demonstrates professional communication with the patient and members of the health care team, is adept with technology used in healthcare (medication administration systems, computer software programs, uses evidence-informed communication strategies (ISBAR), and documents concisely and accurately

Student Comments Midterm:

Preceptor's Comments Midterm:

Clinical (Faculty) Instructor Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical (Faculty) Instructor Comments Final:

4. Collaborator (CNO definition)

Registered nurses are collaborators who play an integral role in the health care team partnership.

Collaborator ETP Competencies: 4.1-4.5	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	DATE / Comments
4.1 Demonstrates collaborative professional relationships.					
4.2 Initiates collaboration to support care planning and safe, continuous transitions from one health care facility to another, or to residential, community or home and self-care.					

4.3 Determines their own professional and interprofessional role within the team by considering the roles, responsibilities, and the scope of practice of others.					
4.4 Applies knowledge about the scopes of practice of each regulated nursing designation to strengthen intraprofessional collaboration that enhances contributions to client health and well-being.					
4.5 Contributes to health care team functioning by applying group communication theory, principles, and group process skills.					

Collaborator Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are collaborators who are beginning to play an integral role in the health care team partnership. i.e. communicates in a professional manner with members of the team, with the guidance of the preceptor who helps to encourage delegation to regulated and un-regulated team members according to their scope of practice, collaborates on care planning.

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical (Faculty) Instructor Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical (Faculty) Instructor Comments Final:

5. Coordinator (CNO definition)

Registered nurses coordinate point-of-care health service delivery with clients, the health care team, and other sectors to ensure continuous, safe care.

Coordinator ETP Competencies: 5.1-5.9	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	DATE / Comments
5.1 Consults with clients and health care team members to make ongoing adjustments required by changes in the availability of services or client health status.					
5.2 Monitors client care to help ensure needed services happen at the right time and in the correct sequence.					
5.3 Organizes own workload, assigns nursing care, sets priorities, and demonstrates effective time management skills.					
5.4 Demonstrates knowledge of the delegation process.					
5.5 Participates in decision-making to manage client transfers within health care facilities.					
5.6 Supports clients to navigate health care systems and other service sectors to optimize health and well-being.					
5.7 Prepares clients for transitions in care.					
5.8 Prepares clients for discharge.					
5.9 Participates in emergency preparedness and disaster management.					

Coordinator Role applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students, with the support of their preceptors, show developing skills in the coordination of point-of-care health service delivery with clients, the health care team, and other sectors to ensure continuous, safe care. i.e., prepares patient and family for transitions, participates in discharge teaching with supervision, consultation with clients and the health care team for additional services, monitors client for effectiveness of consultations and prioritizes assignment.

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical Instructor (Faculty) Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical Instructor (Faculty) Comments Final:

6. Leader (CNO definition)

Registered nurses are leaders who influence and inspire others to achieve optimal health outcomes for all.

Leader ETP Competencies: 6.1-6.11	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	DATE / Comments
6.1 Acquires knowledge of the Calls to Action of the Truth and Reconciliation Commission of Canada.					
6.2 Integrates continuous quality improvement principles and activities into nursing practice.					
6.3 Participates in innovative client-centred care models.					
6.4 Participates in creating and maintaining a healthy, respectful, and psychologically safe workplace.					
6.5 Recognizes the impact of organizational culture and acts to enhance the quality of a professional and safe practice environment.					
6.6 Demonstrates self-awareness through reflective practice and solicitation of feedback.					
6.7 Takes action to support culturally safe practice environments.					
6.8 Uses and allocates resources wisely.					

6.9 Provides constructive feedback to promote professional growth of other members of the health care team.					
6.10 Demonstrates knowledge of the health care system and its impact on client care and professional practice.					
6.11 Adapts practice to meet client care needs within a continually changing health care system.					

Leader Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginning/emerging leaders who influence and inspire others to achieve optimal health outcomes for all. i.e. maintains a culturally safe work environment (maintains confidentiality, is supportive to colleagues), continually engages in reflective practice for quality improvement, seeks and provides constructive feedback, adapts practice within continually changing system i.e., Covid19 protection (ensuring the correct PPE for family members).

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical (Faculty) Instructor Comments Midterm:

Student Comments Final:

Clinical Instructor Comments Final:

Clinical (Faculty) Instructor Comments Final:

7. Advocate (CNO definition)

Registered nurses are advocates who support clients to voice their needs to achieve optimal health outcomes. Registered nurses also support clients who cannot advocate for themselves.

Advocate ETP Competencies: 7.1-7.14	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no	DATE / Comments
-------------------------------------	-----	----------------------------	---------------------------	----------------------------	-----------------

				opportunity	
7.1 Recognizes and takes action in situations where client safety is actually or potentially compromised.					
7.2 Resolves questions about unclear orders, decisions, actions, or treatment.					
7.3 Advocates for the use of Indigenous health knowledge and healing practices in collaboration with Indigenous healers and Elders consistent with the Calls to Action of the Truth and Reconciliation Commission of Canada.					
7.4 Advocates for health equity for all, particularly for vulnerable and/or diverse clients and populations.					
7.5 Supports environmentally responsible practice.					
7.6 Advocates for safe, competent, compassionate and ethical care for clients.					
7.7 Supports and empowers clients in making informed decisions about their health care, and respects their decisions.					
7.8 Supports healthy public policy and principles of social justice.					
7.9 Assesses that clients have an understanding and ability to be an active participant in their own care, and facilitates appropriate strategies for clients who are unable to be fully involved.					
7.10 Advocates for client's rights and ensures informed consent, guided by legislation, practice standards, and ethics.					

7.11 Uses knowledge of population health, determinants of health, primary health care, and health promotion to achieve health equity.					
7.12 Assesses client's understanding of informed consent, and implements actions when client is unable to provide informed consent.					
7.13 Demonstrates knowledge of a substitute decision maker's role in providing informed consent and decision-making for client care.					
7.14 Uses knowledge of health disparities and inequities to optimize health outcomes for all clients.					

Advocate Role applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginner to novice advocates who, with the support of their preceptor, support clients to voice their needs to achieve optimal health outcomes. With support of the preceptor, NURS 4700 and NURS 4701 students also support clients who cannot advocate for themselves. i.e. obtaining consent prior to interventions, advocates for required PPE, clarifies any unclear orders, advocates for patient safety such as appropriate staffing when transferring.

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical Instructor (Faculty) Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical Instructor (Faculty) Comments Final:

8. Educator (CNO definition)

Registered nurses are educators who identify learning needs with clients and apply a broad range of educational strategies towards achieving optimal health outcomes.

Educator ETP Competencies: 8.1-8.5	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	DATE /	Comments
8.1 Develops an education plan with the client and						

team to address learning needs.					
8.2 Applies strategies to optimize client health literacy.					
8.3 Selects, develops, and uses relevant teaching and learning theories and strategies to address diverse clients and contexts, including lifespan, family, and cultural considerations.					
8.4 Evaluates effectiveness of health teaching and revises education plan if necessary.					
8.5 Assists clients to access, review, and evaluate information they retrieve using information and communication technologies (ICTs).					

Educator Role applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginner to novice educators who, with support of their preceptors identify learning needs with clients and apply a broad range of educational strategies towards achieving optimal health outcomes. i.e., assesses patient's learning needs, develops a teaching plan, evaluates patient's understanding, and provides links to health teaching resources, describing methods to authenticate information.

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical Instructor (Faculty) Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical Instructor (Faculty) Comments Final:

9. Scholar (CNO definition)

Registered nurses are scholars who demonstrate a lifelong commitment to excellence in practice through critical inquiry, continuous learning, application of evidence to practice, and support of research activities.

Scholar ETP Competencies: 9.1-9.8	Met	Met FF Sim (initial)	Met V Sim (initial)	Not applicable or no opportunity	DATE / Comments
--	------------	-------------------------------------	------------------------------------	---	------------------------

9.1 Uses best evidence to make informed decisions.					
9.2 Translates knowledge from relevant sources into professional practice.					
9.3 Engages in self-reflection to interact from a place of cultural humility and create culturally safe environments where clients perceive respect for their unique health care practices, preferences, and decisions.					
9.4 Engages in activities to strengthen competence in nursing informatics.					
9.5 Identifies and analyzes emerging evidence and technologies that may change, enhance, or support health care.					
9.6 Uses knowledge about current and emerging community and global health care issues and trends to optimize client health outcomes.					
9.7 Supports research activities and develops own research skills.					
9.8 Engages in practices that contribute to lifelong learning.					

Scholar Role Applied to NURS 4700 and NURS 4701

NURS 4700 and NURS 4701 students are beginning to novice scholars who demonstrate a lifelong commitment to excellence in practice through critical inquiry, continuous learning, application of evidence to practice, and support of research activities, particularly as consumers of research. i.e. practice based on evidence informed protocols, develops an individualized learning plan, seeks out learning opportunities, critical thinking evident in written submissions, engages in research opportunities if available, uses research to support submissions.

Student Comments Midterm:

Preceptor Comments Midterm:

Clinical Instructor (Faculty) Comments Midterm:

Student Comments Final:

Preceptor Comments Final:

Clinical Instructor (Faculty) Comments Final:

*for each competency achieved the student and clinical instructor initial the box

**Direct Clinical Experience (DCE); Face to face manikin based simulation in the lab (FF Sim); Virtual online, computer-based, remote simulation (V Sim)

Summary of Midterm Comments:
Strengths demonstrated Midterm: Student Comments: Preceptor Comments Midterm: Clinical Instructor (Faculty) Comments Midterm:
Areas for development Midterm: Student Comments Midterm: Preceptor Comments Midterm: Clinical Instructor (Faculty) Comments Midterm:
Summary of Final Evaluation Comments:
Strengths demonstrated Final: Student Comments Final: Preceptor Comments Final: Clinical Instructor (Faculty) Comments Final:
Areas for Development Final Evaluation Comments:
Student Comments Final: Preceptor Comments Final: Clinical Instructor (Faculty) Comments Final:

Identify three goals for next practicum NURS 4701:

1.
2.

3.

Midterm Status

Pass: _____

Fail: _____

Student Signature: _____

Signature Clinical Instructor (Faculty): _____

Final Status

Total Hours: _____

Pass: _____

Fail: _____

Student Signature: _____

Signature Clinical Instructor (Faculty): _____

*Your typed signature constitutes a written signature

References for entry to practice competencies.

Maestro, L., & Chadwick, D. J. (2017). Canadian health libraries' responses to the *Truth and Reconciliation Commission's* calls to action: A literature review and content analysis. *Journal of the Canadian Health Libraries Association*, 38(3), 92–101.
<https://doi.org/10.29173/jchla/jabsc.v38i3.29300>

Waschuk, K. (2018). Inequities within Indigenous maternal health: A prevailing issue. *International Journal for Human Caring*, 22(2), 14–20. <https://doi.org/10.20467/1091-5710.22.2.14>