

**The University of British Columbia**

**School of Nursing**



**Master in Nursing  
Nurse Practitioner Program**

***Preceptorship Guide***



**THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING  
Nurse Practitioner Program**

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**THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING**  
**Nurse Practitioner Program**

## **Nurse Practitioner Preceptorship**

### **An Introduction**

*Dear Preceptor:*

*Thank you for serving as a Preceptor for a graduate Nurse Practitioner (NP) student from the University of British Columbia. The clinical experiences the student obtains in your office or clinic area are of critical importance to a successful learning experience in the program. The clinical setting is where synthesis of concepts and application of principles of primary care take place.*

*You are the key to successful learning experiences in the clinical setting. The NP student will work closely with you, learning from your advice and example. Through your supervision, the student will gradually develop skills and clinical judgment necessary to become a primary health care provider. You are also encouraged to expose your student to your busy schedule. Take your student with you as you attend noon conferences, rounds, and hospital committees.*

*During each term, a Site Visitor who is a Nurse Practitioner will make visits to the office or clinic to discuss the student's progress and observe the student seeing patients. The Preceptor and the Site Visitor will collaborate in providing clinical instruction and evaluation and assist the School of Nursing Faculty to assign the student's grade.*

*This Preceptors' Guide provides a brief description of the University of British Columbia's Nurse Practitioner Program. It sets out the responsibilities of the NP student, the Preceptor, and the School of Nursing. Students take a course in NP Nursing Management in Primary Care concurrent with each clinical experience. A list of topics covered in Primary Care Courses I, II, and III is included to assist you in determining which types of patients are most appropriate for management by the student at various stages in the program. Final clinical objectives for each Primary Care Course are also provided. You are asked to complete an on-line student evaluation at the end of the placement. Your email address is required for this process.*

*A Letter of Agreement which establishes that you are serving as a Preceptor, and is an agreement between your office or clinic and the University will be provided to you electronically. When this is received please read and return electronically as acknowledgment and agreement to the terms. Subsequently, you will receive a copy with all signatures for your file.*

*Welcome to the Nurse Practitioner Program at the University of British Columbia. We are pleased that you are joining with our faculty in the educational process of a primary health care provider, and we appreciate your contribution to our program.*

*Sincerely,*

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## THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING Nurse Practitioner Program

### Fact Sheet

#### The UBC Nurse Practitioner

**Definition:** The College of Registered Nurses of British Columbia (CRNBC) defines Nurse Practitioners as registered nurses who have achieved the competencies required for additional registration as a Nurse Practitioner with CRNBC. The competencies required of Nurse Practitioners are achieved through graduate nursing education and substantial nursing practice experience. Nurse Practitioners provide holistic health care services in the diagnosis and treatment of acute and chronic illnesses, including prescribing medications within a health promotion and illness/injury prevention framework.

The Nurse Practitioner student provides health care services to persons across the life span, including newborns, children, adolescents, adults, pregnant and postpartum women, and older adults. The Nurse Practitioner student brings advanced knowledge and experience with persons and families of all ages to the context of practice that is usually in, but not limited to, community clinics, health care centers, or other community settings. The Nurse Practitioner student develops and sustains partnerships with patients and families of all ages and may serve as the primary care provider.

**The Learning Experience:** The learning experience will be supervised by a Physician or a credentialed Nurse Practitioner preceptor who will be responsible for signing all orders such as diagnostic tests, medications, treatments, and referrals. Student experiences for primary care focus on common and predictable conditions, such as uncomplicated hypertension, urinary tract infections, otitis media, and those seen as fast-track patients in the Emergency Departments or Urgent Care Centres who require primary care.

**Examination:** Nurse Practitioner students will perform head to toe examinations or focus exams e.g. vaginal exams, ophthalmoscopic exams, otoscopic exams, and gross hearing tests as appropriate for the patient's or family's presenting concern.

**Tests and Treatments:** The Nurse Practitioner student orders and interprets diagnostic tests and screening procedures e.g. CBC, Lytes, X-ray, EKG, Urine, and C & S, based on advanced knowledge about the age, gender, and health status of patients across the life span. The Nurse Practitioner student also uses advanced knowledge about health promotion, illness/injury prevention, disease, disorders, and conditions across the life span to provide appropriate treatment, including health education, counselling about risk reduction, carrying out necessary procedures i.e., suturing, casting, and prescribing medications for infants and children, pregnant and lactating women, and older adults. The multiple effects of pharmacologic agents, indulging over-the-counter preparations, herbal, and other alternative health remedies, are taken into consideration.

For further information about UBC's Nurse Practitioner students and their learning experiences, please speak with the student in your agency or contact Gloria Joachim, UBC Nurse Practitioner Program Coordinator, UBC School of Nursing, 2211 Wesbrook Mall, Vancouver, BC, V6T 2B5, Tel: (604) 822-7463 or E-mail: [joachim@nursing.ubc.ca](mailto:joachim@nursing.ubc.ca). For further information about Nursing Directorate of the Ministry of Health website: [http://www.healthservices.gov.bc.ca/ndirect/rn\\_np\\_reg.html](http://www.healthservices.gov.bc.ca/ndirect/rn_np_reg.html) and the CRNBC website: <http://www.crnbc.bc.ca/registrants/index.htm>.



## THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING Nurse Practitioner Program

### Overview of the UBC School of Nursing Nurse Practitioner Program

The UBC School of Nursing offers a two-year full time Nurse Practitioner program leading to a Master of Nursing (MN). The program is built upon face-to-face learning and supervision. The first cohort of students was admitted in September 2003. Graduates of the UBC NP program will meet the competencies required for credentialing with the College of Registered Nurses of BC (CRNBC) Nurse Practitioners in BC (CRNBC),

Students are taught core master's program content and specific Nurse Practitioner content. They adapt the Nurse Practitioner competencies by applying advanced knowledge and assessment skills concerning: individual and family growth and development; cultural, family and community assessment; epidemiology of health and disease, high risk populations, health promotion, illness/injury prevention, common acute/episodic health conditions, diseases, disorders and chronic illnesses prevalent across the lifespan.

In the role of NP, students learn to order and interpret diagnostic tests and screening procedures based on advanced knowledge about the age, gender, socioeconomic class, culture, and health status of patients across the lifespan. They also learn to use advanced knowledge about diseases, disorders, and conditions and to provide appropriate treatment including carrying out necessary procedures and prescribing medications.

The courses offered in UBC's NP program were developed in consultation with Credentialed Nurse Practitioners who are UBC faculty, Nurse Practitioner faculty teaching at well-known, established academic institutions in the United States, and faculty experts from Biological Sciences, Pharmaceutical Sciences, Medicine, and Midwifery.

#### *Definitions used in this document*

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**Preceptor:** A certified Nurse Practitioner or Physician that provides clinical teaching and supervision of clinical experiences for the student.

**Site Visitor:** A Nurse Practitioner that visits the clinical site during a student's experience to evaluate the student and to assist the Preceptor as needed in accomplishing the student's learning objectives.



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**Program Admission Requirements**

Applicants to the NP program must meet the general eligibility requirements set out by the UBC Faculty of Graduate Studies. For consideration by the UBC School of Nursing, applicants must have a minimum overall average of 76% at the third and fourth year undergraduate levels, with 80% or above in the equivalent of 12 credits of nursing courses. At least 2-3 years of clinical experience as a registered nurse at the post-baccalaureate level are required. Letters of reference must indicate that applicants have the ability for excellence in clinical performance and readiness to shift to a more autonomous context of practice. Applicants must demonstrate, in a personal interview that they have the ability and motivation to shift to this new professional challenge.

**Program Pre-Requisite:** Basic Health Assessment

**Program Courses and Schedule**

<b>Year 1, Term 1</b> Sept – Dec.	<b>Year 1, Term 2</b> Jan. - Apr	<b>Year 1, Term 3</b> May – Aug.	<b>Year 2, Term 1</b> Sept.-Dec.	<b>Year 2, Term 2</b> Jan.-Apr.
	NURS505 <b>Statistical Literacy in Nursing</b> (3 credits)	NURS504 <b>Nursing and Research</b>	NURS506 <b>Health Promotion in Practice</b> ( credits)	NURS 572 <b>Primary Care III</b> (6 credits)
NURS 508 <b>Pathophysiologic Processes in Illness</b> (3 credits)	NURS 507 <b>Pharmacological Management in Health and Illness</b> (3 credits)	NURS596 <b>Culminating Project</b> (3 credits)	NURS 571 <b>Primary Care II</b> (6 credits)	NURS 578 <b>Nurse Practitioner Consolidated Practicum</b> (6 credits*)
NURS 510 <b>Advanced Health Assessment Across the Life Span</b> (6 credits)	NURS509 <b>Clinical Procedures</b> (2 credits)		NURS 591 <b>Roles and Regulations for NP Practice</b> (3 credits)	
NURS511 <b>Theoretical Foundation of Nursing Practice</b> (3 credits)	NURS570 <b>Primary Care I</b> (6 credits)			

\* The variable credit value and range of credits in the last Term are designed to accommodate the needs of students who require additional primary care support and also those who have mastered primary care competencies and want to practice in specialized clinical contexts.



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**Description of Courses**

**NURSING 504: Nursing Research (3 credits)**

This course will assist students to gain greater understanding of the processes of research and scholarly inquiry in nursing. In this course, students will examine the relationships among knowledge development, theory development, and nursing practice. Students will engage in exercises in which they examine the underpinnings of paradigms that guide qualitative and quantitative research approaches.

The research process will be examined in-depth for these paradigms and through these exercises students will gain greater skill in critiquing studies for their strengths and weaknesses. During the course, students will have opportunity to discuss the need for evidenced-based practice, to examine research utilization models, and to discuss strategies to enhance the use of evidence-based practice. Students will also gain skill in developing questions amenable to investigation and in conceptualizing and planning a study that best addresses those questions.

**NURSING 505: Statistical Literacy (3 credits)**

Statistics, a perplexing subject for many students, is an important means of communication in nursing science. This course is designed, not as a primer in data manipulation, but as an introduction to a scientific approach to thinking. It is aimed at beginners with limited mathematical skill. The goal here is to promote appreciation and comprehension of statistical methods rather than competence in statistical techniques, *per se*. The course is constructed to meet several objectives. Of concern is the development of comprehension of statistical thinking and basic quantitative data analyses. Upon completion, students should be able to cope better with the flow of information and claims commonly encountered by nurses with advanced standing. Such competence is necessary for making informed choices, for assessing the opinions of others, and for making reasonable suppositions about good nursing practice. The focus on evidence-based or evidence-informed, nursing practice rests, in part, on knowledge of statistics. The focus is a working knowledge of basic statistical terms and data analysis techniques, working knowledge of graphics commonly used to communicate in nursing and critical evaluation of research claims and some skill in detecting the misuse of statistics.

**NURSING 506 Health Promotion in Practice (3 credits)**

This course is designed to provide nurse practitioner students with information and practical tools so that they will have the capacity to adopt a systematic approach to the delivery of clinical preventive and health promotion services for children, adolescents, adults and older adults. The course introduces the concept of the periodic health examination, risk assessment, and risk reduction techniques applied by nurse practitioners

**NURSING 507: Pharmacological Management in Health and Illness (3 credits)**

This course examines the clinical application of drug therapy, with an emphasis on pharmacotherapeutics commonly used in primary care settings. It involves in-depth study of mechanisms of drugs actions, therapeutics and adverse effects, drug interactions, and patient education. Emphasis is in clinical decision making applied in case studies that span a variety of age groups and conditions. Legal and ethical considerations of prescriptive practices and prescriptive authority are examined.

**NURSING 508: Pathophysiologic Processes in Illness (3 credits)**

This course provides an intensive, comprehensive, evidence-based background for assessment and advanced nursing management of common acute and chronic illnesses treated in primary health care settings, across the human lifespan. Normal anatomy and physiology are reviewed and the pathophysiology of selected conditions and diseases is examined in-depth using pre-readings, lectures, and clinical case studies. Case studies are chosen on the basis of common causes of mortality and morbidity for Canadians. Emphasis is on applying pathophysiologic principles and concepts in clinical situations.



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### **NURSING 509 Clinical Procedures in Primary Care Settings (2 credits)**

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Common office procedures necessary for practice as a Nurse Practitioner. Primary care diagnostic and treatment procedures such as x-ray interpretation, ECG interpretation, suturing, shave and punch biopsies and administration of local anaesthesia.

### **NURSING 510: Advanced Health Assessment Across the Life Span (6 credits)**

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The focus of this course is on health assessment of a variety of age groups. It provides the foundation for integration of physical assessment skills with diagnostic reasoning and clinical decision-making. It focuses on health history and physical assessment of individuals and families across the life span, with an emphasis on assessing individuals and families in the context of communities and social determinants of health. Laboratory and clinical practice settings are used for developing clinical practice skills.

### **NURSING 511: Theoretical Foundation of Nursing Practice**

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This course provides students with the opportunity to explore the evolution of nursing knowledge and the processes of theoretical and analytical reasoning as they apply to nursing. In the context of the course students will apply critical thinking to the understanding and resolution of nursing problems.

### **NURSING 570: Primary Care I (6 credits)**

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This course focuses on the primary care management of common episodic health and illness conditions across the lifespan. Emphasis is on health promotion and illness/injury prevention strategies. Didactic and clinically-based learning occurs in classroom and clinical settings.

### **NURSING 571: Primary Care II (6 credits)**

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The focus of this course is on the primary care management of common chronic health and illness conditions across the lifespan. Health promotion and illness/injury prevention strategies are integrated throughout. Didactic and clinically-based learning occurs in classroom and clinical settings.

### **NURSING 572: Primary Care III (6 credits)**

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This course focuses on the primary care management of conditions affecting individuals in the context of their families including the childbearing families, families coping with mental health conditions, families with young children, and families caring for elderly members. Emphasis is on the identification of health needs, interventions for the prevention of illness, health promotion, and therapeutic management of selected health and illness conditions. Didactic and clinically-based learning occurs in classroom and clinical settings.

### **NURSING 578: Nurse Practitioner Consolidated Practicum (9 credits)**

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This course provides for the integration and application of primary care practice in the clinical setting. It enables students to consolidate their practice base for clinical decision-making in the assessment and management of individuals and families across the lifespan. Students engage in clinical practice under the supervision of expert primary care clinicians including Nurse Practitioners and Physicians.

This is the final practicum of the program and, as such, builds upon previously acquired knowledge and skills. It comprises an intense clinical experience in a primary care setting; students are linked with preceptors, with faculty supervision built in. Students will have multiple opportunities to assess, diagnose, and treat patients of all age groups who present with a variety of health and illness concerns. Students will integrate knowledge and previous learning from courses focused on assessment and diagnostic reasoning. They will focus on Nurse Practitioner roles related to health promotion, illness/injury prevention, and management specific to the individual recognizing factors that influence well-being such as family and community. The broad principles of population health and specific health determinants are also considered. They will collaborate with other health professionals to provide comprehensive care.



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**NURSING 591: Professional and Ethical Issues in Nurse Practitioner Practice (3 credits)**

This course provides learners with an opportunity to focus on the regulatory and legislative aspects of the nurse practitioner primary care role as it is evolving in British Columbia, and to appreciate the implications for those factors on professional behaviour accountability and practice management.\*

**NURSING 596: Culminating Project (3 credits)**

A MN Culminating Project represents an original project that builds on knowledge and skills acquired from coursework. The project will normally represent a thoughtful and critical examination of knowledge in a field related to nursing practice, theory, education, leadership, or health policy and will include an application of existing knowledge to new questions, domains, or problems. Topics that include data collection from subjects and require ethical approval are not suitable for the Culminating Project. For the Culminating Project to complete the degree, no specific modular development is required. The general description is provided here for the sake of completeness in understanding all program requirements.



**THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING  
Nurse Practitioner Program**

**Responsibilities of the Preceptor, School of Nursing Faculty  
and the Student**

***I. Responsibilities of the School of Nursing***

1. The School of Nursing faculty will provide the course work and laboratory experiences which are the foundation for clinical practice.
2. The School of Nursing will provide visitations from Site Visitors to each primary preceptor and student to evaluate the student and to assist the preceptor, as needed, in accomplishing learning objectives.
3. The School of Nursing will provide liability coverage to the Preceptor while working with a student.

***II. Responsibility of the Preceptor***

1. The Preceptor will provide a setting in which the student may see patients and gain experience in clinical practice.
2. The Preceptor will provide clinical teaching and supervision for the student in the process of working up and managing cases, and will co-sign all records and orders.
3. The Preceptor will meet periodically with the student and site visitor to discuss the student's progress and learning needs.
4. The Preceptor and the Site Visitor will assist the School of Nursing faculty in grading the student and will complete clinical evaluation forms for each clinical course.

***III. Responsibility of the Student***

1. The student will provide the preceptor with his/her own specific learning objectives/needs.
2. The student will perform assigned learning activities in the process of providing care to patients in the preceptorship site.
3. The student will follow policies and procedures established in the preceptorship site, and will keep the Preceptor informed about cases and learning activities.
4. The student participates in conferences with the preceptor and site visitor to discuss progress, problems, and learning needs.

*Adapted with permission from Sonoma State University Department of Nursing, Nurse Practitioner Program.*



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**Clinical Practice Objectives for Primary Care I (N570)**

**A. Clinical Skills**

1. Use a systematic and holistic approach to conduct appropriate histories, addressing data pertaining to physiological, psychosocial, and social parameters.
2. Perform appropriate physical examination of systems pertinent to the problems identified.
3. Interpret findings from the physical exam accurately, identifying normal, normal variant, and pathological findings.
4. Based on the history and physical examination findings, begin to formulate differential diagnoses of the health concerns and identify, with appropriate rationale, the most likely diagnoses.
5. Consider diagnostic tests appropriate for the differential diagnosis.
6. Implement health promotion and illness/injury prevention through identifying health risks, counselling, and educating patients regarding preventative treatment for potential and actual problem(s) identified.
7. Begins to formulate and implement a plan for care and follow-up. As appropriate, this includes psychosocial care, counselling, education, referral, non-pharmacologic strategies, and pharmacotherapeutics.
8. Perform clinical skills and activities with care, judgment, and mastery.

**B. Professional and Academic Behaviours**

1. Begin to evaluate research and evidence-based guidelines for applying to primary care management of health and illness conditions across the lifespan.
2. Record accurately and legibly using well-organized problem-oriented charting.
3. Interpret the role of the Nurse Practitioner (NP) to other professionals, staff, and patients and begins to demonstrate implementation of the role.
4. Communicate respectfully with patients and their families and establish effective working relationships with peers, preceptors, faculty, and allied health workers; demonstrate team work.
5. Establish a therapeutic relationship with patients and families.
6. Present cases in a concise, logical, accurate, and organized manner to preceptor, site visitor, and others.
7. Accept responsibility for personal learning. Show self-assessment abilities, awareness of limitations of own knowledge, and responds constructively to feedback.
8. Demonstrate responsibility and accountability in all aspects of clinical practice including attendance and punctuality.



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**Clinical Practice Objectives for Primary Care II (N571)**

At the completion of the practice experience, the student will:

**A. Clinical Skills**

1. Conduct a complete screening physical exam, utilizing a systematic holistic approach for the collection of pertinent physiological, psychological, and social data.
2. Assess acute episodic complaints and perform a focused history and exam based on the presenting complaint or concern.
3. Interpret findings from the physical examination identifying normal and abnormal findings.
4. Demonstrate increasing independence in formulating the differential diagnoses for the problem(s) and identify, with appropriate rationale, the most likely diagnosis.
5. Demonstrate increasing independence in ordering appropriate diagnostic tests.
6. Show increasing competence in managing acute minor problems and begin to manage chronic conditions of individuals and families across the life span.
7. Begin to select appropriate pharmacological therapies for patients.
8. Implement suitable health and illness/injury prevention strategies that include patient teaching, appropriate referrals, and utilization of community resources.
9. Begin to manage mental health concerns of individuals and families in the community.
10. Refer to specialists appropriately.
11. Practice according to evidence-based guidelines.

**B. Professional and Academic Behaviours**

1. Chart accurately and legibly using problem-oriented format.
2. Communicate respectfully with patients and their families and establish effective relationships with peers, preceptors, faculty, and allied health workers; demonstrate teamwork.
3. Establish a therapeutic relationship with patients and families.
4. Present assessment, diagnosis, and plans to preceptor and site visitor in a logical, concise fashion.
5. Make decisions collaboratively with preceptors as appropriate; recognizes and practices within one's abilities and scope of practice and responds constructively to feedback.
6. Implement research and evidence-based guidelines in the management of patient care.
7. Demonstrate responsibility and accountability in all aspects of clinical practice including attendance and punctuality; and identify personal learning needs and take steps to meet them.



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**Clinical Practice Objectives for Primary Care III (N572)**

At the completion of the practice experience, the student will:

**A. Clinical Skills**

1. Conduct a thorough history that includes physiological, psychological, and social data.
2. Accurately and efficiently perform a physical exam appropriate to the presenting complaint.
3. Order and interpret diagnostic tests correctly.
4. Based on history and physical examination develop an accurate differential diagnosis list and choose the most appropriate diagnosis.
5. With increasing autonomy, manage the care of acute minor illnesses and injuries, common chronic illnesses, pre and post natal and well child care, and family planning.
6. Provide and include patient education regarding the expected course of acute or chronic illnesses in the treatment plan.
7. Provide psychosocial care, counselling as appropriate, consultation and/or referral for the problems beyond the scope of practice, and address health promotion and illness/injury prevention.
8. Plan for appropriate follow-up care.

**B. Professional and Academic Skills**

1. Record accurately and legibly using problem-oriented recording, including updating the list of health concerns.
2. Communicate respectfully with patients and their families and establish effective relationships with peers, preceptors, faculty, and allied health workers; demonstrate teamwork.
3. Establish a therapeutic relationship with patients and families.
4. Interpret the Nurse Practitioner role to patients, other health professionals, and staff.
5. Make and implement decisions with appropriate level of independence and consultation with preceptor.
6. Accept responsibility for own learning; demonstrate self-assessment abilities, show awareness of limitations, and respond constructively to feedback.
7. Implement research and evidence-based guidelines as appropriate for the management of patient care.
8. Demonstrate responsibility and accountability in all aspects of clinical practice including attendance and punctuality.



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**Clinical Practice Objectives for Consolidated Nurse Practitioner  
Practicum (N578)**

In this final clinical course, the Nurse Practitioner student will consolidate the prior learning experiences. The focus of the practicum is on integration of knowledge and skills.

At the completion of the practice experience, the student will consistently and reliably:

**A. Clinical Skills**

1. Establish a therapeutic relationship with clients and families across the life span.
2. Conduct a comprehensive assessment of health status that includes physical examination, history, screening, and the use of diagnostic procedures.
3. Formulate differential diagnoses considering data gathered in the health assessment process and incorporating community factors and individual and family dynamics.
4. Select the most appropriate diagnoses including client priorities.
5. Plan for appropriate follow-up care.
6. Collaborate with other health care professionals.
7. Assist clients to promote health and manage illness by providing anticipatory guidance, counselling, teaching, and support as well as referral to the appropriate resources.
8. Evaluate outcomes of treatment.
9. Demonstrate cultural safety in providing care.

**B. Professional and Academic Skills**

1. Record accurately and legibly using problem-oriented recording, including updating the problem list.
2. Communicate effectively with preceptor, allied health professionals, staff, patients and families.
3. Demonstrate the ability to critically self-evaluate and respond constructively to feedback.
4. Demonstrate use of evidence-based guidelines and research in practice and ability to critically evaluate scientific literature.
5. Demonstrate responsibility and accountability in all aspects of clinical practice including attendance and punctuality.



## THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING Nurse Practitioner Program

### **Topics covered in Primary Care I include:**

Primary health care, EENT, common problems in the respiratory system, ophthalmology, urology, mental health conditions, contraception, sexually transmitted infections, common office emergencies, musculoskeletal problems, dermatology, neurology and common office procedures.

### **Topics covered in Primary Care II include:**

Common pediatric conditions such as growth and development, nutrition, EENT, musculoskeletal conditions, hematology across the lifespan, and menopause, gynecological problems, obstetrics, mental health and geriatrics.

### **Topics covered in Primary Care III include:**

Pain, chronic musculoskeletal conditions, connective tissue disease, acute infections, and common office emergencies

### **Topics covered in Health Promotion**

1. Immunizations
2. Violence
3. Behavioural change
4. health screening
5. Nutrition
6. Smoking Cessation
7. Weight management



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**Nurse Practitioner Liability Insurance: Q & A**

**CRNBC August 2005**

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Q. What liability insurance is available to students enrolled in B.C. nurse practitioner education programs?

A. Nurse practitioner students enrolled in B.C. nursing education programs have primary insurance coverage through the nursing education institution and secondary insurance coverage through CRNBC Captive Insurance Corporation (CIC).

The coverage limit provided by CIC is up to \$1 million to respond to claims presented against an insured member of CRNBC arising out of alleged error, omission or negligence while performing nursing services that constitute the practice of nursing and that conform to the Nurses (Registered) Act and Rules, and policies and guidelines set out by CRNBC.

Q. What does primary and secondary insurance coverage mean?

A. Primary insurance coverage refers to insurance coverage that has been arranged to respond to claims to cover damages assessed by the court to compensate a plaintiff in the event of a negligence claim arising from nursing practice. Secondary insurance coverage only comes into play if the primary insurance is not sufficient to cover the awarded damages or settlements and related costs assessed by the court.

Q. As a registrant with CRNBC and a nurse practitioner student enrolled in a non-B.C. school doing a clinical practicum under the supervision of a physician in B.C., what liability insurance coverage is available?

A. An CRNBC registrant who is a nurse practitioner student enrolled in a non-B.C. school must verify with the nursing education program that liability insurance coverage is provided for the student and the physician supervising the clinical practicum in B.C. Liability insurance coverage from the nursing education program (B.C. and non-B.C.) for the supervising physician is usually achieved through an affiliation agreement between the supervising physician and the education institution.

Secondary insurance coverage is provided for the nurse practitioner student through CRNBC Captive Insurance Corporation. No coverage is provided for the supervising physician under the CRNBC Captive Insurance policy.



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- Q. Once the Health Professions Act (HPA) is proclaimed for nursing and nurse practitioners are regulated by the College of Registered Nurses of British Columbia (CRNBC), how will nurse practitioners be provided with liability insurance?
- A. All nurse practitioners as registrants of CRNBC will be provided liability insurance through Captive Insurance Corporation (CIC). The yearly limit is 5 million dollars per person and in the aggregate. This amount is equivalent to that currently provided by Canadian Nurses Protective Society (CNPS) for nurse practitioners in other parts of Canada.
- Q. If nurse practitioners are employees of a health authority, will they have primary insurance through their employer?
- A. Yes, those nurse practitioners who are employees of health authorities will have primary insurance through their employer.
- Q. If nurse practitioners are employees in a group health care practice with other health care providers, including physicians, will they also have liability insurance through their employer?
- A. Employers have the primary responsibility to arrange for liability coverage for nurse practitioners while they are performing their services on behalf of their employer. Nurse practitioners employed in a group health care practice should check with their employer to verify that both professional and general liability insurance is provided.
- Q. Is it correct that a self-employed nurse practitioner will have primary liability insurance provided through CIC?
- A. That will be the case. An example of this might be a nurse practitioner who has contracts with a number of agencies.
- Q. What if the nurse practitioner is hired directly by a physician?
- A. Nurse practitioners are autonomous professionals and therefore do not require supervision from a physician. However if a nurse practitioner is hired directly by a physician he or she become an employee of that physician and therefore the physician, as employer, has the primary responsibility for liability coverage for



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the nurse practitioner in their employ. This is a complex situation and nurse practitioners are advised to call CRNBC before entering into such an arrangement to discuss issues such as liability and accountability.

- Q. As a self-employed registered nurse, I understand I currently have coverage through CIC for negligence claims arising from nursing practice for damages up to a limit of \$1 million if there is a court settlement or judgment of legal liability against me. If I work in a nurse practitioner-like role prior to the HPA taking effect and would like to purchase additional liability insurance, how and where can I do that?
- A. It is critical that you contact a Nursing Practice Consultant at CRNBC to ensure the delegation process you have in place meets CRNBC requirements before you take on activities that fall outside the scope of practice of registered nurses and as a result, may preclude the CIC from responding to a claim presented against you. CIC provides liability coverage to registered nurses who hold practicing membership and are practicing as defined by CRNBC policies and guidelines for self-employed registered nurses. One reasonably priced source for additional insurance is through the Canadian Nurses Protective Society (CNPS) Plus Program, a national group insurance program. Information about CNPS Plus is available through [www.cnps.ca](http://www.cnps.ca) then click on CNPS Plus. Additional liability insurance may also be available through other insurance brokers.



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## **Electronic Student Management System**

The Nurse Practitioner Program at the UBC School of Nursing has developed a computerized system for tracking students throughout their clinical placements. The NPP Web Portal is the browser-based application that allows the student to record all pertinent information associated with their placement(s). The system tracks placement schedules, clinical objectives, clinical log entries, and student evaluations of themselves and their preceptors.

Near the end of each clinical placement, preceptors are asked to use the NPP Web Portal to evaluate the performance of the student in the clinical setting. A user guide has been developed to assist preceptors in performing these evaluations. To download the user guide, please visit <http://npp.nursing.ubc.ca/NPPWebPortal-PreceptorManual.pdf>. To access the NPP Web Portal to complete the evaluation you will need to provide at the beginning of the placement to [Sharon.thomson@nursing.ubc.ca](mailto:Sharon.thomson@nursing.ubc.ca) a valid email address so that an account can be set up for you.

To access the NPP Web Portal, please visit <http://npp.nursing.ubc.ca>.



## THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING Nurse Practitioner Program

Throughout the Nurse Practitioner Program the NP Student is required to:

- 1) Maintain registration with the College of Registered Nurses of British Columbia.
- 2) Update and be current in Cardiopulmonary Resuscitation (CPR) certification.
- 3) Ensure immunization status is current.

### **School of Nursing Clinical Practice Policies<sup>1</sup>**

#### **Clinical Practice**

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Clinical practice is defined as that experience in or through acute, extended and community care agencies in which the student is engaged in direct nursing care with individuals or groups or is involved in laboratory learning.

#### **Preparation for Clinical Practice Assignments**

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Since the safety and well being of health care recipients is of paramount concern, both faculty and students are responsible and accountable for ensuring that appropriate professional standards (i.e. CRNBC Standards of Practice) are maintained. One important standard is an appropriate knowledge base. Faculty will discuss expected professional standards, including what constitutes appropriate preparation for clinical practice assignments with students at the start of each semester. Unprofessional behaviours such as inappropriate preparation may result in temporary removal of a student from the placement area. Patterns of unprofessional behaviour may lead to charges of professional misconduct (see policy regarding Professional Misconduct).

<sup>1</sup> The Clinical Practice Policies apply to all students attending the UBC School of Nursing. They were approved July 2002, by the UBC School of Nursing Faculty Caucus, and may be downloaded from the Internet at <http://www.nursing.ubc.ca/program/PolicyandGuidelines.html>.



## THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING Nurse Practitioner Program

### **Missed Clinical Practice & Laboratory Experience Time for NP Students**

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Professional nursing is committed to the provision of safe, competent, ethical care. Educational experiences occur in a variety of practice contexts and are designed to advance nursing competence in a deliberate manner; practice experiences promote nursing competence incrementally on a daily, weekly, and monthly basis. Nursing practice competence involves knowledge, skill, application, and judgment. Attaining competence in practice requires that students actively engage in all planned practice experiences throughout the program. 'Missed' practice time is not simply replaceable. It is not about lost hours - it is about lost opportunities to advance individual nursing competence. Students are required to attend all nursing practice and laboratory experiences.

Students are accountable for maintenance of their personal health, and for the maintenance of time management that enables them to attend all scheduled practice and laboratory experiences. Time management is a necessary professional skill; punctuality is expected in professional workplaces.

### **In the Event of Clinical Practice or Laboratory Absence**

Clinical Practice and Lab: Students will follow guidelines given by Faculty at the start of each term.

Absences: All students are expected to notify the course leader by leaving a telephone or email message before or on the day of the scheduled lab or clinical. Students must also notify their preceptor.

Prolonged Absence: Student absence from practice/laboratory experiences of more than 2 days within a term is viewed as a potentially serious disruption of the educational plan for the attainment and maintenance of nursing competence. In absence of more than two days, students will:

- Provide a medical certificate or other supporting evidence for the absence if requested by faculty.
- Initiate discussion with faculty involved regarding plans to ensure maintenance and advancement of their nursing competence to meet expected outcomes.

### **Professional Appearance Guidelines for Clinical Practice Experience**

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#### **Purpose**

To present a professional image as a student enrolled in the UBC School of Nursing. Good judgment should be exercised when making decisions as to what is appropriate in a given clinical experience. If an agency has specific requirements not covered by these guidelines, students must conform to those requirements. Inappropriately dressed students may be asked to leave the clinical area.

#### **Identification**

All UBC Nursing students are required to wear School of Nursing Photo Identification in all clinical practice settings for identification and liability purposes.



## THE UNIVERSITY OF BRITISH COLUMBIA SCHOOL OF NURSING Nurse Practitioner Program

### **Student Injury During Clinical Practice Experience**

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Injury: A student who is injured in any way during clinical practice experiences (including needle stick injuries) should inform the course leader and preceptor and follow the facility's notification and treatment procedure. In most cases, the student should be seen as soon as possible by the facility's Employee Health Services for assessment and potential treatment. In the event of injury, an incident report is usually completed. It is important for the student to obtain a copy of the incident report as a personal health record and for follow-up care if required. Follow-up care may be obtained from the student's own physician or through UBC Student Health Services.

### **Student Accident Insurance**

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Students must have the BC Medical Plan or its equivalent from another province in place in order to provide themselves with basic medical care. Student accident insurance is an additional required insurance that provides a measure of excess medical coverage for the benefit of UBC Nursing students performing course work in environments where the risk of injury is greater than in a classroom, e.g., laboratories, clinical practice. It provides a \$50,000 maximum benefit for death or dismemberment and a \$5,000 excess medical coverage, e.g., ambulance, prescription drugs. The plan does not provide 24-hour coverage. It applies only during the time that the student is actually doing clinical practice.

### **Criminal Record Check**

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As members of the CRNBC, all NP students have had a Criminal Record Check (CRC). Completion of the Criminal Record Check by the police is a requirement for placement at a number of agencies providing clinical learning experiences. The CRC is one way of protecting patients, especially those who may be vulnerable. Students may not refuse a clinical placement on the grounds that a criminal record check is required.

A criminal record does not necessarily preclude admission to the School of Nursing. Once in the Nursing program, students are required to inform the Director of any changes in their criminal record such as criminal charges or convictions.