

# STUDENT PLACEMENT FAQs

## NP-Adult, NP-Paediatric, NP-PHC-GH

Clinical placements in the NP program ensure students apply theoretical knowledge to patient care. Students in every clinical setting demonstrate their commitment to NP competence by engaging in practice reflection (clinical portfolio) and by setting and achieving learning goals (clinical learning plan). Student’s knowledge, skill and judgment is assessed using the [College of Nurses Entry-Level Competencies for Nurse Practitioners](#) within the objectives of each clinical NP course.

Students will develop three (3) learning goals for each clinical NP course, based on the course objectives and the student’s learning needs. Students will select a College practice standard or guideline related to each learning goal. Connecting learning goals to the College’s practice standards will help to guide learning outcomes. Students are also required to develop an additional learning goal related to controlled substances. For example, prescribing controlled substances or understanding the unique risks associated with substance misuse or diversion. In total, students will have four (4) learning goals in each of the NP clinical courses.

### 1. What is practice reflection and how will this help me choose a clinical placement<sup>1</sup>?

Reflection is a powerful skill that helps you grow and learn. It is an intentional process of identifying your strengths, areas for improvement and learning needs. Examples of questions to ask when self-reflecting on your clinical placements:

- **Have I had experience across all age ranges of my area of emphasis<sup>1,2,3,4</sup>?**

Adult: adolescent [early/late], young adults [19-35y], adults [36-64y], older adults [65-79y], elderly [80+ years]

Paediatric: newborn and infants [birth to 12 months], young children [1-6 y], older children [7-12y], adolescents [13-18y]

PHC-GH: the period between preconception and birth, newborn and infants [birth to 12 months], young children [1-6 y], older children [7-12y], adolescents [13-18y], young adults [19-35y], middle-aged adults [36-64y], older adults [65-79y], and adults of advanced age [80+ years]

- **Have I had experience to address my knowledge gaps<sup>1,2,3,4</sup>?**

Adult	Paediatric	PHC-GH
<ul style="list-style-type: none"> <li>• Health promotion, disease prevention, and anticipatory guidance</li> <li>• Anatomy, physiology, and pathophysiology</li> <li>• Therapeutic communication</li> <li>• Health history</li> <li>• Signs and symptoms</li> <li>• Physical examination</li> <li>• Diagnostic and therapeutic tests and/or procedures</li> <li>• Clinical decision-making</li> <li>• Differential diagnosis</li> <li>• Pharmacologic therapies</li> </ul>	<ul style="list-style-type: none"> <li>• HEENT</li> <li>• Dermatology</li> <li>• Allergy</li> <li>• Gastroenterology</li> <li>• Developmental/Behavioural/ Mental Health</li> <li>• Pulmonary</li> <li>• MSK</li> <li>• Nutrition</li> <li>• ID</li> <li>• Urology/Nephrology</li> <li>• Neurology</li> <li>• GYN, Reproductive Health, Sexual Identity</li> </ul>	<ul style="list-style-type: none"> <li>• Health promotion, harm reduction, and disease prevention</li> <li>• Anatomy, physiology, and pathophysiology</li> <li>• Therapeutic communication, change management, and crisis management</li> <li>• Health history, including signs and symptoms</li> <li>• Physical examination</li> <li>• Diagnostic and therapeutic tests and/or procedures</li> <li>• Clinical decision-making</li> </ul>

<sup>1</sup>College of Nurses of Ontario Self-Assessment (<http://www.cno.org/en/myqa/self-assessment/>)

<sup>2</sup>Family Nurse Practitioner and Adult-Gerontology Primary Care Nurse Practitioner Certification (<https://www.aanpcert.org/resource/documents/AGNP%20FNP%20Candidate%20Handbook.pdf>)

<sup>3</sup>Pediatric Nursing Certification Board Certified Pediatric Nurse Practitioner – Primary Care Exam ([https://www.pncb.org/sites/default/files/resources/2018\\_CPNP-PC\\_Exam\\_Content\\_Outline\\_FINAL.pdf](https://www.pncb.org/sites/default/files/resources/2018_CPNP-PC_Exam_Content_Outline_FINAL.pdf))

<sup>4</sup>Canadian Council of Registered Nurse Regulators Blueprint for the Canadian Nurse Practitioner Exam Family/All Ages ([http://www.ccrnr.ca/assets/cnpe-faa-blueprint-2018\\_en\\_final.pdf](http://www.ccrnr.ca/assets/cnpe-faa-blueprint-2018_en_final.pdf))

<ul style="list-style-type: none"> <li>• Polypharmacy</li> <li>• Non-pharmacologic/ complementary/ alternative therapies</li> <li>• Bio-psychosocial principles/ theories</li> <li>• Patient, family, and caregiver education and counseling</li> <li>• Community resources</li> <li>• Evidence-informed practice</li> <li>• Legal and ethical issues</li> <li>• Ethno-cultural and spiritual competency</li> <li>• Principles of epidemiology</li> <li>• Health literacy</li> <li>• Principles of risk management</li> <li>• Palliative and end of life care</li> <li>• Pain management</li> <li>• Healthcare economics</li> </ul>	<ul style="list-style-type: none"> <li>• Cardiology</li> <li>• Endocrinology</li> <li>• Pain</li> <li>• Hematology/Oncology</li> <li>• Environmental Health/Toxicology</li> <li>• Immunology/Rheumatology</li> <li>• Genetics</li> </ul>	<p>and differential diagnosis</p> <ul style="list-style-type: none"> <li>• Pharmacological and non-pharmacological/ complementary/ alternative therapies</li> <li>• Bio-psychosocial principles/theories</li> <li>• Patient and family education and counseling</li> <li>• Community resources</li> <li>• Healthcare economics</li> <li>• Evidence-informed practice</li> <li>• Legal and ethical issues</li> <li>• Cultural competence</li> <li>• Principles of epidemiology, population health, and social determinants of health</li> <li>• Practice management</li> <li>• HEENNT, Integumentary, Respiratory, GI, CV, GU, MSK, neurological, endocrine, hematopoietic, immune/lymphatics, mental health, ID/communicable diseases, sexual/reproductive health, oncology</li> <li>• Prenatal/perinatal/postnatal</li> <li>• Nutrition/hydration</li> <li>• Physical function and mobility</li> </ul>
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• **Have I had experience to address my procedural gaps<sup>1,2,3,4?</sup>**

Adult	Paediatric	PHC-GH
<ul style="list-style-type: none"> <li>• Skin lesion removal</li> <li>• Skin biopsy</li> <li>• Joint aspirations and injections</li> <li>• Therapeutic injections</li> <li>• Wound management</li> <li>• Surgical debridement</li> <li>• Incision and drainage</li> <li>• Foreign body removal</li> <li>• Nail removal</li> <li>• Cerumen removal</li> <li>• Fluorescein dye</li> </ul>	<ul style="list-style-type: none"> <li>• Audiometry</li> <li>• Cerumen removal</li> <li>• Collect skin and body fluid specimens</li> <li>• Fluorescein staining</li> <li>• Incision and drainage</li> <li>• Rapid tests (e.g., rapid strep)</li> <li>• Reduction of nurse maid's elbow</li> <li>• Removal of foreign body</li> <li>• Removal of sutures and</li> </ul>	<ul style="list-style-type: none"> <li>• Minor Lesion Removal</li> <li>• Microscopy</li> <li>• Pap Tests</li> <li>• Joint Aspirations and Injections</li> <li>• Skin Biopsy</li> <li>• Therapeutic Injections</li> <li>• Wound Closure</li> <li>• Splinting</li> <li>• Casting</li> <li>• Wound Management</li> <li>• Incision And Drainage</li> </ul>

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<ul style="list-style-type: none"> <li>• Splinting</li> <li>• Casting</li> <li>• Pulmonary function testing and office spirometry</li> <li>• Pap tests</li> <li>• In-dwelling contraceptive management</li> <li>• Long-term hormonal implantation</li> <li>• Microscopy</li> <li>• Suturing</li> </ul>	<ul style="list-style-type: none"> <li>• staples</li> <li>• Sexually transmitted infection testing</li> <li>• Spirometry/pulmonary function test</li> <li>• Umbilical cord cauterization</li> <li>• Visual acuity</li> <li>• Wart removal</li> </ul>	<ul style="list-style-type: none"> <li>• Diagnostic Interpretation of ECG</li> <li>• Diagnostic Interpretation of X-Rays</li> <li>• Cerumen Removal</li> <li>• Pulmonary Function Testing &amp; Office Spirometry</li> <li>• Fluorescein Dye</li> <li>• Long-Term Contraceptive Management</li> <li>• Long-Term Hormonal Implantation</li> <li>• Foreign Body Removal</li> <li>• Nail Removal</li> </ul>
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## 2. What setting should I choose my placement if I am in Adult, Paediatric or PHC-GH?

All of the areas of emphasis are based in primary care. If you are in the adult or paediatric program you need to have a minimum of 500h of clinical practice in primary care. The National Organization of Nurse Practitioner Faculties (NONPF) Statement on Acute Care/Primary Care Nurse Practitioners (2012) was used to inform what constitutes primary care. Principles used to determine if clinical hours meet the requirements include:

- The determination of whether nursing care is considered primary care or acute care is based on patient care needs and not the patient care setting. Therefore, if your clinical placement is in a hospital or acute care setting, the care provided may be considered primary care IF it addresses comprehensive, chronic or continuous care for a stable patient.
- Primary care is provided in a wide-variety of practice settings, including: community, hospitals (in-patient and out-patient settings), long-term care homes, etc.
- It is the severity and instability of presenting symptoms that determines the care given and if it is considered primary care. Generally care delivered to patients in critical care units, operating rooms, PACU are not considered to be primary care.

If you are in the PHC-GH area of emphasis all of your placements should be in primary care. Students should choose settings in the Community Health Centres (CHC), Family Health Teams (FHT), outpatient clinics, long-term care, palliative care, aboriginal centres, ambulatory care centres (e.g., urgent/emergency departments, primary care clinics), and community-based facilities (e.g., public health, occupational health, correctional services).

## 3. Should I choose a physician or a nurse practitioner as my preceptor?

Ideally students should choose a nurse practitioner as a preceptor. However, if the setting does not have a nurse practitioner, you may choose a physician as your preceptor if the following is met:

- **You have an NP-Advisor.** You should meet with your NP-Advisor every 1-2 weeks throughout your clinical placement. Your NP-Advisor will ensure you are practicing through the lens of a nurse practitioner. The NP-Advisor is also responsible for completing a final clinical evaluation (in addition to the clinical evaluation provided by your physician-preceptor). Please ensure both are listed on your LHP evaluation.

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- **You are not enrolled in NUR1221/22/23 (Nurse Practitioners: Roles and Issues).** This is the final clinical course and your preceptor must be a nurse practitioner. This will allow you to complete the required course objectives.
  - **You have not had more than 500h with a physician preceptor.** This is a nurse practitioner program and ideally your placements should be with an NP-preceptor.
- 4. How do I complete my orientation to the clinical practice setting?**  
 You will be receiving a message from support@hspcanada.net indicating that you have been granted access to the Health Sciences Placement Network of Ontario (HSPnet). This online system allows our clinical practice partners to post their most up-to-date orientation materials for Faculty of Nursing students. It is important that you complete this ASAP so the start of your clinical placement is not delayed.
- 5. Can I split my placements?**  
 No, as you transition from a novice to an expert student practitioner it is recommended that you do NOT split your clinical placements. You are permitted to spend 2-3 days in a related practice area (e.g., heart failure clinic with a cardiology placement) but your primary preceptor needs to account for these clinical hours. It is important that your primary preceptor communicates with your preceptor for these 2-3 days so that your performance (and hours) are included in your overall placement hours.

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