Nurse Practitioner Preceptor Manual 2020-2021

Masters in Nursing (MN) (Nurse Practitioner Field of Study) Degree Program

and

Post-Master NP (PMNP) Diploma Program
Table of Contents

SECTION 1: FACULTY LIAISONS

SECTION 2: NP PROGRAM
  Program Overview
  Post-Masters Nurse Practitioner (PMNP) Diploma Program
  Clinical Practicum Course Descriptions

SECTION 3: PRACTICUM ROLES & RESPONSIBILITIES
  Preceptors
  NP Advisors
  Clinical Education Office
  Report of Clinical Concern
  Students Responsibilities

SECTION 4: ASSESSMENT AND EVALUATION OF STUDENTS
  Competency Evaluation

SECTION 5: POLICY AND PROCEDURES
  Entry-to-Practice Competencies for Nurse Practitioners
  NP Student Conduct
  Accountabilities for Supporting Students
  Student Preparedness Permit
  Placement Process (Points of Contact / Escalating Issues)
  Adjunct Appointments

SECTION 6: CHARACTERISTICS OF AN EFFECTIVE PRECEPTOR/NP ADVISOR
Guiding Learners in Clinical Practice ........................................................................................................26
How to Navigate the Evaluation System: ................................................................................................28
SECTION 7: PRECEPTOR BENEFITS ........................................................................................................32
Preceptor Honorarium .................................................................................................................................32
# SECTION 1: FACULTY LIAISONS

## Academic Inquiries

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heather Thomson, RN, PhD</td>
<td>Director, MN Program</td>
<td>(416) 946-8044</td>
<td><a href="mailto:heather.thomson@utoronto.ca">heather.thomson@utoronto.ca</a></td>
</tr>
<tr>
<td>Katherine Trip, MN NP-Adult</td>
<td>Coordinator, NP Program</td>
<td>(416) 978-7683</td>
<td><a href="mailto:kathy.trip@utoronto.ca">kathy.trip@utoronto.ca</a></td>
</tr>
</tbody>
</table>

## Placement Inquiries

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kavita Kandhai, RN, MN</td>
<td>Clinical Education Placement Officer</td>
<td>(416) 978-7222</td>
<td><a href="mailto:npplacements@utoronto.ca">npplacements@utoronto.ca</a></td>
</tr>
<tr>
<td>Sharon Lee</td>
<td>Student Placement Coordinator</td>
<td>(416) 978-8475</td>
<td><a href="mailto:nursingstudentpracticum@utoronto.ca">nursingstudentpracticum@utoronto.ca</a></td>
</tr>
<tr>
<td>Elena Luk, RN, MN</td>
<td>Interim Director, Clinical Education</td>
<td>(416) 946-0488</td>
<td><a href="mailto:elena.luk@utoronto.ca">elena.luk@utoronto.ca</a></td>
</tr>
</tbody>
</table>

## Clinical Evaluation Inquiries

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Kim</td>
<td>Graduate Program Assistant</td>
<td>(416) 946-0280</td>
<td><a href="mailto:npstudent@utoronto.ca">npstudent@utoronto.ca</a></td>
</tr>
</tbody>
</table>

## Honorarium Payment Inquiries

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pauline Marwan</td>
<td>Financial &amp; Payroll Administrator</td>
<td><a href="mailto:preceptor.nursing@utoronto.ca">preceptor.nursing@utoronto.ca</a></td>
</tr>
</tbody>
</table>
SECTION 2: NP PROGRAM

Program Overview

Master of Nursing (MN) (Nurse Practitioner Field) Degree Program
The NP Field of the Master of Nursing Program is designed to provide students with the skills and competencies required to practice as a Nurse Practitioner (Adult, Paediatric or PHC-GH). This innovative and accessible MN population-based program is completed over 2 years (full time). The course-work is available entirely on-line and the practicums are emphasis focused. In addition to the specialty NP courses outlined in Table 1, MN NP students are required to complete 4 foundation courses:

NUR 1094H: Research Design, Appraisal, & Utilization
NUR 1095H: Qualitative Research
NUR: 1138H Global Health for Advanced Practice Nurse Practitioners
NUR 1097H: Program Planning & Evaluation

More specific details on individual courses in the MN (NP Field) Degree Program is available on our website:
https://bloomberg.nursing.utoronto.ca/programs/master/nurse-practitioner


Post-Masters Nurse Practitioner (PMNP) Diploma Program

The Post-Master's NP Diploma is an innovative and highly competitive 2-year program (part time) available to students across Canada. It is designed to afford students who have completed graduate education in nursing the opportunity to develop knowledge and skills required to practice as a Nurse Practitioner. The Post-Master's NP Diploma consists of 5 courses (Table 1), completed over a 2-year period. Students will focus their studies in the area of adult, paediatric, or primary health-global health care.

*please note that PMNP students take only the NP Specialty courses and the MN NP students take both the MN Foundation and NP Specialty courses.

---

**Table 1. MN Foundation (red font) and NP Specialty (black font) NP courses.**

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fall</strong></td>
<td><strong>Winter</strong></td>
</tr>
<tr>
<td>Pathophysiology and Pharmacotherapeutics I NUR 1140,42,44H:</td>
<td>Pathophysiology and Pharmacotherapeutics II NUR 1141 43 45H:</td>
</tr>
<tr>
<td>NUR1095 (MN-NP students only) Research Design, Appraisal and Utilization</td>
<td>NUR1096 (MN-NP students only) Qualitative Research Methods</td>
</tr>
<tr>
<td>NUR 1115H (Adult) or NUR1116H (Paediatric) or NUR 1117H (PHC-GH) Advanced Health Assessment and Therapeutic Management I 250 clinical hours Fall</td>
<td>NUR 1215H (Adult) or NUR1216H (Paediatric) or NUR 1217H (PHC-GH) Advanced Health Assessment and Therapeutic Management II 250 clinical hours Winter</td>
</tr>
<tr>
<td>NUR1138H (MN-NP students only) Global Health for Advanced Practice Nurse Practitioners</td>
<td></td>
</tr>
<tr>
<td>NUR1097 (MN-NP students only)</td>
<td></td>
</tr>
</tbody>
</table>

## Clinical Practicum Course Descriptions

### Clinical Course

**NUR 1101/1102/1114:** NP Advanced Health Assessment & Clinical Reasoning

Prepare to perform advanced health and physical assessment of the child or adult and family who are experiencing illness. Students must be competent in basic health and physical assessment, and the associated techniques prior to beginning the course. Models of clinical reasoning are investigated, critically reviewed and applied to a broad range of clinical case studies as students develop knowledge and skill in the collection of data, diagnostic approaches and formulation of therapeutic plans in collaboration with clients and families. Practical elements of advanced client assessment are addressed in terms of their impact on the client's health status, including physical and mental status, psychosocial status, developmentally appropriate approaches to assessment, growth and development milestones, family, cultural and community factors, and the implications of determinants of health and risk appraisal. Clinical, theoretical and scientific knowledge is synthesized in the identification and management of existing and potential client states of health and illness. Approaches to effective written and verbal communication of findings to lay individuals and health professional colleagues as they relate to the client and family are addressed.

**NUR 1115/1116/1117**

**Advanced Health Assessment and Therapeutic Management I**

This field experience course incorporates a combination of faculty instruction, guest lectures, and clinical practice. The course provides students with opportunities to analyze synthesize and integrate theoretical principles and concepts into clinical practice with emphasis on diagnostic understanding, developmental issues and collaboration with clients, families and other health professionals.

During the 250 hours of clinical practice, client/family health and illness states are used to build the students' development of advanced skills (e.g., interviewing, physical examination, diagnostics) related to client and family assessment, and to integrate diagnostic reasoning and treatment planning/therapeutic management into practice. Application of the clinical reasoning process is integral to the students' experiences. Students will continue to develop advanced knowledge, skill and judgment related to client and family assessment, incorporating knowledge of diversity, cultural safety, developmental stage and social determinants of health into their assessments, diagnostics, diagnoses and therapeutic plans.

During clinical practicum components, students will become familiar with changes in scope of practice from that of a registered nurse, and the ways that these changes affect their responsibilities and accountabilities as a nurse practitioner. Students will practice in accordance with federal and local legislation, professional and ethical standards, and policy relevant to the role of the nurse practitioner; including those that relate to privacy, documentation and information management (verbal, written and electronic).

Approximately 8 hours/week will be spent in seminar learning and participating in guest lectures. A discussion forum for seminars (online) provides an opportunity for students to facilitate dialogue and communicate ideas and issues. Clinical seminars focus on the presentation of common health and illness symptoms from adolescence through old age (Adult), birth through adolescence (Paediatric) and all ages (PHC-GH) with acute, chronic, emergent, urgent and life-threatening illnesses as well as health promotion and illness prevention activities. There will be a focus on clinical reasoning, diagnostic testing and therapeutic planning. Students in the PHC-GH emphasis will align additional learning related to vulnerable and marginalized populations. Students will critically appraise relevant research and best practice guidelines when developing assignments, participating in on-line discussions, and in clinical practice. In addition, faculty and guest lecturers will provide students the opportunity to learn from individuals actively engaged in practice and research.
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUR1215/1216/1217</td>
<td>Advanced Health Assessment and Therapeutic Management II (250 hours)</td>
<td>This course offers a combination of on-campus synchronous/asynchronous lectures and guest presentations using a flipped classroom format. Lectures will be offered in 8h segments every 2 weeks preceded and followed by online asynchronous discussion and virtual interactive case (VIC) completion. Lecture attendance, ongoing participation in the discussion board and VIC case completion are essential to assist in the development and refinement of skills to critically appraise and synthesize relevant clinical data, research, theory and clinical practice guidelines related to geriatrics, pain, end-of-life care and medical assistance in dying, mental health, diabetes, and skin disorders/dermatologic issues. In addition, faculty and guest lecturers will provide students the opportunity to learn from individuals actively engaged in practice and research. This course also includes 250h of clinical practicum. The course practicum should be in a practice setting that offers broad, comprehensive experience with common client/family health and illness states. During the 250 hours of clinical practice, client/family health and illness states are used to build the students' development of advanced skills related to client and family assessment, and to integrate collaboration, consultation and referral strategies into treatment plans/therapeutic management approaches. Health promotion, health protection, and the prevention of injury, illness, disease and complications are integral to students' experiences. During clinical practicum components, students will become familiar with changes in scope of practice from that of a registered nurse, and the ways that these changes affect their responsibilities and accountabilities as a nurse practitioner. Students will practice in accordance with federal and local legislation, professional and ethical standards, and policy relevant to the role of the nurse practitioner; including those that relate to controlled drugs and substances and assisted dying.</td>
</tr>
<tr>
<td>NUR 1221/1222/1223: Nurse Practitioners: Roles and Issues (200 hours)</td>
<td>Taken as a final course after all other program requirements have been met. This course provides learners with opportunities to continue the analysis, synthesis and integration of advanced theoretical principles and concepts related to advanced nursing practice. Learners will examine legal, organizational and system issues and how these influence the scope of practice and standards of ethical practice, professional accountability, and outcomes of advanced nursing practice. This course is the final practicum experience and incorporates a combination of clinical experience and student/faculty-facilitated seminars.</td>
<td></td>
</tr>
</tbody>
</table>

Course Descriptions can be found online here
SECTION 3: PRACTICUM ROLES & RESPONSIBILITIES

Individual NP students are placed in a clinical practicum to work with either an NP or a physician preceptor. The student works under the guidance and direction of the preceptor and is expected to take on a portion of the workload. Student supervision is integrated into the role of the NP or physician preceptor and supported by the course instructor and the NP program coordinator.

The preceptor's roles include those of a coach, teacher, facilitator, resource person, and clinical evaluator. In most cases, the preceptor is a NP (with a minimum of one year of clinical NP experience). In some situations, students may have a physician preceptor. In this case, students are also assigned a NP Advisor. Students generally have one placement and one preceptor for each practicum course. This is to ensure each student has adequate time to develop in the role of a NP and to allow the preceptor adequate time to assess the student and provide a reliable and valid student and clinical experience evaluation.

Preceptors
The preceptor role is fundamental to helping the student learn, experience, and practice in an environment that is supportive and safe for both the student and the patients. All NP preceptors and NP Advisors must be entitled to practice as an RN (EC) in Ontario (or in their province where placement occurs) with no restrictions. All physician preceptors must be in good standing with the College of Physicians and Surgeons of the province where placement occurs. All NP students must have valid RN registration in their province.

Prior to the Beginning of the Clinical Rotation
- Communicate with the student in order to discuss the clinical environment
- Information such as start times, dress code, reporting of sick time etc. should be communicated prior to the beginning of the practicum experience
- Additional learning opportunities such as rounds, journal clubs etc. can be suggested at this time as well

At the Outset of the Clinical Rotation
- Review the learning plan, clinical portfolio, and practicum competencies with the student
- Assist the student to identify strategies for achieving competencies
- Communicate with the course instructor to establish initial contact (the course instructor typically initiates this contact via email within the first 2 – 3 weeks of the course.)

During the Clinical Rotation
- Facilitate student's introduction to the clinical setting
- Act as a clinical expert and role model sharing experiences and knowledge
- Provide clinical supervision and consultation to the student during their practicum experience
- Meet with the student regularly to discuss progress towards achievement of learning competencies (as outlined in the student's learning plan)
Inform the course instructor of any problems arising from the student placement as soon as these are suspected or identified (Early intervention and faculty support helps to ensure student success and decrease preceptor burden in difficult situations)

Complete all required evaluations* via the online evaluation tool – CORE ELMS (watch for an email link from no-reply@corehighered.com), and discuss the evaluation with the course instructor if unsatisfactory. If you have not received an email, please notify the course instructor.

**After Completion of the Clinical Rotation**

Review the course competencies with the student to determine if successfully achieved. Meet and discuss evaluation of performance with the student. Complete the required final evaluation* online via CORE ELMS (watch for an email link from no-reply@corehighered.com), and discuss the evaluation with the course instructor if unsatisfactory.

Review the clinical portfolio for accuracy

Complete the honorarium request sent via email by the Financial & Payroll Administrator

**Note:** Honoraria requests will be processed once the practicum evaluation has been completed, and final grades have been submitted by the course instructor and approved by Committee on Standing. Honorarium payments are issued September, January, and May each year for the previous term. For more details, visit https://bloomberg.nursing.utoronto.ca/faculty-staff/clinical-instructors/preceptors/nppreceptor.

**NP Advisors**

All students with a physician preceptor in any semester must also have a NP Advisor. The NP advisor is arranged by the Clinical Education Office at the University of Toronto. A NP Advisor will provide feedback via online evaluation to the course instructor about a student's progress towards their clinical competencies as they relate to an understanding of NP practice. NP advisors are not expected to evaluate each clinical evaluation point but only those which were demonstrated as part of the communication with the student during his/her practicum. The NP Advisor will work together with the student and the physician preceptor to ensure the student has the opportunity to learn and be assessed by an Advanced Practice Nurse with NP competencies. NP Advisors usually participate in the student's learning through indirect methods such as video room chats, telephone calls, or email correspondence. They may also participate using face-to-face meetings, or through direct observation in the clinical setting.

The student will provide the NP Advisor with details of his/her individual learning plan at the outset of the course. The student is also asked to provide the NP Advisor with a plan for weekly communication and identify strategies for illustrating progress towards meeting the course and clinical competencies.

The student is expected to negotiate a schedule with the NP Advisor at the beginning of the course. At any point in the semester, the NP Advisor is encouraged to contact the course instructor if there are any concerns about the student's placement or progress, or if contact has not been initiated or is limited.
Some suggestions of how NP Advisors can assess student progress include:

**Indirect:**
- Review sample clinical documentation; discuss student documented case studies and analysis of exemplars describing clinical encounters; discuss experiences related to the NP role with students.

**Direct:**
- Carry out direct observation of a student in the clinical setting.

The NP Advisor is required to document their feedback about the student’s progress and clinical competence via an online evaluation. This feedback will be used together with that provided by the physician preceptor to determine if a student has met the competencies for the clinical practicum component of their course.

**Clinical Education Office**
The staff in the Faculty’s Clinical Education Office identify potential NP placements, in collaboration with the student and the NP program faculty. They recruit suitable preceptors and use a placement matching system to coordinate placements. The staff in the Clinical Education Office are the initial point of contact for students and agencies related to placements. The staff are also responsible for formally notifying agencies when students have been matched to preceptors and informing students of necessary agency orientation requirements.

In the event of a concern with student competencies or behaviors, the preceptor is asked to contact the course instructor as well as the NP program coordinator as soon as a concern is identified. This allows early intervention in order to provide support for both preceptors and students. In any case where a student is not performing at or above the expected standard, written documentation of concerns should be initiated and shared with the course instructor as soon as possible. It is also expected that preceptors communicate their concerns with the NP student with a view to facilitating support and guidance.
Report of Clinical Concern

- Student Reports Clinical Concern
  - Instructor
  - Coordinator
  - Meets with
    - Preceptor
    - Student
  - Plan for Success Developed
    - Resolved
    - Not Resolved
      - Monitor Clinical Progress
      - Meeting with Student, Instructor, Coordinator, Preceptor to explore further options

- Preceptor Reports Clinical Concern
  - Instructor
  - Coordinator
  - Meets with
    - Preceptor
    - Student
  - Plan for Success Developed
    - Resolved
    - Not Resolved
      - Monitor Clinical Progress
      - Meeting with Student, Instructor, Coordinator, Preceptor to explore further options

- Unsatisfactory Final Electronic Evaluation
  - Instructor
  - Meets with
    - Coordinator
    - Student
  - Clinical Competencies not met = failure to proceed to next course
    - Resolved
    - Not Resolved
      - No Dispute
      - Dispute
        - Unsuccessful in Course
        - Meeting with Instructor
          - Meeting with Student, Coordinator, Preceptor
**Student Responsibilities**
The primary objective of practicum experience is to gain knowledge and expertise from working with the preceptor and within the practice setting in preparation for a career as a knowledgeable, competent nurse practitioner. Professional demeanor as would normally be expected of one working in the role of an RN is expected to continue in all practicum experience situations. Respect, collegiality and privacy of information will be upheld at all times by the student. Any breach in conduct should be reported by the preceptor to the instructor immediately.

**Before Beginning a Clinical Rotation, Students are expected to:**
- Analyze and determine what they want to gain from the experience (through reflection on course competencies and individual learning needs)
- Complete online practicum information form
- Ensure that all required documentation for student preparedness permit is valid and complete (immunization, CNO or comparable registration, mask fit testing results, vulnerable sector police record check)
- Complete any agency-specific orientation and/or documentation requirements (e.g. agency ID, secure system access, etc.)
- Develop a draft learning plan; consider the self-reflection piece of the clinical portfolio and the specific course competencies when formulating the learning plan

**At the Outset of every Clinical Practicum**
- Discuss your consolidated clinical portfolio and draft learning plan with the preceptor/submit to course instructor as required
- Discuss with the preceptor reciprocal expectations and devise a schedule of activities to meet learning competencies

**During the Clinical Rotation**
- Maintain an updated clinical portfolio and learning plan
- Seek supervision and feedback from the preceptor on a weekly basis
- Perform within the administrative framework of the practice facility
- Progress toward achievement of all course competencies for a successful clinical evaluation
- Abide by PHIPPA requirements; students will not view any records that they are not authorized to see and will not copy, scan or remove any patient documents from the clinical setting
- Communicate with course instructor if issues arise during practicum placement (e.g. challenges with meeting course competencies, issues with preceptor access or availability, concerns re: clinical supervision, etc.)
After Completion of every Clinical Rotation

- Review the clinical portfolio and learning plan with the preceptor to determine if competencies have been successfully achieved
- Discuss student self-evaluation with the preceptor
- Submit a **preceptor approved** clinical portfolio to instructor verifying hours of on-site clinical practice experience
- Submit a completed learning plan as directed to the instructor
- Keep a copy of the clinical portfolio for submission to the instructor in the next clinical course (i.e. keep 1101 [or 1102 or 1114] for submission at beginning of 1115 [or 1116 or 1117]), etc.
- Complete online preceptor and placement evaluations in a timely manner
SECTION 4: ASSESSMENT AND EVALUATION OF STUDENTS

One of the important roles of the preceptor is to formally provide students with an assessment of their competencies. These are specific to each clinical course (see previous descriptions in Section 2). The following section describes the student assessment methods used at the Lawrence S. Bloomberg Faculty of Nursing. **For students with physician preceptors, a student’s clinical evaluation cannot be considered complete until all required NP Advisor feedback has been submitted via CORE ELMS. Watch for an email link from no-reply@corehighered.com.

Competency Evaluation
Preceptors provide ongoing feedback on their student’s clinical progress throughout the clinical practicum. It is encouraged that preceptors and NP Advisors keep notes on student progress throughout the term. These notes will assist in providing students with individualized and meaningful verbal and written evaluations on their progress. It is helpful to include specific clinical examples to support your observations of the students’ progress.

All clinical courses include two student assessment methods: an early clinical progress update and a final evaluation using CORE.

Early Clinical Progress Update
The NP program co-ordinator will send an email survey requesting information regarding student progress. The clinical progress update usually takes place at week 5.

At this point, the preceptor meets individually with the student during the clinical day to provide them with a verbal evaluation of their progress. The evaluation is the perfect time to conduct a ‘check-in’ with the student. In preparation for the evaluation, it is helpful for the preceptor to review the course competencies and their notes. During this meeting, the preceptor reviews the student’s clinical portfolio and clinical learning plan and discusses how their practicum has progressed to date, how the student believes their goals are being met, how the student is progressing towards meeting the course competencies, and suggested areas for growth. If preceptors are concerned that students are not on track to meet all required competencies by the end of the course, instructors must be informed. Preceptor concerns are discussed with the course instructor and/or NP program coordinator.

NP Advisors communicate with students who have physician preceptors at the 5 week point as well. During this meeting, the NP Advisor reviews the student’s clinical portfolio and clinical learning plan and discusses how their practicum has progressed to date, how the student believes their goals are being met, how the student is progressing towards meeting the course competencies, and suggested areas for growth. NP Advisor concerns are discussed with the course instructor and/or NP program coordinator and then students, preceptors, instructors and coordinators will co-ordinate in order to develop a plan for future success.
Final Evaluations Submitted On-Line via CORE ELMS

Completed by Student
All student evaluations are completed online through our online evaluation system – CORE ELMS (CORE). CORE hosts a community of students and preceptors affiliated with the Lawrence S. Bloomberg Faculty of Nursing. Students carry out self-assessments (competency evaluations) and provide feedback on the clinical experience. All information is private and confidential. Individual evaluations of the preceptor and site are never released to the preceptors. In order to provide constructive feedback, evaluation results are anonymized, collated and shared with the site only after at least three separate evaluations have been provided and a request from the preceptor or site has been made.

Completed by Preceptor
At completion of your student’s placement you are required to complete an online evaluation via CORE. You will receive an email from CORE with your account and login information. The student must complete their self-evaluation first, and then you will complete your preceptor evaluation. As a part of the evaluation you will be required to verify your student’s on-site hours.

We will set up your account with CORE (if not currently a member) and CORE will email you an access password. If you have used CORE previously, you may sign on with your current login name and password.

Completed by NP Advisor
At completion of the student’s placement, NP Advisors complete a NP ADVISOR EVALUATION via CORE. This evaluation is different from the evaluation the preceptor completes. You will receive an email from CORE with your account and login information. We will set up your account with CORE (if not currently a member) and CORE will email you an access password. If you have used CORE previously, you may sign on with your current login name and password.
SECTION 5: POLICY AND PROCEDURES

Entry-to-Practice Competencies for Nurse Practitioners
Competency evaluations are course-specific and based on the entry-level competencies for Nurse Practitioner practice in Ontario. These competencies are the benchmark for the knowledge, skill and judgment a student must demonstrate for safe, ethical and effective NP practice. The entire Entry-to-Practice Competencies for Nurse Practitioners can be accessed using this link: http://www.cno.org/globalassets/docs/reg/47010-np-etp-competencies.pdf.

NP Student Conduct
It is an expectation that NP students demonstrate a high degree of respect towards others as a fundamental aspect of professional conduct. Nurse Practitioner practice is grounded in the values, knowledge and theories of nursing practice (CNO, Entry-to-Practice Competencies for Nurse Practitioners, 2018). Nurse practitioner students in our program must understand and enact this professional standard:

- in their actions and interactions with patients and family members,
- in their communications about patient care and other issues with colleagues,
- in their conduct, manner and demeanor in the practice environment,
- and generally, as a student member and representative of a professional organization.

The Regulated Health Professions Act, 1991 (RHPA) and Nursing Act, 1991 set the legal framework for the practice of nursing. This includes a scope of practice statement and a number of controlled acts NPs are authorized to perform. For additional guidance please refer to:


Guidelines for NP Clinical Performance
The practice of nursing students is guided by the principles of Competence, Client Safety, and Authority as per legislation and/or agency policy. Instructors and students are expected to be familiar with and follow agency policies in relation to student practice. Regardless of what is authorized through legislation or policies, students must provide care only in circumstances where they have the necessary knowledge, skill, and judgment to perform safely, effectively, and ethically. The nursing student is expected to:

- Identify situations where he/she requires assistance
- Seek appropriate assistance, direction, and supervision
Accountabilities for Supporting Students
“Nurses have a professional obligation to support learners to develop and refine the competencies needed for safe, ethical and effective practice, and to support the development and socialization of colleagues who are learning”. Please refer to handout of CNO Practice Guideline: Supporting Learners http://www.cno.org/en/learn-about-standards-guidelines/educational-tools/ask-practice/supporting-learners/

Expectations of Students in Clinical Practice
The primary objective of practicum experience is to gain knowledge and expertise from working with the preceptor and within the practice setting in preparation for a career as a knowledgeable, skilled nurse practitioner. Professional demeanor as would normally be expected of one working in the role of an RN is expected to continue in all practicum experience situations. Respect, collegiality and privacy of information will be upheld at all times by the student.

“Nurse practitioners are expected to comply with relevant laws and other College of Nurses of Ontario standards and guidelines (http://www.cno.org/en/learn-about-standards-guidelines/standards-and-guidelines/). Nurse practitioners are authorized to diagnose, order and interpret diagnostic tests, and prescribe medications and other treatments for clients. NP practice includes health promotion with the aim of optimizing the health of people, families, communities and populations. This enables NPs to practice with diverse client populations in a variety of contexts and practice settings such as acute care, primary care, rehabilitative care, curative and supportive care, and palliative/end-of-life care” (CNO NP Practice Standard, 2018).

Minimal and acceptable characteristics for safe clinical practice for NP students are described according to the following standards: 1) health assessment, 2) diagnosis, 3) therapeutic management, 4) collaboration, consultation and referral, 5) conflict of interest, and 6) discontinuing the NP-client relationship. Further details are found in the CNO NP Practice Standard (2018) at: http://www.cno.org/globalassets/docs/prac/41038_strdrnec.pdf.

Unsafe Performance in the Clinical Setting
Unsafe performance is defined relative to course expectations and competencies. Unsafe performance in clinical practice includes behavior that reflects a lack of knowledge, skill, or judgment, or disregard for the welfare of the client. Unsafe performance indicates that the student is unfit to continue in a course or courses or to continue as a student in the program. If you are concerned about your student’s practice, please contact the clinical instructor and or NP program coordinator immediately so that they can ensure timely and appropriate action is taken.

Student Injury
If a student injures themselves while at clinical (i.e. needle stick injury, fall), it is important that certain steps be followed to ensure that the student receives appropriate follow-up. Students should also complete an online clinical incident reporting form. This new form must be completed along with the accompanying paperwork for all WSIB injuries. For non-WSIB incidents, reporting is optional and anonymous. This form assists the Faculty in tracking injuries and incidents that occur during practicum placements. The form can be located at https://bloomberg.nursing.utoronto.ca/current-students/student-forms#content4
In the event of a student injury during practicum placement, please follow the instructions below:

1. The student notifies the preceptor as soon as incident/ injury occurs. The Course Instructor must be notified as well.

2. The preceptor sends the student to the organization’s Occupational Health Department (or the ER if the organization does not have Occupational Health or if OH is closed). The preceptor tells the student to request a blood test during assessment/examination if this is a needle stick injury or bodily fluid exposure.

3. The student should request a copy of the completed assessment form from the Occupational Health Nurse or ER physician to provide the Faculty of Nursing.

4. On the same day as the incident, the preceptor must send an email to the Course Instructor and the Clinical Education Office nursingplacementoffice@utoronto.ca.

5. Within 48 hours of the incident, the preceptor and student complete the following forms:
   a. University of Toronto Students on Unpaid Work Placements Accident Report
   b. Postsecondary Student Unpaid Work Placement Workplace Insurance Claim
   c. Letter of Authorization to Represent Employer forms (please refer to the WSIB Responsibility Matrix). These three forms can be found on the Faculty’s website at: https://bloomberg.nursing.utoronto.ca/current-students/student-forms#content4 (use Internet Explorer as your web browser to open these forms, for sample document “Postsecondary Student Unpaid Work” please see appendix)

6. Please note that students/preceptors to submit WSIB documents using the University of Toronto’s secure file transfer system UTSend https://send.utoronto.ca/. UTSend file transfers can be directed to nursingplacementoffice@utoronto.ca on the UTSend system.

7. Upon receipt of the completed forms, the Clinical Education Office will submit all the completed documentation to the University of Toronto’s Office of the Vice-Provost, Students on behalf of the Faculty of Nursing.

8. If a student is advised to take time off from the clinical placement, the student must obtain a note from his/her family physician before returning to clinical practice. The note should state “May return to regular duties” or the student will need to register with Accessibility Services for any accommodations.
<table>
<thead>
<tr>
<th>University of Toronto Students on Unpaid Work Placements Accident Report</th>
<th>Student</th>
<th>Preceptor</th>
<th>Clinical Education Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>complete middle two sections on page 1 &quot;Student Trainee Information&quot; and &quot;Reporting Information&quot;</td>
<td>complete the top portion of page 1 i.e. indicate appropriate option &quot;No Injury&quot; vs. &quot;Injury/Illness&quot;, in most cases &quot;No Lost Time&quot; is indicated (only indicate Lost Time if student is not able to return to their placement for a significant amount of time and therefore is unable to graduate on time), complete &quot;Incident Information&quot; bottom of page 1 and continued on page 2, complete &quot;Confirmation of Placement Employer&quot; and sign bottom of the form with date</td>
<td>send to Office of the Vice-Provost, Students</td>
<td></td>
</tr>
<tr>
<td>Postsecondary Student Unpaid Work Placement Workplace Insurance Claim</td>
<td>complete sections A, B and C and sign</td>
<td>complete section D and sign</td>
<td>complete section D and send to Office of the Vice-Provost, Students</td>
</tr>
<tr>
<td>Letter of Authorization to Represent Employer</td>
<td>complete section where it says Placement Employer</td>
<td></td>
<td>Complete section where it says Training Agency and send to Office of the Vice-Provost, Students</td>
</tr>
</tbody>
</table>
Clinical Attendance Expectations

Clinical practice is central to nursing and mandatory in the Nurse Practitioner Program at the Lawrence S Bloomberg Faculty of Nursing. If students cannot attend clinical practicums, they are required to follow the process below. Failure to act responsibly regarding absences constitutes non-compliance with the University of Toronto’s Standards of Professional Practice Behaviour for All Health Professional Students and will impact the student’s professionalism assessment and overall clinical evaluation. Breach of these standards may be cause for failure in a course. Students are expected to arrive with all onboarding/orientation completed. Students should ensure they have signed and returned all the necessary documentation to the agency’s Professional Practice, if applicable.

Absences
In the case of absence due to illness, students must notify: (1) their Preceptor and (2) Course Instructor and (3) the Clinical placement site. Course instructors should be notified by email as soon as an absence occurs; the clinical placement site and preceptor should be notified by phone prior to the beginning of the shift.

Lateness
Students are expected to arrive at the time agreed with the primary preceptor. If student arrival at the clinical placement site will be delayed due to extenuating circumstances, students must notify the Preceptor and the clinical placement site as soon as possible. Ongoing issues with lateness, and/or failure to provide appropriate notification will negatively impact the student’s clinical evaluation.

Vacations
Students are expected to attend course required activities within the course start and end dates. Vacations should be planned around these dates. Commitments which may affect students’ attendance in clinical practicums must be discussed with and approved by the course instructor and/or NP program coordinator prior to the beginning of the term.

Student Preparedness Permit
Students need to meet the requirements of a student preparedness permit prior to the fall term of each academic year, including CNO (or equivalent) registration, immunization, CPR, N95, and a police record check. For more information on additional requirements, visit https://bloomberg.nursing.utoronto.ca/current-students/placements/graduate/graduate-program-practicum-requirements

Vulnerable Sector Police Check
All MN and Post-Master’s NP students are required to comply with the Lawrence S. Bloomberg Faculty of Nursing Police Record Check Guidelines https://bloomberg.nursing.utoronto.ca/current-students/placements/graduate/graduate-program-practicum-requirements#content2
Placement Process (Points of Contact / Escalating Issues)

Notes: This flowchart is simplified and does not represent every scenario that can arise during placement. When a concern is raised the process really changes from a linear process to bidirectional. There should be ongoing communication between the preceptor, student, course instructor +/- NP program coordinator and this is in-keeping with U of T and CNO standards for supporting students.

Student begins placement

Clinical Education Office staff member sends a placement confirmation email message to all preceptors with a copy of the Preceptor Manual

Course Instructor sends an introductory email message to all preceptors with a copy of the course syllabus

During placement, the preceptor acts as the clinical expert and role model for the student

Throughout the term, students, preceptors, and or course instructors may consult with the NP Program Coordinator for guidance

If warranted, the NP Program Coordinator can request that staff in the Clinical Education Office find an alternative placement for the student (occurs early in term)

When appropriate, NP Program Coordinator can resolve issues

When needed, preceptor and/or student may identify to Course Instructor and NP Program Coordinator any difficulties with placement

Course Instructor sends a mid-term email to prompt the preceptor to discuss with the student his/her progress and learning goals

Course instructor determines pass/fail grade for student

Preceptor completes a final evaluation of the student’s placement experience and course instructor reviews

Student completes an evaluation of preceptor, evaluation of site, and self-evaluation

Student completes placement, reviews the clinical portfolio and clinical learning plan with preceptor

If necessary, the matter is discussed with the MN Program Director and Associate Dean Academic
Adjunct Appointments

NP Preceptors are encouraged to apply for an Adjunct Appointment at the Lawrence S. Bloomberg Faculty of Nursing at the University of Toronto. Adjunct appointments are granted to preceptors who do not currently hold an appointment at the University of Toronto and are employed elsewhere in a position that is not primarily academic in nature, who have special skills or learning of value to the Bloomberg Faculty and who may provide services for which recognition is desirable.
For more information, please visit:
http://bloomberg.nursing.utoronto.ca/staff/clinapptprocess.htm

Privileges of Adjunct Faculty
The following privileges are associated with an Adjunct academic appointment at the Lawrence S. Bloomberg Faculty of Nursing:

1. Opportunities for professional development.
2. University of Toronto Library privileges including access to paper and electronic library holdings (for the duration of the appointment). In order to obtain a card please send your request to appointments.nursing@utoronto.ca
3. University of Toronto email account.
4. Reduced rates on courses offered at the Centre for Professional Development.
5. Reduced rates on licensed software: https://onesearch.library.utoronto.ca/ic/licensed-software
6. Adjunct appointees may be a co-investigator on a grant held by appointed or status-only faculty at the University of Toronto but cannot be the principal investigator on research funds administered by the University.
7. Regular communication and updates of issues and events associated with the Lawrence S. Bloomberg Faculty of Nursing.

Duties and Obligations of Adjunct Faculty
1. Adjunct faculty are expected to acknowledge their affiliation with the Lawrence S. Bloomberg Faculty of Nursing in all publications and scholarly works resulting from the adjunct appointment.
2. Adjunct faculty who teach or engage in research are bound by all University of Toronto policies governing academic conduct.
3. Adjunct faculty must complete the Annual Academic Activity Profile on or before June 30th each year of their academic appointment in order to continue to be considered for ongoing adjunct status.
### SECTION 6: CHARACTERISTICS OF AN EFFECTIVE PRECEPTOR/NP ADVISOR

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
</tr>
</thead>
</table>
| **Knowledge**             | • understanding entry-level NP course competencies and advanced practice models of care  
                            • assisting students in how to demonstrate entry-level NP course competencies and advanced practice models of care  
                            • being up-to-date on NP standards of practice, organizational policies, and evidence-based guidelines  
                            • using this knowledge to help students demonstrate entry-level NP course competencies  
                            • knowledge of students’ backgrounds, previous NP clinical experiences (clinical portfolio) and clinical learning goals (clinical learning plans) |
| **Clinical Competence**   | • experts in their clinical specialty  
                            • have maintained their advanced practice clinical skills/competence  
                            • can guide NP students in demonstrating entry-level NP course competencies  
                            • have developing / developed skill in clinical teaching |
| **Skill in Clinical Teaching** | • ability to assess students’ learning goals, plan instruction / clinical experiences that meet student learning goals and foster achievement of entry-level NP course competencies, and evaluate learning (objective evaluations with constructive feedback)  
                            • understands adult learning theories and knows how to teach (being an expert clinician is not enough)  
                            • good organizational skills; keeping students challenged; good role model |
| **Interpersonal Relationship with Students** | • genuine, direct and honest in relationships with students; willing to express own feelings and mistakes / limitations  
                            • trust and respect for diversity (age, background, abilities, gender, ethnicity, race, sexual orientation, learning styles, etc.); nonjudgmental; showing confidence in students  
                            • empathetic understanding, supporting students and demonstrating caring behaviours  
                            • being approachable, encouraging students to ask questions and seek guidance when needed |
| **Personal Characteristics** | • enthusiasm and enjoyment in working with students  
                            • major factor in keeping students motivated and interested in learning  
                            • sense of humour, willingness to admit limitations and mistakes honestly, patience and flexibility  
                            • friendly, provide students with opportunity to share feelings and concerns about patients  
                            • integrity, perseverance, courage  
                            • professional nursing identity |
• well prepared and confident

(Adapted from Gaberson et al., 2015; Hanson & Stenvig, 2008, Melrose et al., 2015)
Guiding Learners in Clinical Practice
(Adapted from Gaberson et al., 2015)

This is the instructional phase of the clinical teaching process – the actual teaching of students in the clinical setting. Guiding learners is a process of coaching students to acquire the essential knowledge, technological and other skills, and values for practice. This is where students develop their clinical reasoning skills and learn to think like a nurse practitioner.

Skill in Observing Clinical Performance
Preceptors/NP Advisors need to be skilled in observing/discussing/evaluating clinical performance, arriving at sound judgments about that performance, and planning/suggesting additional learning activities as needed.

---

Guidelines for Observing Students in Clinical Practice

- Examine your values and biases that may influence observations of/conversations with students and judgments about clinical performance
- Do not rely on first impressions… these often change significantly with further observations of/discussions with the student
- Make a series of observations or have several discussions before drawing conclusions about student knowledge/clinical performance
- Share observations/insights regularly with students and judgments about whether they are meeting entry-level NP course competencies
- Focus observations/discussions on the entry-level NP course competencies
- Use observations/discussions as a way of providing both positive and constructive feedback to students
- When discussing observations/clinical experiences with students, obtain their perceptions of performance and be willing to modify judgments when a different perspective is offered

(Modified from Gaberson, Oermann & Shellenbarger, 2015)
Skill in Questioning Students
Preceptors/NP Advisors also need to be skilled in questioning students to promote critical thinking and clinical judgment. This includes the ability to ask thought-provoking questions without students feeling that they are being interrogated. Open ended questions about students’ thinking and the rationale they used for arriving at clinical decisions foster development of critical thinking skills. It is important to assess students’ understanding of relevant concepts and theories and how they apply to patient care. Questions should encourage learners to think beyond the obvious.

“Situated coaching” has been described by the Carnegie National Study of Nursing Education (Benner, Sutphen, Leonard & Day, 2009) as focusing questions within specific clinical situations (McNiesh, Benner & Chesla, 2011). In this study, an example of excellent clinical teaching by Lisa Day encourages use of the following questions:

1. What are your concerns for this patient?
2. What are you planning to do to cope with these concerns (do you need additional information? what diagnostics will you order? What are your differential diagnoses? What pharmacologic treatments will you prescribe? What non-pharmacologic interventions might be useful? Do you need to consult/refer? Is additional education needed?)
3. What are the patient's concerns?
4. Who/where are your resources?

5 Principles on Providing Feedback in the Clinical Setting

1. Feedback should be precise and specific
2. For procedures, use of technologies, and any psychomotor skills, the preceptor should provide both verbal (by describing observations of performance and explaining what to do differently) and visual feedback (by demonstrating correct performance)
3. Feedback about performance should be given to students at the time of learning or immediately following it
4. Students need different amounts of feedback and positive reinforcement
5. Feedback should be diagnostic – after identifying areas in which further learning is needed, the preceptor's responsibility is to guide students so they can improve performance

(Adapted from Gaberson, Oermann & Shellenbarger, 2015)
How to Navigate the Evaluation System:

1. Student evaluations are completed using the experiential learning management software **CORE ELMS**.

2. Watch for an email link from **no-reply@corehighered.com**. Sign in to CORE using the link provided or at [https://www.corehighered.com/login-elms](https://www.corehighered.com/login-elms).
3. The Faculty of Nursing will send Evaluation Email Alerts which will provide reminders to complete the evaluation with a link to access the evaluation.

4. You may complete evaluations on your student by clicking **Evaluations > Evaluation of Students** on the left-sided menu.

5. Click on the Evaluation Name to begin the evaluation.

**Note**: NP Advisor evaluations will have the words NP ADVISOR EVALUATION indicated in the Evaluation Name.
6. At the top of the evaluation, details of the practicum placement are listed including student name, preceptor name, site, date, and type of evaluation. Please note a preceptor is referred to as an “Instructor” in the CORE evaluation.
7. You may save your evaluation in draft mode by clicking “Save Changes” or press “Submit” when you have completed the evaluation. If you need to make changes after submitting an evaluation, you will need to contact the Clinical Education Office to unlock it.

8. Once you press “Submit”, you have now completed the evaluation component.
SECTION 7: PRECEPTOR BENEFITS

Preceptor Honorarium

The Lawrence S. Bloomberg Faculty of Nursing at the University of Toronto provides a modest honorarium to preceptors of NP students except where prohibited.

All preceptors who complete clinical practice hours with a student and who complete the evaluation will receive an honorarium. Honoraria are not provided for NP Advisors. The honorarium can be designated to the individual preceptor or the site.

Preceptors must complete the student evaluation and instructors must review, confirm and submit final grades. Final grades must be approved by Committee on Standing. This subsequently triggers the honorarium payment process. Typically, the payroll process occurs at the start of the subsequent term.

Maximum honoraria provided per course

<table>
<thead>
<tr>
<th>Course</th>
<th>Honoraria Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUR 1101, 1102, 1114 (spring/summer)</td>
<td>$500.00 per 80 hours (maximum 80 hours)</td>
</tr>
<tr>
<td>NUR 1115, 1116, 1117 (fall)</td>
<td>$1,250 per 250 hours (maximum 250 hours)</td>
</tr>
<tr>
<td>NUR 1215, 1216, 1217 (winter)</td>
<td>$1,250 per 250 hours (maximum 250 hours)</td>
</tr>
<tr>
<td>NUR 1221, 1222, 1223 (spring/summer)</td>
<td>$1,000.00 per 200 hours (maximum 200 hours)</td>
</tr>
</tbody>
</table>

Note: Honoraria payments can only be processed after the receipt of honorarium payment forms by the stated deadline, the completion of students’ practicum evaluations, and the approval of final grades submitted by the course instructors.

If preceptors arrange for additional preceptors for a student in any given term, these arrangements must be communicated to the course instructor. Also, any additional preceptors must receive the necessary honorarium payment forms to complete so that they are able to receive a portion of the honorarium payment. All honorarium payment forms are pro-rated based on the number of hours.

Returning preceptors who have no changes to their previously submitted information (i.e., address, name, banking information) do not need to submit the forms and will be paid using the existing information. We request, that at the start of each term only new preceptors and returning preceptors who have changes to their information (name, address, bank, etc.) complete the Honorarium Payment forms, which can be found at https://bloomberg.nursing.utoronto.ca/faculty-staff/clinical-instructorspreceptors/nppreceptor and return via email to the Financial & Payroll Administrator at preceptor.nursing@utoronto.ca. We also suggest returning preceptors re-submit their information if they are unsure that their information in U of T’s financial system is current and correct. In addition, preceptors are required to identify if the payment is paid either to the preceptor or the organization.