



London Health Sciences Centre

# Nursing Learner Placement Handbook



Nursing Professional Practice, June 2023

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The Nursing Learner Placement Handbook is a reference for leaders, learners, mentors/preceptors, staff and faculty to help guide decision-making related to nursing learner placements within London Health Science Centre (LHSC).

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## Code of Conduct

London Health Sciences Centre is committed to providing a safe and healthy work environment for all employees, physicians, dentists, midwives, learners, and volunteers.

A safe and healthy environment is one that inspires teamwork, respect for the individual, collaboration and professional development. It is an environment that fosters good morale and attitude, the kind of environment in which we all want to work!

To that end, LHSC has adopted this Code of Conduct as a guide to expected behaviour among employees, physicians, dentists, midwives, learners and volunteers.

We are all accountable to provide the highest quality healthcare, teaching, research and advocacy on behalf of the patients and the community we serve. We must ensure the highest standards of ethical conduct, integrity and professionalism are standard practice.

- R** Respect and consider the opinions and contributions of others.
- E** Embrace compassion and show genuine concern for patients and their families.
- S** Share your suggestions and concerns with discretion and tact.
- P** Protect privileged information.
- E** Engage in honest, open and truthful communication.
- C** Create and foster a collaborative and caring work environment.
- T** Treat everyone with dignity and respect.

Refer to the **Code of Conduct | London Health Sciences Centre (lhsc.on.ca)** website for further information.

## Our Vision, Mission, and Values

At LHSC, our employees, physicians, dentists, midwives, learners, and volunteers help provide exceptional care and experiences for our patients and families. What brings us together is our shared vision, mission, and values.

Our **vision** is working together to shape the future of health.

Our vision is achieved through our **mission**, which is our commitment to:

- collaborating with patients, families, and system partners to deliver excellent care experiences and outcomes
- educating the healthcare providers of tomorrow
- advancing new discoveries and innovations that optimize the health and wellbeing of those we serve.

Patients are at the centre of everything we do and four **values** guide us in supporting our patients and each other.

- **Compassion:** engaging others with kindness, sensitivity and respect.
- **Teamwork:** working together to serve others.
- **Curiosity:** gaining knowledge through questioning and exploration.
- **Accountability:** adhering to the highest standards of personal, professional, and corporate responsibility.

By living our **vision, mission, and values**, together we can improve care for all those we serve. More information can be found @ [Our Vision, Mission, and Values | LHSC](#).

## Nursing at LHSC

The website [Nursing | London Health Sciences Centre \(lhsc.on.ca\)](https://lhsc.on.ca) on the LHSC Intranet, provides nursing specific information and resources. Within this website under the *Orientation and Placement* heading within the *Nursing learner Placements* section, there are additional resources to support nursing learner placements for both learners and mentor/preceptors at LHSC.

**Learners: Please note information on the LHSC Intranet can only be accessed via LHSC computers, unless you have web access to LHSC.**

## Our Commitment to Nursing Learners

LHSC, in partnership with a number of educational agencies, including Western University, Fanshawe College and other academic agencies, supports the clinical education of more than 2100 nursing learners annually. We are committed to providing high quality, supportive learning environments to facilitate meaningful, challenging learning experiences for all nursing learners. Nurses at LHSC commit their time and expertise to help learners develop and refine the competencies needed for safe, ethical and effective practice, and support the development and socialization of prospective nurses.

LHSC strives to ensure quality practice settings where learners can learn, discover, and acquire skills to achieve their academic and personal career goals for the future by:

- Expressing support for cultural and ethnic diversity in policies, communication practices and educational materials
- Fostering positive and constructive clinical placement relationships with educational facilities
- Ensuring that clinical placement contracts articulate current, applicable responsibilities
- Engaging in ongoing collaboration with education institutions to develop strategies that foster effective teaching-learning relationships and promote a supportive learning environment for learners
- Providing professional development opportunities for learners
- Demonstrating value for nurses in a learner role
- Working with educational faculty to ensure there are appropriate placements for learners
- Providing access to resources for both mentors and learners

## Learner Affairs

The external LHSC website [Welcome to Learner Affairs! | LHSC](#) provides information regarding learner placement and requirements.

All Learners and Clinical Instructors must complete the pre-requisites through NirvSystem and be cleared by Learner Affairs *prior to* starting a placement (as in the case of learners) or supervising learners (as in the case of Clinical Instructors) at LHSC.

## Privacy and Confidentiality

LHSC and its staff and affiliates are responsible to comply with the Personal Health Information Protection Act (PHIPA). LHSC is committed to a high standard of privacy and has implemented policies and procedures to ensure personal health information (PHI) is kept confidential and

secure while allowing for the effective delivery of health care.

This policy is the foundation for LHSC's PHI practices and sets the standard upon which the organization collects, uses, discloses, retains and safeguards PHI under its custody and control (e.g. PHI about an LHSC patient that is collected, used, disclosed or retained by the organization for any purpose).

For information about LHSC's personal information practices and obligations under the Freedom of Information and Protection of Privacy Act (FIPPA), consult with the Freedom of Information (FOI) Office.

Breaches of the Hospital's privacy policies and/or College of Nurses of Ontario (CNO) Standards of Practice may be cause for disciplinary action, up to and including termination of employment/contract/learner placement or loss of appointment or affiliation with the organization (refer to the LHSC Breach of Privacy procedure within the LHSC Privacy policy). LHSC and its staff and affiliates (learners are included as affiliates) are also subject to the fines and penalties set out in PHIPA.

For further information regarding Privacy and Confidentiality refer to the LHSC [Privacy](#) policy on the LHSC [PolicyManager \(policymedical.net\)](#) and the LHSC Intranet website [Privacy | London Health Sciences Centre \(lhsc.on.ca\)](#).

## Uses of Cellular Phones and Other Wireless Devices

In general, use of personal wireless devices in the clinical area is to be limited to accessing resources to support patient care and not used for personal, non-clinical related reasons.

Staff/affiliates, patients and visitors using wireless devices on hospital property are responsible to:

- Comply with all related hospital policies and standards to protect confidential information and information technology systems
- Obtain consent prior to photographing or recording any individual on hospital property according to Photography, Video and Audio Recording Policy
- Maintain a respectful environment in accordance with the Code of Conduct

Failure of staff/affiliates, patients or visitors to comply with the *Uses of Cellular Phones and Other Wireless Devices* policy should be escalated to area leadership/After Hours Coordinator and/or Security Services, as appropriate.

Failure of staff/affiliates to comply with this policy may result in disciplinary action, up to and including termination of employment/contract or loss of appointment or affiliation with the organization.

Wireless devices can cause electromagnetic interference (EMI) or disruptions in the operation of medical devices. EMI poses a minimal risk to patients provided wireless devices are kept a safe distance from medical devices. Low risk and medium risk wireless devices such as cell phones, smart phones and wireless tablets, are to be kept a minimum distance of one (1) metre from any medical devices.

High Risk wireless devices are only permitted for use by Security, Facilities Engineering, Portering and Emergency Response Personnel and require a minimum distance of three (3) metres from any medical devices.

Refer to the [Uses of Cellular Phones and Other Wireless Devices](#) policy on the LHSC [PolicyManager \(policymedical.net\)](#) for more information.

## Safety and Wellbeing

### Workplace Harassment, Bullying and Discrimination

In accordance with the LHSC [Harassment, Bullying and Discrimination](#) procedure and applicable legislation, all staff, affiliates, patients, family, and visitors/care partners are responsible to assist with maintaining an environment that is free of any form of harassment, bullying or discrimination by:

- Avoiding any conduct which might constitute harassing, bullying, or discriminatory behavior, and
- Reporting incidents of harassment, bullying, or discrimination that have been experienced or witnessed.

Any behaviour considered to be harassment, bullying or discrimination as defined in [Harassment, Bullying and Discrimination](#) procedure and/or the Ontario Human Rights Code is an infringement of human rights and additionally, may be considered professional misconduct

### Immediate Actions/Response to Perceived Harassment, Bullying and/or Discrimination

Learners who feel they are being subjected to harassment, bullying and/or discrimination should:

- where appropriate, inform the offender, in person or in writing, their behavior is viewed as harassing, bullying and/or discriminatory, is unwelcome, and should stop
- document the perceived harassment, bullying and/or discrimination and any efforts to resolve it for their own record

### Reporting a Complaint/Allegations

Learners who feel they have experienced or witnessed harassment, bullying and/or discrimination should report the matter as soon as possible to their clinical instructor or faculty advisor for support and assistance with submitting a complaint in alignment with the educational institutions processes as well as the LHSC *Harassment, Bullying and Discrimination* procedure.

Refer to the LHSC [Harassment, Bullying and Discrimination](#) procedure on the LHSC [PolicyManager \(policymedical.net\)](#) for more information.

### Portable Panic Alarms and Screamer

Nursing learners and Clinical Instructors must wear a Portable Panic Alarm or Screamer in all LHSC areas identified as areas where additional safety protocols are required.

As of January 2020, the areas where Portable Panic Alarms or Screamers are **mandatory**: all Medicine areas; all Mental Health areas; all Emergency departments (adult and children's); and Neurosciences (UH 7IP). **\*Ask in the area you are assigned to as this can change.**

Nursing learners and Clinical Instructors can purchase a Screamer (for \$15.00) for their placements online through NirvSystem. Once the payment has been processed, they can pick up a screamer at Go2HR (either location Victoria Hospital/University Hospital). Learners and Clinical Instructors must show them their electronic receipt as proof of purchase when picking up the screamer. Portable Panic Alarms are worn in most Mental Health areas and are loaned to the learner, not purchased.

When learners are completing the required eModules for placement through NirvSystem, learners must complete the Panic Alarms iLearn module and print, sign, and date the results page indicating a score of at least 80%. Learners are to provide this proof of completion to either their mentor or clinical instructor for all of the areas where they are mandatory. Clinical Instructors should show the area Manager their completed Panic Alarm iLearn results page.

Panic alarms and screamers must be tested by the learner or Clinical Instructor every two weeks. They should be worn above the waist and above the collarbone. Failure to comply with this policy may result in the learner being asked to leave the unit until they are able to secure a panic alarm and wear it according to the guidelines set out in the iLearn module.

### **Workplace Violence & Violence Prevention Training**

All nursing learners at LHSC are required to complete a Non-Violent Crisis Intervention program prior to the start of their placement. This training is coordinated by the individual schools as part of pre-placement requirements, and Learner Affairs must receive an attestation form from the school showing the learner has completed this training *prior to* starting their placement.

The training will contain content on assessing risk of violence, navigating the physical environment in a way that reduces risk of violence, basic de-escalation, and physical self-protective techniques. However, physical self-protective techniques are always considered a last resort.

**Learners should disengage from any patient that is escalating to the point of physical violence, make their way to a safe area, and inform their mentor or clinical instructor and unit staff of the situation.**

Even if the provided training includes training on physical holds to restrain a violent person, students **should not** utilize these techniques while on placement.

**Learners do not receive training on the use of mechanical restraints, and should not be involved in applying, adjusting, or removing mechanical restraints.**

### **Behaviour Safety Alert Flagging**

All patients 10 years of age and older will be assessed for risk for violent behaviour at the first point of contact, throughout admission, and at each subsequent visit/admission to facilitate early recognition of violence risk according to the procedures outlined in this policy.

Where a patient is identified as having a moderate or high risk of violent behaviour, visual alerts will be implemented, including a Behaviour Safety Alert (BSA) applied to the corresponding electronic health record (EHR) that describes behaviours, triggers and safety measures. Other visual indicators include applying a purple armband to the patient, an exclamation mark sign on the door and over the patient's bed, and an exclamation mark sticker on the spine of the patient's chart.

For family members and visitors who are identified as having a known history, or potential risk for violent behaviour, a BSA will be applied to the EHR of the related patient to communicate this risk.

Nursing learners are responsible to maintain awareness of the BSA status of patients they are working with. **When providing care for patients with a BSA flag, learners must check with the assigned LHSC staff member to determine whether the patient is appropriate for the learner to work with and if they need to be directly supervised by a staff nurse.**

### **Workplace Injury**

LHSC staff and affiliates are responsible for working in a safe manner by following the measures, procedures and training received and using the safety equipment and devices provided to prevent or minimize adverse events.

An adverse event entry must be entered within 24 hours of occurrence by an LHSC staff member indicating input by the learner/Clinical Instructor.

In the event learners or Clinical Instructors experience a workplace injury:

- Learners must notify their Clinical Instructor or Faculty Advisor and seek medical attention from the Emergency Department or family physician.
  - **Do not delay in seeking medical attention if unable to contact the Clinical Instructor or Faculty Advisor**
- Learners and Clinical Instructors are *not* to report to OHSS.
- Western learners should have an emergency contact card behind their ID badge outlining who to call in an emergency, if required.
- Notify area leadership/After Hours Manager immediately in person or by phone of:
  - Level 4/5 events and events of concern
  - Critical injuries
- Notify Security immediately to report any critical injuries or if the injury occurs outside of a clinical area
- Participate in investigation and follow up, as required

### **Adverse Events Involving Patients, Visitors/Care Partners, Property**

Adverse Event reporting is the responsibility of all staff/affiliates that observe, are involved in, or made aware of an adverse event or near miss to ensure it is reported in the LHSC [Adverse Event Management System \(AEMS\)](#) within 24 hours of the event.

All adverse events and near misses are investigated to identify system gaps and corrective actions, and to manage potential legal and insurance claims.

Learners and Clinical Instructors are not granted access to AEMS. Therefore, the event should be entered by a LHSC staff member indicating input by the learner/Clinical Instructor.

Learners may be involved in adverse events or near misses and should take the appropriate steps to address the situation, as outlined below.

### **Adverse Events Involving Patients**

**Take immediate actions to stop the event and ensure safety and immediate care needs of those affected.**

- Notify area leadership/After Hours Manager immediately by phone of:
  - Potential Critical incidents (level 4/5) and events of concern; and
  - Critical injuries
- Notify Security immediately of critical injuries. Critical Incident Review and Management for Patient Events policy.
- Disclosure to the patient/substitute decision maker should be initiated as soon as reasonably possible, no later than 48 hours per the LHSC [Disclosure of Patient Harm Process Map](#) (Appendix A; [Disclosure of Patient Harm](#) procedure). In harm level 2 and level 3-Involving Minor Injury/Harm, the learner is to be accompanied and supported by LHSC staff or leadership when disclosing any adverse event.
- Report the facts of the event in AEMS within 24 hours (Refer to Downtime Procedure when AEMS is unavailable). For affiliates who do not have access to AEMS, events should be entered by an LHSC staff member.
- Document the facts of the event in the patient's health record, including patient impact, actions taken and outcome.
- Participate in investigation and follow-up as required.
- Medical equipment/devices, implants and surgical hardware involved in an adverse event must not be disposed of, returned to the manufacturer/supplier or given to the patient without prior approval from Risk Management.
- If the event involves medical equipment/device:
  - Remove patient from the equipment/device.
  - Retain and bag all consumables, packaging and relevant accessories and attach them to the equipment/device.

- Wipe down the equipment/device if it is antibiotic resistant organism (ARO) contaminated.
- Contact Biomedical Engineering.
- Print and attach the AEMS label to the equipment/device and transport it to Biomedical Engineering or Sterile Processing Department as appropriate.
- Any object involved in an adverse event (e.g. fractured implants, failed pacemakers, post-surgical or any retained foreign bodies) must be retained and Risk Management consulted to assess the need to retain for evidentiary protection.

### **Adverse Events Involving Visitors/Care Partners**

**Take immediate actions to stop the incident and ensure safety and assist the injured visitor/care partner in finding medical treatment.**

- Notify most responsible leader/After Hours Coordinator immediately by phone of:
  - Potential critical injury (Level 4/5) incidents or incidents of concern, and
  - Critical injuries
- Notify Security immediately of critical injuries (refer to Critical Injury)
- If the incident occurs outside of a clinical area:
- Notify Security immediately by phone of all incidents.
- Report the facts of the incident in AEMS within 24 hours of occurrence.
- Participate in investigation and follow up as required.
- When an incident is related to a fall notify Security and OHSS immediately, regardless of the injury level.

### **Adverse Events Involving Theft/Loss of Patient Belongings/Property**

- Conduct a thorough search for the item(s)
- Contact Linen or Food Services if it is possible that the items may have been inadvertently removed when the food tray or linen was changed.
- Interview patient/care partner to obtain information that may indicate when and how the property/belongings went missing.
- Contact Security.
- Notify the most responsible leader immediately by phone of any incidents involving significant theft/loss. Report the incident in AEMS within 24 hours of occurrence.
- Participate in investigation and follow up as required.

### **Adverse Events Involving Hospital Property Damage/Loss/Theft**

- Report damage/theft/loss involving hospital property to the following departments as appropriate:
- Facilities Management– Damage related to water leakage, elevator malfunctions, electrical malfunctions or other mechanical or engineering related issues.
  - Information Technology Services (ITS) – Computer or computer related equipment.
  - Biomedical Engineering – Hospital medical devices or medical equipment.
  - Security – Stolen or missing hospital equipment.
- Notify the most responsible leader immediately by phone of any incidents involving significant theft/loss/damage involving hospital property.
- Report the incident in AEMS within 24 hours of occurrence.
  - Participate in investigation and follow-up, as required.

Refer to the LHSC [Disclosure of Patient Harm, Incident Reporting and Management](#) and [Critical Injury](#) procedures within the LHSC [PolicyManager \(policymedical.net\)](#) for additional details on managing and reporting adverse events.

## Radiation

Learners and Clinical Instructors should be mindful of signage indicating the presence or potential presence of radioactive materials, x-rays, and magnetic fields (e.g., magnetic resonance imaging).

**Only trained personnel are permitted to enter areas with Radiation or Magnetic warning signage.** Any access to an area with radiation or magnetic warning signage, requires an escort by an authorized staff member with appropriate training.

For more information about the LHSC Radiation Protection program, visit the LHSC intranet website [Radiation Safety | London Health Sciences Centre \(lhsc.on.ca\)](https://www.lhsc.on.ca/radiation-safety).

Contact the Radiation Safety team at [Radiation\\_Safety@lhsc.on.ca](mailto:Radiation_Safety@lhsc.on.ca) for any radiation safety questions and concerns.

Please refer to the following table for radiation hazards and aligned signage.

Hazard	Signage
<p style="text-align: center;"><b>Radioactive Material</b></p> <ul style="list-style-type: none"><li>- Cannot be turned off, always on</li><li>- No Unauthorized Entry</li></ul>	
<p style="text-align: center;"><b>X-ray Source</b></p> <ul style="list-style-type: none"><li>- Can be turned off</li><li>- No Unauthorized Entry</li></ul>	
<p style="text-align: center;"><b>Magnetic Fields</b></p> <ul style="list-style-type: none"><li>- Cannot be turned off, always on</li><li>- No Unauthorized Entry</li></ul>	

### **Illness and Unauthorized Absence**

Learners are not to report to placement if they feel that their illness will jeopardize the health and wellbeing of staff, patients, and other hospital affiliates. If learners become ill while at work, they are to notify their mentor and faculty advisor/clinical instructor and leave immediately.

All learners, regardless of working location, are required to self-screen daily before they arrive at the hospital. Self-screening for symptoms (respiratory or gastrointestinal) is designed to identify/flag potential infectious diseases that may pose a risk of transmission to patients and staff.

If a learner has any infectious disease symptoms that are new and not related to seasonal allergies or pre-existing medical conditions, they must not report to placement. They should notify their school for direction and be cleared by the school prior to return.

### **Fanshawe Placement Process**

Fanshawe nursing learners who are ill and cannot attend placement or continue learning in the clinical setting due to illness, are to discuss this with their Clinical Instructor. If the learner is in the integrative practicum placement they are to discuss this with their mentor and Faculty Advisor.

If a Fanshawe nursing learner does not show up for a scheduled placement day, the Clinical Instructor will notify the involved patient care area and follow up with the learner according to Fanshawe procedure. If the learner is in the integrative practicum placement, the mentor will notify the unit leader and Faculty Advisor.

### **Western Placement Process**

Western nursing learners need to contact their mentor and Faculty Advisor and make them aware of the illness circumstance.

If a Western nursing learner does not show up for a scheduled shift, the mentor can try to reach the learner directly, or connect with the Faculty Advisor who will attempt to connect with the learner.

### **Mentor Illness**

If the learner's mentor is sick, the learner is to check in with the charge nurse or leader at the start of the shift and be assigned to another mentor on a temporary basis for the day. If no alternative mentor is available for the day, the learner cannot stay for the shift. The assigned Faculty Advisor can be contacted for assistance in navigating these situations as necessary.

### **Food and Beverage Safe Storage and Consumption**

The [Food and Beverage for Staff](#) procedure within the [P&P Manager - PolicyMedical](#), outlines expectations for LHSC staff and affiliates when handling food and beverages. The consumption, handling or storage of personal and communal food or beverages, tobacco or cosmetics in areas where infectious materials, hazardous chemicals or hazardous drugs are used, handled or stored is prohibited.

[Appendix A](#) of the procedure (below) for acceptable storage and consumption are locations.

**Appendix A – Staff Food and Beverage Storage and Consumption Location Guidelines**

Permitted	Not Permitted
<ul style="list-style-type: none"> <li>✓ Private/staff/affiliate areas of the department                             <ul style="list-style-type: none"> <li>○ Lunch room</li> <li>○ Classroom/meeting room</li> <li>○ Private office areas</li> </ul> </li> <li>✓ Other approved designated clean spaces</li> </ul>	<ul style="list-style-type: none"> <li>× Communication stations, <i>except</i> beverages with lids in an approved designated clean space</li> <li>× Direct patient care areas including, but not limited to:                             <ul style="list-style-type: none"> <li>○ Patient rooms</li> <li>○ Patient examination bays</li> <li>○ Procedure areas and Operating rooms</li> <li>○ Treatment rooms</li> <li>○ Patient Care corridors</li> <li>○ Semi-restricted corridors</li> <li>○ Dirty Utility rooms</li> </ul> </li> <li>× Wherever chemicals or medications are located including, but not limited to:                             <ul style="list-style-type: none"> <li>○ Laboratories</li> <li>○ Pharmacies</li> <li>○ Sterile processing areas</li> <li>○ Housekeeping areas</li> <li>○ Maintenance areas</li> </ul> </li> <li>× On/in mobile equipment including, but not limited to:                             <ul style="list-style-type: none"> <li>○ Medication carts</li> <li>○ Isolation carts</li> <li>○ Housekeeping carts</li> <li>○ WOWs</li> <li>○ Supply carts</li> </ul> </li> <li>× In patient supply storage areas, patient nutrition fridges, clean or sterile utility rooms</li> <li>× In areas containing contaminated equipment/materials</li> <li>× Areas where patient specimens are stored</li> </ul>

## Guidelines for Nursing Learner Supervision

### Expectations Related to Learner-Patient Assignments

Guidelines were developed to help facilitate the process for determining patient assignments for nursing learners in the practice environment.

RNAO Best Practice Guideline: Practice Education in Nursing (2016)

[Practice Education in Nursing | RNAO.ca](https://www.rnao.ca/en/guidelines/guidelines-for-practice-education-in-nursing)

This guideline assists academic and clinical partners to:

- Understand mutual needs and requirements in relation to learner-patient assignment practices.
- Support learner assignment decision making that meets the needs of patients, learners, clinical instructors and the clinical partners.

### Fanshawe Placements

#### General Overview

Fanshawe learner placements may be from the Practical Nursing program or the Collaborative Nursing program.

Fanshawe nursing learner integrative practicum placements are individual nursing learner placements where the learner is assigned a mentor to support their on-site learning and supervision.

During IP placements, a Fanshawe Faculty advisor, who is not continuously on-site, is available as needed and should be in contact with the mentor and their learner, to support the learning experience.

Non-integrative practicum placements are group placements of 8-10 learners assigned to a patient care area on defined days of the week for a predetermined number of weeks. During the placement, Fanshawe Clinical Instructors are present to provide on-site learner supervision.

#### Expectations of Managers/Charge Nurses/In Charge Persons

- Collaborate with the Clinical Instructor (CI) prior to the start of each placement shift to determine appropriate patient assignments for nursing learners, communicating any concerns to the Clinical Instructor and working with them to make changes as needed.
- Ensure nurses' patient assignment information is available to the Clinical Instructor prior to the beginning of each shift and be available to engage in dialogue with the Clinical Instructor who will be preparing the learners' patient assignments.
- Support learners' preparation for their patient assignments by reviewing relevant clinical information and providing access to patient's paper chart and in the Electronic Health Record (EHR) as required.
- Ensure learners' patient assignments are clearly communicated to nurses and other members of the care team.

#### Expectations of Clinical Instructors

**The Clinical Instructor is the learner's on-site supervisor for a group of nursing learners (usually 8 learners) who are assigned to a patient care area.**

- Prior to starting the clinical placement complete all required onboarding activities for clinical instructors.
- Orient self to the unit and collaborates with the unit contact (Manager/Clinical educator) to discuss ways to enhance the learner learning experience.
- Orient learners to the agency and facilitate the acquisition of photo ID, personal alarms, etc.
- Be familiar with the factors that will influence decision making related to learners' patient assignments such as common diagnoses, patient acuity and care needs, risk of violence, medications, diagnostic tests and care delivery routines for the assigned unit.

- Communicate with the unit contact (Manager/Clinical educator) about learner assignments, clinical course goals, clinical competencies, seminar/praxis times and hours of work for learners during a shift.
- Prior to the start of each placement shift, consult the unit's Charge Nurse/ICP to prepare patient assignments for learners.
- Orientate nursing learners to the unit on which they will be completing their placement, including safety information and equipment (see [Appendix 1 Nursing Learner Safety Checklist](#) for guidance).
- Review the LHSC Nursing Learner Handbook and course expectations with learners, clarifying their scope of practice for the placement they're currently working towards completing.
- Be available on the ward, monitoring and coaching learners through procedures, medication delivery, and patient care activities when possible. Negotiate supervision of learner with assigned LHSC nurse when not able to be present for procedures and medication delivery.
- Ensure learners and staff are aware of how to reach you in the event that a clinical group is split between different units or wings.
- Ensure students carry their Emergency Contact Information card.
- Possess current theoretical knowledge and clinical expertise to assist nursing learners in transferring theory to practice.
- Promote meaningful discussions and critical thinking to prepare learners for transition to practice during praxis.
- Provide timely and constructive feedback to learners, making sure to report any adverse events to the Manager/Charge Nurse/ICP and school contact.

#### **Expectations of Clinical Nursing Staff**

- Review unit communication tools and assignment sheets to ensure awareness of learner-patient assignments.
- Communicate with the Clinical Instructor or the Charge Nurse/ICP questions or concerns about having a learner assigned to their patient(s) (e.g., appropriateness of assignment).
- Communicate with the Clinical Instructor to clarify and seek more information as needed and to share any additional information that may be necessary to help the Clinical Instructor coordinate their learner's patient assignment (e.g., a specific time the nurse may need to be away from the unit to attend a meeting or training session).
- Consult the Charge Nurse/ICP regarding an appropriate workload conducive to supporting learner goals and patient safety on an as needed basis.
- Support and teach nursing learners in a safe and supportive learning environment.
- Provide direction, collaborate, and share knowledge and expertise with learners (refer to [section IX Guidelines for Nursing Learner Practice](#)).
- Uphold the profession's standards and participate in and promote the profession's growth.
- Place patients' safety and well-being above all other objectives.
- Possess the knowledge, skill, and judgment to orient, supervise or support new learners safely and competently.
- Intervene in care delivery as needed for patient safety and report any untoward events to the Charge Nurse and Clinical Instructor.
- Articulate, model and encourage compliance with the College of Nurses of Ontario's (CNO) Practice Standards and Guidelines.

#### **Expectations of Faculty Advisors**

**A Faculty advisor is an employee of the university or college and is associated with Integrative Practicum (IP) placements and supports 16-18 learners and their mentors; the advisor is not continuously on-site but is available as needed and should be in contact with the mentor and their learner.**

- The faculty advisor will provide their contact information to IP nursing learners and their mentor(s).
- Review the *LHSC Nursing Learner Handbook* and course expectations with learners, clarifying their scope of practice for the placement they're currently working towards completing.
- Be a resource to the mentor, answering any questions about the IP process and addressing any concerns (e.g., the Collaborative Success Plan).
- Check in with mentors and their learners during the placement, either in-person or via telephone conference, to discuss learners' performance, strengths, and areas for improvement as determined by the learners' school.
- Monitor the progress of each learner and provide support to both learners and their mentors.
- Should a learner fail to demonstrate basic nursing competencies or improvement in previously identified areas of practice during the IP placement, the faculty advisor will collaborate with their mentor and the learner to determine what further steps will be required.

### **Expectations of Mentors**

**A Mentor is an LHSC staff member assigned to a learner during their integrative practicum placement, to coach, counsel, role model, teach, and support the clinical and professional growth of a learner.**

- Review the *LHSC Nursing Learner Handbook* and facility course expectations with learners, to be familiar with course goals and expectations for the integrative practicum placement. Possess the knowledge, skill, and judgment to orient, supervise or support learners safely and competently.
- Support and teach learners in a safe and supportive learning environment.
- Orientate learners to the unit, including supporting them to complete the [LHSC Nursing Learner Safety Checklist \(Appendix 1\)](#).
- When on the unit, *be present with the learner at all times*, monitoring and coaching learners through procedures and patient care activities.
- Provide direction, collaborate, and share knowledge and expertise with learners (refer to [Guidelines for Nursing Learner Practice, section X](#))
- Select teaching strategies and learning experiences required to meet identified learning goals.
- Monitor the learner's application of the nursing process or problem-solving approach to the delivery of safe and effective interventions in the clinical practice setting.
- Provide ongoing consultation, guidance, support, feedback and evaluation of the learner in a safe learning environment.
- Articulate, model, and encourage compliance with the College of Nurses of Ontario's (CNO) Practice Standards and Guidelines.
- Practice in alignment with organizational policies and procedures
- Place patients' safety and well-being above all other objectives.
- Intervene in care delivery as needed for patient safety and report any untoward events to the Charge Nurse and Faculty advisor.
- Reports any adverse events through organizational reporting systems and ensures the learner notifies the faculty advisor of the event.
- Collaborate with the learners' faculty advisor to discuss learner's performance, strengths, and areas for improvement.
- Notify the learner's faculty advisor of any professional and practice concerns early on during the learner's placement.
- Should the learner fail to demonstrate basic nursing competencies or improvement in previously identified areas of practice by the end of their IP placement, after being provided with feedback and coaching, notify the faculty Advisor as soon as possible.

## Western Placements

### General Overview

Learners in their hospital-based placements will be paired with a mentor to complete their clinical experience.

Learners in year/level 3 and 4 (prior to the integrative practicum) will be paired with a mentor nurse to complete a 3-week placement. Learners in the integrative practicum will be paired with a mentor nurse for a longer placement experience to prepare for entry to practice.

All learner experiences will be shaped by their prior experience in their clinical placements, and potentially from their experiences outside of their nursing education. Learners are encouraged to discuss these experiences with their mentor to help articulate their learning needs.

All learner experiences will require supervision from the mentor, though the extent of this supervision will be dependent on the stage of the placement. All learning experiences should start with a higher degree of supervision, with learners moving towards increased independence as deemed appropriate by the mentor.

All learners will self-assess their competency to implement any skill based on their knowledge of the skill, discerning appropriateness for client, anticipating outcomes, managing risk, etc. Mentors will also participate in assessing appropriateness of implementing skills in the specific clinical area.

All learners will demonstrate accountability in their practice by:

- Identifying learning needs and seeking support wherever necessary from mentor and/or colleagues
- Actively seeking and responding to feedback on practice
- Participating in reflective practice to identify areas of opportunity for improvement
- Demonstrating professionalism through punctuality, engagement, and initiative
- Adhering to regulatory and organizational standards and policies
- Maintaining privacy, confidentiality, and professional boundaries

### Expectations of Mentors

- Support, mentor, and teach nursing learners in a safe and supportive learning environment.
- Orientate learners to the unit, including supporting them to complete the [LHSC Nursing Learner Safety Checklist \(Appendix 1\)](#).
- When on the unit, **be present with the learner at all times**, monitoring and coaching learners through procedures and patient care activities.
- Provide direction, collaborate, and share knowledge and expertise with learners
- Uphold the profession's standards and participate in and promote the profession's growth.
- Place patients' safety and well-being above all other objectives.
- Possess the knowledge, skill, and judgment to orient, supervise or support new learners safely and competently.
- Review materials sent in advance of placement to understand assigned learner's learning expectations. A general overview of learning expectations across the program are articulated in [Learning Expectations for Placements.pdf](#)
- Assign learners to an appropriate number of patients (may start with one patient and increase based on appropriateness and acuity of patients)
- Provide supervision to learner as necessary
- All medications must be given with the supervision of the mentor at the start of the placement. In learner placements in year/level 3, all medications **must** be given with supervision. In placements in year/level 4, the mentor may determine the learner is safe to administer medications independently, as appropriate,

considering LHSC medication policies and procedures and the [Guidelines for Nursing Learner Practice \(section X\)](#).

- Completing learner evaluations as required (information on the evaluation is provided to the mentor upon assignment to learner placement)
- Intervene in care delivery as needed for patient safety and report any untoward events to the unit's leadership, as well as to the learner's faculty Advisor/Clinical Instructor.
- Articulate, model, and encourage compliance with the College of Nurses of Ontario's (CNO) Practice Standards and Guidelines.
- Reports any adverse events through organizational reporting systems and ensures the learner notifies the faculty Advisor of the event
- Practice in alignment with organizational policies and procedures

Additional Resources for Mentors in the Western Placement Model are available in [section XIII Resources](#).

### **Expectations of Managers/Charge Nurses/In Charge Persons**

- Provide support to mentors as necessary
- May be asked to assist in brainstorming if mentor is absent and learner is seeking assignment to a substitute mentor for shift if possible
- Support mentors in practicing in alignment with organizational policies and procedures

### **Expectations of Faculty Advisors**

**A faculty Advisor is an employee of the university or college and is associated with placements and supports 16-18 students and their preceptors; the advisor is not continuously on-site but is available as needed and will be in contact with the preceptor and his/her student.**

- Will provide contact information with the mentor via email at the beginning of the placement.
- Be a resource to the mentor, answering any questions about the learning experience and addressing any concerns
- Monitor the progress of each learner and provide support to both learners and their mentors.
- Should a learner fail to demonstrate basic nursing competencies or improvement in identified areas of practice during the placement, the faculty Advisor will collaborate with the mentor and learner to determine what further steps will be required.

## **Guidelines for Nursing Learner Practice**

The flowchart [Decision Guide for Nursing Learner Practice & Performance of Specific Skills \(Appendix 2\)](#) provides a guide to support nurses' decision-making related to learner practice at LHSC. This guide should be used in addition to two key documents from the College of Nurses of Ontario:

- [Practice Standard: Decisions About Procedures and Authority \(2020\)](#)
- [Practice Guideline: Authorizing Mechanisms \(2022\)](#)

In addition, the following points can be used to assist in learner skill development decisions:

- Nursing Professional Practice at LHSC recommends learners focus on developing competency in comprehensive patient assessments and development of cognitive skills such as critical thinking, clinical reasoning and clinical judgement.
- The learner nurse's experience should be focused on meeting the College of Nurses of Ontario Entry-to-Practice Competencies @ [Entry-to-Practice Competencies for Registered Nurses \(cno.org\)](#) and [Entry -to -Prac tice Competencies for Registered Practical Nurses \(cno.org\)](#).
- Added nursing skills requiring additional formal training or certification that is not

offered to nursing learners at LHSC, cannot be performed by nursing learners (e.g. IV starts, venipuncture, chest tube removal, etc.).

- If a clinical skill is not common practice for all nurses in that setting, then it is not a priority learning focus for the nursing learner.
- Nursing learners only perform controlled acts that are authorized to Nursing and delegated by a Regulated Health Provider under the Regulated Health Professions Act.
- The learner’s nursing knowledge, performance, critical thinking, and readiness to learn those skills identified as appropriate, are to be considered collaboratively by the faculty advisor/instructor, supervising nurse/mentor and learner. The learner must complete the LHSC learning and competency validation requirements (e.g. the same requirements as all LHSC nurses) required to perform the skill prior to doing so in the clinical setting.
- In situations where the learner is competent or learning to become competent to perform an added skill but may not yet be able to recognize and manage all possible outcomes of performing the skill, the faculty advisor/supervising nurse/mentor must be present to supervise, support decision-making and provide care as necessary.
- The learner nurse must have the knowledge, skill and judgment to safely perform the skill and to manage all possible outcomes of performing the procedure if the learner performs the skill independently.

#### IV Initiation and Blood Draws

IV initiation and venipuncture are considered added nursing skills. Nursing learners may learn the theory behind IV initiation and venipuncture and watch nurses perform these skills; however, **they are not to directly practice these skills, even with supervision.** These skills require formal education offered only to LHSC staff by the Venous Access Support Team (VAST).

Central line blood draws may be performed by nursing learners, during their integrative practicum placement, who demonstrate the required knowledge and judgement (see [Appendix 2](#)).

A learner, *prior* to performing central line blood draws, must have completed the Central Line Standards of Care Modules 1-4 via the Learner Affairs NirvSystem. The learner must show proof of completion to their mentor before performing central line blood draws by printing, signing, and dating the results page indicating a score of at least 80%. The learner must complete the [Competency Validation for Blood Draws from CVADs.pdf \(lhsc.on.ca\)](#) together with their mentor and save the document in their personal records. Only after competency is validated and it is deemed appropriate and safe, would the learner perform central line blood draws independently.

Refer to [Central Line Care | London Health Sciences Centre \(lhsc.on.ca\)](#) on the [Venous Access Support Team \(VAST\) | London Health Sciences Centre \(lhsc.on.ca\)](#) website for further education resources, including instructional videos.

#### Cerner Access

Once the LHSC Learner Affairs office receives confirmation that learners have met all of the LHSC pre-placement requirements, Cerner access is confirmed and communicated as outlined below.

Integrative Practicum	Clinical Group Placement
<p><b>Western/Fanshawe:</b></p> <ul style="list-style-type: none"> <li>• Learner Affairs works with the school to arrange/request Cerner access (PowerChart, FirstNet, SurgiNet).</li> <li>• School distributes usernames and passwords to learner</li> </ul> <p><b>Out of Town (non-Western/Fanshawe):</b></p> <ul style="list-style-type: none"> <li>• Learner Affairs arranges Cerner access, sends username and password directly to the learner</li> </ul>	<p><b>Western/Fanshawe:</b></p> <ul style="list-style-type: none"> <li>• Learner Affairs works with school to arrange/request Cerner access</li> <li>• School distributes usernames and passwords to learner</li> </ul> <p><b>Clinical Instructors:</b></p> <ul style="list-style-type: none"> <li>• Same process as learners above</li> </ul>

## Powerchart Fundamentals Training

Effective the fall of 2023, as assigned by Learner Affairs, all nursing learners are required to complete the *Nurse Inpatient Orientation PowerChart Fundamentals* elearning, prior to their initial placement. Learners as part of their integrative practicum placement orientation will complete the *LHSC Nursing PowerChart In-Class Practice Guide*.

## Glucose Meter Certification for Point of Care Testing

Integrative Practicum (IP) nursing learners will receive a barcode for glucose Point of Care Testing (POCT) after completing the certification process.

Nursing learners in **non-IP placements** will not be issued barcodes for glucose POCT and are **excluded from performing glucose POC**.

### IP Placement Glucose Meter Certification Process

- Learners will pick up their Glucose Meter barcodes on the first day of their IP placement on their respective nursing unit/area.
- **Two steps are required** by learners to complete the required training for certification and have the barcode activated:
  - 1)** Complete the Glucose Meter **online module** found on the Learner Affairs website @ [Glucose Barcodes | LHSC](#) and **email a copy of the completion certificate to [POCT@lhsc.on.ca](mailto:POCT@lhsc.on.ca)**
  - 2)** Complete the **high and low Quality Control (QC)** glucose test on the unit Glucose meter using their own learner barcode and **send email notification to [POCT@lhsc.on.ca](mailto:POCT@lhsc.on.ca) their control testing is completed**

#### IMPORTANT:

- **Only after notification from the learner will POCT activate the learner's barcode** to enable patient glucose testing on the glucose meters.
- **POCT barcodes are never to be shared.** This includes learners lending their barcodes to other nursing colleagues or learners using other nursing colleagues' barcodes.

## Clinitek Urinalysis Certification for POCT

Only those IP learners assigned IP placements in the Emergency Departments, Women's Health Care Clinics and OB Triage will complete Clinitek Urinalysis certification.

### IP Placement Clinitek Urinalysis Certification Process

- Learners will complete their Clinitek Urinalysis certification by reviewing the Clinitek Status Urinalysis section of the [Point of Care Standard Operating Guide \(omni-assistant.net\)](#)
  - [Performing Maintenance on the CLINITEK 50/Status \(omni-assistant.net\)](#)
  - [Analyzing Quality Controls \(omni-assistant.net\)](#)
  - [Analyzing Patient Samples \(omni-assistant.net\)](#)
  - [Procedure for Urine Speciment Collection in WAC \(omni-assistant.net\)](#)
- After completing review of the above content, learners are required to successfully complete the [Clinitek Quiz \(lhsc.on.ca\)](#).
- Completion of the Point of Care Standard Operating Guide content and the Clinitek Quiz complete the certification process.

#### IMPORTANT:

- Nursing learners may proceed with Clinitek Urinalysis POCT **only after this certification process is completed.**

### **Additional POCT Resources:**

- Procedural Documents: Pathology and Laboratory Medicine (PaLM) @ [Point of Care Testing | London Health Sciences Centre \(lhsc.on.ca\)](#)
- [Point of Care Standard Operating Guide \(omni-assistant.net\)](#) (Accu-Chek Inform II Glucose Meter and Clinitek Urinalysis)
- Learner Affairs: [Glucose Barcodes | LHSC](#)

### **POCT Contacts:**

- Point of Care Testing [POCT@lhsc.on.ca](mailto:POCT@lhsc.on.ca) Extension 65741
  - Wendy Stratton, Manager POCT, [Wendy.Stratton@lhsc.on.ca](mailto:Wendy.Stratton@lhsc.on.ca)

### **Medication Administration**

When administering medications, nursing learners are required to comply/consult with:

- the [Practice Standard - Medication \(cno.org\)](#), as set out by the College of Nurses of Ontario (2022)
- the [PDAMs \(Parenteral Drug Administration Monographs\) | London Health Sciences Centre \(lhsc.on.ca\)](#) prior to administering parenteral medications.
- All LHSC policies related to medications and medication administration, including, but not limited to the [Closed Loop Medication Administration \(Barcode Scanning\)](#) policy and the [Management of Controlled Drugs](#) policy, accessible through the [PolicyManager \(policymedical.net\)](#) on the LHSC Intranet.
- Nursing learners are required to use PowerChart when administering approved medications, using closed loop medication administration (CLMA) whenever possible.
  - CLMA will be used for the administration of all medications, except in the following situations:
    - Code Blue, Code Pink or Code OB and other patient emergencies where it is believed that delaying medication administration for barcode scanning will put the patient at risk of harm.
    - System downtimes
    - Absent or unreadable barcodes
    - Approved areas that have been designated as non-CLMA
    - Medication boluses from a primary continuous infusion administered using the infusion pump's bolus feature
  - CLMA requires the learner to use barcode scanning technology to scan the patient's ID band and medication(s) prior to administration, reviewing any messages generated while scanning and taking appropriate action as required.
  - Nurse learners will immediately report any issues with barcode scanning equipment or labels to their mentor and area leadership for follow-up.
- Supervising nurses are to directly observe nursing learners scanning and administering medications at patients' bedsides as well as completing any required monitoring guidelines associated with administering a particular medication. Nursing learners in their integrative practicum and 4<sup>th</sup> year Western learners may perform medication administration independently as permitted within LHSC medication policies/procedures and if deemed appropriate and safe.
- Nursing learners may only have direct access to non-controlled medications. Therefore, learners can access medications stored in the drawers of Workstations on Wheels (WOWs), as these drawers contain non-controlled medications.
- Access to medication rooms require swipe card access to obtain non-controlled drugs that are not locked up (e.g., insulins, injections, IV medications, and electrolyte replacements, TPN, etc). **Access is limited to nursing learners during integrated practicum placements.** Learners during their Integrative Practicum placement, as deemed appropriate by their

mentor, may request access to the medication room where they are completing the placement, through the unit's Manager(s).

- Western nursing learners in all other placements outside of the integrative practicum, access the medication rooms supervised by their mentors.
- Fanshawe nursing learners in group placements outside of the integrative practicum, access the medication room under a supervising nurse. Clinical instructors may request access for themselves from the unit Manager.
- Nursing learners, during integrative practicum placements only, may have access to non-controlled medications in Pyxis machines, but will not have access to controlled medications housed in these systems. Pyxis access must be requested by the unit Manager.
- Learners may not administer medications that are part of a clinical trial.

#### **IV Direct Medication Administration**

- IV direct medications may be administered by nursing learners, during their integrative practicum, who demonstrate the required knowledge and judgement (see [Appendix 2](#)).
- A learner, *prior* to administering IV direct medications, must have completed the [Intravenous Direct Administration \(lhsc.on.ca\)](#) iLearn, accessed via the Learner Affairs NirvSystem. The learner must show proof of completion to their mentor before performing IV direct administration by printing, signing, and dating the results page indicating a score of at least 80%. The learner must complete the [Intravenous Direct Administration Competency Checklist](#) together with their mentor and save the document in their personal records. Only after competency is validated and it is deemed appropriate and safe, would the learner administer IV direct medications independently.

#### **Controlled Medications**

Controlled substance is defined by Health Canada to refer to all narcotics, benzodiazepines, controlled drugs, and other targeted substances.

Nursing learners may only dispose of and document wastage of controlled drugs **they administered** on the Controlled Drug Disposition Record. The supervising nurse will observe the disposal and witness the wastage on the Controlled Drug Disposition Record.

Nursing learners are not permitted to witness wastages for other regulated health care professionals.

Nursing learners in their Integrative Practicum may complete a controlled drug inventory count with a supervising nurse and co-sign the Controlled Drug Disposition Record. Learners in non-integrative practicum placements may observe a controlled drug inventory count being performed but cannot complete and/or co-sign the Controlled Drug Disposition Record.

Nursing learners when dealing with controlled drugs:

- are **not permitted to carry controlled drug storage keys**; access and accountability for narcotic/controlled medication keys is restricted to Regulated Health Professionals (RHP) only
- may only access controlled drugs under a supervising nurse without practice restrictions related to controlled drugs, and are not permitted to have independent access to controlled drug storage areas
- when administering controlled drugs will complete and sign the Controlled Drug Disposition Record at the time the drug is removed from inventory; the supervising nurse will witness and co-sign the controlled drug removal on the Record
- may dispose of and document wastage of controlled drugs **they administered** to a patient on the Controlled Drug Disposition Record or at the Pyxis station
- may remove and document removal of Fentanyl patches under a supervising nurse following the LHSC [Fentanyl Patches](#) process for Fentanyl patch removal (Appendix F; [Management of Controlled Drugs](#) policy); the wastage of that removal is witnessed by the supervising nurse
- are not permitted to witness wastages for other RHPs

- are not permitted to witness wastage in Pyxis

### **Initiating Electronic Patient Care Orders**

Nursing learners in their Integrative Practicum may initiate, sign and complete the nurse review of electronic patient care orders with a nurse (usually their mentor). **Note:** The nursing learner must use their Cerner login and password.

### **Verbal and Telephone Orders**

Nursing learners **may not** take verbal or telephone orders. Refer to LHSC's [Telephone and Verbal Orders](#) policy within the [PolicyManager \(policymedical.net\)](#).

### **Blood Component and Fractionated Blood Product Administration**

Nursing learners are not permitted to participate in any aspect of the blood component and blood product administration process. They may only observe the administration, assessment, and monitoring of a patient receiving a blood transfusion. Nursing learners may review administration, monitoring and recognition of transfusion reaction guidelines as described by the [Blood Transfusion Clinical Practice Manual](#) within the LHSC Intranet [Manuals & Guides | London Health Sciences Centre \(lhsc.on.ca\)](#) and the [LHSC Nursing Documentation & Practice Standards for Administration of Blood Components and Fractionated Blood Products](#) within the [PolicyManager \(policymedical.net\)](#).

#### **Blood Components**

Administration of blood components (PRBC, SD plasma, platelets, cryoprecipitate) must be done by a regulated health professional and documentation must be completed in the BRIDGE transfusion module within the patient's electronic health record. Exceptions exist in defined circumstances (e.g. resuscitation, downtime, approved exempt departments, etc.). The BRIDGE transfusion module acts as a secondary witness to the regulated health professional and all documentation within BRIDGE is to be completed by the regulated health professional. **The BRIDGE module cannot be used by unregulated health providers and nursing learners are not granted access to Bridge.** When defined exceptions occur to documenting in the BRIDGE transfusion module, checking of blood components must be completed by two Regulated Health Providers.

#### **Fractionated Blood Products**

Administration of Fractionated Blood Products (e.g. IVIG, Albumin, Prothrombin Complex Concentrate, RhIG, Fibrinogen Concentrate, etc.) must be done by a regulated health professional. Independent double checks are not required.

When administration of blood components or fractionated blood products is required, nursing learners, who have the required knowledge, skill and judgement may prepare the tubing **under the supervision of a regulated healthcare professional**. All documentation related to transfusion within iView and within the Bridge module must be completed by the regulated healthcare professional administering the transfusion.

### **Offsite Patient Transport**

Nursing learners can accompany their **assigned patient** off site for tests/procedures **within the city of London**, provided that the task fits within their learner scope/practice/goals and they are accompanying a staff member from LHSC, who is responsible for the patient. The learner will travel to and from with the staff member.

### **Code Blue**

During a code blue, nursing learners must ensure their learning does not interfere with or delay emergent care needs of the patient, as patient resuscitation takes precedence. Each code blue situation is unique, and the role of nursing learners will vary based on the context of the situation at

hand and the knowledge, skill and judgement of the nursing learners to participate in aspects of the resuscitation. LHSC code blue priorities and procedures are to be followed at all times (e.g. [Protected Code Blue/Pink COVID-19 Response | London Health Sciences Centre \(lhsc.on.ca\)](https://lhsc.on.ca)).

Opportunities for learning during a code blue may include:

- Calling a code blue
- Obtaining the crash cart
- Notifying healthcare team members as directed
- Removing obstacles and escorting visitors out of the patient's room
- Keeping track of time
- Performing chest compressions
- Documenting the situation prior to calling the code if they are the first responder
- Obtaining supplies and equipment (e.g., IV fluids, suction equipment, etc.)

## Learner Access to LHSC

All learners, regardless of working location, are required to complete the one-time COVID-19 Screening Declaration Module as part of their orientation and self-screen daily before they arrive at the hospital. Learners must also comply with any universal Infection Prevention and Control measures in place, as directed by current LHSC guidelines.

LHSC personal photo ID badges are required to be worn when entering LHSC sites and can be arranged through Go2HR once learners have completed their pre-requisites through NirvSystem. **If an ID badge goes missing, immediately report this occurrence to Security so that it can be deactivated.** A request for a replacement card can be made by contacting Go2HR.

Nursing learners are required to enter and exit using the staff/physician entrances. Some of these doors are locked and require swipe card access with your LHSC ID badge. Designated Patient/Visitor doors are not permitted for learner entry.

Please ensure your LHSC ID badge is worn and that doors latch upon entry and exit – especially in low traffic areas. Do not let anyone in without an LHSC ID badge.

Below are maps for both Victoria and University Hospital to identify staff/physician entrances.

[LHSC Victoria Entrances](#)

[LHSC University Entrances](#)

## Secured Clinical Units/Areas

Some clinical units require swipe card access in order to gain entry. All learners and Clinical Instructors must wear their LHSC ID badge which will provide access to these restricted areas. Doors must be confirmed to latch upon entry and exit and access is not to be allowed to anyone without an LHSC ID badge, unless approved by the clinical unit/area.

## Operating Room Patient Experience during Surgical Placements

**Third-year nursing learners in the winter term and fourth year nursing learners in the fall**, with patient consent, *may be approved* to follow the patient through their surgical experience. This surgical experience includes a one-day observational experience, with one learner assigned to one patient and a maximum of one learner in an operating (OR) room. **This opportunity only applies to those learners in a surgical placement.**

Process details and requirements to be followed for OR Patient Experiences can be accessed on the University and Victoria Hospital site-specific OR websites:

[VH OR Observation | London Health Sciences Centre \(lhsc.on.ca\)](#)

[OR Observer Package - UH.pdf \(lhsc.on.ca\)](#)

### **Process highlights to facilitate the OR experience:**

- desire to gain the OR experience is **initiated by the learner at the onset of their surgical placement** and communicated to their mentor
- learning goals for the experience must be identified and communicated to the mentor and on the required request submissions
- formal submissions/notifications are completed **at least 1 week in advance** of the experience
- once the OR case the learner will observe is confirmed, the patient consent **must be obtained in advance by the learner and mentor**, to observe the patient during their OR procedure and as applicable, peri-operative experience
- the learner is required to maintain patient privacy and confidentiality
- in OR cases involving medical imaging the learner must complete, **at least 1 week in advance**, Radiation Awareness Education, submit a Request for Radiation Badge and wear the radiation badge and properly fitted lead wear in the OR room
- the learner **will not, under any circumstances, participate in any patient care**, during their OR experience – this is strictly an observation experience
- no personal valuables/devices, jewelry, long sleeves or turtlenecks, perfume or cologne are allowed
- the learner must wear their LHSC ID badge and closed toe footwear and their hair must be securely contained under a bonnet in the OR room
- the learner must obtain OR scrubs to wear during the OR experience, **in advance of the OR experience date**, according to the site-specific process
  - **NOTE: OR scrubs must be donned in hospital and returned (not placed in linen hamper) upon completion of the experience**
- the learner will minimize the risk of fainting during the OR experience by ensuring they eat and are adequately hydrated the morning of the OR experience and if spending the better part of the day, bring food/snacks/drinks or money to purchase such
  - upon feeling lightheaded or ill during the OR experience, the learner will step away from the sterile field, approach a wall and alert the nurse in the room
- The learner, on the day of the OR experience, will introduce themselves to the patient, surgeon and OR team, sharing their goals for attending the experience
- the learner is required to locate themselves to not interfere with the work/business of the OR room and to prevent touching/contamination of sterile fields (blue gowns, blue draped tables, etc.)
  - do not enter the 2-foot perimeter around the sterile field
  - always walk front-facing the sterile field
  - do not walk between sterile fields

## **Resources**

### **Mentor Information Package**

Each mentor will receive an information package electronically from the nursing learner's school. If a mentor does not receive a package, they are to ask the learner to make inquiries with the school.

In the event a mentor can no longer fulfill their responsibilities and needs to be replaced, the patient care unit's manager will identify a new mentor. **The learner must notify their school and Learner Affairs, providing the name of their new mentor.** The learner's school will send the new mentor the mentor information package.

### **Resource Websites**

**LHSC Nursing website**

**[Nursing | London Health Sciences Centre \(lhsc.on.ca\)](http://lhsc.on.ca)**

**LHSC Learner Affairs website**

**[Welcome to Learner Affairs! | LHSC](#)**

**Preceptor Education Program (e-learning)**

**[PEP \(preceptor.ca\)](http://preceptor.ca)**

**RNAO**

**[Practice Education in Nursing | Registered Nurses' Association of Ontario \(rnao.ca\)](http://rnao.ca)**

**College of Nurses of Ontario**

**[Supporting Learners \(cno.org\)](http://cno.org)**

**Western Nursing Learner Placement Resources**

**[Western University Preceptor/Mentor Resources \(lhsc.on.ca\)](http://lhsc.on.ca)**

# Appendices

## Appendix 1

### LHSC Nursing Learner Safety Checklist

**Nursing learners, on initiation of all Western learner placements and Fanshawe RPN Integrative Practicum placements, must complete the following safety checklist with the support of their mentors, on their assigned patient care unit/area.**

**Note:** initialing indicates knowledge of location of items and use of any equipment listed.

**Learner Name:** \_\_\_\_\_

<b>Safety Sign Off</b>	<b>Initials</b>
Eye Wash Stations	
PPE Supplies	
Precaution signage	
Crash Carts	
Restraint Carts	
Cytotoxic Spill Kit (Hazardous Material Spill) and Cytotoxic buckets	
Location of Fire Exits/Fire Pulls/Fire extinguishers/Evacuation Plan	
Screamer/Panic Alarms	
Safe Rooms	
Safe beverage station	
Lift Equipment ( <i>Maxi Slide Sheets, Slings, SARA lift, Maxi Sky, ceiling lifts, etc.</i> )	
Hillrom Beds ( <i>safety features; steering arms default in down position, code blue release/max inflate</i> )	

**Learner Signature:** \_\_\_\_\_

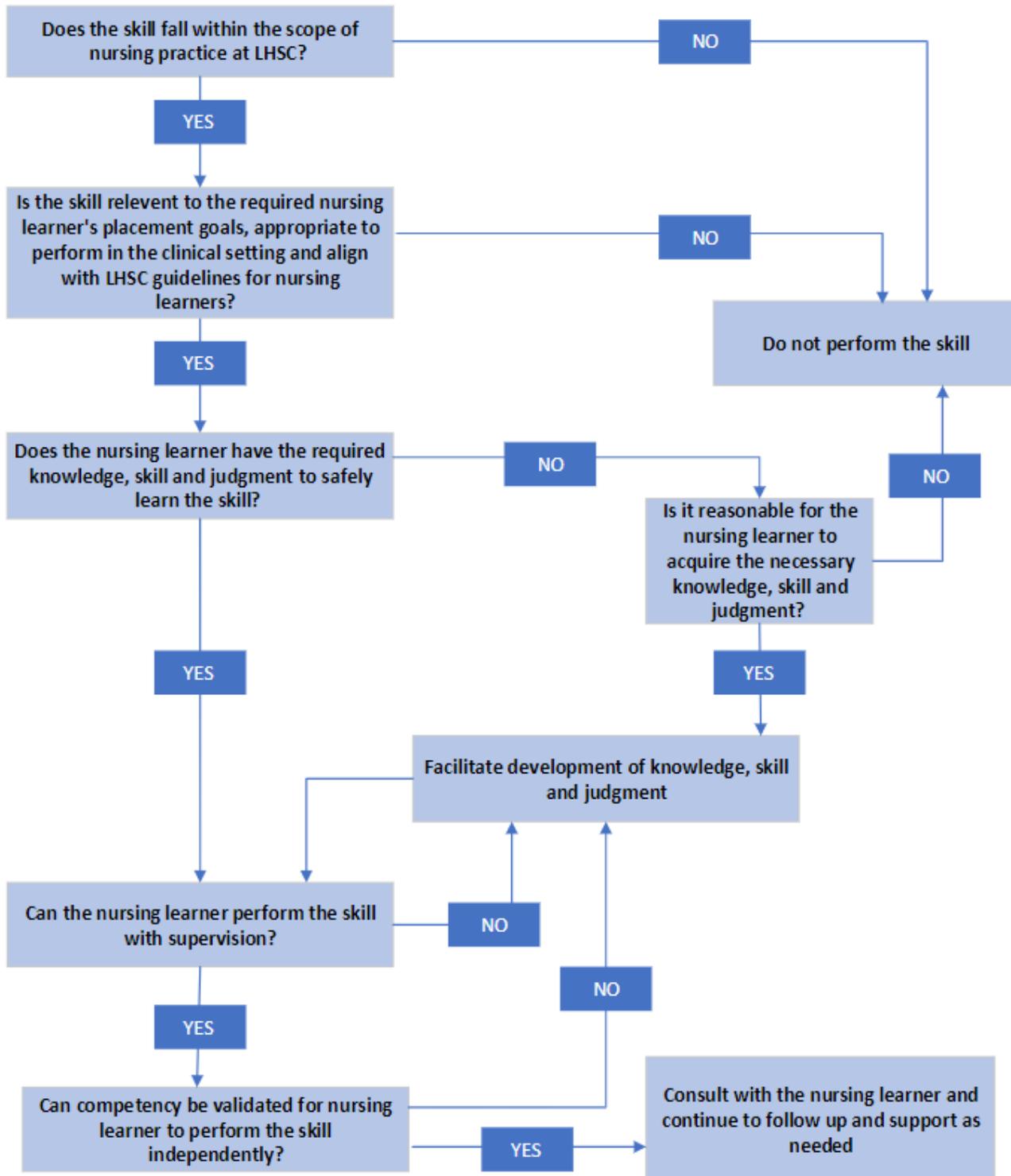
**Date of Completion:** \_\_\_\_\_

**\*Nursing learner upon completion retains this document for proof of completion.**

April 2023; Nursing Professional Practice

## Appendix 2

### Decision Guide for Nursing Learner Practice and Performance of Specific Skills



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