BScN Handbook
School of Nursing
Policies and Guidelines
2025 - 2026

Table of Contents

BScN Undergraduate Program

BScN Curriculum Framework

The TRU BScN curriculum is based on beliefs about people, health, health promotion, and registered nursing practice. The curriculum is also based upon certain visions for health care, nursing, and registered nursing education at a baccalaureate level.

Principles of the CAEN-Informed Nursing Curriculum

Through engagement in teaching and learning, the TRU BScN curriculum provides baccalaureate academic education of nurses. At completion, graduates will be prepared to meet the entry-level professional practice requirements, as identified by the British Columbia College of Nursing Professionals (BCCNM) and to pursue further academic education at the graduate level.

The purpose of the curriculum is to educate people to become nurses who contribute to the enhancement of health for all Canadians and others in the global community. The curriculum fosters critically reflective, independent, and motivated learners and practitioners with an inquiry approach to lifelong learning. Within this curriculum, learners are prepared to work with individuals, families, groups, and communities in a variety of settings. The curriculum assists students to develop knowledge, competencies, and understanding of their own and others' (individuals, families, groups, populations, communities, society) diverse experiences of health and healing, including care of the sick and dying. By being cognizant of nurses' professional roles and the evolving health care system, students learn to work as partners with clients and other health care providers. Through their understanding of and participation in the evolving health care system, graduates will be active participants and leaders in influencing and contributing to the promotion of health.

CAEN-Informed Curriculum Goals
- Practice nursing using a framework to promote holistic health and healing within various contexts and with diverse client populations.

- Provide safe competent care based on nursing knowledge, ethics, relationships, cultural safety, and ways of knowing.

- Anticipate, respond to, and influence the current and future of nursing and health care at the economic, political, social, environmental, and professional levels.

- Be critically thinking, reflective, and self-directed professionals who engage in inquiry-based, evidenced informed practice.

- Promote health and wellness with Indigenous Peoples.

Concepts

The curriculum is based on the assumption/belief that the focus of nursing is the promotion of client health and healing through situated, relational, caring practice. Core concepts and foundational perspectives are woven through all semesters and courses in the curriculum. Exploring a variety of perspectives provides a different lens through which the concepts can be viewed. The concepts may look different depending on the perspective and these differences embrace diversity and enhance learning. (Refer to table of Curriculum Concepts)

The foundational perspectives and core concepts of the curriculum are introduced early in the program and are revisited throughout the four years. With each revisiting the perspective or concept is examined in increasing depth and with consideration for the focus of the semester and the increasing complexity of practice expected of the students. The metaphor of the iceberg is useful for developing an understanding for how perspectives and concepts will be examined in the curriculum. The depth of examination of a concept will be like the tip of the iceberg in Semester one with a gradual increase in depth and breadth across the curriculum to Semester eight, when the full size, depth and breadth of a perspective or concept will have been explored.

BScN Curriculum Concepts

Capacity Building	Evidence-Informed Practice	Leadership
Client	Healing	Nurse
Collaboration	Health	Politics
Cultural Safety	Health Promotion	Power/Power Relations
Culture	Illness	Relational Inquiry
Decision Making	Indigenous/Indigeneity	Safety
Diversity	Informatics	Scholarship
Environment	Inquiry	Spirituality
Ethics	Knowledge	Transitions and Change

Course Streams

The curriculum is organized using four streams of courses. The core concepts guide the focus of each course and direct the choice of sub-concepts and topics to be explored.

The TRU BScN course streams are:

1. Health and Health Promotion
2. Communication and Collaboration
3. Professionalism and Leadership
4. Knowledge and Critical Inquiry
5. Health Sciences
6. Nursing Practice

Supporting these streams of courses, are courses from other disciplines such as Biology and English. To support the Indigenization of our curriculum, we have a HLTH 2300 Interdisciplinary Indigenous Health Course. All courses contribute to the development of a body of nursing knowledge as demonstrated by students in nursing practice courses and praxis seminars, which occur in every semester.

Curriculum Overview and Semester Foci

Introduction

This section provides and overview of the semester-by-semester focus and highlights key experiences students will gain as they progress.

People's lived experience is holistic, and the experiences of family and community play an integral part. Integrated throughout all the semesters is a focus on both families and community in relation to the client. It is critical that students come to acknowledge and understand the client's whole experience to provide holistic care.

Family is defined in the curriculum in the broadest sense. That is, any membership, configuration, or connection a person has with another whom that person considers to be family is also considered to be family within the curriculum.

Community is also defined within the curriculum from the broadest perspective. Community can be considered from a relational perspective or from a geographical perspective. From a relational perspective, community is defined as a collection of people who, through their relationships, come together to form a community. This means that the community might not be in the same geographical location, but rather it connects to fulfill a purpose or to form a bond. Thus, community is not necessarily a place, setting, or a set of defined relationships, but rather a lived experience.

Semester Foci

Semester One

In Semester one, students are introduced to the profession of nursing and the foundational perspectives and concepts that guide nursing practice. Students will begin to explore nursing history, the roles and responsibilities of the nurse, and ethics. Students in semester 1 are introduced to the core concepts of the curriculum and the foundational perspectives that will provide the lens to view these concepts. Students will learn the meaning of health from personal, family, community, and societal perspectives and begin to practice holistic health assessments across the life span, primarily with adults and seniors, and healthy families in the community. Students also get a beginning understanding of what constitutes a community, meanings of community, and collaborating with communities with health-promoting approaches and prevention strategies. In addition, students will focus on gaining knowledge about themselves as

individuals and develop interpersonal skills that will influence their relationships with others.

Semester Two

In Semester two, the focus is on developing caring relationships with groups, families, and individuals across the lifespan. Emphasis is placed on health assessment and coming to know how clients understand and promote their health, and the role of the nurse in collaborating with the client in this process. Students will have opportunities to explore and critique various theoretical and conceptual frameworks in relation to health assessment within the context of decision making. In addition, students explore the historical development of nursing knowledge and theory as well as contemporary understandings of nursing as a profession and discipline and the unique body of knowledge that defines it. Students begin to develop an inquiry-based approach to learning and nursing practice. Students work with groups, families and individuals in the home and community, in agencies, and in care facilities to incorporate concepts and learning from all the courses in this semester into their nursing practice.

Semester Three

In Semester 3 students continue to experience and develop their nursing practice in a variety of settings across community, and acute care sites. They work in healthy populations and clients experiencing chronic and episodic health challenges with a focus on the determinants of health, community assessment, health promotion and the application of the Ottawa Charter for Health Promotion. Key concepts this semester include ethics, evidence-informed practice, health promotion, client, cultural safety, social justice, indigeneity, and diversity. Students have opportunity to build their relational practice skills, pharmacology and nursing research while working with individuals, families and groups.

Semester Four

In Semester Four, students gain experiential learning and work to develop their nursing practice in a variety of clinical settings. Students work with healthy populations as well as with clients experiencing chronic and episodic health challenges in a variety of clinical settings across community and acute care. Students have an opportunity to contextualize their learning with the integration of nursing and interdisciplinary courses, which include Indigenous Health, Pharmacology, Pathophysiology, and Health & Health Promotion, and Health Care Ethics courses.

CPE 2 (Condensed Practice Experience 2) takes place at the end of Year 2 and is designed to integrate and apply the knowledge and skills students have developed in the program. In this immersive clinical experience, students are placed in groups and supported by a dedicated clinical instructor in a variety of practice settings. CPE 2 offers valuable opportunities for students to engage in real-life nursing practice, collaborate with nurses and other health professionals, and begin to develop their professional identity.

Reflection is a key component of this experience, encouraging students to think critically about their growth, learning, and contributions within the healthcare team.

By this point in the program, students can expect to have had placements in community, mental health, maternity/child and acute care.

Semester Five

In Semester Five, students work with clients experiencing chronic and episodic events in acute care settings. Students continue to build the knowledge required for these increasingly complex practice experiences by examining multiple sources of nursing knowledge: client presentation, pathophysiology, ethical knowledge, clinical judgement, professional supports, and nursing frameworks. Students use critical thinking and relational inquiry to assess the impact of health challenges on clients, to examine the nurse's role in relation to people's experience with health, to begin participating in interdisciplinary care and to develop an appreciation of other health disciplines knowledge. The context of care and its effect on client health practices and health care services is examined. Students build their self-awareness and professional presence through the exploration of relational inquiry, complex communication techniques, reflexivity, trauma informed care, and clinical judgment.

Semester Six

Students further develop their understanding of health and healing, focusing their attention on community and societal health, examining global health issues, and the leadership role of nurses with emphasis on the socio-political and economic context of nursing. Students continue to develop an understanding of the concept of working with the community as client, considering the processes and steps to engage with communities to promote health. Students learn complex assessment skills, develop their competence as leaders, and engage in more advanced explorations of the role of nurses in global health. Students engage in focused learning to increase their understanding of global health issues and nursing's' role in contributing to global health and equity. Semester Six practice placements are group project based and are in a variety of agencies such as government and non-government health care agencies and other community organizations.

CPE 3 (Condensed Practice Experience 3) is at the end of Year 3 students consolidate the knowledge, abilities, and skills learned thus far in a variety of practice settings. This will be the students first opportunity to be in a preceptorship experience. Students practice experiences throughout the program are tracked and by the end of CPE 3 all students will have had experience in a variety of agencies/settings (acute care, extended care, community or International) in order that they might develop entry-level competencies required of a registered nurse.

Semester Seven

The focus in Semester Seven is on the increasing complexity of nursing practice and recognizing the bigger picture of nursing care and healthcare delivery. Students further

develop their understanding of health and healing, examining complex health issues and contexts, and the leadership role of nurses. Students learn to consider complexity in their assessment skills and decision-making, they develop their competence as leaders, and engage in more advanced explorations of the discipline of nursing and nursing inquiry. Students conclude their Health Sciences stream with their final pathophysiology course. Semester Seven practice is called the Increasing Complexity Experience (ICE) and placements are in a variety of agencies including acute care, community and within government and non-government health care agencies and organizations. The practice course utilizes a collaborative partnership model with health care sites with the emphasis on the growth of the student as a professional nurse who is critically reflective and actively involved in exploring complexity, change processes and leadership roles within nursing, health care, and society at large.

Semester Eight

In Semester Eight students continue to strengthen professional nursing practice with increasing independence to meet entry-level competencies and professional standards as defined by BCCNM. The nursing practice component of Semester Eight consists of a preceptorship placement (432 hours) that prepares the student for the transition of the graduate nurse to the workplace, and the role of the professional nurse. Students will have an opportunity to refine relational practice skills, integrate nursing knowledge, and apply their leadership abilities with emphasis on strengthening evidence-informed practice.

Practice Placement Snapshot

YEAR 1	YEAR 2	YEAR 3	YEAR 4
Semester 1: Groups in the community assessing health Semester 2: Groups may be: in long term care / extended care residential care homes and rehabilitation	Semester 3, 4, & CPE 2 Groups may be in: Community Health, Maternal/Child Health, Mental Health Medical/Surgical Local and out-of-town CPE 2: Spring & Summer Sessions Clinical groups with an instructor	Semester 5: Groups in Medical and Surgical Semester 6: Community development initiatives CPE 3: Preceptored placements Local, out-of-town, & International	Semester 7: Acute and Community Placements 1:1 with a nurse Local and out of town Semester 8: Preceptored placement Local & out-of-town

*Note: practice placements are subject to change based on agency

availability and program needs

Year	Fall	Cr	Hours /Wk	Winter	Cr	Hours /Week	Spring (May-June)	Cr	Hr/Week
1	**Semester 1** NURS 1700: Professionalism and Leadership 1 NURS 1170 : Communication and Collaboration NURS 1730 : Health and Health Promotion 1 NURS 1740 : Nursing Practice 1 BIOL 1592 + 1594 (lab): Anatomy & Physiology ENGL 1100: Composition	3 3 3 3 3 3 __ 18	(3-0-0) (3-0-0) (3-0-0) (3-1-1L-2P) (3-0-2L) (3-0-0) _____ 24 hrs	**Semester 2** NURS 1800 : Professionalism and Leadership 2 NURS 1830: Health and Heath Promotion 2 NURS 1840: Nursing Practice 2 BIOL 1692 + 1694 (lab): Anatomy & Physiology PHIL 2310: Health Care Ethics recommended completion prior to year two	3 3 4 3 3 __ 16	(3-0-0) (3-0-0) (3-0-0) (3-0-2L-9P) (3-0-0) _____ 26 hrs			
2	**Semester 3** NURS 2300: Knowledge & Critical Inquiry 2 NURS 2750 Health & Health Promotion 3: Community Health Nursing NURS 2740: Nursing Practice 3 NURS 2170: Communication & Collaboration 2 HLSC 2660: Health Science 1: Pharmacology (part 1)	3 3 4 3 1.5 __ 14.5	(3-0-0) (3-0-0) (3-0-2L-13P) (3-0-0) (1.5-0-0) _____ 28.5 hrs	**Semester 4** NURS 2830: Health & Health Promotion: 4 HLTH 2300: Interdisciplinary Indigenous Health NURS 2840: Nursing Practice 4 HLSC 2550: Health Science 2: Pathophysiology 1 HLSC 2660 Health Science 1: Pharmacology (part 2) *PHIL 2310: Health Care Ethics	3 3 4 3 1.5 __ 14.5	(3-0-0) (3-0-0) (2-0-2L-13p) (3-0-0) (1.5-0-0) _____ 27.5 hrs	NURS 2380: Condensed Practice Experience (CPE 2) Spring & summer delivery	4	(0-0-22p) Total CPE2 hours: 132 hours 5 weeks
3	**Semester 5** NURS 3730: Health & Health Promotion 5 NURS 3740: Nursing Practice 5 HLSC 3650 : Health Science 3: Pathophysiology 2 NURS 3170: Communication and Collaboration 3	**3** **4** **3** **3** **3** __ **16**	(3-0-0) (2-0-2L-13P) (3-0-0) (3-0-0) ___ **26 hrs**	**Semester 6** NURS 3500: Health & Health Promotion: 7 NURS 3510: Nursing Practice 6 NURS 3830: Health & Health Promotion 6: Global Health	**3** **4** **3** **3** __ **12**	(3-0-0) (0-3-6P) (3-0-0) _____ **15 hrs**	NURS 3380/3390 Consolidated Practice Experience (CPE 3)	4	(0-3-33p) Total CPE3 hours: 252 hours 7 weeks

	Non-nursing Elective -1000 Level			Non-nursing elective - 2000 level					
4	**Semester 7** NURS 4300 Professional Practice 5 NURS 4740 Health and Health Promotion 8 NURS 4380 Nursing Practice 7 HLSC 4650 Health Science 4: Pathophysiology 3 Nursing elective (3000 level)	3 3 4 3	**(**3-0-0) (3-0-0) (0-2-14P) (3-0-0) _____ **25 hours**	**Semester 8** NURS 4210 Nursing Practice 8	10	(0-3-36P) _____ **39 hrs Sem** **432 hrs Practice**			

Program Completion Requirements: The BScN Curriculum requires successful completion of 126 credits some of which may be Transfer Credit (upon approval). To view the curriculum and course outlines visit: The nursing curriculum program grid. (Bachelor of Science in Nursing Courses: Thompson Rivers University (tru.ca)

Undergraduate School of Nursing Progression Policy

Program Completion Requirements

BScN students must complete all program requirements within 7 years of the date of entry. Prior to graduation, students must ensure all official transcripts from courses taken outside of TRU are submitted directly to the Admissions Department, so they are documented on their TRU transcript. This includes courses that require a letter of permission. Failure to provide an official transcript for transfer credit courses at least 5 weeks prior to convocation may result in an inability for TRU to grant the degree for that year's date of convocation.

Progression Policy

Students must achieve a minimum 60% grade in all of the required courses (NURS, HLSC, HLTH 2300, BIOL, ENG, PHIL), and a minimum grade of 50% in the accepted non-nursing elective courses. To progress to the next semester of the BScN program, students must maintain a cumulative GPA of 2.33. Students who do not achieve a GPA of 2.33, will meet with the Program Chairperson may be placed on academic probation for one semester. Refer to TRU Satisfactory Academic Progress Policy ED 3-2.

In addition, students must successfully complete all pre-requisites, including practice courses, to progress to the next semester of the BScN program.

Course Failures

In the event of a course failure, a student may repeat a given course (theory or practice) one time. Exceptions for extenuating circumstances require written approval of the Program Chairperson, for NURS, HLTH, or HLSC courses. The Chair of Biology must give permission for students to repeat a BIOL course.

A student who fails a practice or theory course cannot progress in the program until the course is passed. If in repeating the course the student passes, then the student will re-enter the program at a subsequent offering of the same semester in which the failure occurred **provided there is an available seat.**

If in repeating the practice course the student fails again, then the student will not be able to progress to the next semester and can only re-enter by going through the admission process beginning at Semester One. A student who has already failed a practice course, repeated it and passed, and then fails another practice course will not be able to continue in the program.

Nursing practice course failures are considered across the entire program. Students who have failed two practice courses in the BScN program, including failures prior to transferring to TRU School of Nursing will not be able to progress to the next semester. The student can only re-enter by going through the admission process and beginning at Semester One. Refer to TRU Course and Program Repeaters Policy ED 3-3.

Withdrawal from BScN Program

There are a variety of reasons why a student may need to leave and re-enter the nursing program. The student may need to withdraw from the program due to medical issues, domestic affliction, and/or course failure.

Students withdrawing from the program are expected to:

- inform the appropriate faculty member(s)

- meet with the Program Chairperson

- meet with a counsellor from Student Services

- meet with TRU academic advising

- terminate relationships with client and community field guides

- refer to the TRU Withdrawals Policy ED 3-0 for detailed information regarding procedure and deadlines for withdrawal

- students who leave the program for extenuating circumstances, will need to complete and send the Withdrawal in Extenuating Circumstances form to the Registrar's office (email and fax number on the form). Student Case Managers from the Office of Student Affairs may also assist students in understanding this process.

General Procedures/Policies for Re-entry

Students seeking re-enter into the BScN program, must meet with the Program Chairperson to discuss readiness for re-entry. This could include and/or depend on a BCCNM Requisite Skills and Abilities review, seat availability, GPA standing, a letter of intent to return to the program, a review of the length of time out of the program, including a professional performance standards of conduct assessment. Students admitted into the BScN program must complete the BScN degree within seven years.

In accordance to BCCNMs requisite skills and abilities for practice, students who have withdrawn due to extenuating circumstances, may be asked to provide a Health Care Provider's note which states that they are physically/mentally fit to return to the program. Students must submit to the nursing office their updated BCCNM Requisite Skills and Abilities form.

Re-entry/Transfer to Practice Courses

Process for Re-entry

At least four (4) months prior to the date of intended re-entry, submit a Letter of Intent to the BScN Chairperson. The Letter of Intent should indicate the date that the student wishes to re-enter, the year or semester to return, and include steps that the student has taken to ensure their success in the program (if applicable) and to confirm their ability to meet BCCNM requisite skills and abilities for becoming a Registered Nurse in British Columbia

- Make an appointment to see the BScN Chairperson for the purpose of advising. This interview should be during the month of May for the September re-entry, month of

September for January re-entry, month of January for May re-entry. If a student is offered a seat, prior to starting the semester a student must register and pay tuition.

- submit to the nursing office at nursing@tru.ca:

  o proof of up-to-date immunizations (may include influenza vaccine),

  o mask fit testing certificate, (for re-entry sem 2-8),

  o Basic Life Support certification (yearly)

  o SPECO (for re-entry sem 2-8).

- Successfully complete Nursing Skills Assessment (NURS 0610). This assessment includes both a written and psychomotor skills test to ensure you can demonstrate previously attained competencies for client and personal safety. *Please refer to your re-entry letter for further information*.

- Students are reminded of the program completion requirements and the policies regarding failures and re-entry, as stated in the Thompson Rivers University Calendar.

- Students who fail a nursing theory course may be required to repeat the co-requisite nursing practice course.

- Students who fail a nursing practice course may be required to repeat the co-requisite theory course(s).

- A student who withdraws from or receives a failing grade in any nursing practice course may be required to re-enter the program at an earlier level.

- Re-admission to the program may be denied if the student does not provide evidence of the re-entry requirements.

Learning Contract Policy

When a practice faculty member has concerns regarding a student's ability to meet the course competencies and domains, a learning contract **may** be initiated. In conjunction with the practice faculty member, the Program Chairperson and the student, strategies will be developed to support the student in meeting the expected domains and competencies as outlined in the learning contract. If performance is unsatisfactory at the end of the contract period the student will fail the course, receive a grade of No Credit Granted (NCG), and will be required to withdraw from all nursing courses. If there are significant safety concerns prior to the end of the practice rotation, a student may be removed from the practice area, and the student will fail the course. Refer to TRU [Satisfactory Academic Progress](#) . For more information see Appendix C Learning Contracts: Guidelines for Implementation.

School of Program and Course Requirements

Elective Requirements

The BScN program requires that students complete two non-nursing electives (one at the 1000 and one at 2000 level) prior to entering semester 7. Prior to semester 8, students

must complete an upper-level nursing or health related elective or equivalent. Students may choose when they complete electives. However, these electives **MUST** be successfully completed before progressing into semester 8. For advice on applicable electives students need to set up an appointment with an academic nursing advisor.

Link: nursing@tru.ca

Prior to semester 8 and the final practicum, we strongly suggest all required courses be completed. Failure to complete any of these courses will interfere with the completion of the program, graduation, and the writing of the NCLEX exam.

Transfer Credit Policy

To receive transfer credits for any of the required courses in the Nursing Program, students must have a C (60%) minimum grade in that course. Students must request an Official Transcript be sent directly to the Registrar's Department when applying for transfer credit.

Courses/electives taken at other educational institutions and receiving a Transfer Credit will show as a 'T-course number' on your transcript and is not factored into your GPA.

Most courses are eligible for a Transfer Credit from an Accredited Institution. A TRU Letter of Permission (LOP) MUST be approved by the SON Nursing Student Advisor and submitted to Admissions before you register for a course (TRU-OL courses do not require a LOP).

Biology Transfer Credits

Transfer Credit will NOT be given towards the required courses Biology 1592/1594 or 1692/1694 if the Human Anatomy and Physiology course is taken **without** a laboratory component. For example, TRU-OL BIOL1593 and BIOL1693 courses **DO NOT** have a lab component, therefore no Transfer Credit are given for BIOL1592 or BIOL1692. Equivalent Human Anatomy and Physiology courses with a laboratory component will be considered for transfer credit towards Biology 1592 and/or 1692 at the discretion of the chairperson.

Transfer Credit for courses in Human Anatomy and Physiology courses (Biology 1592 and 1692) may not be granted if course(s) are more than 5 years prior to admission to the BScN program. Please consult with the SON Nursing Student Advisor re: transferability of Human Anatomy and Physiology Courses.

Required English Courses

All students in the BScN Program are required to obtain 3 credits (one 3-credit English course) of University Transfer English. The English course **MUST** be a Composition or a University Writing course (or equivalent).

In the first year of the program, all students are assigned into one English course: ENGL1100: Introduction to University Writing.

Students **MUST** complete the English course to progress into Year 2. In addition to the option to take this course on campus in the regular academic year, you may complete the English course during the summer session on campus or on-line. If the course is not taken at TRU or TRU-OL, a LOP is required before you register so you receive transfer credit.

Transfer Credit for courses in English courses may not be granted if course(s) are more than 5 years prior to admission to the BScN program.

Prior Learning Assessment and Recognition

TRU recognizes that adult learners acquire knowledge and skills through life and work experience. Through Prior Learning Assessment and Recognition (PLAR), TRU will assess this knowledge and skills and grant credit/recognition for the learning that has taken place. PLAR is the assessment by some valid and reliable means, of what has been learned through formal and non-formal education, training or experience that is worthy of credit in a course or program offered by TRU. PLAR is used to evaluate knowledge, skills and competencies which may have been acquired through, but not limited to, work experience, independent reading, hobbies, volunteer work, non-formal learning, travel and artistic pursuits. The assessment and evaluation of prior learning and the determination of competency and credit awarded will be done by faculty who have the appropriate subject matter expertise, other staff in an institution may have a supporting role in the process. For more information on the TRU PLAR policy ED 2-0 see: [TRU PLAR Policy](#)

Graduation

After completion of all course requirements, students will qualify to graduate. All elective courses must be completed prior to the end of final semester. Failure to provide an Official Transcript for transfer credit courses by **5 weeks prior to convocation** may result in an inability for TRU to grant the degree for that year's date of convocation.

If students plan to practice nursing in BC following graduation, they will need to register with BCCNM. The School of Nursing will submit the graduate's name to BCCNM once all course requirements have been met. This will then qualify the graduate to write the NCLEX examination. More information will be provided to students prior to Semester 8 (final practicum).

NCLEX

The BScN degree does not qualify the graduate to undertake employment as a registered nurse but does qualify the graduate to write the National Council Licensure Examination (NCLEX). Further information on the NCLEX and registration as a new graduate can be found on the BCCNM Website at [BCCNM NCLEX Information](#).

Persons with disabilities that may adversely impact their performance on the NCLEX examination may request modifications. These students are asked to contact BCCNM prior to applying to write the NCLEX to obtain the necessary forms to request modifications.

BScN Undergraduate Practice Placement Guidelines

BScN Practice Uniform

The BScN Program requires slate gray scrub tops and pants are to be worn by students in long term and acute care practice. They are available for purchase in the TRU Bookstore at a very reasonable cost.

Practicum Placements

Students in the BScN program will have practicum placements in a variety of settings in Kamloops, Williams Lake, and surrounding areas. Students should **_expect_** to travel to locations other than Kamloops or Williams Lake, starting in semester 2 of the program. All students should expect to have at least one practice placement outside of their campus of origin in at least 2 of 8 semesters. Students are responsible for their accommodation and travel expenses. Students are expected to arrange their own transportation to clinical placements including insurance and accommodation as needed. Students should understand that changes to clinical placements will not be made if transport or accommodations are not available.

Students in semesters 1 to 5 are placed in faculty led practice groups in selected agencies, as predetermined by nursing faculty. The variety of contexts aims to facilitate the student's ability to meet the BCCNM Entry-Level _Competencies for Registered Nurses_ (2021).

In semesters 2, 3, 4, and 5, practice groups are developed for placements within the Thompson Cariboo Shuswap Health Service Area. Students can expect to have practicums in the **_evenings, weekends, and / or 12-hour shifts_**, and are expected to adjust their personal schedules accordingly.

Students are advised to refrain from booking work until clinical schedules have been released and finalized. Clinical practice schedules will not be changed to accommodate student work schedules. It is strongly advised that students do NOT schedule commitments during clinical practice.
In practice courses **NURS 3510, 3380, 4380, and 4210** students can expect placement in increasingly diverse settings, and in settings outside of Kamloops and Williams Lake. Access to Practice Placement information (processes, resources, preference forms for local, provincial, national, and international placements) for Semester 6 and beyond is available on the Moodle Site. To access, search for the following in Moodle: BScN Class of ___ (Year _) -Required Documents

Practice Placements (SEM 6, CPE III, SEM 7, & 8)

Decisions regarding placement outside of Kamloops/Williams Lake by the School of Nursing from Semester 6 onward are based on the following general principles and practical considerations:

- Placement site/healthcare agency is appropriate/available for the course and student level.

- Student practice history and readiness, as assessed by faculty members, for increasingly independent and indirect faculty member supervision.
- Transportation, living costs, and payment of any agency specific fees, additional criminal record checks, immunizations, passports, visas, and additional extended health coverage or out-of-province coverage from BC Medical Service Plan (recommended for national or international practice-education opportunities) or Pacific Blue Cross (http://www.pac.bluecross.ca/) or BCAA (http://www.bcaa.com/insurance) are the responsibility of the student. Out of province placements are normally not covered by WorkSafe BC or any other Worker's compensation by another province.
- Student indication of preference (provided the placement office can accommodate) in combination with educational goals and supporting evidence when required by healthcare agency (see preference forms).
- Preference forms for practice placement BScN year 3-4 are on Moodle BScN Class of ___ (Year X) site and are to be submitted to nursingpractice@tru.ca as directed on the preference forms. ***Students should understand that preferences are not guaranteed and are subject to change. Requests are subject to professional, academic and clinical performance reviews in addition to fitness to practice language as outlined by BCCNM.***

    o **Placement requests within BC need** to be submitted 4-5 months ahead of practicum start date. Students should monitor their myTRU email and Moodle for communication from the practice placement team.
    o **Placement requests beyond BC** are normally submitted 6-8 months ahead of practicum start date to ensure legal contracts are in place between TRU and the agency. The student is also responsible for meeting any other agency specific requests. Students should monitor their myTRU email and Moodle for communication from the practice placement team

General Information Regarding Placements in BC or Canada

- When applying for a distance practice placement in CPE 3 (NURS 3380, 3390,) and Semester 8 (NUR 4210) students need to plan ahead to ensure that they meet the guidelines of eligibility discussed below. The Practice Placement Coordinator (PPC) is available as a resource for students interested in pursuing this option.
- There is **no guarantee** that a request to an agency will be filled. Legal contracts must be in place between TRU and the agency.
- To facilitate the learning in this type of placement, the student must have strong practice performance with the ability to work independently with minimal supervision from faculty member. The student is responsible to meet any other agency specific requests.

Focus on Intercultural Nursing:

(consolidated practicums, field school and study abroad)

- Students will be invited to apply for an intercultural placement in the fall of year 3 in advance of the possible placement. This usually involved NURS 3390 (CPE 3 - international), NURS 3380 (CPE 3 – Indigenous / Hazelton), Semester 7 or 8 (study abroad), and
- To learn about previously offered intercultural nursing opportunities in the School of Nursing visit https://www.tru.ca/nursing/global-health/placements.html
- Other information about the field school and study abroad experiences can be found at https://www.tru.ca/studyabroad/programs/field-school.html

- Students may be able to use this experience to earn credit for Global Competency Certification [Global Competency (tru.ca)](https://www.tru.ca) There are considerable additional costs related to these types of practicums which are the responsibility of the student (e.g. passports, visas, immunizations, travel, and accommodation, etc.)
- Students who are interested can expect to attend a number of information sessions to discuss opportunities and requirements
- The opportunity to partake in these types of experiences is contingent on the student's continued strong academic and clinical performance. Students who do not meet this standard may have their previous approval to partake in this type of practicum withdrawn.

Enrichments- Observation Requests for Student Practice

Individual student *observations* may occur when a BScN student wishes to gain more exposure to a practice setting because they are interested in the nature of the RNs role in this area. This **may** be possible for practice settings where there are not practicum opportunities, the student has not had the opportunity to spend time in this area, or the student would like more exposure. Students must complete these observations outside of clinical and class hours and are limited with the number of requests they can make. Requests must be made 30 days in advance. Students are in an observation role only and will not be involved in patient care.

Please note: Students should NOT organize observations on their own, or approach practice partners to inquire about observations/practice placements independently of the TRU SON practice placement office.

Process:

1)Students are to contact the TRU SON Practice Placement Coordinator to discuss the request.
2)Requests will be assessed and made based on appropriateness for student development, timing, and purpose.

Practice requirements

*Students must complete the following <u>before</u> being permitted into practice areas.

Upload all of the completed practice requirement certificates/record of completion to the appropriate Moodle site. **This information can be found in the program acceptance letter and includes the course name and the enrollment key.**

Review the following sites:

 https://www.tru.ca/nursing/programs/bsn/accepted.html

https://www.interiorhealth.ca/careers/student-career-opportunities/student-placement

YEAR ONE – Semester ONE

When required	What is required – for instruction on how to complete, see the required document moodle site	What to do with evidence of completion:
<u>To be completed Before</u> the **start** of Semester 1	☐ Basic Life Support Certificate (BLS) ** renewed annually** ☐ Mask fit testing **renewed annually** ☐ Criminal record check (CRC) ☐ TB Skin Test ☐ Photo for TRU ID ☐ Advising Appointment ☐ Immunization history ☐ WHMIS ☐ IHA Confidentiality Form ☐ HSPnet Form ☐ BCCNM Requisite Skills and Abilities Form ☐ Provincial /Hand Hygiene Basics module	Upload certificate(s) of completion or document to the Moodle site: Required Documents
<u>To be completed Before</u> the **start** of Semester 2	Student Practice Education Core Orientation (SPECO) Courses. ☐ #8558 Introduction to Student Practice ☐ #24610 Infection Prevention and Control Practices for Direct / Professional Clinical Care Providers ☐ #10853 Provincial Code Red - Fire Safety Training (Acute & Residential Facilities) ☐ #9114 Waste Management Basics ☐ # 29687 Code Silver Active Attacker ☐ Violence Prevention Modules (1-8)	Upload certificate(s) of completion or document to the Moodle site: Required Documents

YEAR ONE – Semester TWO

When required	What is required – for instruction on how to complete, see the required document moodle site	What to do with evidence of completion:
<u>To be completed Before</u> the **end** of Semester 2	☐ Gentle Persuasion Approach (GPA) - this course is offered in January and the cost is covered by the program. ☐ Provincial Violence Prevention Curriculum (PVPC) - This course will be offered in early January (Please be aware there is a cost associated with this course.) ☐ Meditech Access - Activate Meditech access through IHA access e-mail, **you will receive this email approximately 2nd/3rd week of March.** • Upload Mnemonic **by March 31st**	Upload certificate(s) of completion or document to the Moodle site: Required Documents

YEAR TWO – Semester THREE

When required	What is required – for instruction on how to complete, see the required document moodle site	What to do with evidence of completion:
<u>To be completed Before</u> the **start** of Semester 3	Current Basic Life Support BLS ☐ Current mask fit testing ☐ Statutory Declaration Form ☐ Update COVID/Influenza Immunization history ☐ Meditech/ ACE YouTube training videos (IHA): ☐ IHA iLearns: • #1331 Privacy and Security Documentation • #596 Respiratory Protection Program (N95) • #922 Medication Administration Independent Double Checks • #1397 Anywhere RN Nurse Training #1799 Omnicell ADC Competency Validation #1505 Patient Care in a Profiled Environment ☐ Complete SPECO modules	Upload certificate(s) of completion or document to the Moodle site: Required Documents

	• #10853 Code Red - Fire Safety Training (Acute & Residential Facilities) • #31208 Hazardous Drugs Safety Awareness	

YEAR TWO – Semester FOUR

When required	What is required – for instruction on how to complete, see the required document moodle site	What to do with evidence of completion:
To be completed Before the **end** Semester 4	☐ Provincial Violence Prevention Curriculum Refresher	Upload certificate(s) of completion or document to the Moodle site: Required Documents

YEAR THREE – Semester FIVE

When required	What is required – for instruction on how to complete, see the required document moodle site	What to do with evidence of completion:
To be completed Before the **start** of Semester 5	Current Basic Life Support BLS ☐ Current mask fit testing ☐ Statutory Declaration Form ☐ Update COVID/Influenza Immunization history ☐ Complete SPECO modules ☐ #24610 Infection Prevention and Control Practices for Direct / Professional Clinical Care Providers ☐ #10853 Provincial Code Red - Fire Safety Training (Acute & Residential Facilities)	Upload certificate(s) of completion or documents to the Moodle site: Required Documents

YEAR THREE – Semester SIX

When required	What is required – for instruction on how to complete, see the required document moodle site	What to do with evidence of completion:
To be completed Before the **end** Semester 6	☐ Provincial Violence Prevention Curriculum Refresher	Upload certificate(s) of completion or documents to the Moodle site: Required Documents

YEAR FOUR – Semester SEVEN

When required	What is required – for instruction on how to complete, see the required document moodle site	What to do with evidence of completion:
To be completed Before the **start** of Semester 7	☐ Current Basic Life Support ☐ Current mask fit testing ☐ Statutory Declaration Form ☐ Update COVID/Influenza Immunization history ☐ Complete SPECO modules #10853 Provincial Code Red - Fire Safety Training (Acute & Residential Facilities)	Upload certificate(s) of completion or documents to the Moodle site: Required Documents
To be completed Before the **end** Semester 7	☐ Provincial Violence Prevention Curriculum Refresher	Upload certificate(s) of completion or documents to the Moodle site: Required Documents

BScN Undergraduate Program: Schedule of Skill Theory and Practice

Skill	Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	CPE 3
Hand Hygiene	*					
TPR, BP, Oxygen Saturation, Blood Glucose Monitoring	*					
Personal Hygiene Includes catheter care (indwelling/suprapubic)	*					
Body mechanics, Lifts, Transfers, Positioning	*					
Infection Prevention and Control – intro (SPECO)	*					
Physical Assessment / Mental Health Assessment		*				
Range of Motion		*				
Infection Prevention and Control - PPE		*				
Introduction to Principles of Medication Administration • Topical creams • Suppositories		*				
Principles of Medication Administration • PO/SL / IM / subcutaneous meds, • Inhalers • Transdermal			*			
Infection Prevention and Control • Decision making for additional precautions			*			
Principles of Surgical Asepsis • Simple dressing change, sterile gloving			*			

IV Therapy Level 1
• Different types PVAD & CVAD & Midline catheters
• Indications, Risks, Site assessment
    o maintenance of PVAD short **including** dressing changes and flushing
    o line changes up to extension tubing and needless cap on PVAD short & CVAD (percutaneous non-hemodialysis & PICC)
    o removal PVAD short
    o accessing capped / locked PVAD short
o Intravenous Infusion
			*			

○ pumps & gravity, priming lines						
Suture and Staple Removal			*			
Oxygenation (delivery methods, nasal & oral airways)			*			
Suctioning – Oral, Pharyngeal			*			
Epidural / PCA (assessments and monitoring)			*			
Nasogastric (NG) Tubes / PEG / PEJ • Maintenance, insertion, medication administration, removal • Enteral feeds – maintenance • Weighted NG tubes – check health authority policy. Permitted in IHA				*		
IV Therapy Level 2 • Maintenance of CVADs and midline catheters percutaneous, PICC, Tunneled (non- hemodialysis) 　○ Accessing locked / capped lines 　○ Flushing protocols: CVAD (PICC & percutaneous non-hemodialysis) 　○ Change IV lines: PVAD & CVAD (PICC & percutaneous non-hemodialysis) including extension and needleless capIV medication administration (mini-bag, direct)				*		
Urinary Catheterization				*		
Complex Wounds – (packing, irrigation, VAC, products)				*		
Drain Shortening and Removal				*		
Chest Tubes (care & maintenance)				*		
Code Blue					*	
IV therapy Level 3 • PICC dressing changes • CVAD dressing changes • Blood draws on CVAD (PICC & percutaneous non-hemodialysis) • CVAD removal (PICC & percutaneous non-hemodialysis)					*	
Blood Transfusions					*	
Basic ECG interpretation					*	
Parenteral Nutrition					*	
Tracheostomies – (care and suctioning)					*	
Transcribing and Checking orders						*

Intravenous Insertion PVAD – short insertions (optional lab. Paid for by students)						*

Supervision of Psychomotor Skills Limits and Conditions

The following chart reflects TRU SON policy and will provide students, faculty, and preceptors/field guides with quick reference regarding the level of supervision required for performance of specific psychomotor skills in the different semesters of the program. Theoretical knowledge about the skill prior to the performance is an expectation.

Key:

X	Not permitted
DS	Direct Supervision **(every time)** by the clinical instructor OR a nurse educator OR Preceptor/Field Guide OR an RN who accepts the responsibility of overseeing the skill with the student
SI	**At discretion of nurse educator or preceptor** may do independently
DS C	Direct supervision and only after certification (for PVAD short insertions this means a workshop; for needling of dialysis lines this means completion of learning modules as determined by the agency)
◊	Saline & heparin syringes (vials) must be confirmed prior to flushing
*	Does not include IVADs and / or any VAD for haemodialysis purposes
∞	Requires an independent double check (IDC) by an RN

	4	CPE 2	5	6	CPE 3	7	8
Anticoagulants (Oral & Parenteral)	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞
Insulin	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞
All meds in Labour & Delivery	X	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞
STAT medications	X	X	X	X	X	X	X
Student Blood Transfusionist	X	X	DS	DS	DS	DS	DS
Fentanyl patches	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞
Methadone	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞	DS∞
PVAD short flush	SI◊	SI ◊	SI◊	SI◊	SI◊	SI ◊	SI◊
IV meds - minibags							
PVAD Short **locked**	DS	DS	SI ◊	SI◊	SI ◊	SI ◊	SI ◊
PVAD & CVAD **infusing**	DS	DS	SI ◊	SI ◊	SI ◊	SI ◊	SI ◊
CVAD * **locked**	DS	DS	DS	DS	DS	DS	SI ◊

Infusions (IV, SC, epidural) on adults–of high alert meds (chemo, heparin, ketamine, magnesium sulfate, opioids, oxytocin, PCA, 3%NaCl, local anesthetics, insulin	DS∞		DS∞	DS∞	DS∞	DS∞	DS∞
IV meds – direct (aka push)							
PVAD Short locked	DS		DS	DS	DS	DS	DS	SI ◊
PVAD & CVAD **infusing**	DS		DS	DS	DS	DS	DS	SI ◊
CVAD* capped / locked	DS		DS	DS	DS	DS	DS	SI ◊
IV site dressing changes							
PVAD short	DS		DS	SI	SI	SI	SI	SI
CVAD (percutaneous non-hemodialysis) *	DS		DS	SI	SI	SI	SI	SI
CVAD (PICC)	X		X	DS	DS	DS	DS	SI
IV-line changes							
PVAD & CVAD* tubing changes up to the needless cap	DS		SI	SI	SI	SI	SI	SI
PVAD & CVAD* tubing change including the extension tube & needless cap	DS		DS	DS	SI	SI	SI	SI
Transcribing and checking orders	X		X	DS	DS	DS	DS	DS
Renal Lines - needling	X		X	X	X	X	X	DS C
Insert PVAD short	X		X	X	X	DS C	DS C	DS C

BScN Undergraduate Students Practice Limitations

Interventions and Procedures

Students are <u>Not Permitted</u> to:

- Pronounce death
- Confirm surgical or procedural consents
- Witness, confirm or sign any medical consent form
- Give medications via epidural
- Remove epidural catheters
- Remove chest tubes
- Interpreting obstetrical non-stress tests
- Initiate IVs for children aged 5 and under
- Access renal dialysis ports/shunts/lines. (See exception Sem 8 RDU in RIH)
- Access IVADs
- Take verbal or telephone laboratory reports related to critical values (IH AU 1100)
- [Perform Restricted Activities designated for Certified Practice](#)

Medication Administration

Students are <u>Not Permitted</u> to:

- Verify the dosage or witness a medication administered by an RN, LPN, student nurse, or other health care provider.
- Conduct an independent double check (IDC) of high alert medications prepared by another student or nurse
- Co-signing to indicate that an action was supervised and carried out correctly
- Witness narcotic wastage.
- Do an official narcotic count.
- Pick up controlled drugs from the pharmacy.
- Administer any medications ordered "STAT" including PO, Subcutaneous, IM or IV
- Give medications via epidural.
- Set up, change syringe /bag, or adjust settings on PCA or Epidural infusion pumps.
- Administer anti-neoplastic medications intravenously.

Medication Administration Limits and Conditions

- Prior to administering the initial dose (ID) of a medication, students are expected to check the original prescriber's order against the client's Medication Administration Record (MAR) for accuracy and RN /LPN verification (verification dependent on agency policy). ID - is the initial dose the client receives of a particular medication in a hospital/agency, not the first time the student has given a medication.

- Faculty members or RN preceptors must supervise the preparation and administration of all medications, fractional doses, narcotic or controlled drugs, insulin, anticoagulants, and other high alert meds as per legislation and IH policy/protocol until the nurse educator or RN preceptor feels the student has successfully demonstrated competency. (https://www.interiorhealth.ca/sites/default/files/PDFS/clinical-practice-education-student-placements.pdf)

- Medications dependent on laboratory values must have the dose verified by the nursing faculty member or supervising staff member. [(IH AU1100)](#)

- - Examples: titrating heparin, warfarin, correcting electrolytes

- With every medication administration, two unique patient identifiers must be used (AU1100). Acceptable patient identifiers are full name, date of birth, personal health number. Room/ bed number is not acceptable. (IH AU1100)

- Students may not routinely carry the narcotic keys when not directly using them. (IH AU1100)

- Students may engage in dispensing medications under the supervision of an RN (IH AU 1100)

**** When in different health authorities' students are required to be familiar with the site-specific policies and procedures.***

Limits and conditions for specific populations

(source: IH AH 1600)

Neonatal Patients

Note: Newborns require specific unique identifiers - see Policy AH1600 - Identification of Newborns.

Students must follow the IDC procedure for:
All medications
All vitamins
Expressed breast milk
Parenteral nutrition

Pediatric Patients

Students must follow the IDC procedure for:

- all anticoagulants
- all cardiac medications
- all controlled drugs (e.g., opioids, benzodiazepines, ketamine)
- all electrolytes
- all hypoglycemics (insulins and oral hypoglycemics)
- IV medications (prepared by RN)
- parenteral nutrition

Narcotic Administration Limits and Conditions

- When a fractional dose of a controlled drug is prepared by a student, the discarded portion must be witnessed by an RN or faculty member. Students are not permitted to be the witness.

- 'Unofficial' narcotic counts may be done by students but must be followed by regular end-of-shift narcotic counts by agency employees (usually RN or LPN).

Intravenous Therapy Limits and Conditions

- Students are **NOT permitted** to give STAT or urgent medications via IV direct (push)

- All prefilled medication syringes (anticoagulants, antibiotics, insulin, etc) must be confirmed by the faculty member or RN prior to flushing and cosigned

- For all IV direct (push) medications, the student and the faculty member or RN preceptor will:
  - check the medication administration record to establish the time the last dose was administered
  - confirm the container from which the medication was drawn and the dosage
  - go to the bedside and verify the identity of the patient
  - verify the above steps were followed by co-signing the medication administration record
  - The exception to this is in Semester 8 the student may administer IV direct meds independently after the MAR, drug and dose have been verified by the RN and after the RN has assessed the student to be competent.

- IV insertions. Beginning in CPE 3 students:
  - may insert PVAD short cannulas after they have completed the workshop, successfully passed an IV theory quiz and supervised psychomotor practice
  - Will be directly supervised by an RN or faculty member for all IV insertions
  - Are only allowed two (2) attempts at initiating an IV a with each client
  - Students are not permitted to start an IV for children under the age of 5

Please note agency policy(s) around IV therapy, IV insertions, care of CVADs varies between agencies and health authorities. As such the **student must make themselves aware of and follow the policies set out by each agency, they practice in.** Students should review the decision support tools for medication administration that require/do not require an order for licensed RN's and the appropriate decision support tool as recommended by the BCCNM.

Blood Component Administration – Limits and Conditions

Beginning in Semester 5, RN students may participate in transfusion practices (i.e., provide general care, monitor vital signs) if they:
- Have completed the theory in their education program
- Have previously practiced the skill in the lab or clinical setting
- Are deemed competent by the RN responsible for regulatory supervision

The student must be supervised by their onsite academic educator or designated supervising staff member during the following permitted components of the procedure including:
- Transporter of blood products
- Assessment checks as assigned by the transfusionist
- General care (vital signs, IV flow rate, and site condition, comfort and warmth, adverse effects) for the stable patient during transfusion
- General care for the stable patient for the first 24 hours post transfusion

Limitation: student RNs cannot be the 2nd person verifier. Within IHA, student nurses do NOT have access to the TAR documentation on ACE therefore, two nurses with TAR access must complete all the transfusion checks.

Immunizations Given by Student Nurses

(Incorporates IH Policy AU1100)Students may provide single dose (containing one or more antigens) immunizations to adults and children five years of age and older (see limits below) if

the student has been deemed competent (has the knowledge and skill) either by the faculty member or RN field guide / preceptor. Providing immunization to infants, children less than five years old and special populations involve complex scenarios that require a more inclusive level of competency. Because of the time required to demonstrate competency for immunization practice, students will not be permitted to immunize infants, children less than five years old and special populations. *(Communicable Disease Control Manual Chapter II, Immunization Program. Section III – Immunization of Special Populations) For students in Interior Health settings see IH requirements in the conditions below.

IH Limits:

- o Students do not provide immunizations to children under five years of age with the exception of BScN students within the IH Promotion & Prevention Program who may provide single dose immunizations to clients four years of age and older.
- o BScN students may provide single dose immunizations to IH Promotion & Prevention program clients identified as Select Populations in *Section III - Immunization of Special Populations, item 3.0.*

IHA Conditions

- o Students must successfully complete the British Columbia Centre for Disease Control Immunization Competency (BCCDC) course prior to providing immunizations to IH Promotion and Prevention Program clients
- o Students will follow the Interior Health policies for electronic documentation.

RN Students providing immunizations outside of the IH Promotion and Prevention Program must meet the IH Immunizing Agents competency standards (currently under development); and must be directly supervised by a qualified RN who is immediately available to respond to unintended consequences

- For students in health authorities outside of Interior Health follow the health authority policies and procedures for student administration of immunizations. If the policies are not available or are not written continue to follow the above TRU SON policy based on approved policy from Interior Health.

Miscellaneous Practice Policies and Guidelines

- Verbal or Telephone Orders from authorized professionals* may be accepted beginning in CPE 3 and only in the following circumstances:
    - o The situation and patient circumstances necessitate it (i.e. There is no other option)
    - o The faculty member or RN preceptor/field guide hears the order directly as well (via speaker phone, 3-way teleconferencing, or in person).
    - o The RN verifying the order co-signs the order.

    * Health professionals listed to give orders to registered nurses in Interior Health are dentists, midwives, naturopaths, physicians, podiatrists.

- Beginning in CPE 3, students may transcribe and/or check orders when:
    - o they are directly supervised by a nurse educator or RN preceptor/field guide
    - o the work is checked for accuracy by the nurse educator or RN preceptor/field guide.
    - o the orders and/or MAR's are checked and initialed as correct by the nurse educator or RN preceptor / field guide.
    - o Students must have unit dose medication administration records co-signed as correct.

Appendix A: TRU SON Expectations and Guidelines Relating to APA Style for Student Scholarly Papers

TRU School of Nursing requires the use of the American Psychological Association (APA) style for written assignments. Students are to refer to the [Publication Manual of the American Psychological Association](#) (APA) for information regarding how to organize a scholarly paper, express ideas, reduce bias in writing, use correct grammar and punctuation, how to cite references within the text of a paper, and how to create a reference list.

The information here identifies TRU SON acceptable modifications to **7th edition** of the APA Manual and a few pointers to get students started. Students should refer to each course assignment for specific APA requirements. Students should know that APA information is available through a textbook and many free on line abbreviated resources including some from the [TRU library, including APA 7th in a Nutshell](#). Below are some general instructions to get you started

[General Instructions](#)

- Papers must be typed with a consistent font throughout the paper. Font can include any of the following: 11 pt. Calibri, 11 pt. Arial, 10 pt. Lucinda Sans Unicode, 11 pt. Georgia ,12 pt. Times New Roman, or 10 pt. Computer Modern.
- 2.5 cm (1 inch) margins on all sides.
- Double-space throughout the paper including the title page and reference list.
- Align your content to the left margin, leaving the right margin uneven, do not use full justification, like a newspaper column, for your assignments.
- The title page should seven pieces of information: title of the paper (bolded), author(s) full name(s) and / or student identification number, institutional affiliation, course name and number, instructor's name, assignment due date.
- Page numbering begins on the title page in the upper right-hand corner.
- APA Style and grammar guidelines can help you figure out how to use commas, hyphenation, spacing after a period.
- See [sample student paper](#)

1. Headings, Abstracts and Table of Contents
   - If [headings](#) are required in your paper, remember they serve as an outline for the reader. The length and complexity of your paper will determine the number of headings used.
   - All topics of equal importance have the same level heading throughout the paper.
   - The introduction section of the paper does not require a heading as the title of the paper is assumed to be the introductory heading.
   - Abstracts are not required unless they are specifically asked for in the assignment criteria.

- Table of Contents are not required unless specifically asked for in the assignment criteria. The APA Manual does not include formatting for Table of Contents. Refer to the example in this Appendix for formatting.

2. In-text Citations
- An easy way to decide if you need to provide a citation is: If it's not your idea, it needs referencing.
- When directly quoting another source, use double quotation marks around the text, and include the author, year, and page or paragraph number in parenthesis at the end.
- If the quote is 40 words or more, block the quote and omit the quotation marks.
- If paraphrasing an individual's work, quotation marks are not required, however the author and year are necessary.
- When there are 2 authors, use "and" in text and "&" inside parentheses. For example: Kerry and Jones (2007) noted... but ... The results indicated a significant relationship (Kerry & Jones, 2007).
- If there are 3 or more authors, cite only the first author followed by "et al." and a year.
- When a publication date is not available, write n. d. in parenthesis after the author(s).

3. Reference List
- Start the reference list on a new page, after the body of the assignment.
- Type the word References at the top of the page, **bold it**, and center it.
- Order references alphabetically by author's surname
- The first line of the reference source is aligned with the left margin. The second and subsequent lines of the reference source are indented 2.5 cm.
- All sources cited within the paper must be included in the reference list.
- If you are using multiple works from the same author, the date of publication determines the order in the reference list. The earliest publication is listed first.
- Electronic sources each require specific referencing and is different from print sources.

4. Appendices:
- If using an appendix, it must be correctly cited and discussed in the body of the paper.
- Page numbering continues throughout the appendices.
- See Sample Table of Contents re format for listing Appendices in the Table of Contents page.

Reference

American Psychological Association. (2020). *Publication Manual of the American Psychological Association* (7th ed.). American Psychological Association