Challenges in Meeting Clinical Practice Competencies

The evaluation of clinical practice involves ongoing feedback and documentation of student performance. Although learning in the School of Nursing takes place in classrooms, labs and clinical practice sites, this policy applies to the context of clinical practice only.

The clinical practice component of any course is graded as Pass or Fail.

- Professional Practice course outcomes and all evaluative methods are clearly identified in each course syllabus and are discussed with students at the beginning of the course.
- In meeting course outcomes and clinical practice competencies, students are required to complete all required learning activities in preparation for clinical practice including lab, simulation and clinical practice orientation requirements.
- Successful completion of the clinical practice component of the course is required in order to be eligible to complete the final examination/assignment and to obtain credit for satisfactory course completion.
- Both the student and Clinical Instructor are responsible for early identification, as they arise, of learners' difficulties meeting their clinical practice competencies. Consultation with practice colleagues may be relevant throughout. Ongoing and timely verbal and written feedback and discussion between Clinical Instructor and student about apparent difficulties in meeting clinical practice competencies is crucial.
- Consultation between Clinical Instructor and student with regard to practice competency development and ongoing learning ought to be both facilitative and evaluative. This consultation involves both written and verbal exchanges over the course of the clinical learning experience.
- When the Clinical Instructor identifies an early pattern indicative of unsatisfactory competency development, the Clinical Instructor will provide the student with prompt verbal feedback and written documentation (which could include email correspondence as part of a legal record of communication) to this effect, indicating the particular course outcome(s) or clinical practice competencies in jeopardy. The student will have an opportunity to discuss the issues raised in the documentation with the Clinical Instructor, who will propose a plan for remedial action. In all such instances, the practice leader and/or course leader should be consulted; such consultation may be initiated by either the student or the Clinical Instructor at any time during the clinical experience.
- Following discussion between the Clinical Instructor and student with regard to a plan of remedial action, the plan will be articulated in the form of a detailed remedial learning plan. The remedial learning plan serves as a contract that sets out clear expectations for
performance, including the length of the contract, and is signed by both the student and teacher and placed in the student’s electronic practice file. Referral to other support resources (such as the Clinical Skills and Simulation Laboratory) may be appropriate; referrals and assistance will also be documented in the student’s record.

- Should students wish to respond to any aspect of their documentation, including the remedial learning plan, they may provide a written response within a 48 hour period, and the response will be placed in their electronic practice file.

- Written documentation related to the student’s progress will be maintained in the student’s record. The student will have access to all documentation.

- The Clinical Instructor will inform the course/practice leader of the student’s status on an ongoing basis. Unresolved concerns will be brought to the Level Coordinator for advisement. As Chair of the Progressions Committee, the Associate Director of the Undergraduate Program will be consulted, as needed.

- There may be situations when the seriousness of the student’s practice challenges precludes the use of a remedial learning plan. There are some actions on the part of the student that violate professional conduct and the delivery of safe competent, compassionate and ethical care client care. Even if such conduct is in isolation and not part of an identified pattern, it may justify immediate withdrawal from the clinical setting and potential clinical failure. In all such instances, the supervising Clinical Instructor will obtain consultation from the Practice/Course Leader and Level Coordinator as soon as possible.

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1. A remedial learning plan (contract) is a negotiated written agreement developed collaboratively between a student and teacher that specify learning activities to be undertaken in order to achieve course learning outcomes, clinical practice competencies, and professional standards. Learning gaps or deficits related to the course outcomes, clinical competencies, or professional standards are identified and specific learning objectives are established. Strategies and resources are identified to assist and support the student in meeting the learning outcome(s). Establishing a remedial learning plan (contract) highlights the responsibilities of the parties involved and encourages students to be reflective active participants and to take ownership in their learning while promoting achievement of competencies (de Tornyay R. & Thompson M. (1987). Using learning contracts. In Strategies for Teaching Nursing 3rd ed. (de Tornyay R. A Thompson M. Eds), John Wiley. New York., p. 253)

2. Clinical teaching and learning represent a balance between the student’s need to learn and the student’s obligation to provide safe, competent, compassionate and ethical care to clients and families. Attending to this balance requires oversight by Clinical Instructors and other health care professionals in the clinical setting (Canadian Nurses Association: Code of Ethics and CRNBC Professional Standards)
The student must be provided with written documentation of the nature and seriousness of the action and an explanation of the rationale for the decision that was reached by the Clinical Instructor in consultation with the Practice/Course Leader. The student will be given an opportunity to respond verbally and in writing to the Clinical Instructor’s feedback and written documentation at any stage in the process. Students’ written response will be placed in their electronic file. Students will be informed of the implications of the decision for their academic progression and will also be referred to the BSN Program Advisor (see also Progression and Advancement Policy and Student Progression Challenges Flow Chart).

This policy is informed by the College of Registered Nurses of British Columbia (CRNBC) Standards for Practice and the Canadian Nurses Association (CNA) Code of Ethics.