August 2021

Intent / Purpose

Outline the limits and conditions surrounding Post-Secondary Institution (PSI)
 Student activities while within a Health Care Organization (HCO) practice education setting.

Definitions

Refer to: Standard Terms and Abbreviations

Conditions	Sets out the circumstances under which a Student can carry out an activity.1		
Independent Double Check	"requires two people to separately check the targeted components of the work process, without knowing the results of their colleague" ² - verifying the work or decision of the first person		
Limits	Specifies what activities Students are or are not permitted to perform based on provincial or federal laws, the discipline's licensing body, PSI policy, HCO policy, and individual competence. ³		
Observation	"a learning opportunity with minimal client risk. Observers must not provide any hands on or direct client services including but not limited to: assessment, treatment/intervention, education, or counselling."4		
	For strictly observational practice education experiences, the Student is a passive observer and under direct and constant supervision at all times (such as novices to the practice education setting). Other terms: job shadow, career observation, observership		
Qualified	"having the standard of skill, knowledge, or ability that is necessary for doing or being something."5		
Restricted Activity	"(formerly called reserved acts) are a narrowly defined list of invasive, higher risk activities that must not be performed by any person in the course of providing health services, except:		
	 registrants of a health profession college who have been granted specific authority to do so in their regulations, based on their education and competence, and 		
	 non-registrants who have been delegated the authority to perform the restricted activity, or who have been authorized to perform the restricted activity, by a regulated professional that has been granted the restricted activity. *Please note: Delegation of restricted activities to non-registrants (including unregulated persons) must be authorized in bylaw by the health profession college whose registrants have been granted authority to perform the restricted activity, before such a delegation may take place."6 		

¹ Adapted from British Columbia College of Nurses & Midwives. (2021). Standards. Limits, and Conditions. Retrieved February 15, 2021 from https://www.bccnm.ca/RN/ScopePractice/part1/Pages/SLC.aspx

² Institute for Safe Medication Practices. (June 2019). *Independent Double Checks: Worth the Effort if Used Judiciously and Properly*. Paragraph 4. Retrieved February 15, 2021 from https://www.ismp.org/resources/independent-double-checks-worth-effort-if-used-judiciously-and-properly

³ Adapted from British Columbia College of Nurses & Midwives. (2021). Standards. Limits, and Conditions. Retrieved February 15, 2021 from https://www.bccnm.ca/RN/ScopePractice/part1/Pages/SLC.aspx

⁴ College of Speech and Hearing Professionals of BC. (2018). POL-QA-06: Levels of Supervision. Retrieved June 23, 2019 from https://www.cshbc.ca/wp-content/uploads/2019/02/CSHBC-POL-QA-06-Levels-of-Supervision.pdf

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⁵ Qualified [Def. 2]. (n.d.) In *Cambridge Academic Content Dictionary*. Cambridge University Press. Retrieved June 25, 2019 from https://dictionary.cambridge.org/dictionary/english/qualified

⁶ Government of British Columbia. (n.d.). Scope of Practice Reform: Restricted Activities. Retrieved June 20, 2019 from https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/professional-regulation/scope-of-practice-reform

Scope of Practice	"the range of healthcare tasks, decisions or activities of a qualified, licensed healthcare professional (e.g. doctor, nurse practitioner, nurse, pharmacist) allowed by law and the provincial/territorial licensing authority governing that profession. A scope of practice is a general boundary and does not necessarily mean that an individual provider has the knowledge, skills, or experience to safely perform all allowed activities."	
Standard	"An expected and achievable level of performance against which actual performance can be compared. It is the minimum level of acceptable performance."8	
	"reflects the minimum standard of professional behaviour and ethical conduct on a specific topic or issue expected by the College of its registrants"9	
Supervision	Oversight of Students while in the HCO. Except for strictly observational practice experiences, the supervisor does not necessarily have to be present or in close proximity but is accessible when needed. The degree of supervision is adjusted based on the Student's demonstration of competence. Supervisors remain responsible and accountable for the actions of the individual under their direct or indirect supervision. 10, 11, 12	
Supervision - Direct	The supervisor is physically present either at all times (constant supervision), at certain times (constant supervision while doing an activity), or in close proximity to directly observe and support or intervene as needed (close supervision). For strictly observational practice education experiences, direct supervision means physically present at all times (see definition: Observation). Other terms: Close supervision, constant supervision	
Supervision - Indirect	The supervisor is accessible, either in person (working in the same area) or through technology, to provide guidance, direction, and support as needed, and to regularly review Student progress through activities such as case conferencing and debriefing. Other terms: general supervision, remote supervision (supervision from a distance)	

Practice Education Guidelines

HCO health care and/or services must not be compromised by inexperienced or undersupervised Students.¹³

The HCO Supervisor/Workers are ultimately responsible for the health care and/or services of their work assignment.

⁷ Canadian Medical Protective Association. (n.d.) Scopes of Practice. Retrieved February 7, 2021 from https://www.cmpa-acpm.ca/serve/docs/ela/goodpracticesguide/pages/teams/Healthcare_teams/scopes_of_practice-e.html

⁸ British Columbia College of Nurses & Midwives. (November 2012). Nurse Practitioners and Registered Nurses Professional Standards. Pg. 21. Retrieved February 7, 2021 from https://www.bccnm.ca/RN/ProfessionalStandards/Pages/Default.aspx

⁹ College of Physicians and Surgeons of British Columbia. (2021). Practice Standards and Professional Guidelines. Retrieved February 7, 2021 from https://www.cpsbc.ca/for-physicians/standards-guidelines

¹⁰ College of Speech and Hearing Professionals of BC. (December 2020). SOP-PRAC-07: Supervision. Pg. 1. Retrieved January 31, 2021 from https://cshbc.ca/wp-content/uploads/2020/12/CSHBC-SOP-PRAC-07-Supervision.pdf

¹¹ College of Physical Therapy of British Columbia. (2018). *Standard 18: Supervision*. Retrieved June 23, 2019 from https://cptbc.org/wp-content/uploads/2019/04/CPTBC_Standards_2018_Dec14_singles_18.pdf

¹² British Columbia College of Nurses & Midwives. (July 2020). *Regulatory Supervision of Students*. Retrieved February 15, 2021 from https://www.bccnm.ca/RN/PracticeStandards/Pages/regulatorysupervision.aspx

¹³ Canadian Medical Protective Association. (n.d.). *Delegation and supervision: The role of the patient*. Retrieved January 24, 2021 from https://www.cmpa-acpm.ca/serve/docs/ela/goodpracticesguide/pages/teams/Delegation_and_supervision/the_role_of_the_patient-e.html

The PSI is responsible and liable for the actions of Students during practice education experiences, including those sponsored/funded HCO employees, by virtue of their enrollment in the education program.¹⁴

Onsite PSI Educators and HCO Supervisors are accountable and responsible for decisions associated with supervision of Students including decisions made by Students.^{15, 16, 17}

Students are accountable to the PSI and Educators, the HCO and Supervisor, and the HCO Clients for their actions, behaviour, and decisions in the practice education setting (see <u>PEG Supervision of Students</u>).

The PSI or HCO policy determines which activities must be performed under direct supervision each and every time based on:

- provincial or federal laws
- relevant regulatory body of the profession or discipline standards and scope of practice
- the risk to Clients.

On-site PSI Educators and/or HCO Supervisors/Workers determine the degree of supervision required and adjust as needed based on:

- the expectations of the PSI
- the Student's level of education, learning needs, experience, and competence
- the activity being performed
- level of risk related to doing the activity
- the needs of the situation or HCO Client

On-site PSI Educators and/or HCO Supervisors only allow Students to perform activities and tasks independently when they are confident the Student has the necessary knowledge and skills to do so safely^{18, 19} (see <u>PEG Supervision of Students</u>).

¹⁴ Health Care Protection Program. (2008). Risk Note: Managing Risk in Educational Affiliation Agreements - Educational Institution Affiliation Agreement Template. Retrieved October 27, 2020 from https://www.hcpp.org/?q=node/17

¹⁵ College of Physical Therapy of British Columbia. (2018). Standard 18: Supervision. Retrieved June 23, 2019 from https://cptbc.org/wp-content/uploads/2019/04/CPTBC_Standards_2018_Dec14_singles_18.pdf

¹⁶ British Columbia College of Nurses & Midwives. (July 2020). *Regulatory Supervision of Students*. Retrieved February 15, 2021 from https://www.bccnm.ca/RN/PracticeStandards/Pages/regulatorysupervision.aspx

¹⁷ College of Dietitians of BC. (November 2020). Standards of Practice: Indicators & Outcomes. Pg. 4. Retrieved February 15, 2021 from https://collegeofdietitiansofbc.org/wp-content/uploads/2020/11/Standards-Practice-Ind-Outcomes-Final-Nov-17-20.pdf

¹⁸ Canadian Medical Protective Association. (n.d.). *Delegation and supervision: The role of the patient*. Retrieved January 24, 2021 from https://www.cmpa-acpm.ca/serve/docs/ela/goodpracticesguide/pages/teams/Delegation_and_supervision/the_role_of_the_patient-e.html

¹⁹ Canadian Nurses Protective Society. (2012). Supervision. Retrieved January 31, 2021 from https://cnps.ca/article/supervision/

Students **may be allowed to perform** certain activities and tasks in the practice education setting when <u>all</u> these conditions are present:

- The PSI has deemed the activity to be within the education program requirements and permits the activity.
- The Student received the relevant theory, practised the activity in a simulated setting, <u>and</u> met the competency expectations of their education program.
- The HCO policies and procedures permit Students to perform the activity.
- The activity:
 - is within the scope of practice of the discipline (or job category) within that practice education setting
 - has a defined learning purpose
 - is a graduation requirement of the existing curriculum
- The supervising PSI Educator or HCO Supervisor/Worker:
 - is qualified and authorized to perform the activity
 - determines that the Students are ready to perform the activity
 - is available to directly supervise Students performing the activity at least the first time the activity is done
 - is comfortable with Students performing the activity within the context of the situation
 - has confirmed consent from the Client for Student involvement in care (see <u>PEG</u>
 <u>Consent for Student Involvement in Care</u>)

Students may be allowed to perform restricted activities and tasks when <u>all</u> these conditions are also present:²⁰

- The relevant regulatory body of the profession or discipline, the PSI, and the HCO allows Students to perform the activity.
- The supervising PSI Educator or HCO Supervisor/Worker:
 - is a registrant of the regulatory body
 - is qualified and authorized to perform the activity
 - has followed the regulatory body's process for authorizing Students to do the activity, including determining the degree of supervision

²⁰ Government of British Columbia. (n.d.). Scope of Practice Reform: Restricted Activities. Retrieved June 20, 2019 from https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/professional-regulation/scope-of-practice-reform

Students may be allowed to perform restricted activities and tasks *independently* when they are:

- registrants of their regulatory body
- qualified following successful completion of additional education
- authorized to perform the activity within the HCO²¹

In cases where there is a discrepancy between PSI's and HCO's policy, standards, guidelines, and/or protocols, the most restrictive will apply.

When a PSI Educator is not available or is off-site, the final responsibility for deciding whether or not Students perform an activity or task lies with the HCO Supervisor/Worker based on HCO policy, standards, guidelines, and protocols.

The HCO can suspend or terminate a Student's practice education experience (see <u>PEG</u> <u>Student Practice Issues</u>) if the Student is found to be practicing in a manner that:

- is beyond what is permitted by either the PSI or HCO
- endangers the mental or physical health or safety of any HCO Client or Worker²²
- interferes with or compromises the care, service, or operations of the HCO²³
- is contrary to the HCO mission, vision, values, policy, standards, guidelines, and/or protocols

Roles, Responsibilities and Expectations

Post-Secondary Institutions

- Establish policies, standards, guidelines, and protocols for Student activities, limits, and conditions for all practice education experiences.
- Communicate the expected activities, limits, and conditions to the Students.
- Provide opportunities for Students to practice skills and activities in a simulated setting.
- Examine the Student successfully performing required activities in a simulated setting prior to entering the practice education setting.

²¹ Government of British Columbia. (n.d.). *Scope of Practice Reform: Restricted Activities*. Retrieved June 20, 2019 from https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/professional-regulation/scope-of-practice-reform

²² Health Care Protection Program. (2008). Risk Note: Managing Risk in Educational Affiliation Agreements - Educational Institution Affiliation Agreement Template. Retrieved October 27, 2020 from https://www.hcpp.org/?q=node/17

- Before or at the beginning of the practice education experience, provide the HCO Supervisors/Workers with:
 - education program outcomes
 - a list of skills and activities the Student has been taught and has met the performance expectations of the education program
 - any limits or conditions imposed on the Student's practice
 - anticipated type and intensity of supervision needed for the Student²⁴
- Take action to address practice issues in a timely manner, including removing the Student from the practice education setting if needed (see <u>PEG Student Practice Issues</u>).

Students

- Perform skills, activities, and tasks based on education provided and the degree of supervision expected by the PSI.
- Recognize the limits of knowledge, skills, and abilities at all times, act responsibly within those limits, and pursue continuing competency and learning.
- Carry out only those activities and tasks permitted by the PSI education program, the HCO's policies, standards, guidelines, and/or protocols, as well as their regulatory body (if applicable).²⁵
- Communicate own learning needs, competencies, experiences, abilities, and limitations to the PSI Educator and/or HCO Supervisor/Worker throughout the practice education experience.
- Seek out direct or indirect supervision as needed (see <u>PEG Supervision of Students</u>).
- Verify with the PSI Educator that an activity is within the field of study and that
 there are no restrictions, limits, or conditions placed on doing the activity either by
 the PSI or by the HCO.
- Only do activities when <u>all</u> these conditions are present:
 - learned the relevant theory related to activity within the PSI
 - practised the activity within the PSI
 - met the performance expectations within the PSI
 - authorized to perform by both the PSI and HCO policy
 - adequately supervised by a PSI Educator or HCO Supervisor/Worker
- Keep the PSI Educator or HCO Supervisor informed of actions.

 ²⁴ Canadian Nurses Protective Society. (2012). Supervision. Retrieved January 31, 2021 from https://cnps.ca/article/supervision/
 ²⁵ UBC School of Nursing – Okanagan Campus. (2017). Scope of Practice: Psychomotor Skills for BSN Students – Standards, Limits, Conditions. University of British Columbia. Retrieved July 11, 2019 from https://nursing.ok.ubc.ca/wp-content/uploads/sites/6/2016/02/BSN-Scope-of-Practice-Mar2017.pdf

- Decline to do any delegated activity that is outside the field of study or discipline's scope of practice and inform the PSI Educator or HCO Supervisor of the request.²⁶
- Comply with the HCO policies and procedures related to carrying out the activity.

Health Care Organizations

- Articulate within policies, standards, guidelines, and protocols those activities that
 Students are limited or not permitted to perform within any specific settings or contexts.
- Communicate any limits and conditions of Student activities within policies, standards, guidelines, and protocols to the PSI.
- Suspend or terminate the Student's practice education experience in collaboration with the PSI Practice Education Coordinator and Educator if, after focused remediation, a Student demonstrates a consistent pattern of placing the HCO or its Clients at serious risk for harm (see <u>PEG Student Practice Issues</u>).

PSI Educators / HCO Supervisors

- Perform within own role and scope of practice when supervising Students.
- Remain responsible and accountable for making sure the standards of care and service of the HCO and profession are maintained.
- Maintain competency and/or qualifications for performing those activities being done by Students under their supervision.
- Know what the activities, limits, and conditions are for Students under their supervision.
- Explore the learning needs, experience, abilities, and limitations with the Student, and PSI if needed, throughout the practice education experience.
- Manage any risks to the HCO or its Clients related to a Student's involvement in care or service.
- Clearly communicate the activities Students are permitted to perform and any limits and conditions on Student practice to other HCO Workers.
- Determine the degree of supervision and support the Student needs within the context of the situation and Student's individual competency (see *PEG Supervision of Students*).
- Authorize or assign only those activities that the Student has the knowledge, skill, judgement, and ability to perform safely.

²⁶ UBC School of Nursing – Okanagan Campus. (2017). Scope of Practice: Psychomotor Skills for BSN Students – Standards, Limits, Conditions. University of British Columbia. Retrieved July 11, 2019 from https://nursing.ok.ubc.ca/wp-content/uploads/sites/6/2016/02/BSN-Scope-of-Practice-Mar2017.pdf

- Set the conditions for how, when, and where the Student can perform the activity.
- Directly supervise Students performing activities at least the first time they are done.
- Never assign or delegate tasks to the Student that are outside what is permitted or expected for the Student's level of learning.
- Follow an independent double check procedure before a Student performs any high risk activity or tasks such as administering high alert medications or providing care or service to highly vulnerable Clients.²⁷
- Before doing any activity independently, ensure the Student has the knowledge, skills, and judgement to provide safe and competent health care or service with the same quality as expected of at least a novice HCO Worker
- Interrupt or suspend the Student's involvement in Client care or service when the Student's actions or intended actions could place the HCO or its Clients at serious risk (see <u>PEG Student Practice Issues</u>).
- Alert the PSI when concerns continue to exist over a Student's actions and abilities to safely provide care or service after giving the Student an opportunity to remediate (see <u>PEG Student Practice Issues</u>).

References and Resources

British Columbia College of Nurses & Midwives. (July 2020). *Regulatory Supervision of Students*. Retrieved February 15, 2021 from https://www.bccnm.ca/RN/PracticeStandards/Pages/regulatorysupervision.aspx

Ibid. (November 2012). *Nurse Practitioners and Registered Nurses Professional Standards*. Retrieved February 7, 2021 from https://www.bccnm.ca/RN/ProfessionalStandards/Pages/Default.aspx

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²⁷ Institute for Safe Medication Practices. (June 2019). *Independent Double Checks: Worth the Effort if Used Judiciously and Properly*. Paragraph 4. Retrieved February 15, 2021 from https://www.ismp.org/resources/independent-double-checks-worth-effort-if-used-judiciously-and-properly

- Ibid. (n.d.) *Scopes of Practice*. Retrieved February 7, 2021 from https://www.cmpa-acpm.ca/serve/docs/ela/goodpracticesguide/pages/teams/Healthcare_teams/scopes_of_practice-e.html
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Guideline Review History

Version	Date	People Responsible	Brief Description (reason for change)	
1	July 2008	Authors/Editors: Carol A. Wilson (BCAHC), Barb Collingwood (BCAHC) Reviewers: Practice Education Committee of the BC Academic Health Council (Grace Mickelson, Chair)		
2	March 2013	Editors: Andrea Starck (NHA) Deb McDougall (BCHAC)	Content update Template / terminology References updated	
3	March 2021	Editor: Carol A. Wilson (PHSA) Reviewers: Judy Lee (KPU) BJ Gdanski (PHSA) Ministry of Health (Allied Health Policy Secretariat and Nursing Policy Secretariat) Ministry of Advanced Education, Skills and Training (Health Education Reference Committee) Health Authority Practice Education Committee	Title changed to remove reference to scope of practice as term only applies to regulated professions Updated definitions and references Updated guidelines to include restricted activities Consistent with language in the affiliation agreement template Updated and expanded to clarify roles/responsibilities	