

Columbia College

Policy on Student Clinical Practice

Academic Evaluation of Unsafe/Unprofessional and Weak Practice

NOTE: Must; Shall; Will: Should: May or Could; Can:	Clarification of Terms These words or phrases indicate actions or activities that are <i>essential</i> or <i>mandatory</i> . This word implies that it is highly desirable to perform certain actions or activities, but not essential or mandatory. These words imply freedom or liberty to follow an alternative to the action or activity being presented in a document.
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The student practices within the boundaries of:

- the professional association requirements and current professional standards of practice;
- Academic Department course objectives;
- and Department, College and clinical agency policies, procedures & unit specific protocols.

A student whose clinical practice is judged to be unsafe and/or unprofessional may be removed from the clinical experience. In order to be eligible to resume the clinical experience, the student who has been removed must comply with the conditions outlined by the facilitator for re-admission to the clinical experience.

The facilitator responsible for the clinical experience will review the clinical practice of a student who exhibits weaknesses that may lead to unsafe and/or unprofessional practice. The facilitator, with appropriate input from the student, will develop a set of expectations which the student is to attain to remedy those weaknesses in the current and/or subsequent semester.

Rationale: Clinical Facilitators have a legal and professional responsibility to assure the public, other students, the College and the professional association that students can practice safely and professionally in their various clinical practice settings at a competency level equal to their current educational experience.

The policy embodies that accountability:

- by defining unsafe practice, unprofessional practice and weak practice;
- by establishing guidelines for facilitators to make a judgment of unsafe, unprofessional and/or weak practice;
- and by providing procedures to be followed when a judgment of unsafe, unprofessional and/or weak clinical practice is made.

Definitions:

Unsafe Practice

Behavior that fails to achieve standards of care or calls into question the professional accountability of the student in providing care to clients. The behavior causes harm or has the potential to cause harm to a client or other person.

Depending upon the degree of actual or potential harm a client may suffer, one time deviation from safe practice may be sufficient to judge a student unsafe. Examples of unsafe practice include but are not limited to the following:

1. practicing in a clinical practicum under the influence of drugs and/or alcohol that could or does interfere with one's ability to practice;
2. demonstrating behavior that puts a client at risk of harm by violating a standard of care;
3. acting in a manner likely to cause serious harm to self or others, including but not limited to inadequate preparation for a clinical experience;
4. acts of omission or commission likely to cause harm to clients including but not limited to physical abuse, placing clients in hazardous positions or circumstances, mental or emotional abuse, medication errors or the inability to provide ordered treatment of care;
5. failure to provide accurate, inclusive, written and verbal communication, or falsely documenting in a clinical record, written assignment or student log;
6. attempting activities without adequate orientation, knowledge, assistance or supervision.

Unprofessional Practice

Behavior in providing care to clients that violates the standards of practice relating to the professional association. Under this guideline, examples include but are not limited to the following:

1. failure to notify the agency and/or clinical instructor of absence or lateness;
2. practicing in a clinical practicum under the influence of drugs and/or alcohol that does or may interfere with the ability to practice;
3. violating client privacy rights through breach of confidentiality of interactions or records or failure to protect the privacy in personal care;
4. engaging in behavior that is disrespectful of a client's social or economic status, personal attributes or health problems.
5. taking pictures of clients and/or posting pictures on Facebook or any other social network

Weak Practice with Potential for Unsafe and/or Unprofessional Practice

Behavior with potential for unsafe and/or unprofessional practice in providing care to clients includes behavior that fails to achieve the standards of care or calls into question the professional accountability of the student. Under this guideline, examples include but are not limited to the following:

1. difficulty or inability to apply theoretical knowledge to specific clinical situation;
2. inability to successfully organize care and documentation of clinic assignment;
3. inability to correctly interpret laboratory and/or diagnostic results;
4. difficulty or inability to determine priorities in completing clinical assignment;
5. difficulty communicating with clients, families, peers or other health care personnel.

Procedures That Will Be Followed:

Unsafe or Unprofessional Practice

When a facilitator has reason to conclude that a student has practiced unsafely or unprofessionally, the facilitator needs to notify the student prior to the next scheduled clinical day of these reasons. A copy of the notification will be forwarded to the Department Chair or designate.

Included in this written notification is a description of:

1. specific actions necessary to demonstrate safe and/or professional practice including any medical/health evaluations in situations where the physical, cognitive and/or emotional behavior of the student placed the client at risk;
2. the time during which the corrective actions must be achieved;
3. any modifications of the clinical experience pending completion of specific corrective actions necessary to demonstrate safe and/or professional practice including but not limited to restriction of activities and responsibilities, supervision of activities or procedures, removal from clinical experience, and/or alteration in clinical site.

Students removed from the clinical experience who, in the facilitator's judgment, have taken the specific corrective actions prescribed to remedy unsafe and/or unprofessional practice will be permitted to resume the clinical experience contingent upon the availability of clinical placements and adequate resources. Students achieving corrective action will either pass the course or pass the course with identified improvement activities as prescribed by the current and subsequent clinical facilitator.

A copy of the record of the judgment of unsafe and/or unprofessional practice will remain in their student record. If no further instances of unsafe and/or unprofessional practice occur, the record of unsafe and/or unprofessional practice will be removed at the time any potential for litigation expires as outlined in the records classification schedule for the College.

The action to be taken if the specific corrective actions prescribed are not achieved includes failure of the course or failure of the course and recommendation for discipline under the College Academic Regulations section of the academic calendar. Depending upon the degree of actual or potential harm, a one time deviation from safe and professional practice may be sufficient to warrant failure of the course and/or suspension from the program.

Students who fail a clinical course due to unsafe and/or unprofessional practice may pursue re-entry to the course by notifying the Department Chair or designate. This does not prevent the possibility of an appeal.

Students who fail a course because of unsafe and/or unprofessional practice and who disagree with the evaluation that their clinical practice is unsafe and/or unprofessional may appeal the facilitator's judgment through the Columbia College Appeals Process.

Weak Clinical Practice

When the facilitator has reason to conclude that a student's clinical practice is weak with potential for unsafe and/or unprofessional practice, the student will be notified as soon as possible. If deficits are identified in a timely manner, the student will be provided with a learning plan and contract. This written notification will include a description of specific actions to be taken to improve the clinical practice, the support provided by faculty to promote improvement, the time period during which the specific improvement actions must be completed, and any modifications in the clinical experience to demonstrate safe and/or professional practice. However, if significant weaknesses are not identified soon enough in the semester to create a contract, the student is still (ultimately) responsible for meeting the objectives by the end of the semester.

The action to be taken if the specified improvement actions prescribed are not fully achieved includes:

1. pass the course because some improvement has been demonstrated but the student needs to continue improvement activities in the subsequent clinical course (see next paragraph);
2. fail the course because improvement actions have not been completed in allotted time frame;
3. fail the course because behavior has become unsafe and/or unprofessional;
4. fail the course and recommend discipline under the College Academic Regulations and Student Conduct.

If actions for improvement must bridge the current and subsequent semester, the facilitator of the current semester and the facilitator responsible for the subsequent clinical will mutually agree upon and provide the student with a written description of expectations. The written description will include specific improvement actions to be taken during the subsequent semester, the time prior during which the action must be completed in the subsequent semester and any modifications in the clinical experience that might be necessary to demonstrate safe and/or unprofessional practice.

CLPNA STANDARDS OF PRACTICE

<p>STANDARD KNOWLEDGE</p>	<p>1:</p>	<p>The Licensed Practical Nurse integrates knowledge of nursing science, arts and humanities acquired through basic education and continuous learning. The LPN:</p> <ol style="list-style-type: none"> 1. Demonstrates an understanding of the knowledge, critical thinking and clinical judgment required for the provision of safe, competent and ethical nursing care. 2. Demonstrates awareness of and practices in accordance with accepted infection prevention and control standards. 3. Evaluates, reports and documents effectiveness of nursing care in relation to client responses and expected outcomes. 4. Accesses resources when needed to support the provision of safe, appropriate client care. 5. Uses health promotion and health teaching appropriate to the client's need. 6. Demonstrates awareness of evidence based practice and applies this understanding to provision of client care. 7. Participates in research and quality improvement activities to enhance nursing practice and health outcomes.
<p>STANDARD ACCOUNTABILITY</p>	<p>2:</p>	<p>The Licensed Practical Nurse maintains standards of nursing practice and professional conduct as determined by the CLPNA and the practice setting. The LPN:</p> <ol style="list-style-type: none"> 1. Demonstrates accountability and responsibility for own nursing actions and professional conduct. 2. Practices within applicable legislation, Regulation, By-laws, Code of Ethics Standards of Practice and own level of competence. 3. Delivers nursing care in a manner that preserves and protects client autonomy, dignity and rights. 4. Maintains appropriate boundaries between professional therapeutic relationships and non-professional personal relationships. 5. Identifies and questions situations where directions, policies or procedures maybe unclear or potentially unsafe and reports such situations to an appropriate person, agency or professional body. 6. Is accountable for monitoring and maintaining own fitness to practice.

<p>STANDARD 3: PATIENT SAFETY</p>	<p>The Licensed Practical Nurse takes responsibility for own safe nursing practice and patient safety. The LPN:</p> <ol style="list-style-type: none"> 1. Acts to prevent or minimize adverse events through identification and reporting of situations that are unsafe or potentially unsafe for clients or health providers. 2. Reports unsafe practice, abusive behavior or unprofessional conduct to the appropriate authority. 3. Advocates for improved safety within nursing practice and health care delivery.
<p>STANDARD 4: CONTINUING COMPETENCE</p>	<p>The Licensed Practical Nurse engages in self assessment of practice identifying strengths, and learning needs requiring ongoing professional development. The LPN:</p> <ol style="list-style-type: none"> 1. Assumes primary responsibility and accountability for maintaining competence. 2. Participates in the Continuing Competency Program of CLPNA. 3. Demonstrates commitment to lifelong learning. 4. Maintains awareness of trends, issues and changes in nursing and health care.
<p>STANDARD 5: COLLABORATION</p>	<p>The Licensed Practical Nurse collaborates with clients, health care providers and stakeholders in the delivery of health care services. The LPN:</p> <ol style="list-style-type: none"> 1. Establishes and maintains an environment that promotes effective relationships in planning, implementing and coordinating the delivery of nursing care. 2. Utilizes effective interpersonal and therapeutic communication skills. 3. Uses constructive feedback and mediation strategies to resolve conflicts and facilitate collaboration. 4. Mentors students, colleagues and others, and shares own experience and knowledge to advance the profession. 5. Acknowledges and respects the role and competencies of other health providers in the delivery of health services.

<p>STANDARD LEADERSHIP</p>	<p>6: The Licensed Practical Nurse demonstrates effective leadership knowledge and skill in own practice, as well as in the management and supervision of others. The LPN:</p> <ol style="list-style-type: none"> 1. Models professional values, beliefs and attributes that promote the profession to clients, learners, peers and other health care professionals. 2. Evaluates safety, effectiveness and efficiencies when planning nursing care and/or assigning duties to unregulated providers, in accordance with established CLPNA guidelines. 3. Promotes innovation and an openness to new ideas which may enhance or support nursing practice. 4. Contributes to the development of policies and procedures for the delivery of safe competent and ethical nursing care. 5. Advocates for clients, healthy practice environments and the nursing profession.
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